



Making the Grade on College Drinking Prevention

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Campus Focus

- Unique culture
- Broad understanding of campus environment
- Environmental scan
- Campus task force

Access & Availability

- Apply learning from campus assessment
- Policy review, understanding, and improvement

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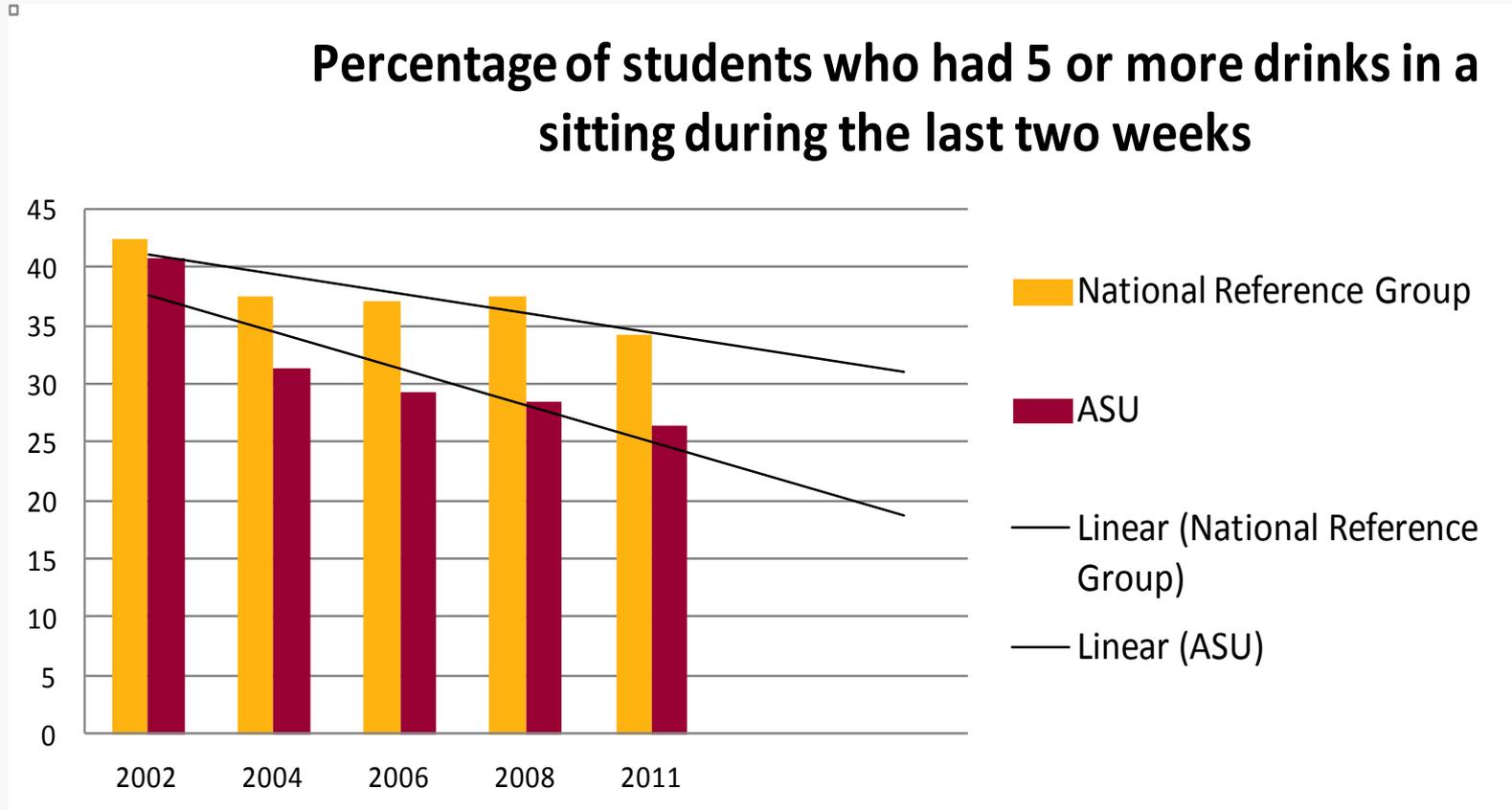
Restricted Sales at Public Events

- General Policies
- Examples:
 - Devil's After Dark
 - Game Day Initiative
 - Student tailgate
 - Homecoming Block Party

Broader Community Efforts

- Mandatory Server Training
- Driver's license for under 21
- Hours for alcohol sales are restricted
- "Large Party Ordinance" in Tempe
- Your Body is a Container

ASU Student Drinking



American College Health Association-National College Health Assessment, Reference Group Executive Summary, and ASU data.



Spencer Deakin, Counseling and Psychology Services Director
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About Frostburg State University

- Rural Location in western Maryland – 2 ½ hours from DC, Baltimore region
- 4,500 undergraduate students
- 2,000 in campus housing;
2,500 in local community
- Community population: 7,800
- Number of alcohol outlets: 31
- Establishment of “student neighborhood” which is 75% student occupied in a 3 x 6 block radius adjacent to campus

Here's where it starts.....

