

Alcohol and Drug Use Among James Madison University Students 2008



The Office of Substance Abuse Research

Dr. Jeanne Martino-McAllister, Director
<http://web.jmu.edu/osar/>
martinjm@jmu.edu
540-568-7097

Report Prepared by
Laurie Gabriele
Research Assistant

Table of Contents

	<u>Page</u>
Research Synopsis.....	1
Overview.....	2-3
Objectives.....	2
Instrument.....	3
Funding.....	3
Methodology.....	3
Research Findings.....	4-39
Section 1:Demographics.....	4
Section 2:Use of Alcohol: Quantity and Frequency.....	7
Section 3:Use of Tobacco.....	12
Section 4:Use of Illegal Drugs.....	14
Section 5:Student Perceptions of Other's Use.....	17
Section 6:Use of Alcohol: Consequences and Problematic Experience.....	20
Section 7:Other Behaviors and Attitudes.....	22
Section 8:Secondary Effects of Alcohol Use.....	23
JMU Additional Questions.....	24-39
Discussion.....	40
Recommendations for JMU.....	41
Conclusion.....	44
References.....	45

Tables & Figures

<u>Section Number and Name</u>	<u>Pages</u>
Section 1: Demographics	
Figure 1: Gender 2008 JMU Population 2008 Campus Wide 2006 Campus Wide 2004 Campus Wide	4
Figure 2: Class Year 2008 JMU Population 2008 Campus Wide 2006 Campus Wide 2004 Campus Wide	5
Figure 3: Age 2008 JMU Population 2008 Campus Wide 2006 Campus Wide 2004 Campus Wide	6
Section 2: Use of Alcohol: Quantity and Frequency	
Figure 4: Average # of drinks per week 2008 JMU Population 2006 National Reference Group 2006 JMU Population 2005 National Reference Group	7
Figure 4a: # of drinks per week 2008 JMU Population	
Figure 5: Alcohol consumption of 5 or more drinks in previous 2 weeks 2008 Campus Wide 2006 Campus Wide 2004 Campus Wide	8
Figure 6: Alcohol use rates within the previous year 2008 Campus Wide 2006 Campus Wide	9
Figure 7: Alcohol use rates within the past 30 days 2008 Campus Wide 2006 Campus Wide 2004 Campus Wide	10
Figure 8: A closer look at alcohol use rates within the last 30 days 2008 Male 2008 Female	11

Section 3: Use of Tobacco

Figure 9: Tobacco use within the past year 2008 Campus Wide 2006 Campus Wide	12
Figure 10: Tobacco use in past 30 days 2008 Campus Wide 2008 Male 2008 Female	13

Section 4: Use of Illegal Drugs

Figure 11: Marijuana use within the past year 2008 Campus Wide 2006 Campus Wide	14
Figure 12: Marijuana use in past 30 days 2008 Campus Wide 2006 Campus Wide	15
Table 1: Alcohol and other drug use – A comparison of 30 day prevalence 2008 Campus Wide 2006 Campus Wide 2004 Campus Wide 2000 Virginia 2006 Reference	16

Section 5: Student Perceptions of Others' Use

Figure 13: Perception of other students tobacco use (past year) 2008 Campus Wide	17
Figure 14: Perception of other students alcohol use (past year) 2008 Campus Wide	18
Figure 15: Perception of other students marijuana use (past year) 2008 Campus Wide	19

Section 6: Use of Alcohol: Consequences and Problematic Experiences

Table 2: Consequences of Alcohol Use – Problematic Experiences 2008 Campus Wide 2006 Campus Wide 2004 Campus Wide 2000 Virginia 2006 Reference	20
---	----

Section 8: Secondary Effects of Alcohol Use

Figure 16: Ways in which other students' drug/alcohol use affects life	23
--	----

JMU Additional Questions

Figure 17: Opinion on the Office of Judicial Affairs and its approach to alcohol violations 2008 Campus Wide	24
---	----

Table 3: A closer look at the “Three Strikes” policy	25
Figure 18: Treatment of students by Judicial Affairs	26
Table 4: Students feeling regarding privacy at the Counseling & Student Development Ctr	27
Figure 19: Reasons students would be less likely to drink and engage in risky behaviors	28
Figure 20: Thoughts on what would make friends less likely to drink and engage in risky behavior	29
Figure 21: A closer look at students’ perception of their parents attitude towards underage/illegal drinking	30
Table 5: Perception of JMU drinking culture prior to arrival	31
Figure 22: Who students turn to if they had a drinking problem	32
Figure 23: Perception of high-risk drinking	33
Table 6: Attitudes about alcohol	34
Table 7: Perception of most students’ attitudes about alcohol	35
Table 8: Reasons students drink alcohol	36
Figure 24: Alcohol use in relation to students’ best sexual experience	37
Figure 25: Non-alcohol activities vs. activities with alcohol	38
Table 9: Most attractive non-alcohol activities	39

Research Synopsis

The James Madison University Office of Substance Abuse Research (OSAR) conducted a web-based survey in February 2008 on alcohol and other drug use by JMU students. The study was coordinated by Dr. Jeanne Martino-McAllister, Director of the Office of Substance Abuse Research.

The purpose of this research was to examine alcohol and other drug use attitudes, behaviors and consequences among JMU students. Key findings are compared to a campus-wide sample from 2004 and 2006, a statewide reference group from 2000, and a national reference group from 2008. JMU data is also available from studies conducted in 1995, 1997, 1999, 2000, and 2002.

In 2008, the Core Alcohol and Drug Survey (Core Use) was administered online to a sample of 1000 randomly selected students in all classes, racial, grade point average and residential categories. Two-hundred seventy-eight (278) of 1000 (27.8%) students completed the online survey. This response rate is 2.7% higher than the previous survey administered. The respondents included 25.9% freshman, 17.6% sophomores, 21.9% juniors and 26.3% seniors. Of the respondents, 67.9% were female.

Key Findings

Alcohol

Of the students reporting, **83.3%** report that they have used alcohol in the past 30 days compared to **81.2%** in 2006. In 2008, students report they consume **8.0** drinks per week compared to the national reference group at **5.5** drinks per week. In 2006, JMU students consumed an average of 8.2 drinks per week compared to the 2006 national average of 5.8. The percentage of students who report having 'binged' (having five or more drinks in one sitting) in the last two weeks is **62.2%** compared to the national average of **46.7%**. This number is up from 60% in 2006 and 56.3% in 2004. While binge drinking statistics suggest a negative behavior shift, a positive shift is represented as **65.8%** of students report drinking once a week, less, or not at all in the past year compared to 63.6% in 2006. The 2008 data also shows a strong misperception that more frequent drinking behavior exists as students *think* that only **27.5%** of other students drink once a week, less, or not at all.

Misperception of Tobacco

54.5% of students reporting never used tobacco in the last year. However, students *think* that only **6.9%** have never used tobacco in the last year. Perception is closer to reality in the 'everyday use' as students *think* **9.1%** of other students use tobacco everyday, and in reality, **8.3%** report everyday use.

Illicit Drugs

Marijuana previous 30-day use is up. Past 30-day marijuana use reported by the 2008 campus wide population is **24.8%**, compared to **21.6%** reported in 2006 survey. Most students (**75.2%**) are not current users of marijuana.

Consequences of Use

In regard to consequences of substance use, in most categories, the 2008 campus wide population reported more problematic experiences than the national reference group.

Recommendations and Conclusion

The Core survey should continue to be administered on a bi-annual basis to assess the impact of the programs implemented by the campus and community coalition and ongoing campus environmental policies and initiatives. Campus programming recommendations include the continuation of collaboration of students, faculty, administration and staff to reduce the risks of excessive drinking and increased marijuana use. Effective practices should be continued through short-term and long-term evaluation.

Alcohol and Drug Use Among James Madison University Students

Overview

The Office of Substance Abuse Research (OSAR) in the Department of Health Sciences assumes responsibility for gathering trend data on student alcohol and drug attitudes, perceptions, usage, behaviors and consequences. This report compares results of the 2008 Campus Wide online survey to results of the 2006 Campus Wide, 2004 Campus Wide, 2008 Nationwide, and 2000 Statewide Core Alcohol and Drug Survey.

It is apparent that certain departments and individuals at James Madison University are dedicated to reducing high-risk consumption of alcohol by students. Since the early 1990's, various university alcohol prevention task forces have attempted to re-shape the campus culture and correct student misperceptions to reduce alcohol related problems on our campus. A comprehensive campus community approach is built around the review of objective data and utilizes appropriate strategies based on this data.

A growing body of research suggests that misperception of peer norms may increase tolerance for, and actual use of, alcohol and other drugs. Students typically overestimate drug use and overestimate the permissiveness of their peers. Students, in reality, are more moderate in both use and attitudes, and more students are non-users than most students, and others, think. (Perkins, 1991)

While alcohol and other drugs can create devastating problems on our campus, misperceptions exceed the prevalence of actual use. These misperceptions can fuel the problem behavior if that is the behavior that receives attention and emphasis. Students follow the negative behavior beyond what they know because they "think everyone is doing it." Then, the problem behavior actually does become more widespread because they incorrectly perceive it as the norm.

Changing the perception of normative behavior to more accurately mirror "true" norms is a relatively new area of research and was first introduced as a prevention issue a little over ten years ago (Haines, 1996; Hansen & Graham, 1991.) Based on components of the normative beliefs theory, this strategy involves correcting misperceptions about the prevalence and acceptability of AOD use. Typically, students will overestimate actual prevalence of substance use, thus leading them to consider abuse to be the norm. A growing body of research suggests that misperception of peer norms may increase tolerance for, and actual use of, alcohol and other drugs.

Intentional consideration has been given as to how the data in this report is presented. The intention is not to mislead, but to place emphasis on student non-behaviors (non-users) as well as behaviors (users.) This emphasis can help disseminate the actual norms thereby decreasing overestimates of use of AOD. Reducing misperceptions can help the AOD problems among students. In the past, this "social norms" approach has been used by James Madison University as a prevention strategy, however, it has not been used in a concerted effort recently. The norm data included in this report should be reviewed with this in mind and possible use as an evidence-based strategy.

Objectives

1. To assess the current nature, scope and consequences of student alcohol and other drug use in comparison with the 2006 Campus Wide, 2004 Campus Wide, 2008 Nationwide, and 2000 Virginia college population survey results.
2. To survey student's alcohol and other drug attitudes and usage, as well as their perceptions of other student's attitudes and usage.
3. To use the results to provide a quantifiable benchmarks for progress towards accomplishment of intervention goals.

Instrument

The Core Alcohol and Drug Survey, a statistically reliable and valid survey tool developed at the Southern Illinois University at Carbondale (SIUC), has been used across the United States at approximately 197 colleges and universities. Over 93,679 college and university students were surveyed from 1995-97. The schools using the survey represent all varieties of higher education ranging from the degree-granting community colleges to the largest research-based universities in the country. The students surveyed represented various majors and levels in school. The results from these surveys provided a reference group for alcohol and drug use on college and university campuses across the United States to which JMU is compared. For 2008, the reference group is 71189 students from 148 institutions from the 2006 Core Aggregated National Database.

The content areas of the Core Alcohol and Drug Survey are based on both the theoretical assumptions of alcohol and other drug use in higher education and in the research presented in recent literature. The content areas include demographics; working and living arrangements; perceptions of campus substance abuse policies and their enforcement; average number of drinks consumed per week; frequency of binge drinking; patterns of use of alcohol, tobacco, marijuana, cocaine, amphetamines, sedatives, hallucinogens, opiates, inhalants, designer drugs, steroids, and other drugs; age of first use; family history of substance abuse problems; and desire for an alcohol- and drug- free social environment. The Core surveys have evidence of reliability and validity.

Sixteen additional questions were included in the 2008 survey. The questions were submitted by the JMU Office of Judicial Affairs, University Health Center and Counseling and Student Development Center. The results can be found on pages 24-33.

Funding

In 2008, administration costs were covered through the Office of Substance Abuse Research (OSAR), the Community Coalition on Alcohol Abuse, and the University Health Center. In past years, the Virginia Department of Alcoholic Beverage Control (ABC) has collaborated with the Governor's Office of Substance Abuse Prevention (GOSAP) to fund campus-based data collection.

Methodology

A random sample of 1000 students was drawn using the *JMU Email and Label Request* form from Computing Support Services. The sample included currently enrolled (Spring, 2008) undergraduate and graduate, residential and commuter students, male and female, all academic levels, majors, ethnic backgrounds, and GPAs.

The Core survey was administered online through the Core Institute. Students were informed via an emailed letter on February 18 that they were selected to participate in the survey. This email served as their informed consent and survey completion confirmation. Students were directed to the Core website (<http://www.coresurvey.com/login.asp>) and instructed to use the JMU USER ID.

After completing the online survey, students sent an email to the Office of Substance Abuse Research if they chose to be eligible for one of eight \$25 incentive drawings. This allowed for JMU tracking of respondents, but in no way were names associated with their survey results. The website was open for survey responses between February 18, 2008 and February 29, 2008. The Core Institute provided technical assistance and data summaries. Students were assured of confidentiality, anonymity and voluntary participation at every contact.

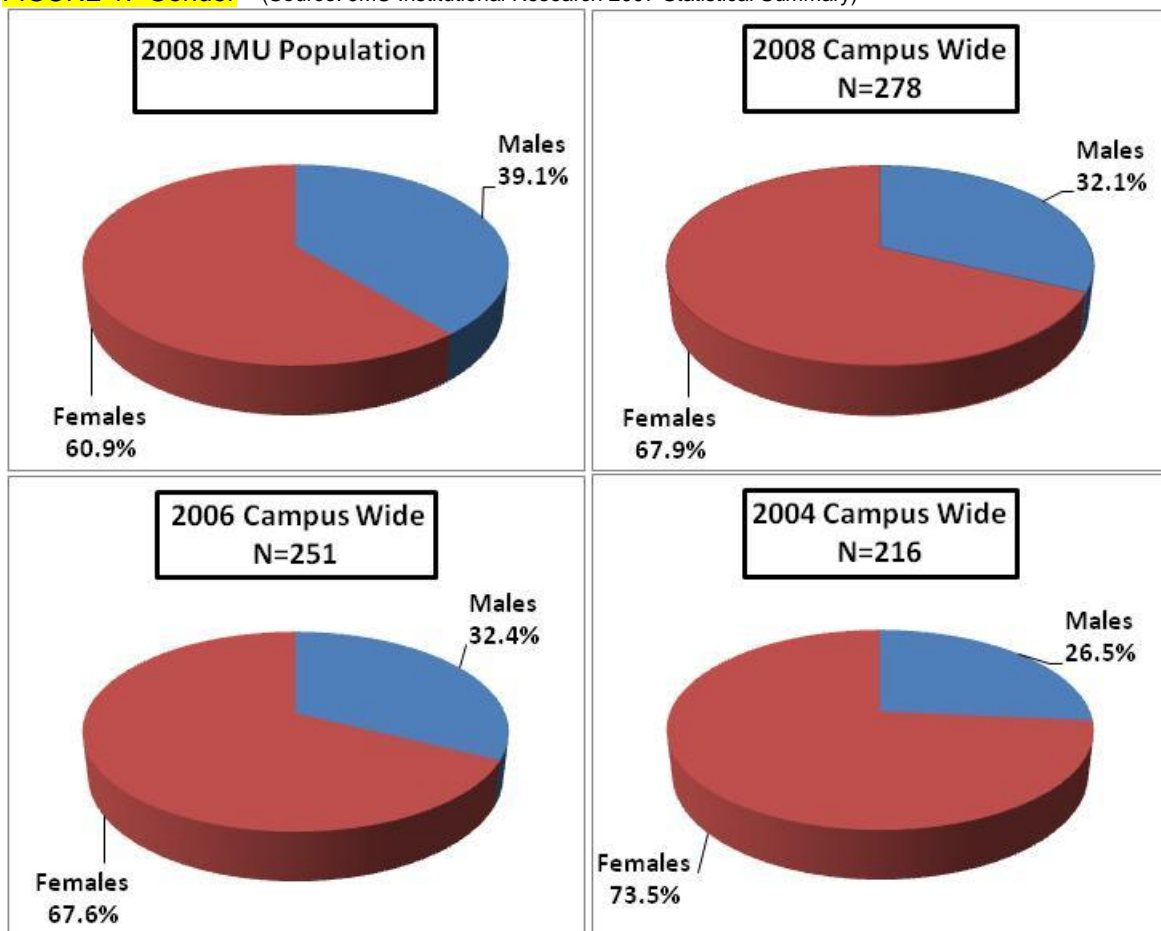
Research Findings

Following are key findings from the 2008 survey. Comparison data in many cases are given for the 2006 campus wide, 2004 campus wide, 2008 nationwide and 2000 Virginia college population. Where possible, the norm and perception data are given. This is intended to help educate readers toward the normative behaviors and attitudes of the JMU students.

