



Middle Tennessee State University
Drug-Free Schools and Campuses Regulations Biennial Report
2018 – 2020

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Introduction and Executive Summary

The Drug-Free Schools and Campuses Act (“DFSCA”) provided in the Department of Education’s General Administration Regulations (“EDGAR”), Part 86, (34 CFR Part 86, Vol. 55, No. 159 (Aug. 16, 1990)), requires all institutions of higher education (“IHE”) that receive any form of federal funding to adopt and implement programs that prevent “the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees.” As part of DFSCR, IHEs are required to:

- ❖ Provide annual notification to all employees and students, in writing, of standards of conduct; appropriate sanctions for violation of federal, state, and local law and campus policy; a description of health risks associated with alcohol and other drug (“AOD”) use; and a description of available treatment programs;
- ❖ Develop methodology to distribute annual notification information to all students and staff; and
- ❖ Prepare a biennial report on the effectiveness of its AOD prevention and education programs and the consistency of sanction enforcement.

To comply with the DFSCA, as well as to promote an alcohol- and drug-free campus community for the safety and security of all students, faculty, and staff, Middle Tennessee State University (“MTSU” or “University”) has developed policies and processes to:

- ❖ Ensure engagement and review of AOD programs and policies by a cross-section of University departments and divisions;
- ❖ Develop annual notifications and communications to employees and students regarding MTSU’s standards of conduct, drug and alcohol policies, and a description of appropriate sanctions related to University, local, state, and federal violations of drug or alcohol possession, use, or distribution;
- ❖ Provide annual information on AOD prevention and treatment programming;
- ❖ Regularly provide information on the health risks associated with AOD use;
- ❖ Examine and review trends in AOD use on campus to enhance program delivery and treatment and/or support services; and
- ❖ Annually review campus AOD programming, and reports on programming effectiveness.

Since the last Biennial Report of 2016 – 2018, Middle Tennessee State University (“MTSU” or “University”) continues to provide substantive and creative AOD prevention programming. The University also continues to obtain feedback on the effectiveness of its AOD prevention programming from both students and others within the campus community.

This MTSU 2018 – 2020 DFSCR Biennial update provides: (1) documentation of the University’s ’s ongoing AOD prevention efforts, even during the coronavirus pandemic; (2) information regarding AOD awareness campaigns; (3) evidence of the continuing collaboration between internal University departments and divisions to provide AOD, mental health, and crime prevention programming and

statistics; (4) areas of opportunity and improvement in MTSU's prevention efforts; and (5) an update on the progress of any prior recommendations.

The following information provides updates and documentation of MTSU's AOD prevention awareness campaigns and programming efforts.

1. Alcohol and Other Drug-Prevention Program Elements

The Core Drug and Alcohol Survey ("Core Survey") and the National College Health Assessment ("NCHA") continue to be utilized to assess current trends in usage, risk, and behaviors. The Executive Summary of the NCHA report, Spring 2019 is included in Appendix A along with the Core Survey (Long Form), which was utilized in 2018 to survey students in an effort to provide programming strategies, including educational programs, social norming campaigns, late-night alternative programming, counseling, stress management, and motivational interviewing sessions.

University Policy

Campus AOD policies are designed to limit the availability of alcohol and drugs through environmental management. The University's mandate regarding maintaining an alcohol-, drug-, and tobacco-free campus are included in institutional Policies 540 – Student Disciplinary Rules; 541 – Residential Life and Housing Rules; 750 – Tobacco-Free Campus; 755 – Alcoholic Beverages; and 760 – Drug-Free Workplace. The University also coordinates with local law enforcement, as well as the county's AOD prevention coalition, to advocate and enforce AOD policies.. Efforts to include parents of students and faculty/staff in AOD prevention programming continue to occur.

Counseling

MTSU offers counseling services that provide brief, personal counseling for currently enrolled students. In addition, Counseling Services seeks to help students plan, and achieve, their educational, personal, and vocational goals. Counseling also refers students to external local, county, and state agencies and medical facilities in cases where additional treatment and/or intervention strategies are needed. Parents attending CUSTOMS for new, incoming students are provided with AOD information to encourage family discussions with their student about MTSU's AOD policies, Counseling services, and prevention programming. Through Counseling and Psychological Services ("CAPS"), a training center for graduate level counseling students, AOD counseling services also are available. Student therapists are trained to offer brief, motivational interviewing as part of a related counseling session.

Health Services and Campus Pharmacy

The University offers Health Services to enrolled students, upon request, and extends such services for up to thirty (30) days after a student's graduation. Students do not pay a fee to be seen by the medical staff at Health Services; however, expenses may be incurred if additional medical testing is required. Campus Pharmacy services also are available to students, as well as faculty and staff.