High-Risk drinking.....



Greeks... Athletes... Freshmen... Students

Our Commitment:

- **establish a culture that actively supports, educates, and empowers students to make healthy choices about alcohol consumption**
- **engage the university community with innovative, evidence-based, student-driven alcohol awareness and prevention programs**
- **enhance our community collaboration through meaningful endeavors and intentional initiatives consistent with our institutional values**

Comprehensive Environmental Strategy:

- **Prevention**: AlcoholEdu, *Making it Count* audience response presentations, *Reality Check* website, TIPS training, social marketing /norming campaigns, Brief Screening Intervention (BSI), on-campus student A.A. meetings, and Safe Ride
- **Engagement**: community involvement with *University Neighbors*, BURG Peer Education Network, CHILL CHOICES events, and PAWS after Dark late-night programming options
- **Deterrence**: adjudicating on and off campus violations consistently, parental notification letters/phone calls, law enforcement collaborative meetings, “Knock-and-Talk’s” in the community, pre-emptive emails to students and parents advising of law enforcement saturation efforts

President's Alcohol Task Force:

- Reorganized in 2006 to address the high-risk drinking culture among many students
- Purposeful intent to build coalitions with campus and community stakeholders
- Increased deterrence measures by consistently addressing off-campus behaviors
- Addressing environmental issues unique to Frostburg

Fostering Collaborative Relationships:

- **Open the lines of communication with authentic dialogue**
- **Establish a genuine appreciation for diverse opinions and perspectives**
- **Engage a cross-section of stakeholders committed to successful communities**
- **Create “win-win” scenarios**
- **Be patient...but keeping moving forward**

Campus/Community Collaboration:

- **County/City/University Joint Law Enforcement efforts**
- **Consistent City/University administrator meetings**
- **Community Development and Code Enforcement meetings**
- **Frostburg Fire Department and State Fire Marshall's Office**
- **University Neighbors affiliation**
- **Board of Liquor License Commissioners**
- **Collaborative efforts with Property Managers**
- **Allegany County Health Department (MSPF grant)**

Collaboration Results

- ▶ **Reduction in off-campus citations**
- ▶ **Identify number of non-students involved in alcohol incidents**
- ▶ **Raised Community Awareness of FSU prevention efforts**
- ▶ **Improved relations with Community stakeholders**
- ▶ **Reduced number of high risk events**
- ▶ **Students understand the message**
- ▶ **Off-campus events involve fewer people**