Section 1: Demographics

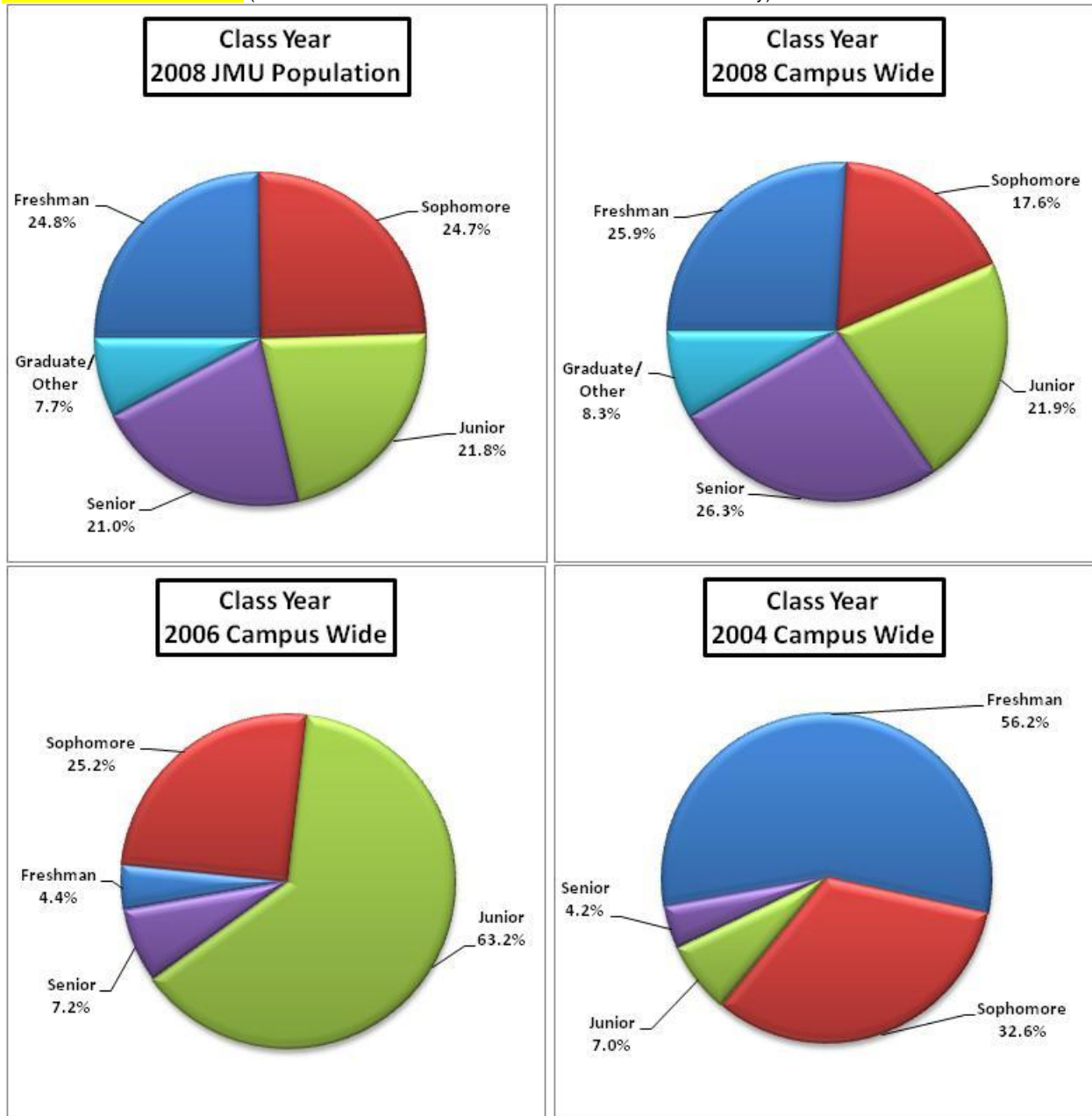
The 2008 response rate is 2.6% higher than the previous online survey administered. Of the 1000 student sample, 278 (27.8%) students completed the online survey. The respondents included 25.9% freshman; 17.6% sophomores, 21.9% juniors and 26.3% seniors. Of the respondents, 67.9% were female. Because of the notable differences in class year and gender, survey results are compared to like populations in previous studies. Characteristics of the 278 students who accurately completed and returned the questionnaires compared to other survey years are presented below.

FIGURE 1: Gender (Source: JMU Institutional Research 2007 Statistical Summary)



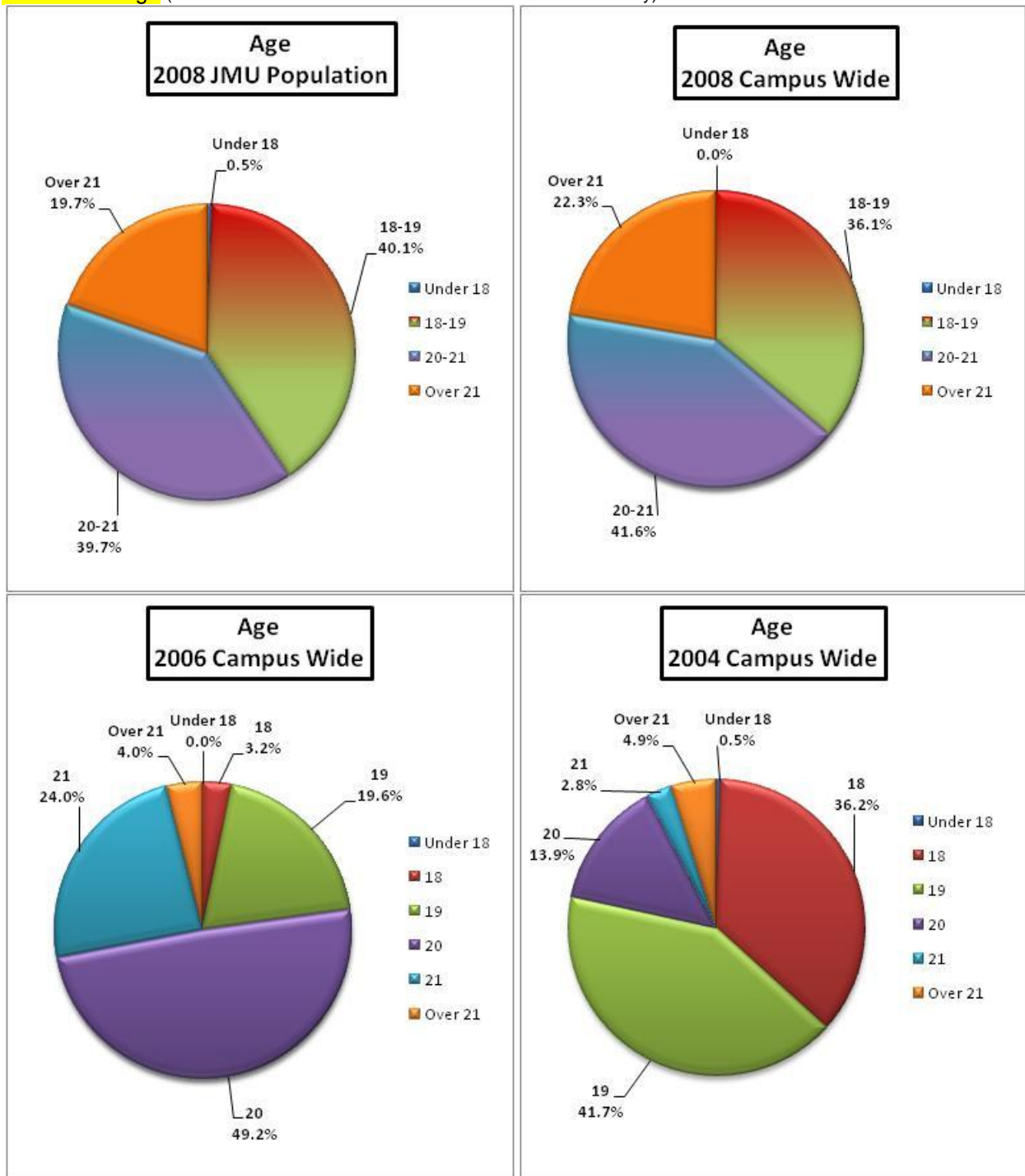
Note: The 2008 respondents have a higher proportion of female respondents which is in alignment with the campus wide population.

FIGURE 2: Class Year (Source: JMU Institutional Research 2007 Statistical Summary)



Note: The 2008 respondents are similar to the overall James Madison University population in terms of class year.

FIGURE 3: Age (Source: JMU Institutional Research 2007 Statistical Summary)



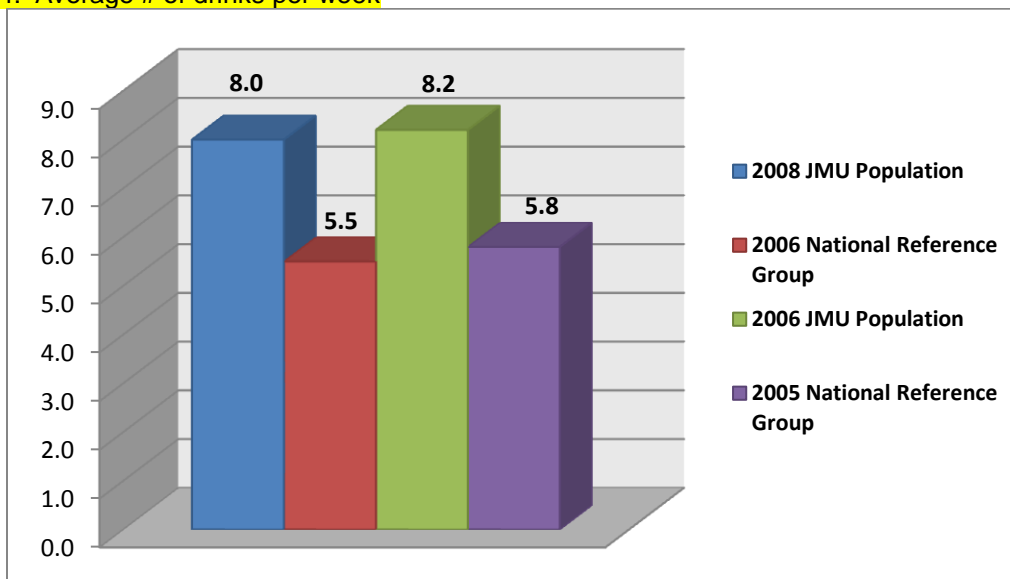
Note: The ages of the 2008 respondents correspond closely to the overall population of James Madison University.

Section 2: Use of Alcohol: Quantity and Frequency

Student use of alcohol is examined in this section. The focus is on “quantity” and “frequency” of use.

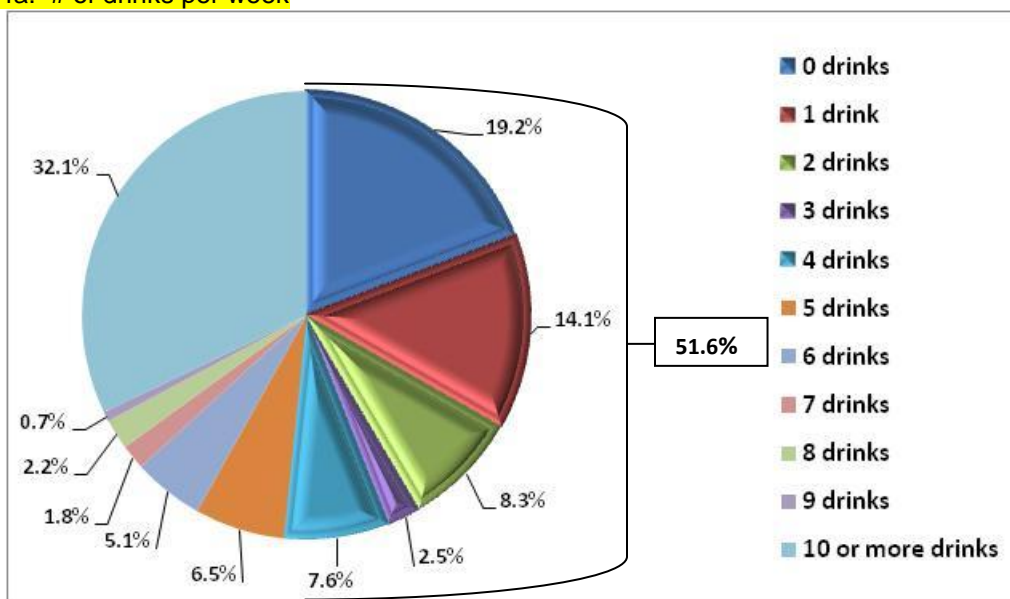
In response to Question 15: What is the average # of drinks you consume a week?

FIGURE 4: Average # of drinks per week



Note: The reporting JMU population consumes significantly more drinks per week than the national reference group (8.0 vs. 5.5). In comparison, the 2006 JMU population reported an average consumption of 8.2 drinks per week while the national reference group reported 5.8 drinks per week. Although consumption slightly decreased since 2006, the disparity between the JMU population and the national reference group has increased (2.4 more drinks per week in 2006 vs. 2.5 more drinks per week in 2008).

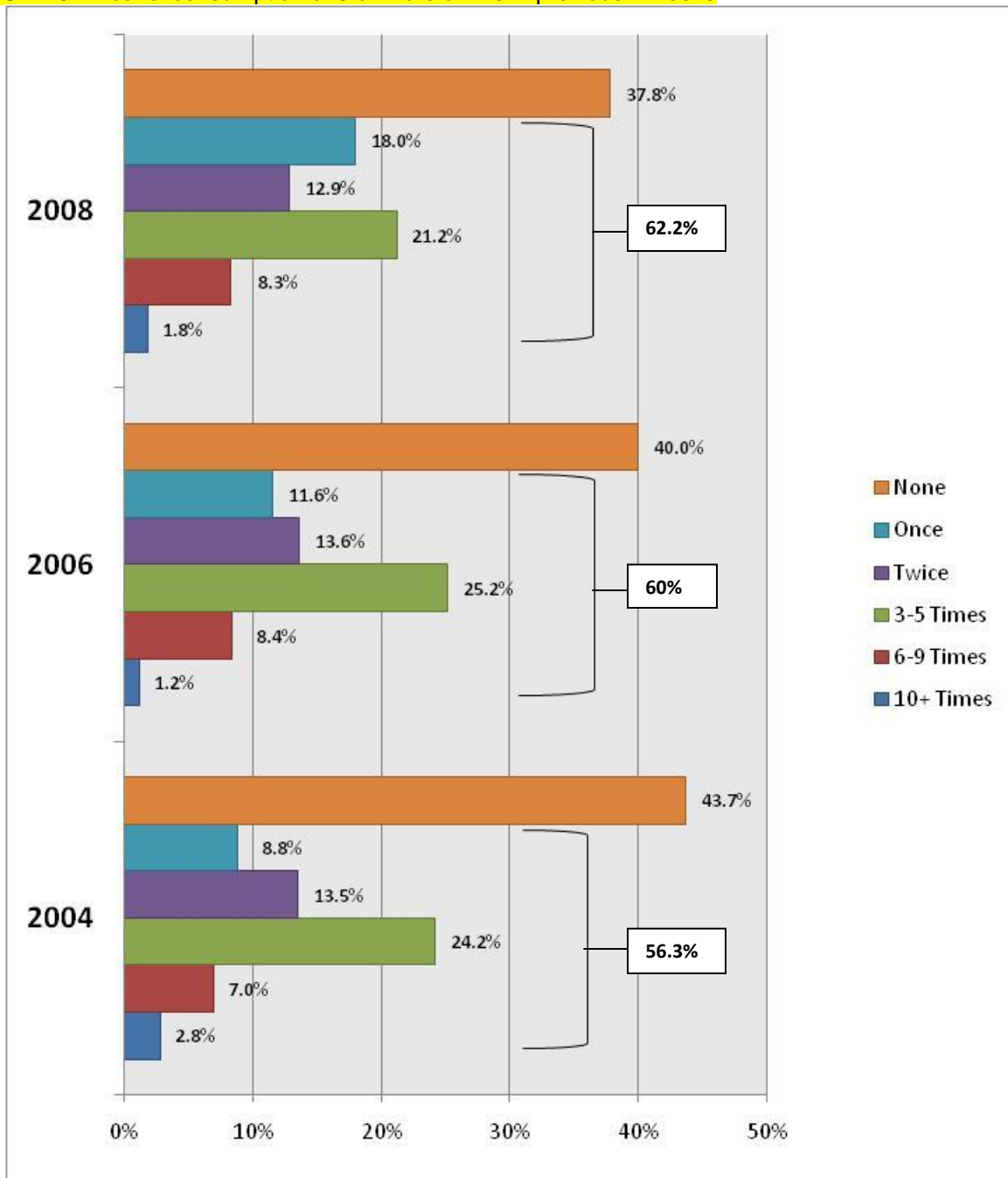
FIGURE 4a: # of drinks per week



Note: A small majority of students (51.6%) consume 4 drinks or less per week; note the high percentage of 10 or more drinks per week.