Staff Professional Development and Training

The University's Health Promotion's staff, as well as members of MTSU's administration, continue to participate in the state-wide prevention coalition known as the Coalition for Healthy and Safe Campus Communities ("CHASCo"), which is funded by the State of Tennessee's Department of Mental Health and Substance Abuse Services. Participation in CHASCo as a member University allows MTSU staff and administrators the opportunity to receive ongoing professional development, education, and strategic tools in AOD prevention. Membership in CHASCo also continues to provide the University with suicide prevention, mental health, stress management, and diversity/inclusion strategies and initiatives.

Members of MTSU's University Counsel, Health Services, Financial Aid, Student Conduct, Housing, and the Office of Compliance and Enterprise Risk Management ("CAERM Office") departments continue to collaborate and provide updates regarding the University's AOD prevention strategies, particularly as the COVID-19 pandemic rates of infection continue to increase in year 2020. Representatives from Health Services and the CAERM Office continue to attend, and participate in, CHASCo meetings. From MTSU's continued participation in CHASCo and its work in AOD prevention programming, the University's Director of Health Promotions was awarded the *Baxter Award* in 2018 by CHASCo, which is provided to individuals whose work and dedication achieves meaningful results in AOD prevention. In addition, and in 2020, the Director of Health Promotions authored a new prevention guide/manual for CHASCo members entitled "Prevention 101: Things to Know When Prevention Was NOT Your Training Background."

Copies of program agendas from both in-person and virtual CHASCo meetings are included in Appendix B, as well as the 2018 press release regarding the *Baxter Award* presented to Health Promotions Director Lisa Schrader along with a copy of Ms. Schrader's prevention guide.

A summary chart of MTSU's AOD programs also appears in Appendix C, and copies of the annual reports provided to CHASCo of our AOD prevention activities are found in Appendix D.

2. Program and Policy Awareness

AOD Programs and Campaigns

As part of MTSU's efforts to increase awareness of its AOD programs, initiatives, policies, and resources, the following are updates:

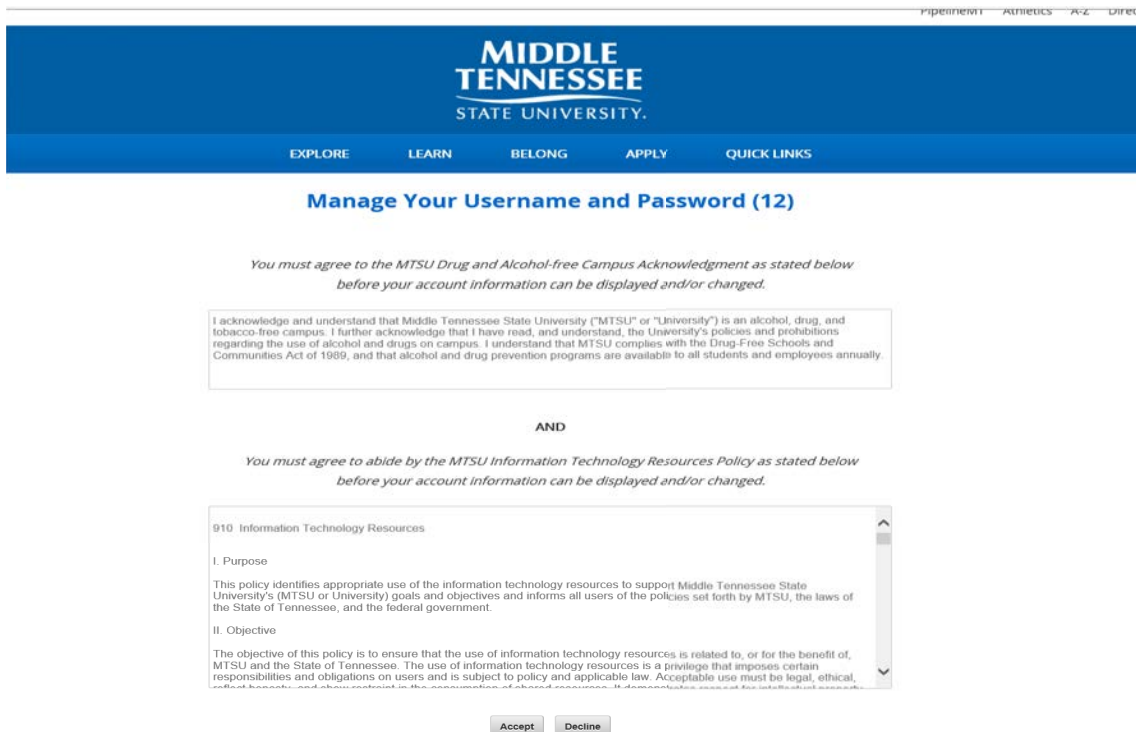
- Annual distribution of the Higher Education Opportunity Act ("HEOA") notifications regarding: Title IX; sexual misconduct prohibitions; sex discrimination prohibitions; sexual assault resources; and the contact information for MTSU's Title IX Coordinator, Counseling Services, Health Services, The June Anderson Center for Women, the Sexual Assault Liaison, and University Police.
- Annual distribution of the HEOA notifications regarding the legal sanctions, health risks, and disciplinary sanctions related to drug and alcohol use on campus.
- Annual distributions of the HEOA notifications regarding MTSU's policy on student drug convictions and federal student financial aid.