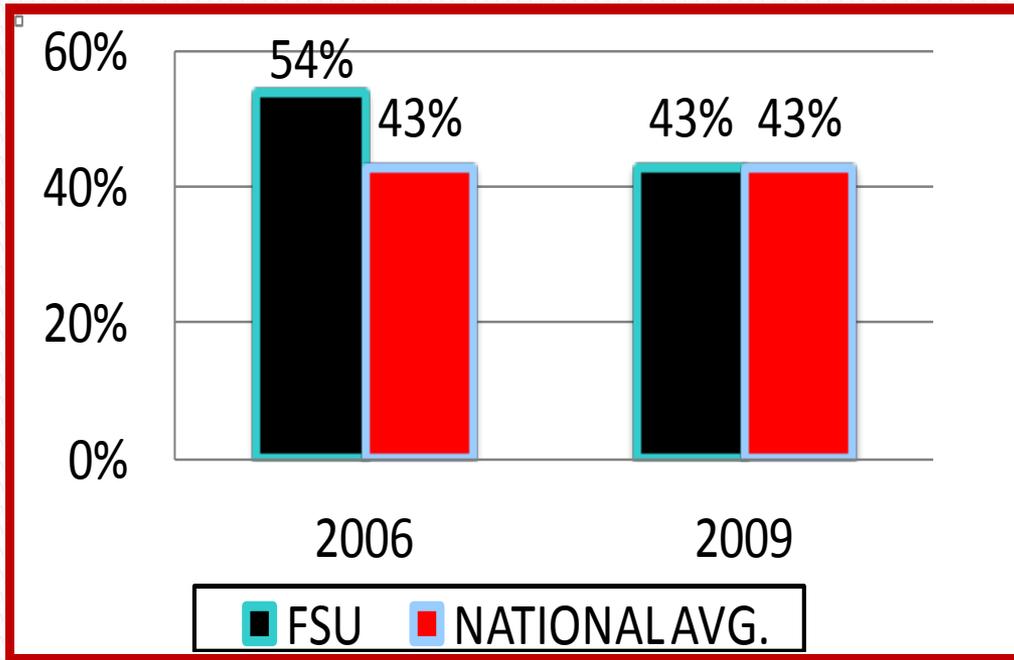
Keeping our Eye on the Big Picture

Current Instruments Used In Measurement

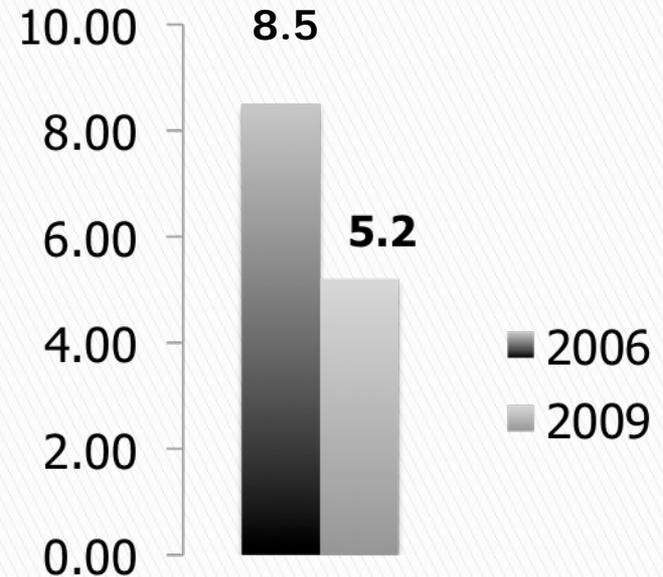
- ▶ **CORE Survey**
- ▶ **National College Health Assessment (NCHA)**
- ▶ **AlcoholEDU**
- ▶ **Student Conduct Statistics (On/Off Campus)**
- ▶ **Medical Transport data**
- ▶ **PDSA (Learning Collaborative Efforts)**

Frostburg's Core Survey Results

Binge Drinking



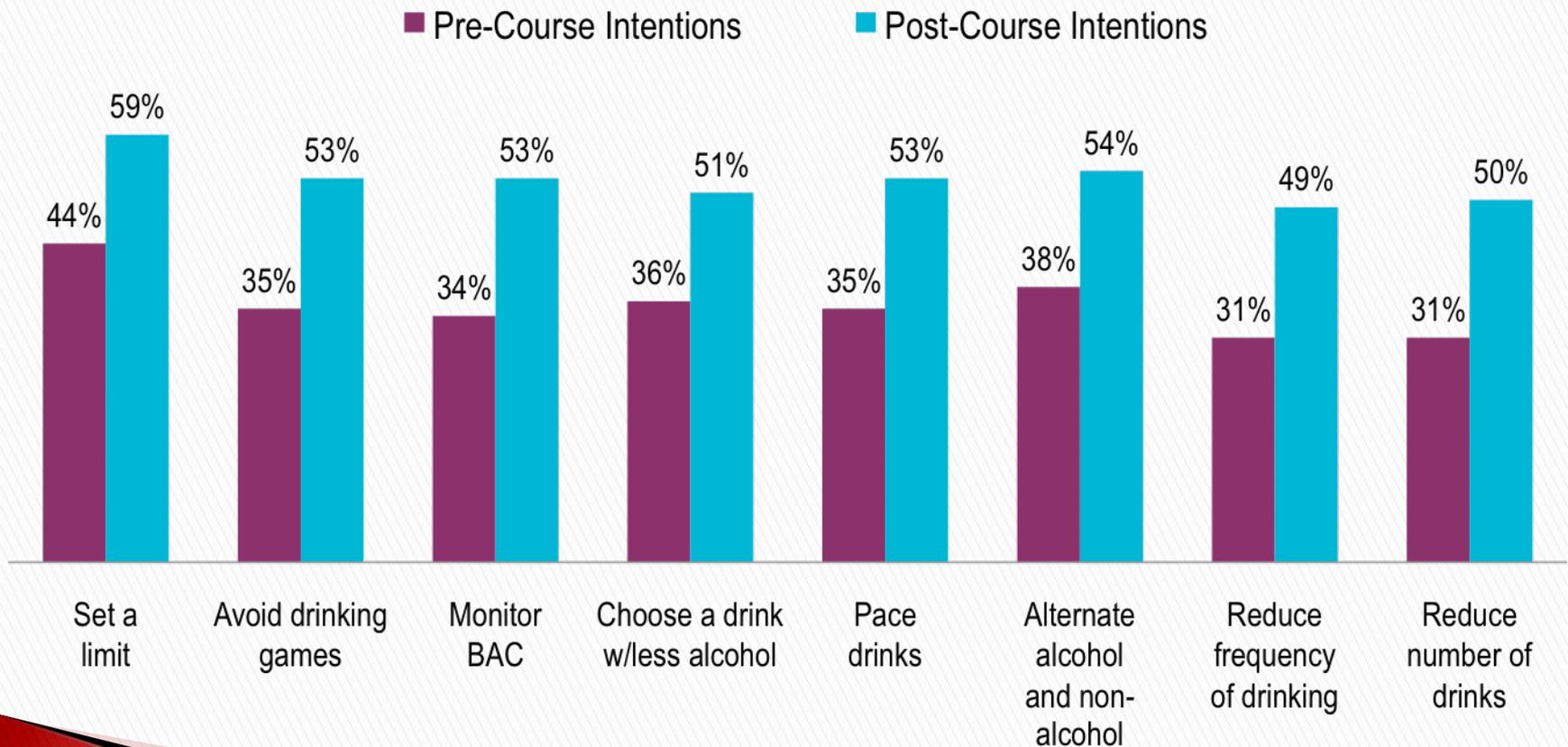
Drinks Per Week



Source: Core Survey

Impact of AlcoholEdu at Frostburg

► After completing AlcoholEdu, Frostburg students reported an increase in several positive behavioral intentions.