In response to Question 14: How many times have you had five or more drinks at a sitting in the last two weeks?

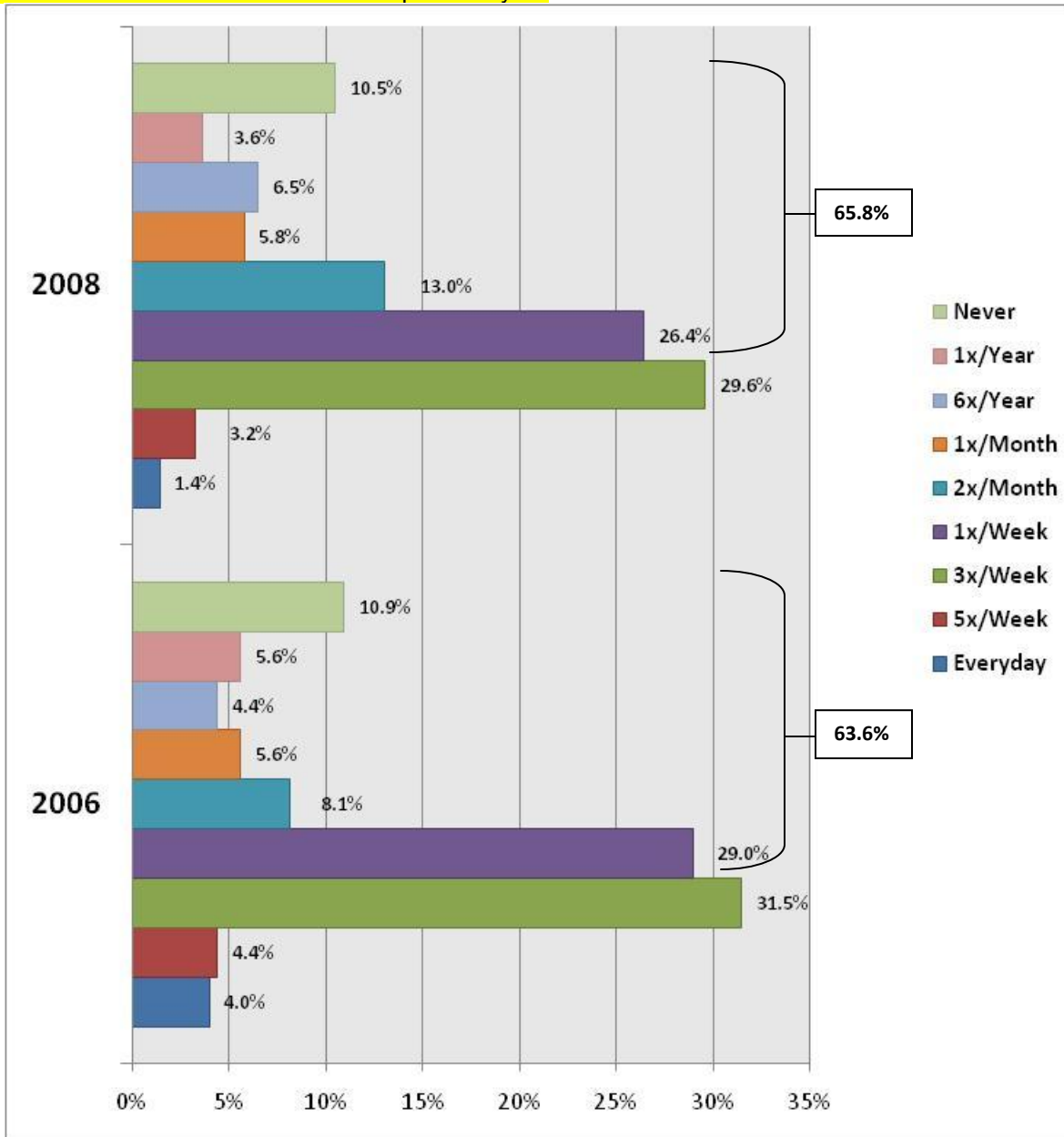
FIGURE 5: Alcohol consumption of 5 or more drinks in previous 2 weeks



Note: In 2008, 62.2% of students report binge drinking in the previous two weeks, which is up from 60% in 2006 and 56.3% in 2004. This is a negative behavior shift.

In response to Question 17b: Within the last year about how often have you used alcohol (beer, wine, liquor)?

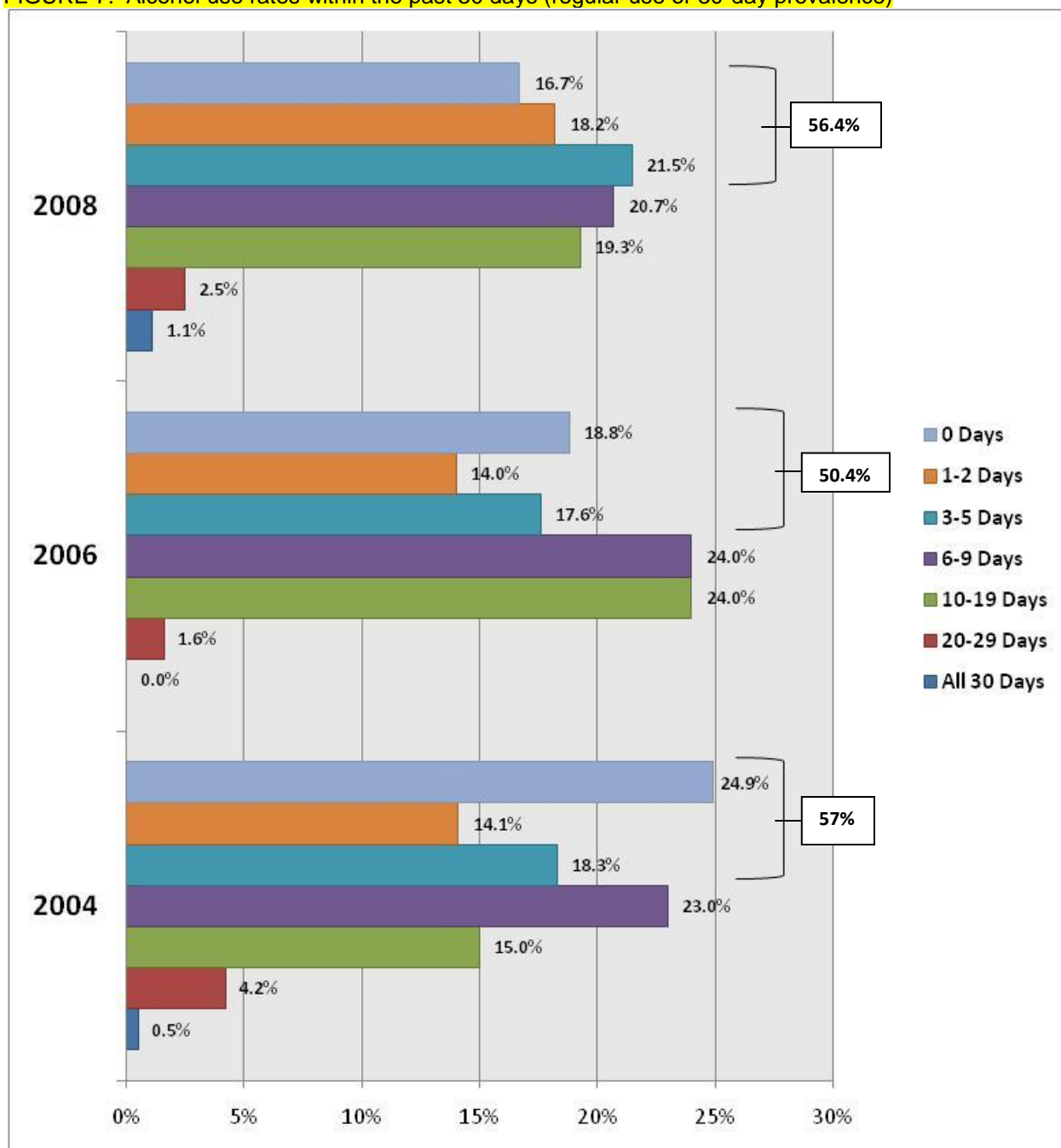
FIGURE 6: Alcohol use rates within the previous year



Note: Looking at the top graph, in 2008, 65.8% of students reporting drinking once a week, less or not at all in the past year. In comparison, the 2006 population reported a rate of 63.6% drinking once a week, less or not at all. This is a positive shift. Also, the population who reported drinking 3 times/week decreased from 31.5% in 2006 to 29.6% in 2008.

In response to Question 18b: During the past 30 days on how many days did you have alcohol (beer, wine, liquor)?

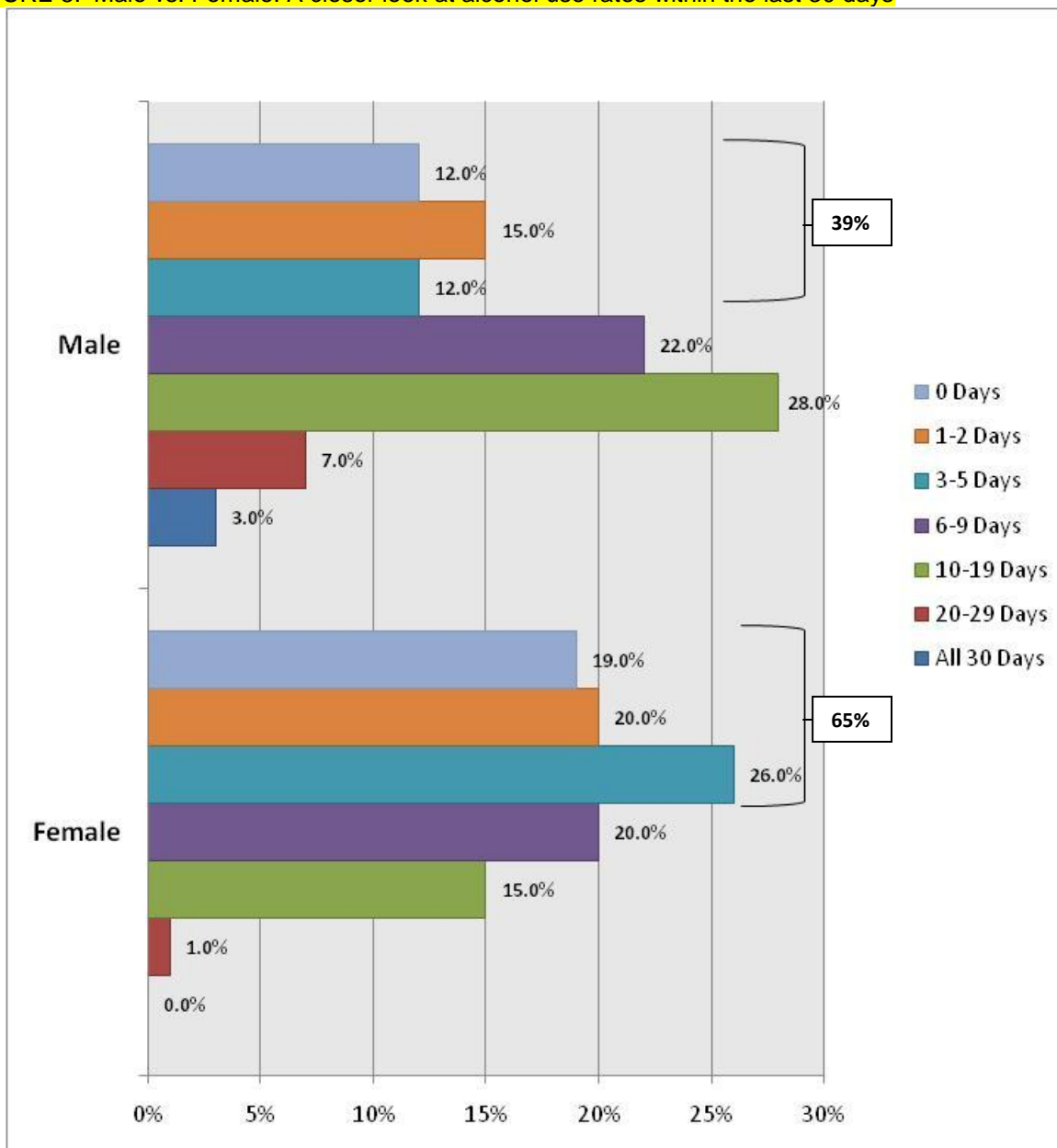
FIGURE 7: Alcohol use rates within the past 30 days (regular use or 30-day prevalence)



Note: In 2008, 56.4% of students reporting drank 5 or fewer days in the 30 days prior to the survey compared to 50.4% in 2006. In 2004, those drinking 5 or fewer days was 57%. This is a positive shift since 2006, as we want to see *more* students drinking *fewer* days. Finally, in 2008, 19.3% of respondents report drinking 10-19 days compared to 24% in 2006.

In response to Question 18b: During the past 30 days on how many days did you have alcohol (beer, wine, liquor)?

FIGURE 8: Male vs. Female: A closer look at alcohol use rates within the last 30 days



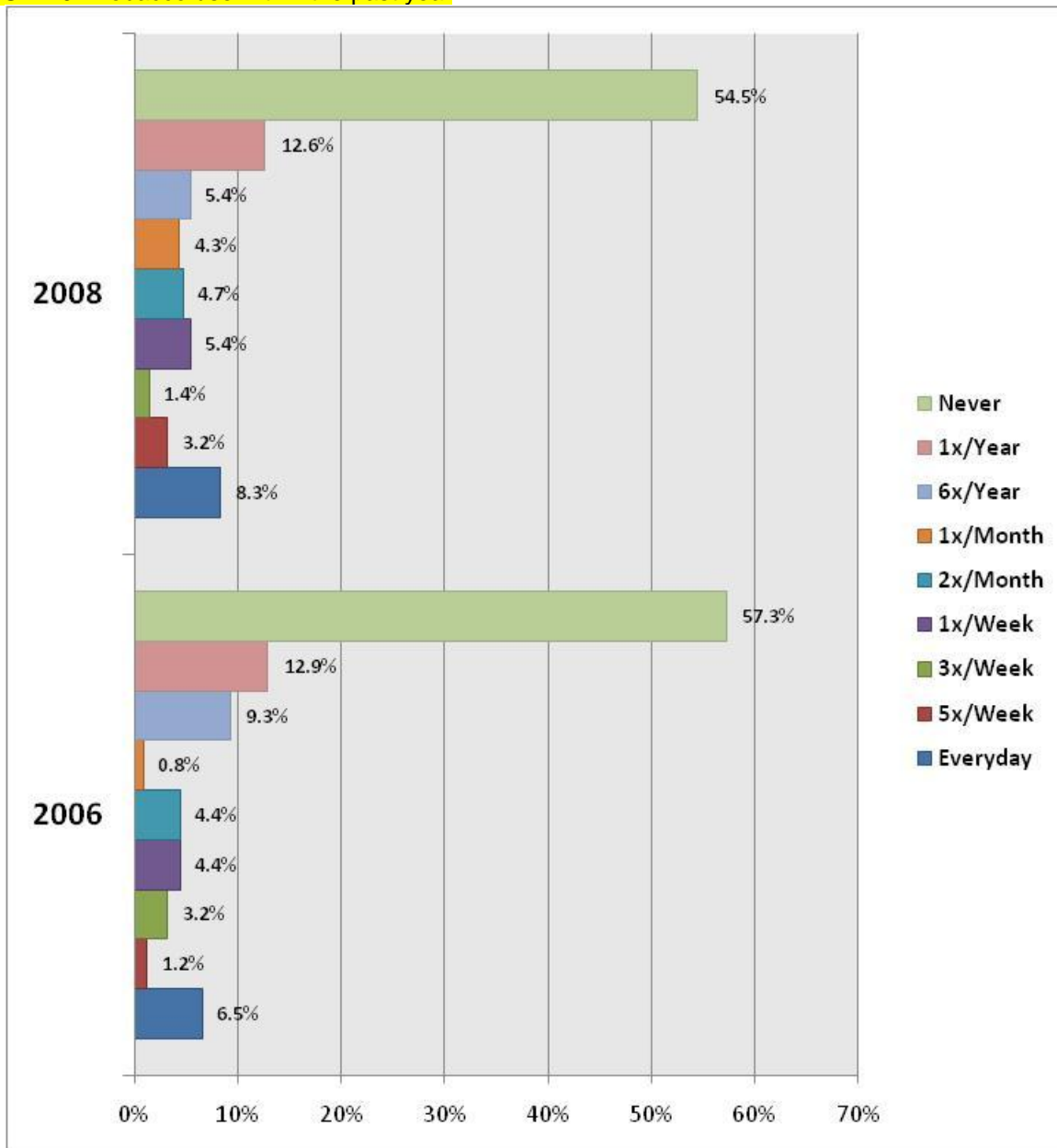
Note: In 2008, of males reporting, 39% have used alcohol 5 days or less during the past 30 days compared to 65% of females. Also, 15% of female respondents report using alcohol 10-19 days compared to 28% of males.