- Marketing of the University’s Health Promotion programs. For 2018 - 2020, the following initiatives were facilitated:
 - a. An MTSU “Connection Point” activity called *BAE Watch* to raise awareness around consent, sexual responsibility, and the connection between alcohol and sexual violation perpetration (held on 8/28/18).
 - b. Tabling activities and De-stress Stations at the Student Union to promote mental health awareness (held on the following dates: 4/9/19, 10/10/19, and 11/14/19).
 - c. Drug Take-Back events sponsored by MTSU’s Campus Pharmacy and University Police (held on 4/23/19 and 10/24/19).
 - d. Alcohol Awareness Week and Spring Break Safety Week covering heavy episodic drinking, impaired driving, and underage consumption (held on 10/22/18 through 10/25/18; 2/26/19 through 3/1/19; and 3/1/20 through 3/6/20).
 - e. Free HIV Testing, provided by the Tennessee Department of Health (held on 9/19/19).
 - f. Screening of the “Ripple Effect” documentary during Suicide Prevention week (held on 9/25/19 and 9/26/19).

In addition to the above initiatives, the University continues to require that students and staff acknowledge their awareness of the University’s AOD policy and programs. The Biennial Reports for 2016 – 2018 and 2018 – 2020 also are posted on public-facing University webpages to continue to increase student, staff, and public awareness of MTSU’s ongoing AOD prevention programs and activities.

A copy of the online acknowledgement of MTSU’s AOD policy and programs is provided in Figure 1 below.

Figure 1



Employee Policies and Information

The MTSU Human Resources (HR) Department provides all employees with information about the University's policy as a drug-free workplace. As part of the HR's department employee benefits orientation, staff members are informed of MTSU's prohibition regarding the possession, use, or distribution of illegal drugs and alcohol on the campus, or on institutionally-owned, leased, or University controlled property. The HR webpage additionally provides information on the serious health risks associated with alcohol consumption and heavy drinking, as well as the health risks associated with the use of illegal/illicit drugs. The University's prohibition on the use, possession, and/or distribution of illegal drugs and alcohol on campus also applies to student workers. Additionally, HR provides a brochure to employees regarding MTSU's alcohol and drug prohibitions, sanctions, health risks, and treatment resources (see Appendix G).

Figure 2, below, provides information from the HR webpage entitled, *Drugs and Alcohol Don't Work at MTSU* (https://www.mtsu.edu/hrs/benefits/drugs_and_alcohol_brochure.php), which mirrors the brochure in Appendix G.

Figure 2

Drugs and Alcohol Don't Work at MTSU

Middle Tennessee State University prohibits the possession, use, or distribution of illegal drugs and alcohol on the campus proper or on institutionally-owned, leased, or otherwise controlled property.

Various federal and state statutes make it unlawful to manufacture, distribute, dispense, deliver or sell, or possess with intent to manufacture, distribute, dispense, deliver, or sell controlled substances. The penalty imposed depends upon many factors which include the type and amount of controlled substance involved, the number of prior offenses, if any, and whether any other crimes were committed in connection with the use of the controlled substance. Possible sanctions include incarceration up to and including life imprisonment and imposition of substantial monetary fines.

Tennessee statutes provide that it is unlawful for any person under the age of twenty-one (21) to buy, possess, transport (unless in the course of his or her employment), or consume alcoholic beverages, wine, or beer. Any violation of this law results in an offense classified a Class A misdemeanor punishable by imprisonment for not more than 11 months, 29 days, or by a fine of not more than \$2,500, or both. The receipt, possession, or transportation of alcoholic beverages without the required revenue stamp is also a misdemeanor punishable by imprisonment of not more than thirty (30) days or a fine of not more than \$50, or both.