Moving in the Right Direction

Improvements Across the Board at Frostburg State

High-Risk Drinking Rate:

59% (1997)

**ALCOHOL PREVENTION
INITIATIVES:**

43% (2008)

Percentage of Abstainers:

40% (2004)

- BASICS
- Social norms marketing

57% (2008)

Average Number of Drinks Consumed by Drinkers:

9.5 (1997)

- Online education
- Substance-Free housing
- Parental notification

5.2 (2009)

Total Enrollment:

4252 (2006)

- Peer Engagement
- Responsible beverage service training

4755 (2009)

Retention Rate:

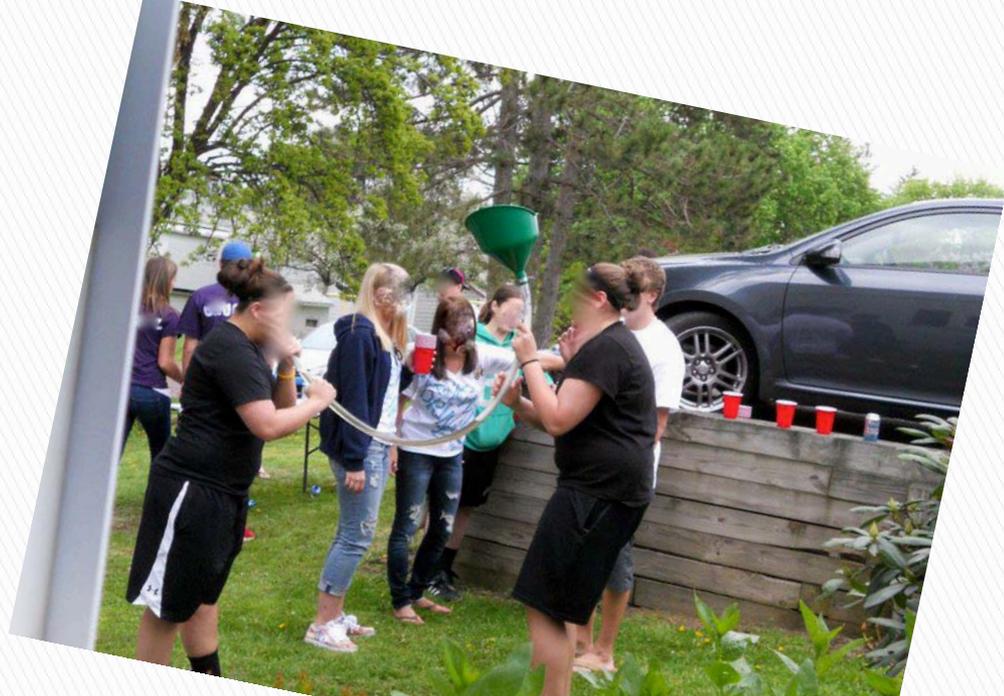
68% (2006)

- Social marketing
- Alcohol-free options

72% (2008)

74% (2009)

Persistence...



Required!!!



Challenges:

- **Persistent culture of drinking on college campuses with the intention of getting “drunk” versus “social” drinking**
- **Sophistication of today’s student in evading responsibility and detection** (black-out windows, invitation only affairs, designated door security, and groups are intentionally “rolling parties” from address to address on different nights, entrepreneurial efforts who rent older, larger homes)
- **High intoxication rate for students consuming grain alcohol and other hard liquors**
- **Large number of alcohol outlets close to campus**
- **Low cost drink specials and super-sized, super-charged drinks at some college bars**

“And miles to go before I sleep” (Frost)

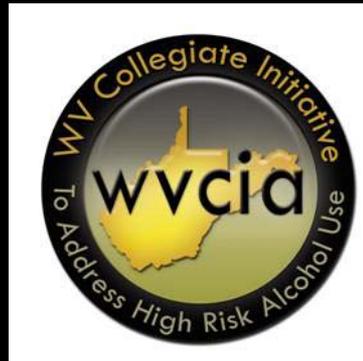
- **Vigilance in mitigating risks to students**
- **Continuous polishing of relationships with community and campus stakeholders**
- **Commitment to the cause...reducing the potentially devastating consequences of high-risk drinking**
- **Inform our practice with the best information**
- **Sweat equity...put in the work**
- **Celebrate small victories**

Carla Lapelle

Associate Dean of Student Affairs, Marshall University

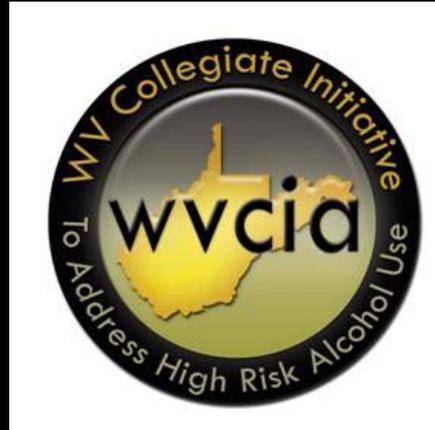
Executive Committee, Cabell County Substance Abuse
Prevention Partnership

Executive Committee, West Virginia Collegiate Initiative



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Statewide Campuses



- Biennial statewide assessment and strategic planning
- Statewide professional development opportunities
- De-shelved grain alcohol
- Now eligible for state OJJDP grant money

Recent Trends and Findings Regarding the Magnitude and Prevention of College Drinking and Drug Use Problems

Ralph Hingson, Sc.D., M.P.H.