Section 3: Use of Tobacco

Student use of tobacco is examined in this section.

In response to Question 17a: Within the last year about how often have you used tobacco (smoke, chew, snuff)?

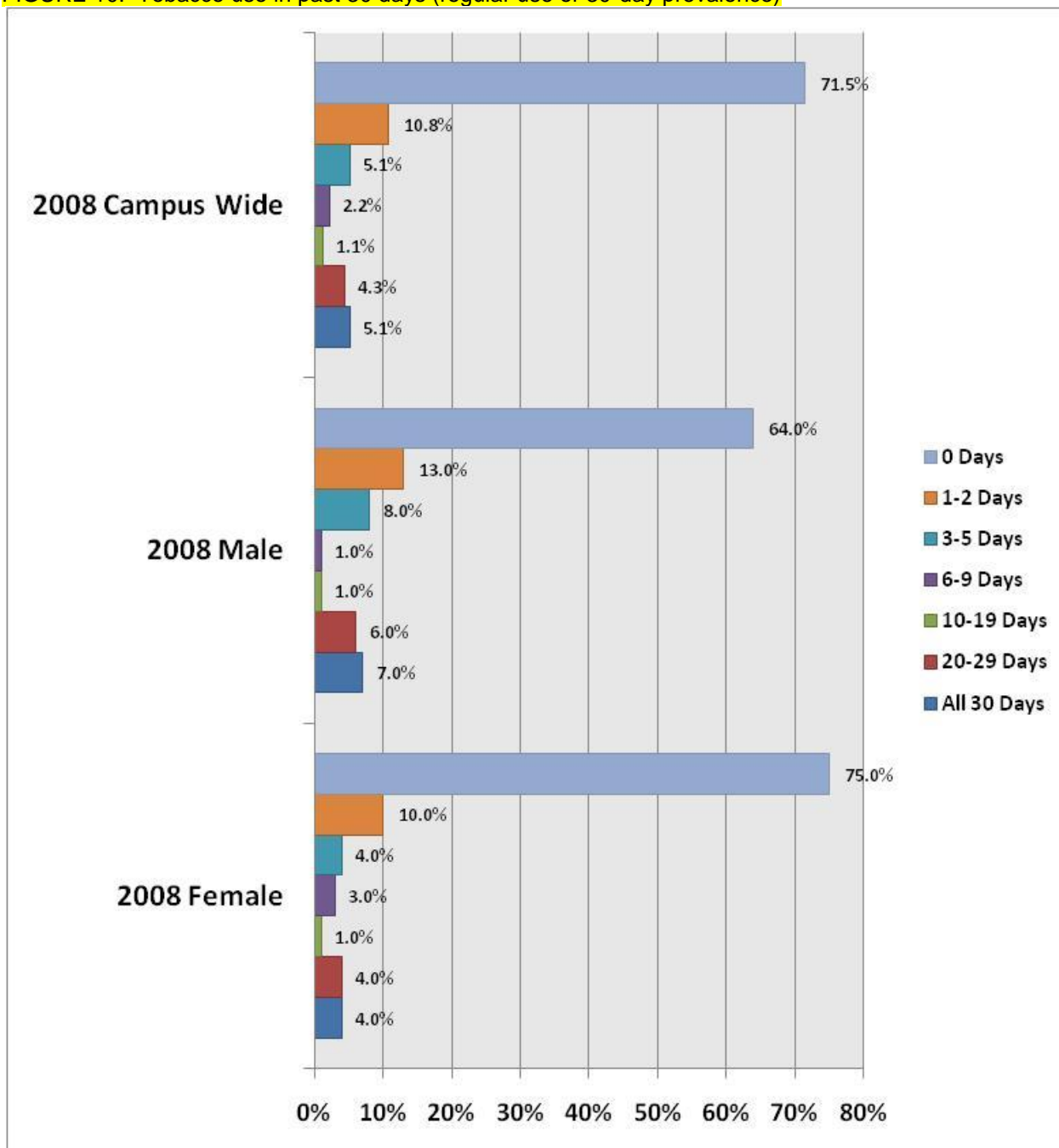
FIGURE 9: Tobacco use within the past year



Note: Although the majority of students reporting (54.5%) have never used tobacco in the last year, this number has decreased since 2006 (57.3%). A negative shift is also evident in everyday use as percentages increased from 6.5% in 2006 to 8.3% in 2008.

In response to Question 18a: During the past 30 days on how many days did you have tobacco (smoke, chew, snuff)?

FIGURE 10: Tobacco use in past 30 days (regular use or 30-day prevalence)



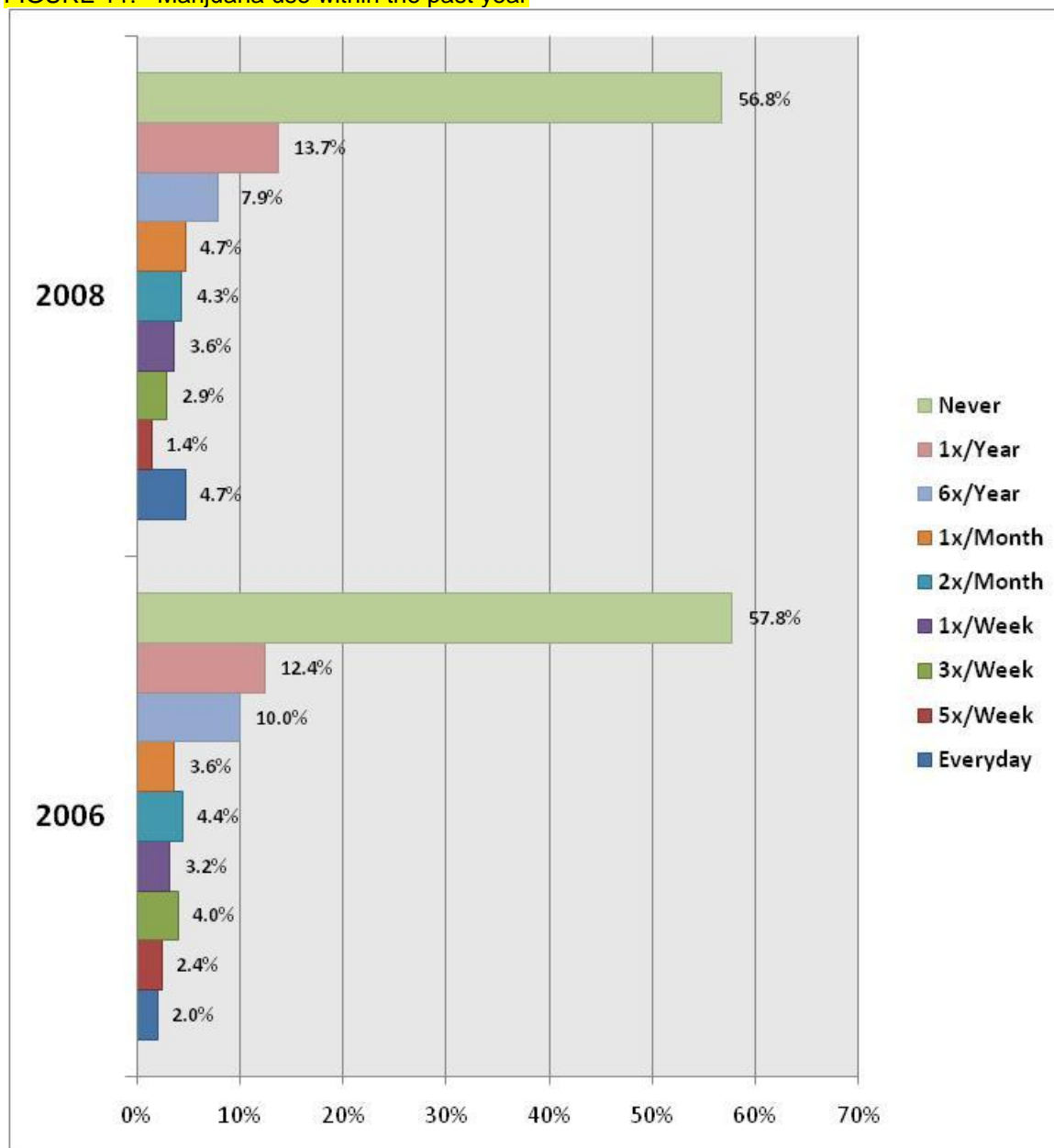
Note: In 2008, 71.5% of students reporting have not used tobacco in the 30 days prior to the survey; 64% of males and 75% of females have not used tobacco.

Section 4: Use of Illegal Drugs

Student use of illegal drugs, specifically marijuana, is examined in this section.

In response to Question 17c: Within the last year about how often have you used marijuana (pot, hash oil)?

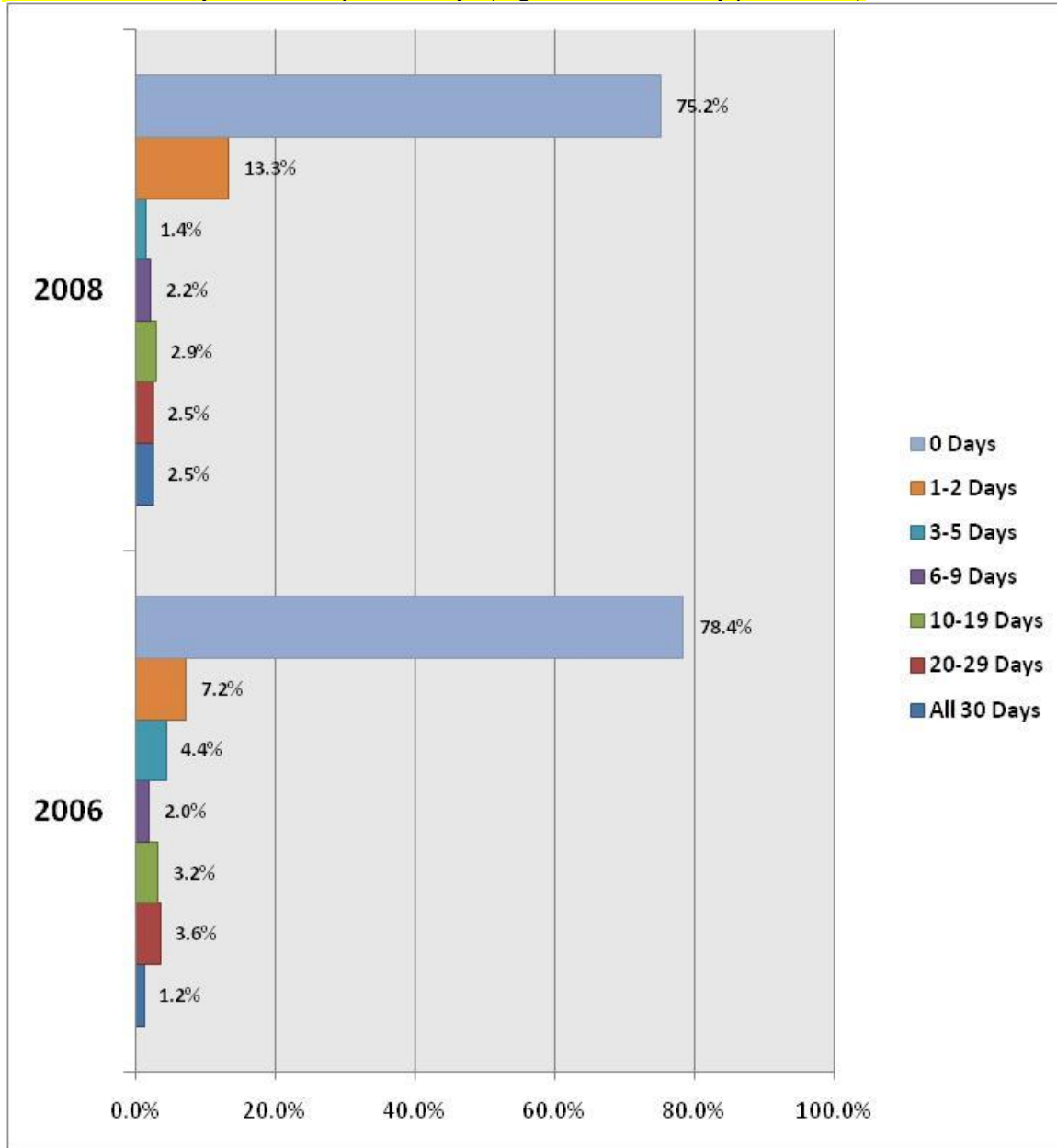
FIGURE 11: Marijuana use within the past year



Note: 56.8% of students (the majority) report not using marijuana in the last year, closely compared to 57.8% who reported not using marijuana in the past year in 2006.

In response to Question 18c: During the past 30 days on how many days did you have marijuana (pot, hash oil)?

FIGURE 12: Marijuana use in past 30 days (regular use or 30-day prevalence)



Note: Compared to 2006, there are less students reporting that they have smoked marijuana on 0 days (78.4% in 2006 down to 75.8% in 2008). This is a negative shift.

TABLE 1: Alcohol and Other Drug Use - A Comparison of 30 day prevalence

	2008 Campus Wide	2006 Campus Wide	2004 Campus Wide	2000 Virginia	2006 Reference
Tobacco	28.5	26.8	26.0	35.5	26.3
Alcohol	83.3	81.2	75.1	70.4	71.9
Marijuana	24.8	21.6	24.7	18.2	16.8
Cocaine	2.9	2.8	2.3	1.3	2.2
Amphetamines	1.1	2.4	2.8	2.9	3.1
Sedatives	1.4	2.0	0.5	1.4	2.0
Hallucinogens	1.4	2.0	1.4	2.5	1.1
Opiates	.4	0.0	0.0	0.7	.7
Inhalants	.4	0.0	0.0	0.8	.5
Designer Drugs	.7	0.0	0.5	2.0	.9
Steroids	0	0.0	0.0	0.6	.4
Other Drugs	.7	0.4	0.9	0.9	.8

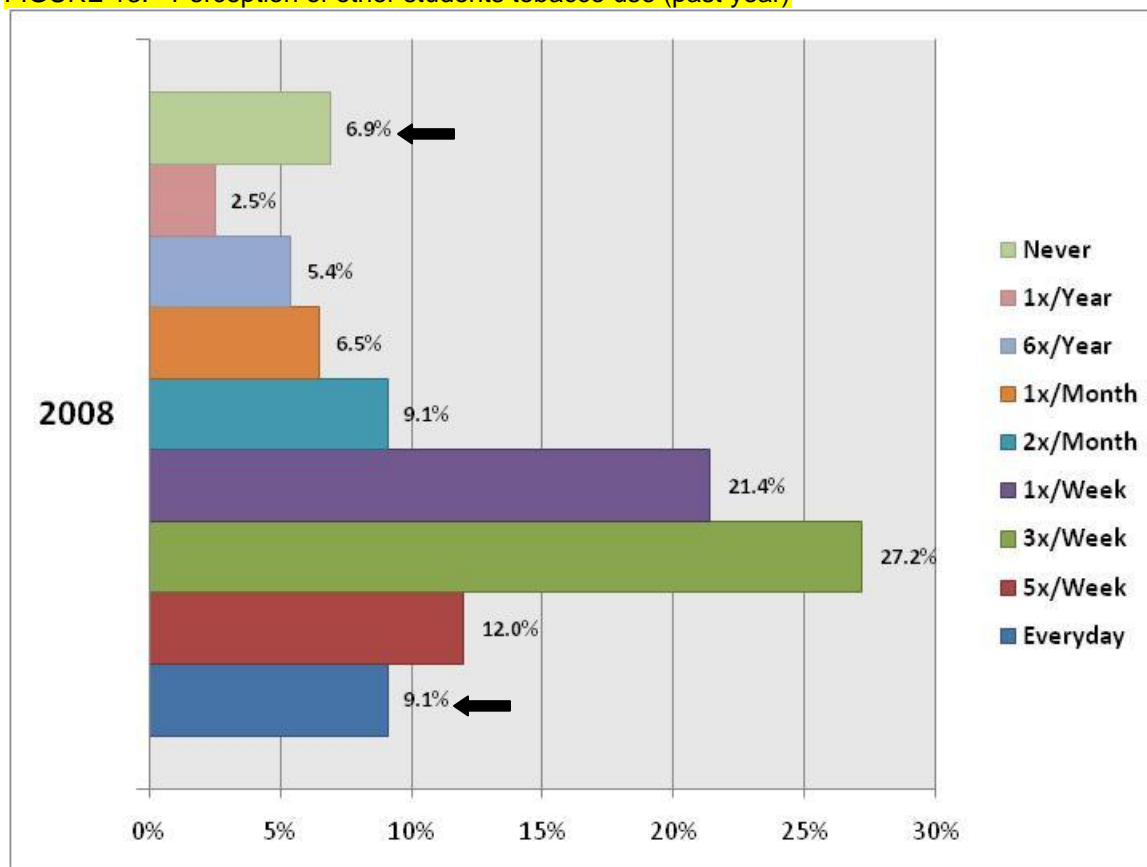
Note: Past 30 day use of tobacco is 28.5% for the 2008 campus wide population which is higher than the 2006 campus wide population and the 2006 national reference group. Among the JMU comparison groups, the 2004 campus-wide population had the lowest alcohol consumption rate of 75.1%. This percentage has steadily increased through the years with the 2008 population reporting 83.3% which is the highest 30-day prevalence since data has been collected at JMU and well above the 2006 national reference group. The past 30-day marijuana use reported by the 2008 campus-wide population (24.8%) is higher than past JMU populations and the 2006 national reference group.

Section 5: Student Perceptions of Other's Use

This section examines student perceptions of other student tobacco, alcohol and marijuana use. Perceptions of use is a significant focus area for prevention of alcohol and drug abuse.

In response to Question 19a: How often do you think the average student on your campus uses tobacco (smoke, chew, snuff)?

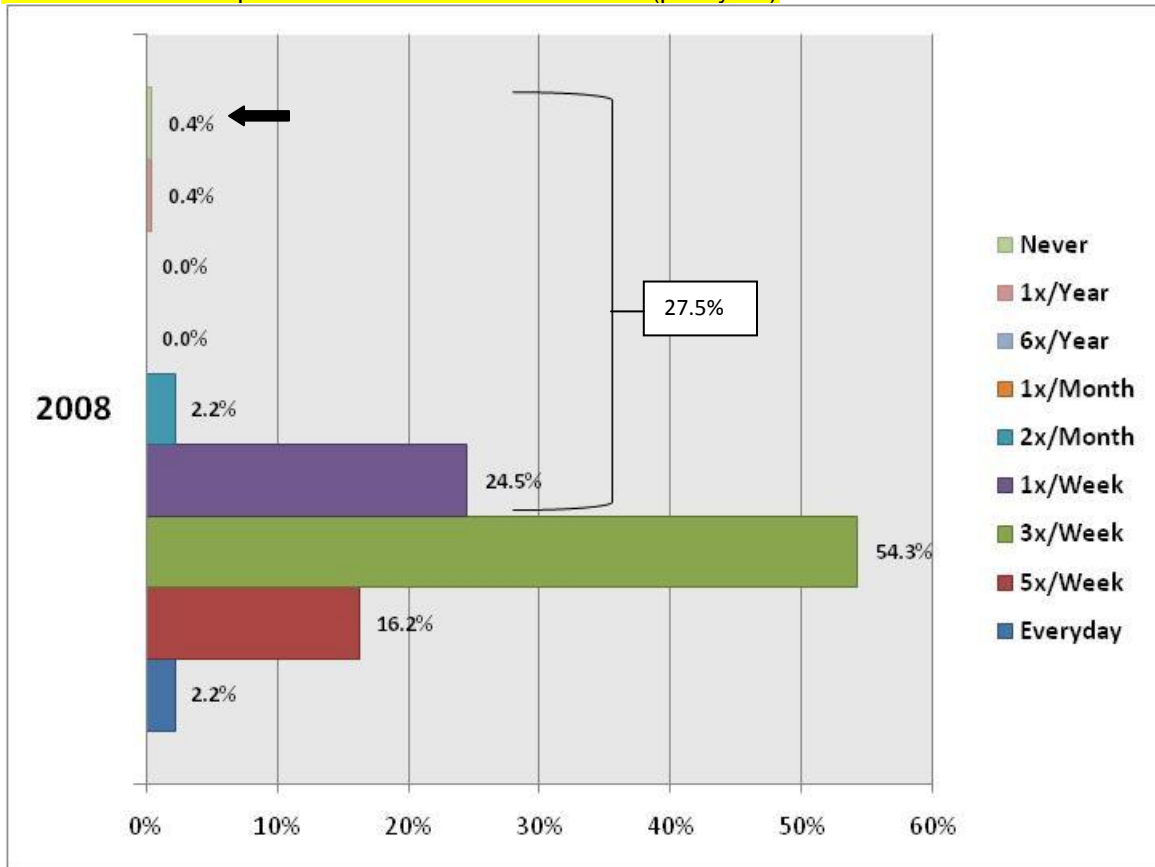
FIGURE 13: Perception of other students tobacco use (past year)



Note: To understand this important misperception, refer to **Figure 9**, (p. 12): *Tobacco use rates within the previous year*. The response category "Never Used" is 54.5%. This indicates that 54.5% of students reporting never used tobacco in the last year. Looking at **Figure 13** (above), students **think** that only 6.9% have never used tobacco in the last year. Perception is closer to reality in the 'everyday use' response. 9.1% (**Figure 13**) of students **think** other students use tobacco everyday, and in reality, just 8.3% report everyday use (**Figure 9**).

In response to Question 19b: How often do you think the average student on your campus uses alcohol (beer, wine, liquor)?

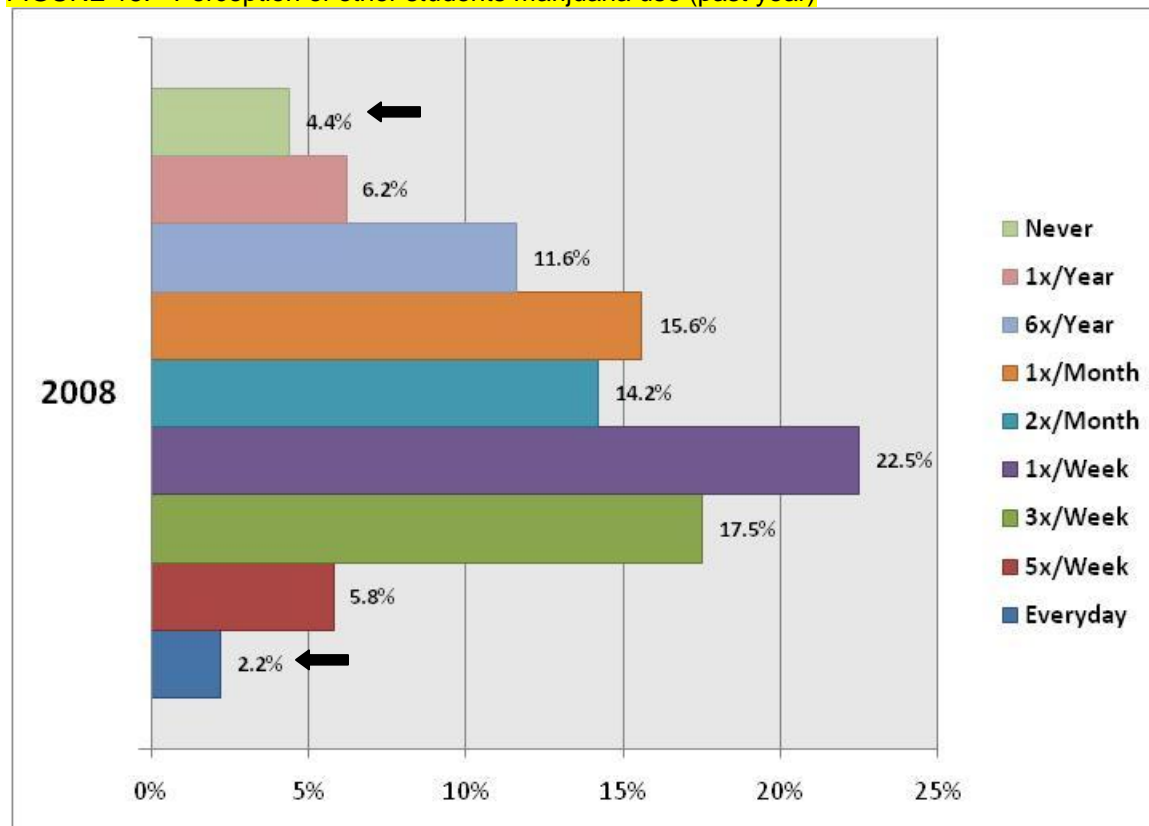
FIGURE 14: Perception of other students alcohol use (past year)



Note: To understand this misperception, look back at **Figure 6**, (p. 9): *Alcohol use rates within the previous year*. An important misperception is that 65.8% report drinking once a week, less or not at all. However, in **Figure 14** (above), students **think** only 27.5% of other students drink once a week, less or not at all. Thus, a strong misperception of more frequent drinking behavior exists. Similarly, students think that just 0.4% never drank alcohol in the last year (**Figure 14** above), when in reality, 10.5% report having never drank alcohol within the last year (**Figure 6**).

In response to Question 19c: How often do you think the average student on your campus uses marijuana?

FIGURE 15: Perception of other students marijuana use (past year)



Note: To understand this misperception, look back at **Figure 11**, (p. 14): *Marijuana use rates within the past year*, an important misperception is in the response category of “Never”. 56.8% of students report never using marijuana in the last year. Looking at **Figure 15** (above), students **think** that only 4.4% have never used marijuana in the last year. On the other hand, respondents held a more accurate perception of everyday use when they reported that they **think** 2.2% of other students use marijuana everyday, and in reality, 4.7% report everyday use. (Figure 11)

Section 6: Use of Alcohol: Consequences and Problematic Experiences

These behaviors are divided into two categories that deal with public and personal issues. In 2008, the campus wide population reported these consequences:

1. **50.5%** reported some form of public misconduct. This compares to 51.6% in 2006. Examples include being arrested for DWI/DUI, trouble with police or college authority, or driving while under the influence at least once during the past year as a result of drinking or drug use.
2. **39.1%**, compared to 35.5% in 2006, reported that they, at least once during the past year, as a result of drinking or drug use, experienced some kind of **serious** personal problems including the following experiences:
 - Suicide thoughts, suicide attempts, becoming hurt or injured, trying unsuccessfully to stop using alcohol, tobacco or other drugs, being taken advantage of sexually, and performing poorly on a test or important university project and **less serious** and more common-place problems, such as memory loss, nausea or vomiting and hangovers

In response to Question 21: Please indicate how often you have experienced the following due to your drinking or drug use during the last year...the 2006 campus wide population is compared to previous groups.

TABLE 2: Consequences of Alcohol Use- Problematic Experiences

	2008 Campus Wide	2006 Campus Wide	2004 Campus Wide	2000 Virginia	2006 Reference
Been arrested for DWI/DUI	.7	0.4	0.0	1.1	1.4
Been in trouble with police	15.3	16.9	18.1	14.9	13.7
Damaged property, pulled alarm, etc.	10.5	9.7	9.3	8.7	6.8
Driven a car under the influence	23.4	28.7	25.6	30.2	27.0
Got into an argument or fight	44.2	45.6	36.3	30.9	32.3
Tried to commit suicide	.4	1.2	1.4	1.2	1.3
Seriously thought about suicide	5.5	5.7	4.7	3.7	4.5
Been hurt or injured	28.6	29.8	25.1	15.5	16.2
Been taken advantage of sexually	12.8	12.2	10.8	12.1	10.1
Taken advantage of another sexually	2.5	1.6	1.9	5.3	3.2
Tried unsuccessfully to stop using	8.3	6.5	5.6	5.4	5.2
Thought I might have a drinking/drug problem	17.1	15.3	13.0	10.1	10.8
Performed poorly on a test/important project	30.8	31.9	24.4	22.6	22.1
Done something I later regretted	50.5	50.0	43.7	39.5	37.2
Missed a class	41.2	43.3	33.2	32.5	30.1
Been criticized by someone I know	42.3	38.8	41.4	30.6	30.9
Had a memory loss	49.3	55.5	46.3	34.3	33.9
Got nauseated or vomited	65.2	68.8	62.1	53.1	54.3
Had a hangover	75.4	74.6	64.7	60.6	62.5

Note: In most categories, the 2008 campus wide population report more problematic experiences than the 2006 national reference group.

ANOTHER WAY OF LOOKING AT CONSEQUENCES OF ALCOHOL USE

In 2008, the majority of JMU students . . .

- 89.5% NEVER Damaged property, pulled fire alarm, etc.
- 84.7% NEVER Have been in trouble with police, residence hall or other college authorities
- 69.2% NEVER Performed poorly on a test or important project
- 76.6% NEVER Drove a car while under the influence
- 58.8% NEVER Missed a class
- 50.7% NEVER Had a memory loss
- 71.4% NEVER Have been hurt or injured

Section 7: Other Behaviors and Attitudes

These attitudes, perceptions, beliefs and behaviors are responses to different questions asked of students:

2008 2006

- 95.3% 96.8%** Said the campus has alcohol and drug policies
- 97.1% 99.2%** Felt safe on campus
- 80.1% 77.5%** Refused an offer of alcohol within the past 30 days

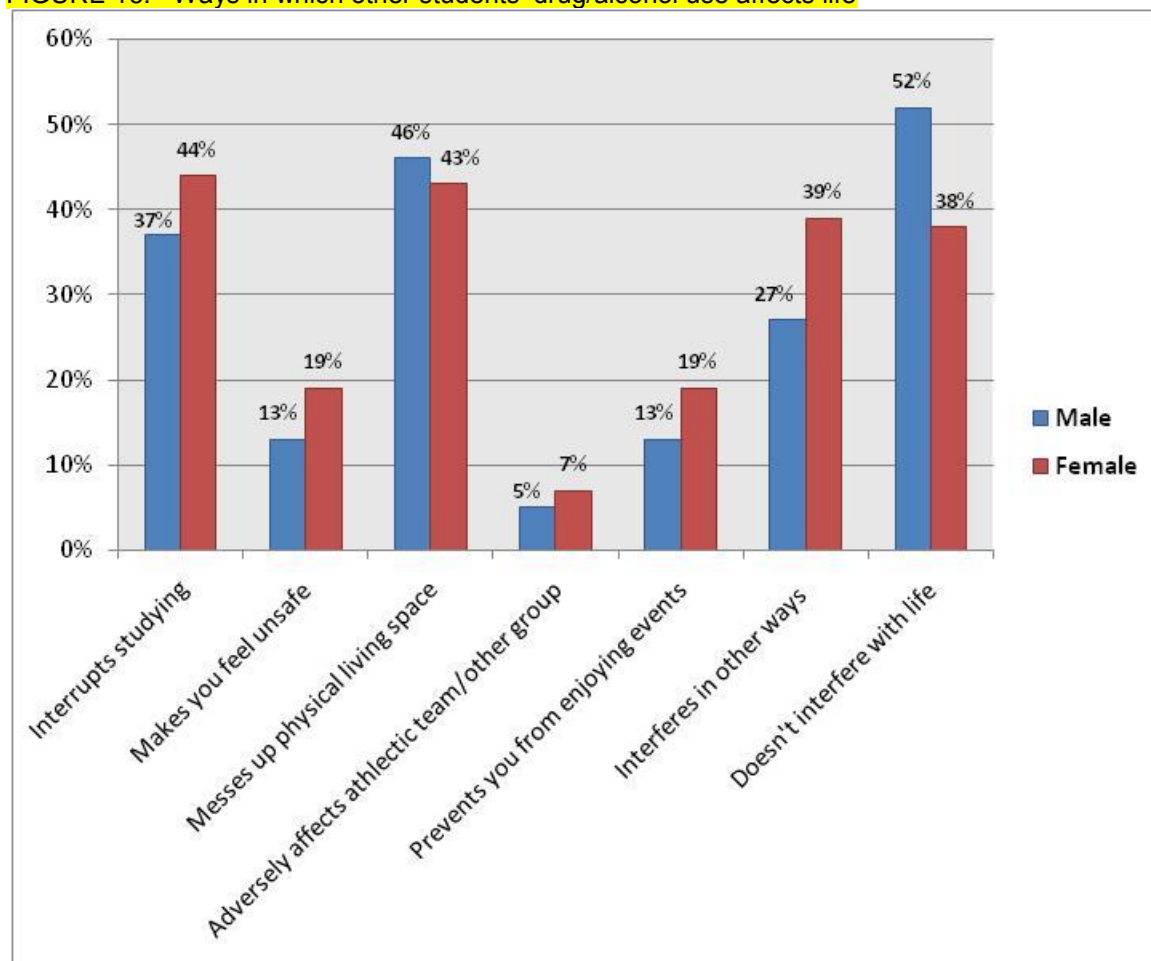
59.8%	67.5%	<u>Know the campus has an alcohol and drug prevention program, up from 62.1% in 2004</u>
43.7%	39.7%	<u>Believe their friends would disapprove if they drank five or more drinks in 1 sitting</u>
42.2%	37.0%	<u>Perceive great risk is associated with having five or more drinks in 1 sitting</u>
25.5%	18.8%	<u>Believe their alcohol use has increased within the last 12 months</u>
73.8%	82.9%	<u>Believe the social atmosphere promotes alcohol use</u>
20.7%	22.9%	<u>Have held a drink to have people stop bothering them about not drinking</u>

Section 8: Secondary Effects of Alcohol Use

This section discusses ways in which other student's drinking interferes with the quality of life of students.