Director, Division of Epidemiology and Prevention Research
National Institute on Alcohol Abuse and Alcoholism

SAMHSA: Making the Grade on College Drinking Prevention
Webcast of a national 2012 Town Hall Meeting on Underage
Drinking Prevention

National Harbor, MD

Feb. 6, 2012



A CALL TO ACTION:

CHANGING THE CULTURE OF DRINKING AT U.S. COLLEGES

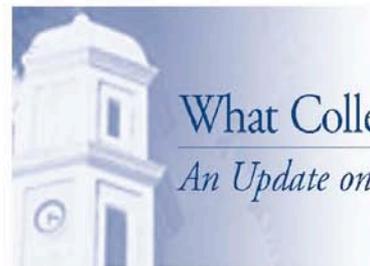


Task Force of the National Advisory Council
on Alcohol Abuse and Alcoholism

National Institutes of Health

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

www.collegedrinkingprevention.gov



What Colleges Need to Know Now

An Update on College Drinking Research

College Drinking and Its Consequences: New Data

The comprehensive reports released by the National Institute on Alcohol Abuse and Alcoholism's (NIAAA's) Task Force on College Drinking turned a national spotlight on the problem of harmful drinking among college students. The central report, *A Call to Action: Changing the Culture of Drinking at U.S. Colleges*, has proven influential in the college alcohol and other drug (AOD) prevention and treatment field. Statistics first introduced in the report are now routinely used to convey the magnitude of college drinking problems and their consequences. Policymakers, legal experts, and organizations that provide college programming assistance have modified their efforts to reflect the Task Force recommendations.

College drinking research remains a high priority for NIAAA, and ongoing projects continue to yield important new information. This bulletin summarizes these recent findings with updated statistics, analysis, and recommendations.

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As national headlines attest, students continue to be seriously injured or die as a result of drinking. Are these attention-grabbing headlines designed to simply sell newspapers, or is the problem as extensive today as it was in 2002 when the NIAAA Task Force first reported its findings?

The news is mixed. Among college students and other 18- to 24-year-olds, binge drinking (see the textbox, page 2, for a definition) and, in particular, driving while intoxicated (DWI), have increased since 1998. The number of students who reported DWI increased from 2.3 million students to 2.8 million (1). The number of alcohol-related deaths also have increased. In 2001, there were an estimated 1,700 alcohol-related unintentional injury deaths among students 18–24, an increase of 6 percent among college students (that is, per college population) since 1998 (1). In addition, it is estimated that each year, more than 696,000 students between the ages of 18 and 24 are assaulted by another student who has been drinking, and more than 97,000 students between the ages of 18 and 24 are victims of alcohol-related sexual assault or date rape (1). Clearly, alcohol-related problems on campus still exist (1).

Another line of research is examining how becoming intoxicated at a young age is linked to later drinking problems during the college years. The results showed that college students who first became intoxicated prior to age 19 were significantly more likely to be alcohol dependent and

Continued on page 2



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NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM

Magnitude of Alcohol Problems on U.S. College Campuses



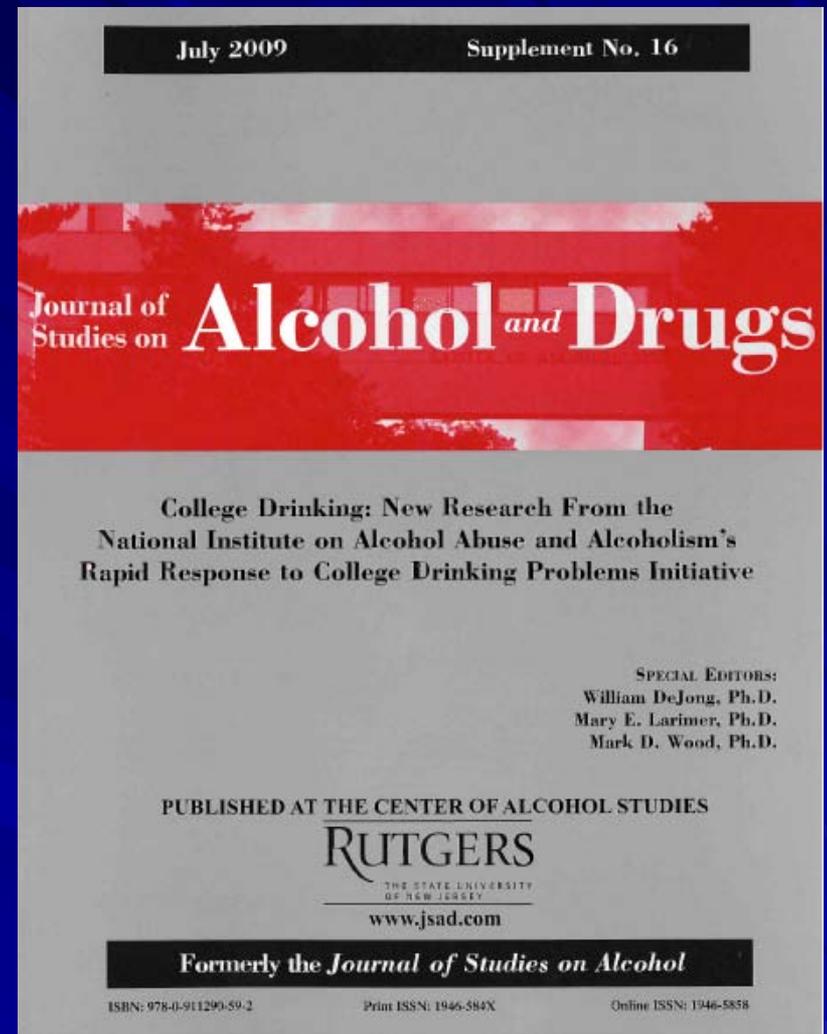
Dr. Margaret
Moore

Jonathan
Levy

Travis
Stedman

Interventions

- Individually oriented
- Family
- School
- Web-Based
- Environmental
- Comprehensive Community Interventions



Gentilello

Brief Motivational Alcohol Intervention in a Trauma Center; Annals of Surgery, 1999

- 46% of injured trauma center patients age 18 and older screened positive for alcohol problems.
- Half (N=336) randomly allocated to receive 30 minute brief intervention to reduce risky drinking and offers links to alcohol treatment

Gentilello

Brief Motivational Alcohol Intervention in a Trauma Center; Annals of Surgery, 1999

- Reduced alcohol consumption by an average 21 drinks per week at 1 year follow up
- 47% reduction in new injuries requiring treatment in ED
- 48% reduction in hospital admissions for injury over 3 years
- 23% fewer drunk driving arrests



Literature Reviews Indicating Effectiveness of Screening and Brief Counseling Intervention Regarding Alcohol

- Solberg et al., Am J Prev Med, 2008
(adults in primary care)
- Tripodi et al., Arch Pediatr Adolesc Med, 2010
(adolescents ages 12-19)
- Jensen et al., J Consulting Clin Psychol, 2011
(adolescents)
- Larimer, Addict Behav, 2007
(college students)
- Carey et al., Addict Behav, 2007
(college students)

Young Adults at Risk for Excess Alcohol Consumption are Often Not Asked or Counseled About Drinking

- 2/3 of 18-39 year olds nationwide saw a physician in the past year
- Only 14% of them:
 - Were asked about their alcohol consumption and
 - Given advice about what drinking patterns pose risk to health
- Persons 18-25:
 - Were most likely to exceed low-risk drinking guidelines (68% vs. 56%)
 - Were least likely to have been asked about their drinking (34% vs. 54%), especially those under age 21 (26%)

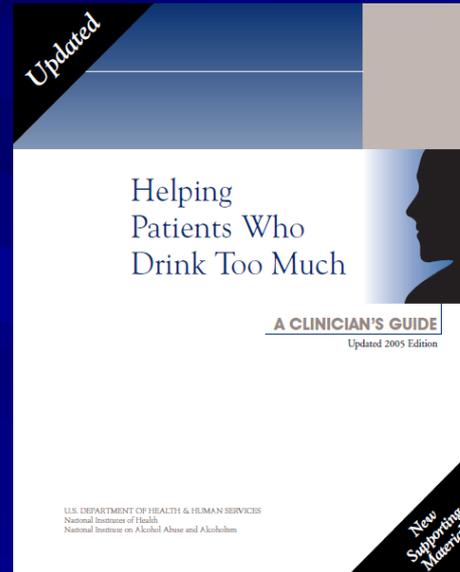
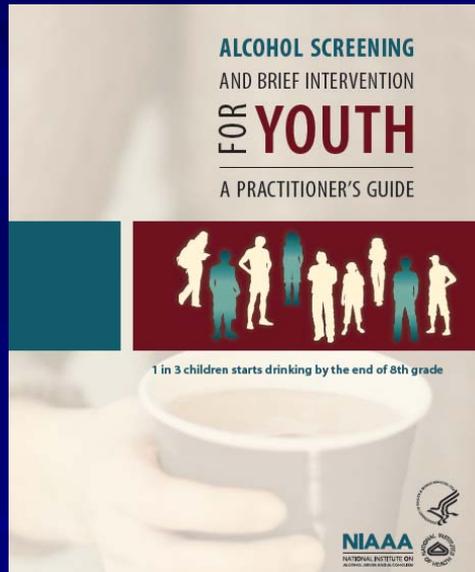