In response to Question 39: In which of the following ways does other student's drinking interfere with your life around campus?

FIGURE 16: Ways in which other students' drug/alcohol use affects life



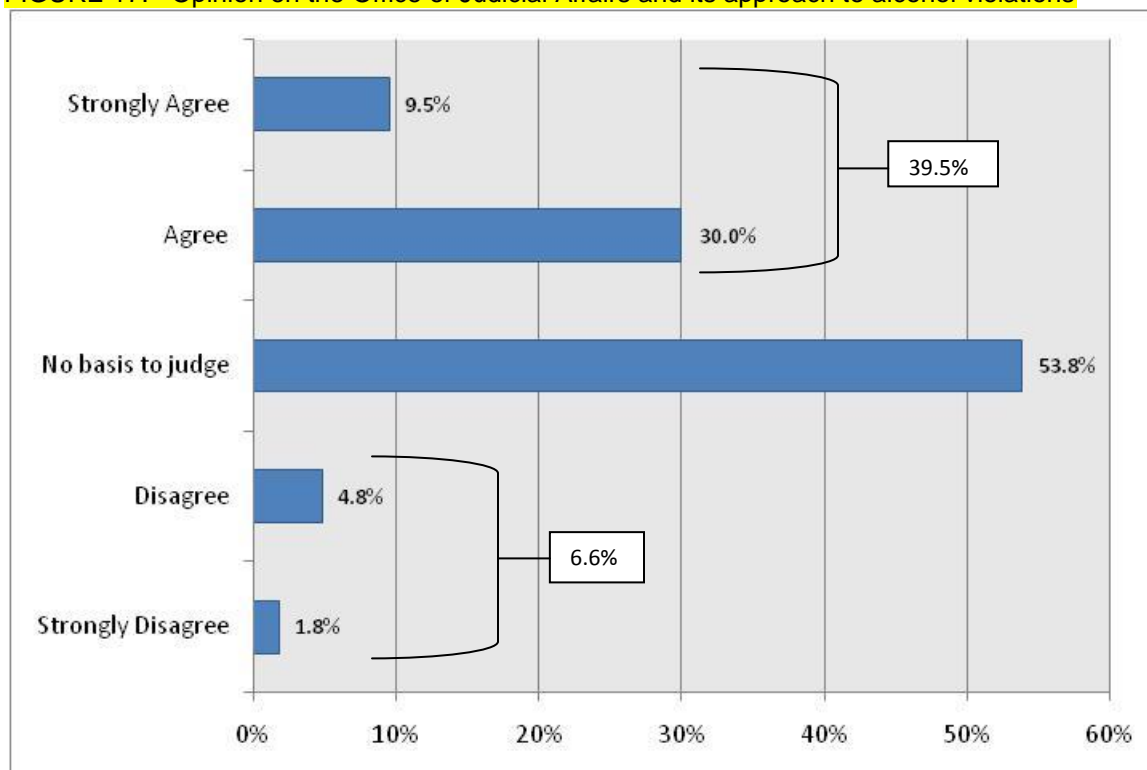
Note: This data suggests that students have identified a variety of ways in which other students' alcohol consumption negatively affects their academic, social, and other aspects associated with the quality of life on campus. Especially note the 19% of females who report 'makes you feel unsafe'

JMU Additional Questions

The Office of Judicial Affairs and the Counseling and Student Development Center provided additional questions to further investigate student perceptions of alcohol use. The following graphs display the questions and the results to these questions.

In response to Question 40-1: I believe the Office of Judicial Affairs takes an educational approach with alcohol violations.

FIGURE 17: Opinion on the Office of Judicial Affairs and its approach to alcohol violations



Note: This data suggests that 39.5% of students agree and 6.6% disagree that the Office of Judicial Affairs takes an educational approach with alcohol violations, but the largest response is that there is no basis to judge the office.

In response to Question 40-2: Which of these statements is not true of the “Three Strikes” policy?

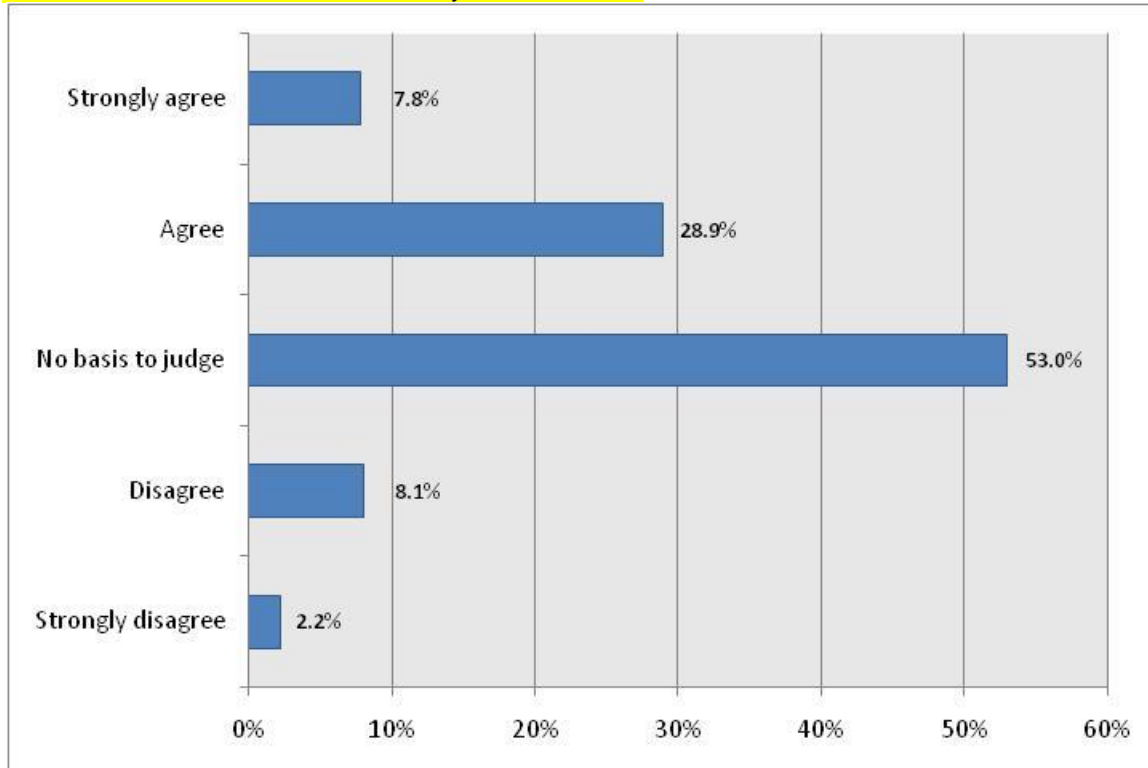
TABLE 3: A closer look at the "Three Strikes" policy

	2008 Campus Wide
The recommended sanction for "three strikes" is suspension for one semester.	12.7%
Students receive a "strike" on their record as soon as the violation happens.	42.7%
"Three Strikes" is related to alcohol and drug violations only.	33.3%
A student can be suspended prior to receiving three strikes.	7.5%
A student who is 21 can still receive a strike	3.7%

Note: The correct response is "students receive a 'strike'" on their record as soon as a violation happens' which most students (42.7%) answered correctly.

In response to Question 40-3: I believe the Office of Judicial Affairs treats students fairly throughout their process .

FIGURE 18: Treatment of students by Judicial Affairs



Note: This data suggests that 36.7% of students agree, 10.3% disagree that the Office of Judicial Affairs treats students fairly. Most students (53%) have no basis to judge the office.

In response to Question 40-4: If I tell a counselor at the Counseling & Student Development Center about my illegal drinking & other substance abuse they will:

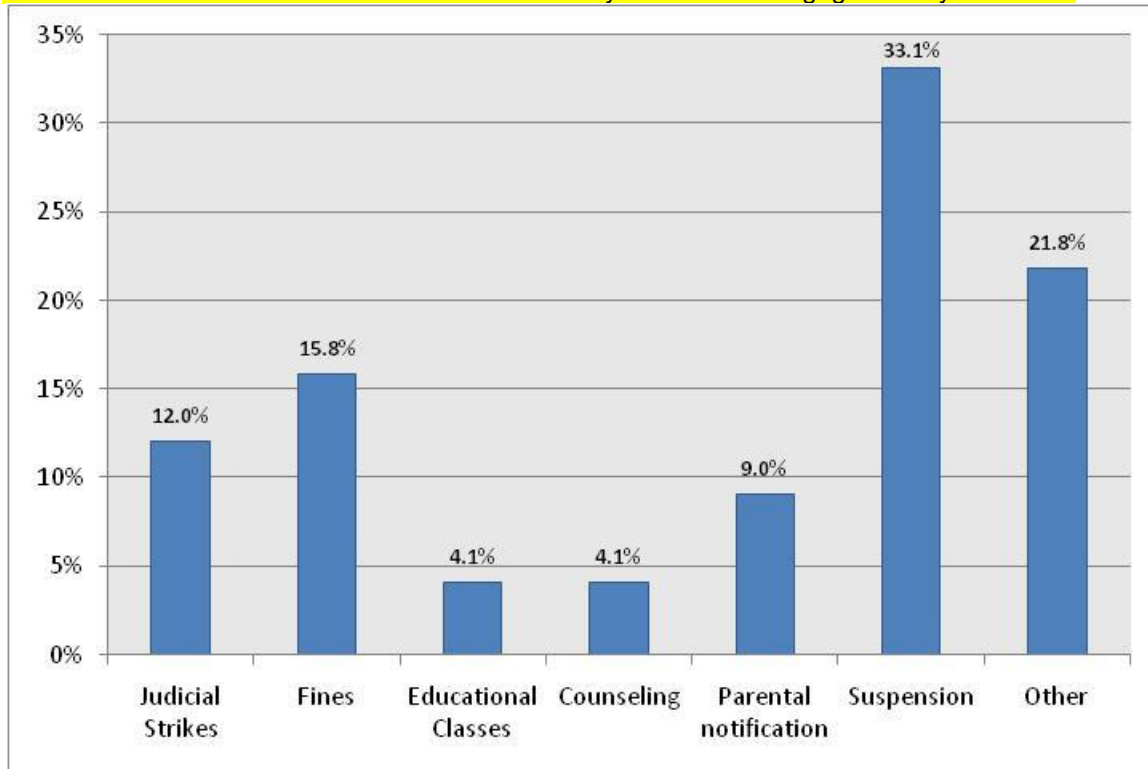
TABLE 4: Feelings regarding privacy at the Counseling & Student Development Center

	2008 Campus Wide
Share that information with JMU administration officials.	1.5%
Share that information with The Office of Judicial Affairs	4.9%
Share that information with parents.	.4%
Not share that information with anyone as they have strict confidentiality clauses.	93.3%

Note: This data shows that 93.3% of students are confident that their information will not be shared with others.

In response to Question 40-5: What might make you less likely to drink excessively and engage in risky behaviors?

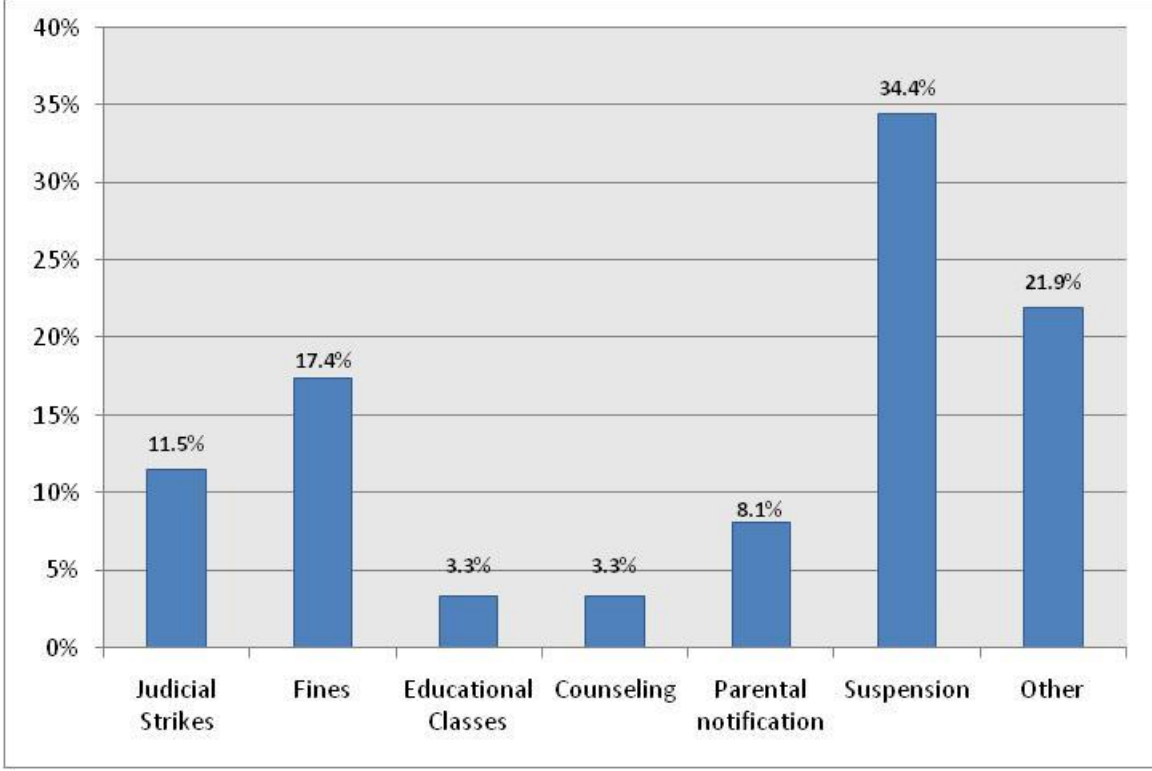
FIGURE 19: Reasons students would be less likely to drink and engage in risky behaviors



Note: Data suggest that “Suspension” and “Other” seem to make students less likely to drink. There was not a fill in the blank for ‘other’ specifics.

In response to Question 40-6: What might make your friends less likely to drink excessively and engage in risky behaviors?

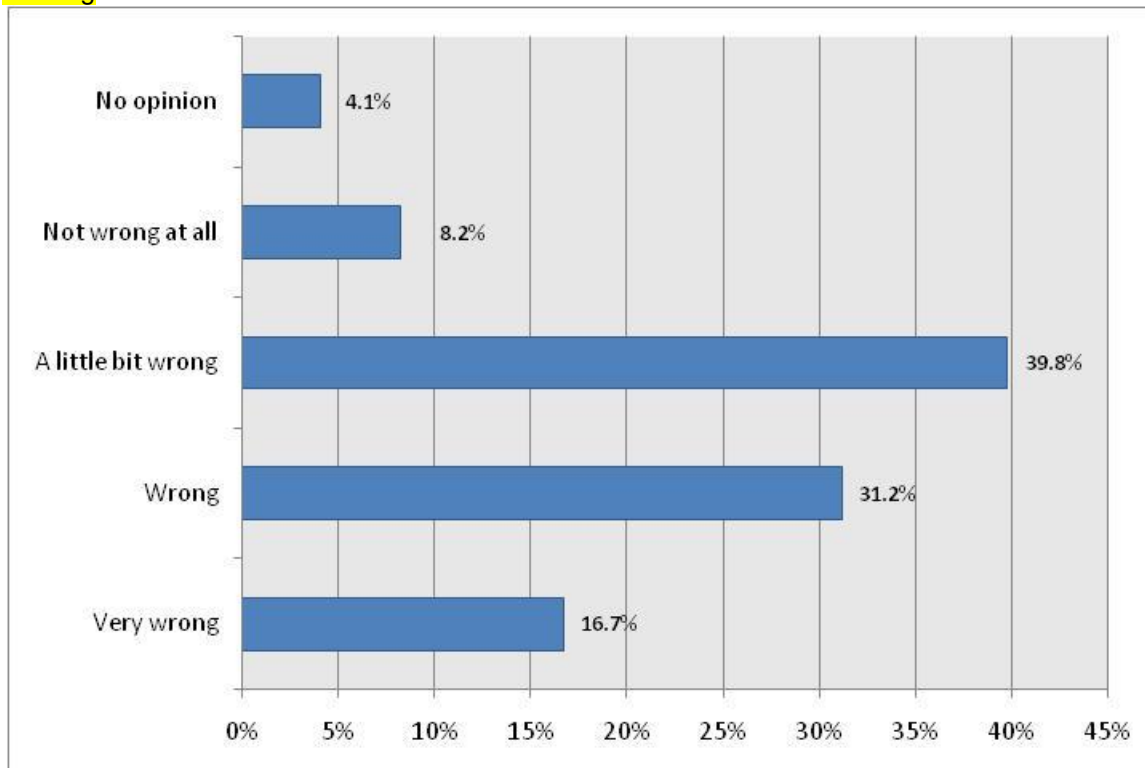
FIGURE 20: Thoughts on what would make friends less likely to drink and engage in risky behaviors



Note: Data suggest that students think “Suspension” and “Other” seem to make their friends less likely to drink while there is really not a clear majority response.

In response to Question 40-7: What is your perception of your parents' attitude towards underage/illegal drinking, especially of their own children? Would they think it to be:

FIGURE 21: A closer look at students' perception of their parents attitude towards underage/illegal drinking



Note: This data suggests that 39.8% of students believe their parents would only think underage/illegal drinking would be “A Little Bit Wrong”. Only 8.2% suggest their parents would not feel underage/illegal drinking to be wrong at all.

In response to Question 40-8: Describe your perception of the JMU drinking culture prior to your arrival on campus as a first year student:

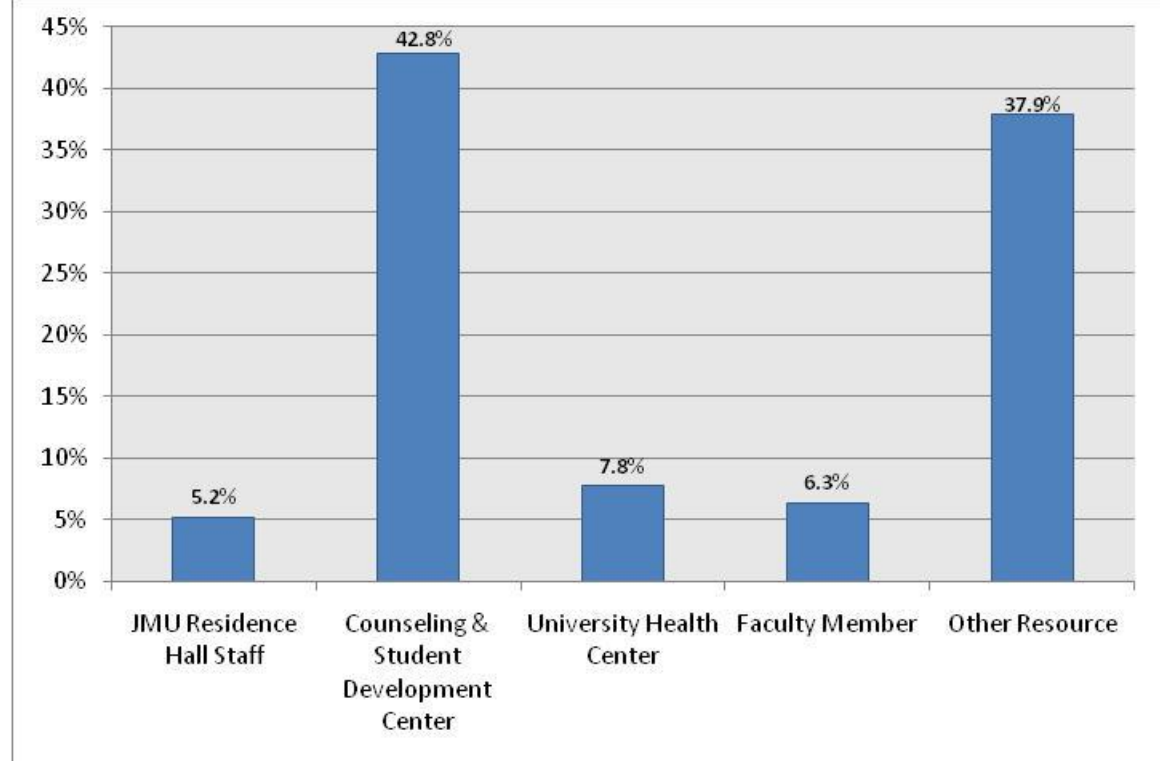
TABLE 5: Perception of JMU drinking culture prior to arrival

	2008 Campus Wide
JMU discourages or tries to prevent all student drinking	13.0%
JMU tolerates drinking but tries to keep students from becoming drunk and disorderly	38.3%
JMU encourages responsible drinking	26.8%
JMU does little to discourage alcohol use or abuse	14.1%
JMU encourages heavy alcohol consumption	7.8%

Note: Prior to their arrival on campus, 38.3% of students feel that JMU tolerates drinking but tries to keep students from becoming drunk and disorderly.

In response to Question 40-9: Other than a friend, roommate or family member, to whom would you first turn to if you thought you had a drinking problem?

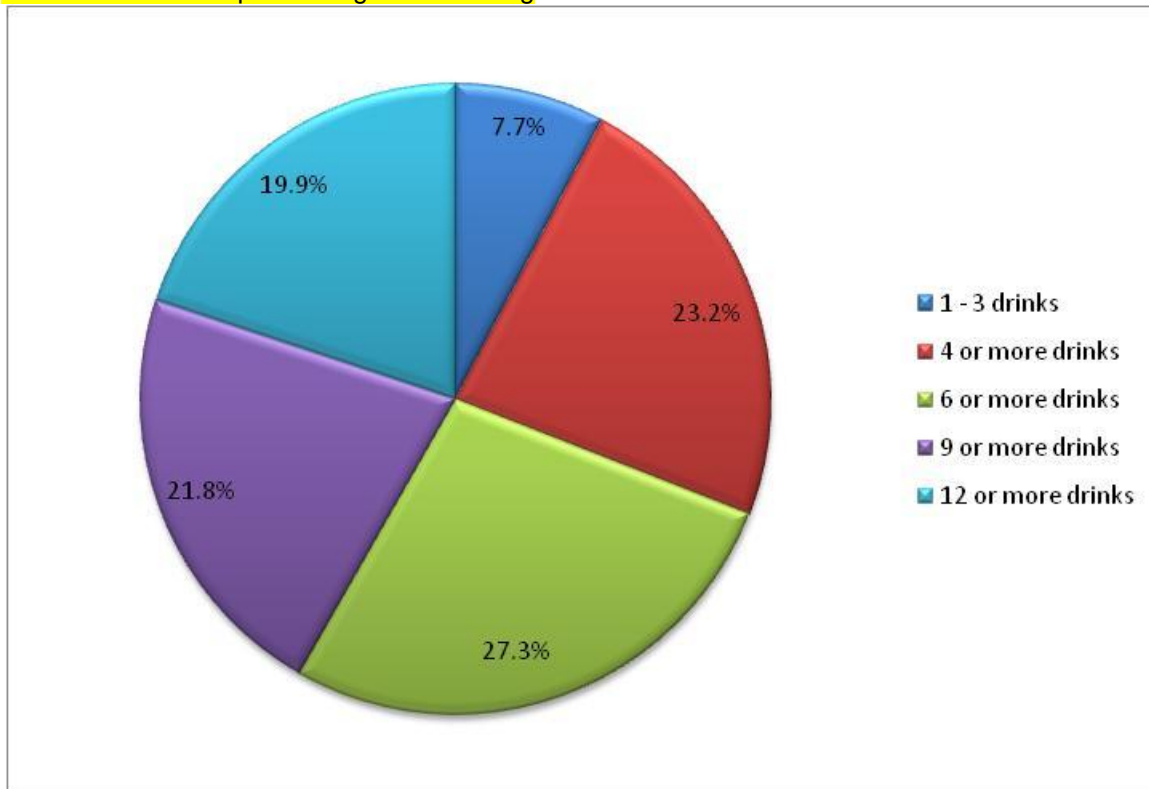
FIGURE 22: Who students turn to if they had a drinking problem



Note: This data suggests that the highest percentage of students (42.8%) would confide in the Counseling and Student Development Center at JMU.

In response to Question 40-10: How would you define high-risk drinking for yourself in the course of one evening?

FIGURE 23: Perception of high-risk drinking



Note: In 2008, 19.9% of the students responding think that 12 or more alcoholic drinks in one evening would be defined as high-risk drinking.

In response to Question 40-11: Which of the following best represents your own attitude about alcohol?

TABLE 6: Attitudes about alcohol

	2008 Campus Wide	
Drinking is never a good thing to do	4.8%	} 25.4%
Drinking is okay, but a person should never get drunk	20.6%	
Occasionally getting drunk is okay, as long as it doesn't interfere with academics or other responsibilities	63.2%	} 11.4%
Occasionally getting drunk is okay, even if it does interfere with academics or other responsibilities	3.3%	
Frequently getting drunk is okay if that is what the individual wants to do	8.1%	

Note: In 2008, 63.2% of students reporting believe getting drunk is acceptable as long as it does not interfere with academics or other responsibilities, 11.4% believe getting drunk is acceptable regardless of negative consequences, and 25.4% believe getting drunk is never acceptable.

In response to Question 40-12: Which of the following best represents the attitude of most students at your school about alcohol?

TABLE 7: Perception of most students' attitudes about alcohol

	2008 Campus Wide
Drinking is never a good thing to do	1.1%
Drinking is okay, but a person should never get drunk	1.1%
Occasionally getting drunk is okay, as long as it doesn't interfere with academics or other responsibilities	43.3%
Occasionally getting drunk is okay, even if it does interfere with academics or other responsibilities	21.9%
Frequently getting drunk is okay if that is what the individual wants to do	32.6%

Note: The above data suggests that students have misperceptions of the majority's attitude about alcohol. Looking at Table 7, students **think** that 54.5% of students believe getting drunk is acceptable regardless of negative consequences. In reality, only 11.4% of students maintain this attitude as shown in Table 6 (p. 34).

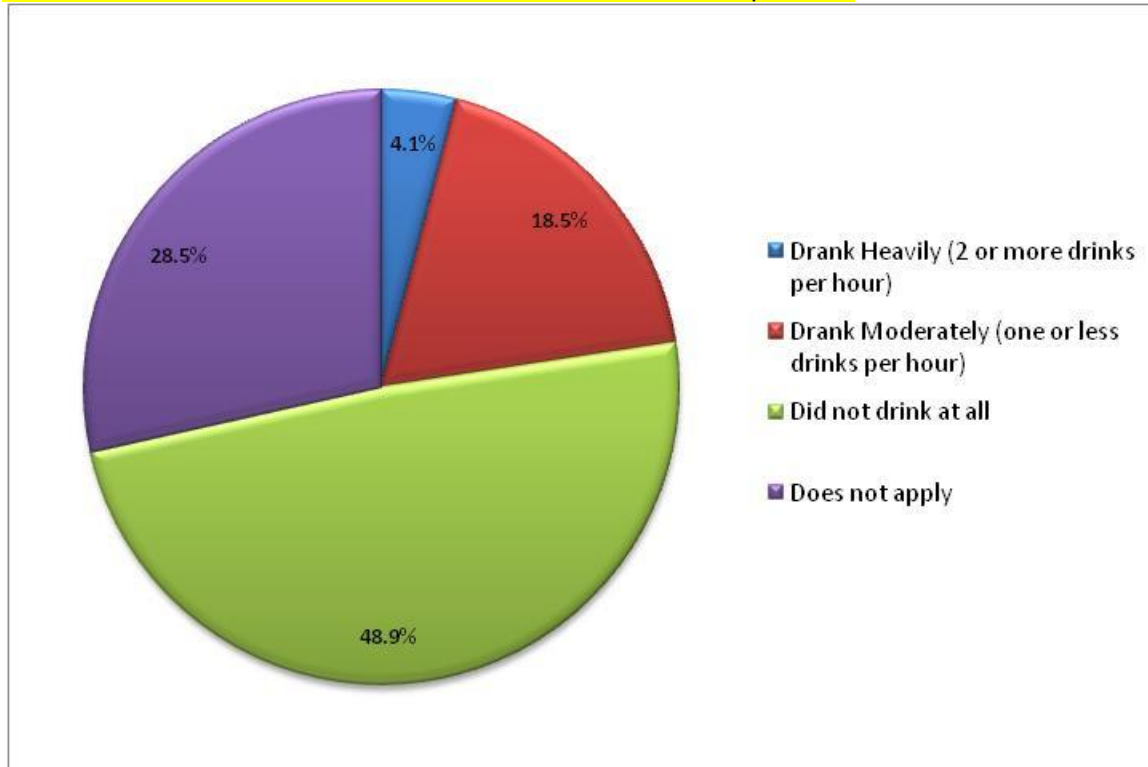
In response to Question 40-13: When you choose to drink alcohol, what are the most important reasons why you do drink alcohol?

TABLE 8: Reasons students drink alcohol

	2008 Campus Wide
To experiment and see what it is like	16.9%
To relax or relieve tension	54.0%
To feel good or get high	47.5%
As a reward for hard work	46.8%
To have a good time with my friends	82.0%
To fit in with a group I like	12.6%
To get away from my problems	17.6%
Because I am bored and there is nothing else to do	28.1%
Because of anger or frustration	10.4%
To get through the day	2.2%

In response to Question 40-14: When you think about your best sexual experience, is it one in which you drank alcohol?

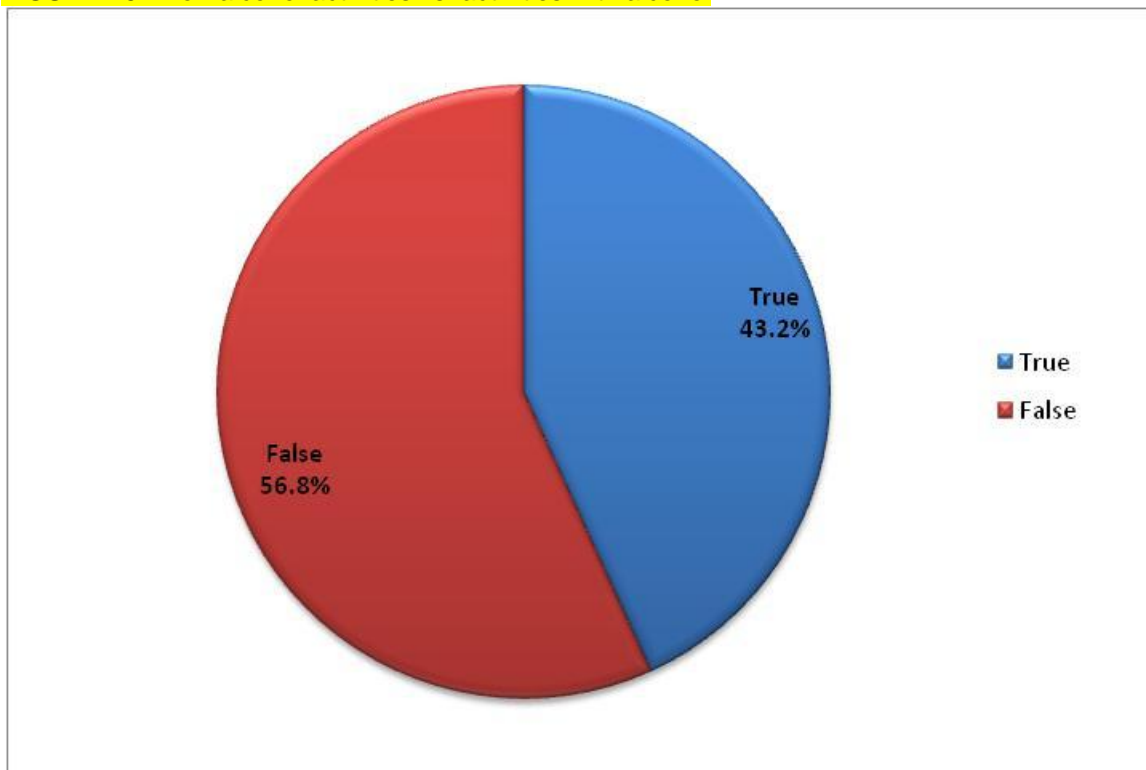
FIGURE 24: Alcohol use in relation to students' best sexual experience



Note: The majority of students (48.9%) report that their best sexual experience did not involve drinking alcohol.