Helen Marie Witty

Source: Hingson et al.,
J Gen Intern Med, 2011

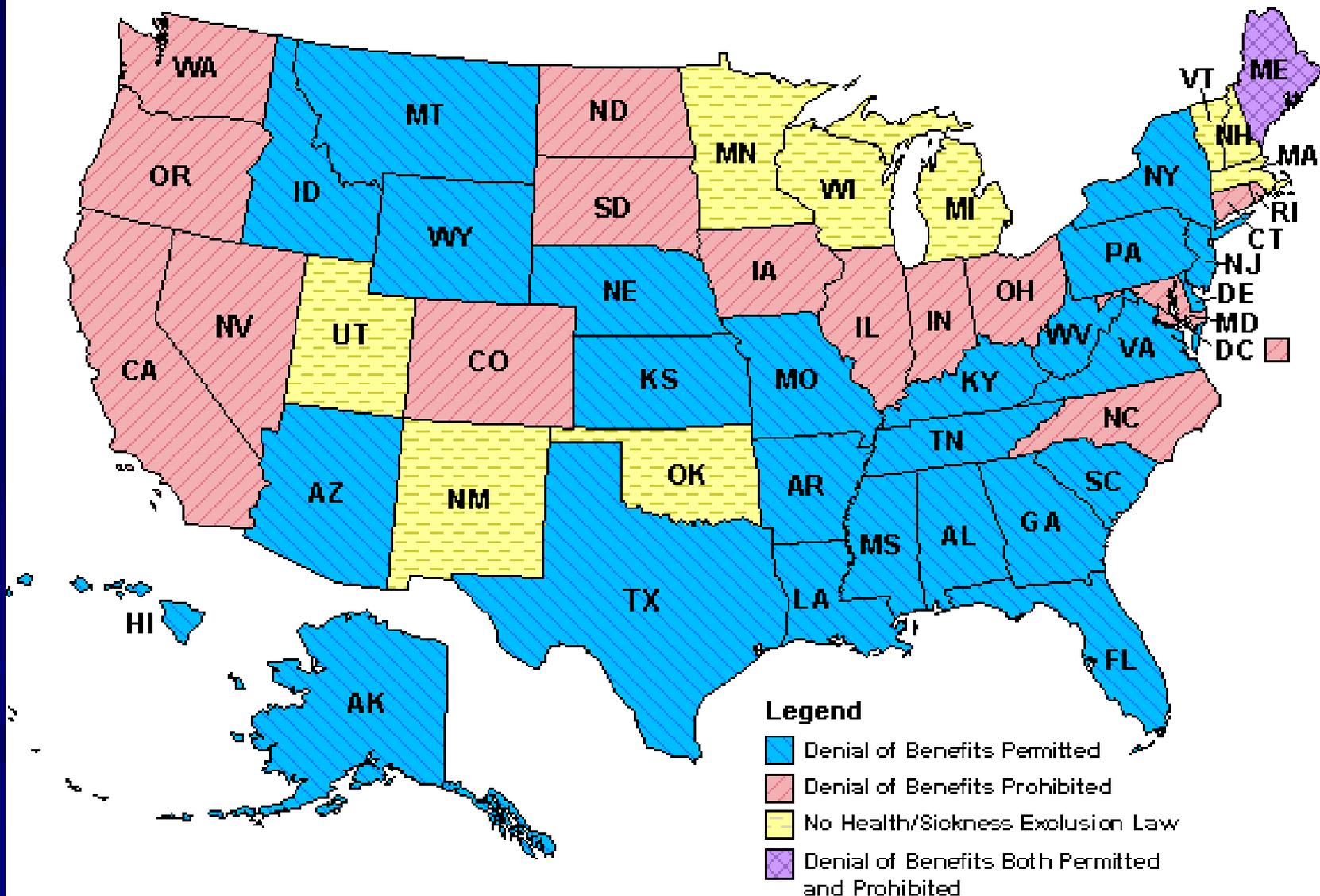
Barriers to Screening

- Time to ask questions
- Time to respond to questions
- Lack of training

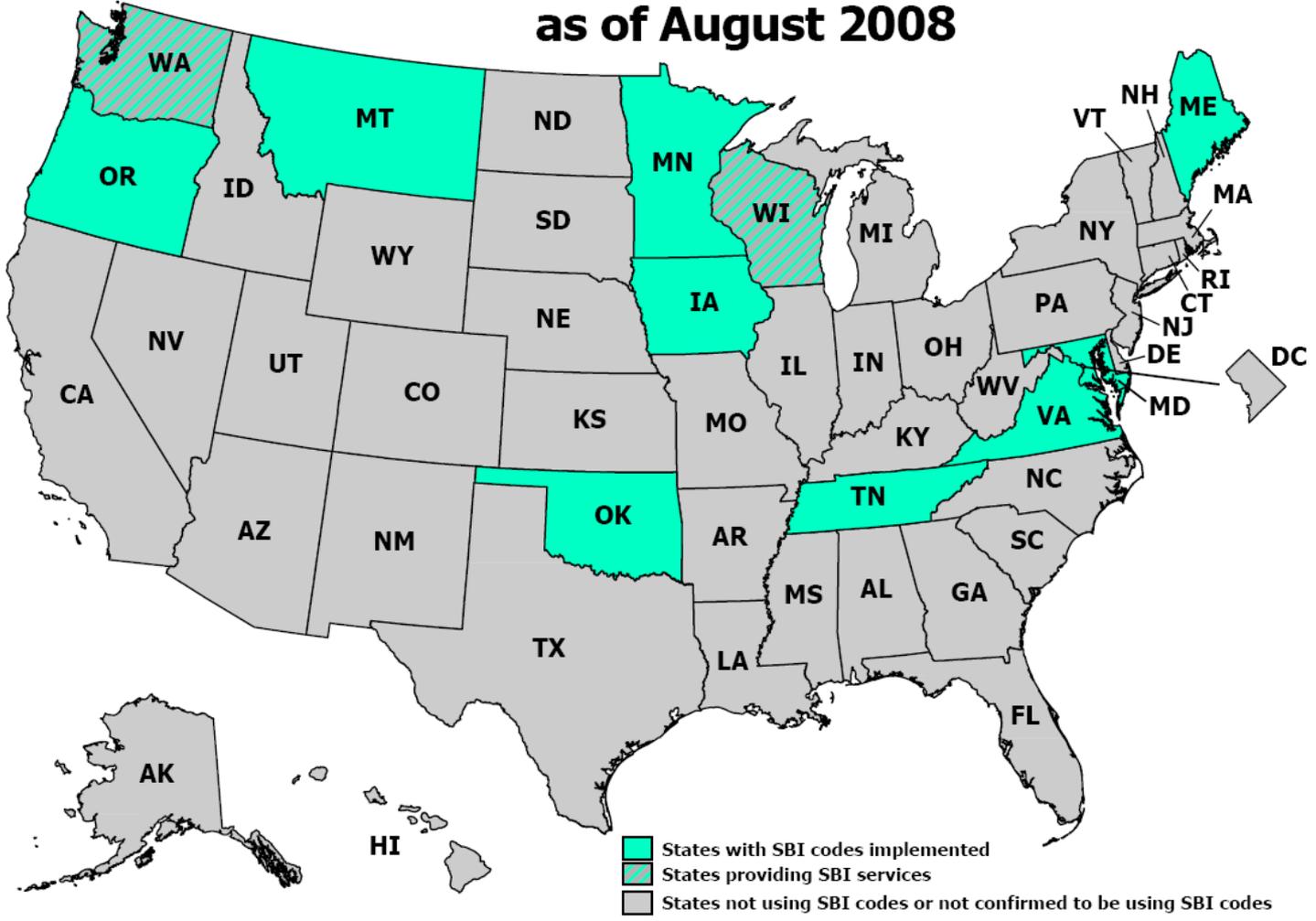


- Lack of treatment centers for referral
- Reimbursement issues

Insurers' Liability for Health/ Sickness Losses Due to Intoxication ("UPPL") as of January 1, 2010



States that Have Implemented Screening and Brief Intervention Reimbursement Codes For Medicaid as of August 2008



ONDCCP012766

Sources: SAMHSA and ONDCP (September 2008).

Medicare will pay for annual alcohol screening and up to 4 brief face-to-face counseling interventions (American Medical News, Oct. 17, 2011)



Screening and Brief Alcohol Intervention at College Health Center

- Screened all students at health service for at-risk drinkers
 - Past 2 weeks
 - 5+ per occasion for men
 - 4+ per occasion for women
 - Excluded and referred for treatment
 - BAC > 0.35
 - Drank 200+ in past 30 days

Source: Schaus et al., *J. Stud. Alcohol Drug, Suppl. No. 16*, 2009



Screening and Brief Alcohol Intervention (cont.)

- **Interventions Based on 2 brief motivational interventions (MI) (20 minute sessions)**
 - Patient-Centered MI (Miller & Rollnick, 2002)
 - NIAAA curriculum to reduce high risk drinking in college students (Fleming, 2002)
 - Brief alcohol screening and intervention for college student BASICS (DiMeff, 1999)
- **Results**
 - 3 months
 - Reduction in typical and peak BAC
 - Peak drinks/setting
 - Drinks/week
 - Foolish risk-taking
 - 6 + 9 months
 - Lower scores (Rutgers Alcohol Problem Index (RAPI))

Source: Schaus et al., *J. Stud. Alcohol Drug, Suppl. No. 16, 2009*



Fleming et al. Brief Physician Advice for Heavy Drinking College Students, *Journal of Studies on Alcohol and Drugs, 2010*

- Brief intervention studied at five college student health services
- Similar results as Schaus

Patrick Keough

Student



- President Club Baseball (Fall 2009-2011)
- Secretary, Eta Chi Chapter Theta Chi Fraternity, (Fall 2008-2009)
- Chair, University Community Adjudication Board, Office of Student Conduct
- Desk Assistant, Office of Housing and Residence Life

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