In response to Question 40-15: True or False - Regardless of whatever other non-alcohol activities were available on or off campus, the most attractive activity to me on a normal Friday or Saturday night would involve drinking alcohol.

FIGURE 25: Non-alcohol activities vs. activities with alcohol



Note: The majority of students (56.8%) report that they prefer a non-alcoholic activity on a normal Friday or Saturday night.

In response to Question 40-16: For those students that answered false to question 40-15, what activities would you find more attractive than those that involve drinking alcohol?

TABLE 9: Most attractive non-alcohol activities

	2008 Campus Wide
Having a small group of close friends with whom I can hang out, play video/xbox, etc.	47.1%
Being in a relationship with a significant other	51.8%
Attending an athletic event	28.1%
Participating in personal wellness physical activities or intramurals at UREC	18.3%
Movies on campus	36.3%
Theater/art musical performances	27.7%
Student organization activities (non-Greek)	16.2%
Volunteering/community service	16.9%
Any form of spiritual or religious activity	12.9%
Going to a non-restaurant/bar (i.e. coffee shop setting) to meet friends & new people	34.9%

Note: Of those students that prefer a non-alcoholic activity on a normal Friday or Saturday night, the majority (51.8%) report that being in a relationship with a significant other is more attractive than an activity involving alcohol.

Discussion

JMU students responding to this survey have provided a wide array of information that is useful for planning programs, services, initiatives and policy development. In reviewing the data, JMU students are reporting negative trends in some behaviors that exceed the Virginia and national reference groups. High rates of alcohol use exist, as well as high levels of negative consequences with some behaviors greatly exceeding the Virginia and national reference groups. While alcohol, tobacco and marijuana use exists at high levels, in all three cases, not to the extent that most students believe it exists. Campus planners must address the heavy use of alcohol pattern. Students report some utilization of protective behaviors, such as holding a drink to not be bothered. Students are reporting that other students' drinking negatively affects their academic, social and other aspects of the quality of life on campus. Females report feeling unsafe when around other students' drinking.

Students really do not know the ins and outs of the judicial policies. There is a comfort level that information is held in confidence at the Counseling and Student Development Center. For the most part, students think their parents see illegal drinking as wrong. Safe drinking definitions typically use 1 to 2 drinks an evening as low-risk (Applied Health Research) and only 7.7% of JMU students responding to this survey say that 1-3 drinks per evening is 'high risk'. The numbers of drinks in one evening those students see as 'high risk' is alarmingly high although there is no direct connection to whether they actually behave this way. Relationships are important to students with 47.1% saying they would prefer having a small group of close friends with whom they can hang out if not drinking on a normal Friday evening, and 51.8% would like to be in a relationship with a significant other.

JMU is in a unique position when compared to other campuses in Virginia. There is presidential and senior administration support of healthy students and substance abuse prevention efforts and significant changes took place in 2007-2008. Most significantly, an Assistant Director for Substance Abuse Prevention in the Office of Health Promotion was hired and will be a focal point of the institutionalization of a comprehensive and strategic plan. External consultants from the University of South Carolina visited campus in October 2007 and made specific recommendations to the university.

Key university and community divisions will continue to convene to plan, fund and implement programs with the intention that the data presented in this report shows improvement over the next few years. New overarching campus goals will be put into place as well.

JMU has somewhat followed the recommendations of the National Institute for Alcohol Abuse and Alcoholism (NIAAA) Task Force on College Drinking (NIAAA, 2003) To change the culture of drinking on campus, this research strongly supports a "comprehensive, integrated program with multiple complementary components that target 1) individuals, including at-risk or alcohol-dependent drinkers, 2) the student population as a whole, and 3) the college and the surrounding community. These are not new concepts to alcohol prevention at college campuses or JMU. Consistent programming that makes an impact on the campus culture is imperative to reverse the negative trends seen at JMU.

Recommendations for JMU

(1) Implement research-based programs at the individual intervention level

It is crucial to support strategies that assist individual students identified as problem, at-risk, or alcohol-dependent drinkers. Strategies are clearly needed to engage these students as early as possible in appropriate screening and intervention services—whether provided on campus or through referral to specialized community-based services.

a) AlcoholEdu & Online prevention programs

JMU was selected to participate in a national, multi-campus research project to determine the extent to which AlcoholEdu, an internet-based alcohol prevention program, reduces student alcohol consumption and risky behaviors. All incoming freshmen students will complete Part 1 of AlcoholEdu prior to arriving on campus and then complete Part Two by October 1, 2008. Resident Advisors, Orientation Program Assistants and First Year Orientation Guides will also complete the program. Survey data will be collected three times throughout the program in addition to baseline and follow up data collection from a random sample of first year students who did not participate in the program.

Currently available research on online programs supports some extent of effectiveness, however even with AlcoholEdu, it “misses the boat” in terms of appealing to the uniqueness of JMU. AlcoholEdu will create an opportunity for the Multidisciplinary JMU team to evaluate this program, assess what they liked and did not like, and also evaluate what was learned by our students. From this, the team will pick the best from this other online programs and develop one that is JMU specific. Educational information, videos, interactive quizzes, and JMU trivia will be intertwined to make it highly effective and uniquely JMU.

b) BASICS

The Brief Alcohol Screening and Intervention for College Students (BASICS) training held in May 2005 prepared university faculty and staff to identify and intervene with students who drink above recommended limits or who are experiencing alcohol-related problems. BASICS is a service available for students who want to consider changing or reducing their substance use. The Counseling and Student Development Center (CSDC) Substance Abuse Prevention Specialist is the trained staff member at JMU who anchors the BASICS intervention process. In fall 2007, a graduate assistant was hired to split time between the CSDC and the Office of Health Promotion. This graduate became the initial BASICS referral source and made recommendations for improving the referral process.

BASICS is a non-confrontational, non-judgmental, non-authoritarian and non-labeling intervention comprised of 2 50-minute interview sessions. The first session is retrieving information from the student about their substance abuse. The second session is a feedback session. It is designed to help students assess their own risky behavior risks, identifying potential changes, and help to reduce future problems related to substance abuse. BASICS is designed to reduce risky student behavior, it is not an abstinence based program. Referrals to off campus agencies are provided for students who need more intensive alcohol treatment.

BASICS is designed to reduce risky behaviors as well as drinking and driving, sexual assault/rape, missing class and/or dropping out of college prematurely. Students identified as high risks drinkers include student athletes, fraternity/sorority members, and first year students. Most of the heavy drinking takes place during the freshman year, although the data in this report indicates heavy drinking among the junior class as a majority of the respondents were juniors

(63.2%). Although some students still tend to drink heavily by their senior year research shows a decline in heavy drinking during that stage. BASICS Intervention can speed up the maturing out process, and freshman are in a position to begin the process. Students who have violated the JMU alcohol policy may be required to attend a 2 session BASICS intervention, but it is for students in need.

Personnel, funding and space resources are needed to support the continued intervention effort of the BASIS program that was launched in May 2005. The CSDC is experiencing additional support in its effort to utilize technology and personal feedback mechanisms to enhance this intervention.

b) CHOICES

Students must be empowered because they are the change agents on campus. A successful and sustainable campus-wide effort depends on the extent to which students lead change on campus. Successful programs have been those, which are facilitated and directed by students. These include peer educators, peer-run focus groups, student/intern-developed materials preparation and class-sponsored activities. Students are not only the primary targets and beneficiaries of prevention programs, but also key contributors to their successful implementation (Mara, 2000; Presidents Leadership Group, 1997). Students should be asked what has an impact on their decisions to not binge drink or participate in risky behaviors.

The CHOICES program is delivered by specially-trained peers and delivered in a group setting. The program teaches students basic principles of moderate drinking and how to cope with high-risk situations for excessive alcohol consumption (Fromme et al., 1994). The foci is motivational enhancement, which is based on the theory that individuals alone are responsible for changing their drinking behavior and complying with that decision (Miller et al., 1992). In reality, though, counselors and interveners can still assist students in getting to the self-help point with support. The results of an assessment are scored and students receive nonjudgmental feedback on their drinking behavior and its negative consequences. Students also receive suggestions to support their decision to change.

Brief motivational enhancement techniques have been demonstrated to work in a variety of contexts, including with randomly selected high-risk college freshmen. The research also suggests that in-person feedback and interpersonal interaction may not be essential to the success of brief motivational enhancement. Marlatt et al. (1998) found that high risk students receiving a brief motivational feedback session (consisting of information on the student's alcohol use, consequences, expectancies and comparison of their own use to the campus norm) reported reductions in use and consequences compared with control group participants. Thus, brief motivational intervention research supports. CHOICES is an ongoing prevention/intervention program that has potential to impact student alcohol use behaviors.

Key representatives from academics, university health center, student affairs, counseling, Greek organizations, student organizations, and campus police were trained in CHOICES in May, 2005. In the fall 2005 semester, the program was implemented by specially trained students in Eagle Residence Hall. Since spring semester 2006, fraternities and sororities participated in the CHOICES program. Additionally, as part of New Member Education Day, all Greek new members complete the CHOICES program.

As part of the HTH 389 practicum and HTH 407 Health Facilitation and Synthesis class, CHOICES was implemented in several residence halls and with several organizations in spring 2008. Significant pre to post results occurred with nearly all groups increased knowledge of

information pertaining to alcohol, consumption rates, and absorption factors. While knowledge alone does not change behavior, CHOICES acts as an early intervention for those who may be hindering on high-risk behaviors.

The CHOICES program will continue to be offered to fraternity and sorority members. It is imperative that CHOICES facilitators receive increased training in not only the content of the program but also facilitation techniques and processes. To this end, the substance abuse intervention minors enrolled in HTH 407 Health Facilitation and Synthesis class should be utilized with the facilitation of all required Choices.

Specific planning for implementation in the fall 2008 semester must continue with campus wide support.

2) Continue efforts at the student body level – environmental strategies

The key to affecting the behavior of the general student population is to address the factors that encourage high-risk drinking. The policies established by and enforced through the Office of Judicial Affairs is a model sanctioning program for student violators. The parental notification policy, three strikes policy and the three-tiered alcohol violation sanctioned program are established environmental practices that should discourage high-risk drinking. Staff and faculty positions in the University Health Center (UHC), Counseling and Student Development Center (CSDC) and Office of Substance Abuse Research (OSAR), Department of Health Sciences indicate the institutional support of substance abuse prevention at JMU.

For the first time, alcohol use in the context of healthy choices, will be addressed during the Summer Springboard Orientation sessions for all freshmen students. This, along with AlcoholEdu, will be the first time alcohol use is confronted this early and this consistently with any incoming class.

The newly proposed 'Center' under the direction of the Assistant Director for Substance Abuse Prevention will absolutely allow for a more effective, centralized substance abuse prevention effort that is already showing signs of institutionalization and coordination.

(3) Upgrade effort at the college and surrounding community level

Mutually reinforcing interventions between the college and surrounding community can change the broader environment and help reduce alcohol abuse and alcohol-related problems over the long term. When college drinking is reframed as a community as well as a college problem, campus and community leaders are more likely to come together to address it comprehensively. The joint activities that typically result help produce policy and enforcement reforms that, in turn, affect the total drinking environment. Campus and community alliances also improve relationships overall and enable key groups such as student affairs offices, residence life directors, local police, retail alcohol outlets, and the court system to work cooperatively in resolving issues involving students (NIAAA, 2003)

In the JMU-Harrisonburg community, the Campus Community Coalition on Alcohol provides a forum for discussion. The coalition distributes funds upon request and serves as an informational conduit between key agencies and campus staff, especially law enforcement. To make significant changes in the campus environment with regard to alcohol use and abuse, this coalition should devote leadership, time and commitment to implementing a comprehensive

plan with specific research-based programs. This plan should be accepted and supported by all key players and organizations on campus and in the community and include a vision, objective data, priorities, measurable goals and objectives, evaluation plan and responsible parties. Representatives from throughout the campus community should continue involvement and articulation of a university committed to reducing the risks of alcohol and drug use consequences. Key representatives from areas including academics, university health center, students affairs, counseling, Greek organizations, student organizations, and campus police must continue to communicate, cooperate and collaborate to provide education and prevention efforts for AOD. Rethinking the “normal” environment with students, faculty, administration and staff education programming should be considered as a major emphasis. All campus community members should be included in environmental change.

Conclusion

Sporadic programs with short-term results are occurring, but progress towards long-term goals is not being made. The Core survey should continue to be administered on a bi-annual basis to assess the impact of the programs & policies implemented by the campus and community. Data should be corroborated with other sources such as the American College Health Association (ACHA) survey and the Continuing Student Survey.

References

- Applied Health Research, Inc. (1995). *By The Numbers*. Nebraska Council to Prevent Alcohol and Drug Abuse.
- Berkowitz, A. (1990). Following imaginary peers: How Norm Misperceptions Influence Student Substance Abuse. Project Direction, Module #316, Eta Sigma Gamma National Honor Society, The Wisconsin Clearinghouse.
- Berkowitz, A.D., & Perkins, H.W. (1986). Problem drinking among college students: A Review of Recent Research. *Journal of American College Health Association*, 35(1), 21-28.
- Fromme, K., and Corbin, W. Prevention of heavy drinking and associated negative consequences among mandated and voluntary college students. *Journal of Consulting and Clinical Psychology*, in press.
- Haines, M. (1996). A social norms approach to preventing binge drinking at colleges and universities. The Higher Education Center for Alcohol and Other Drug Prevention. Newton, MA.
- Hansen, W. B. & Graham, J. W. (1991). Preventing alcohol, marijuana, and cigarette use among adolescents: peer resistance training versus establishing conservative norms. *Preventive Medicine*. 20. 414-430.
- Mara, JR. The view from the president's office: The leadership change. Paper prepared for the Panel on Prevention and Treatment of College Alcohol Problems, National Advisory Council on Alcohol Abuse and Alcoholism, National Institute on Alcohol Abuse and Alcoholism, 2000.
- Marlatt, G.A.; Baer, J.S.; Kivlahan, D.R.; et al. Screening and brief intervention for high-risk college student drinkers: Results from a 2-year follow up assessment. *Journal of Consulting and Clinical Psychology* 66:604-615, 1998.
- Martino-McAllister, J.M. (2002, 2004). Alcohol and drug use among James Madison University students, 2002. Office of Substance Abuse Research. James Madison University, Harrisonburg, VA.
- National Institute on Alcohol Abuse and Alcoholism. A Call to Action: Changing the Culture of Drinking at U.S. Colleges; www.collegedrinkingprevention.gov
- Perkins, H. W. & Berkowitz, A. D. (1986). Perceiving the community norms of alcohol use among students: some research implications for campus alcohol education programming. *The International Journal of Addictions*. 21(9&10), 961-976.
- Perkins, H.W. (1995). Scope of the problem: misperceptions of alcohol and drugs. *Catalyst*. Higher Education Center for Alcohol and Other Drug Prevention. 1(3), Fall, 1995.
- Presley, C. H, Meilman, P. W., Cashin, J.R, & Lyerla, R. (1996) Alcohol and Drugs on American College Campuses: Use, Consequences and Perceptions of the Campus Environment, Volume III. The Core Institute, Student Health Programs, Southern Illinois University at Carbondale, Carbondale, IL.
- Presley, C.H. and Meilman, P.W. (1989). *The Core Alcohol and Drug Survey*. Carbondale, IL: The Core Institute, Southern Illinois University at Carbondale, Carbondale, IL