The use of alcohol can lead to serious health risk:

- loss of muscle control, poor coordination, slurred speech
- fatigue, nausea, headache
- increased likelihood of accidents
- impaired judgment

- possible respiratory paralysis and death
- birth defects/fetal impairment

Heavy drinking can lead to:

- alcoholism
- damage to brain cells
- increased risk of cirrhosis, ulcers, heart disease, heart attack, and cancers of liver, mouth, throat, and stomach
- hallucinations
- personality disorders

Health risks associated with the use of illegal drugs include:

- increased susceptibility to disease due to a less efficient immune system
- increased likelihood of accidents
- personality disorders
- addiction
- death by overdose
- anemia
- poor concentration
- fetal impairment/addiction

Additional information about how the use of drugs and/or alcohol affects your health is available through the Health Promotion office of Student Health Services located in the Health, Wellness, and Recreation Center.

MTSU regular employees with full benefits have available to them the statewide Employee Assistance Program which provides confidential assistance for assessment and short-term counseling. Up to six visits are provided free of charge. Additionally, treatment for chemical dependencies on both an in-patient and out-patient basis are generally covered expenses under the state group health insurance plan. Please refer to your health insurance brochures for specific coverages and limitations. Referral to community treatment facilities may be made by the MTSU Human Resource Services Office if assistance is desired.

Middle Tennessee State University will impose sanctions against individuals who have violated rules prohibiting the use, possession, or distribution of illegal drugs or alcohol.

Sanctions for students using or possessing illegal drugs or alcohol include disciplinary probation, and in appropriate cases, suspension from the University. In addition, residence hall students will be removed from the housing system. Referral for criminal prosecution may be made in all appropriate cases. Individuals involved in the sale or distribution of illegal drugs or alcohol will be suspended from the University and referred to the appropriate authorities for criminal prosecution.

All employees, including student employees, agree as a condition of employment to abide by this policy. Sanctions against employees for use or possession of illegal drugs or alcohol in the workplace include termination of employment by means of the termination procedures available by contract and/or in policy. Additionally, employees are required to notify the institution of any drug convictions no later than five days after the conviction

In compliance with the Drug-Free Schools and Communities Act and the Drug-Free Workplace Act of 1988, MTSU provides this information as a service to the campus community.

Distribution of Annual AOD Notifications

Annually, the Dean of Students sends an electronic notification to all enrolled students each semester regarding the impact of a drug conviction on a student's financial aid eligibility. In addition, an annual notification is sent to students concerning drug and alcohol use and abuse, and includes information on legal sanctions, health risks, and AOD treatment resources. A copy of these annual notifications is included in Appendix F.

Smoking Policy

I. PURPOSE

Middle Tennessee State University ("MTSU") promotes a healthy, safe, and aesthetically pleasing work, educational, and living environment. The MTSU community acknowledges that long-term health hazards may accrue to people who use tobacco products or who are subjected to second-hand smoke. As a result, effective July 1, 2011, MTSU became a Tobacco-Free Campus, and the use of tobacco will not be permitted except as specifically permitted under this policy.

II. SCOPE

This policy applies to all faculty, staff, students, contractors, and visitors of MTSU and is in effect 24 hours a day, year-round. This policy applies to all forms of tobacco products including, but not limited to, cigarettes, pipes, cigars, chewing tobacco, and snuff, as well as smokeless electronic cigarettes and other similar devices.

III. GENERAL RULES

A. Prohibited Areas for Smoking

Tobacco use is not permitted in any MTSU-owned or leased property. This includes all grounds, vehicles, and buildings owned or leased by MTSU, including off-campus property.

B. Areas and Circumstances in which Smoking is Permitted

Notwithstanding the above,

(1) Individuals may use tobacco while inside private vehicles situated on MTSU property.

(2) Additional exceptions may be approved for academic, artistic, educational, or research activities.

Any individual or group seeking an exception under this paragraph for an academic purpose should submit the Request for Exception form to the Provost's Office; otherwise, the Request for Exception form [Appendix E] should be submitted to the Senior Vice President's Office. The activity may be approved provided that Campus Planning and Environmental Health and Safety Services concur with the proposed use of the facility, including confirming that the proposed space may be safely used for the requested activity and, to the extent applicable, has adequate ventilation and separation from non-smokers.

Parental Notification Policy

In addition to the information provided in the Drug Free Communities (DFC) Statement listed above, MTSU also supports a Parental Notification Policy: Middle Tennessee State University recognizes that students, parents, and the University are in a partnership in which each has the responsibility of

promoting a healthy and productive educational experience. The University disciplinary process exists to provide corrective action that is educational and developmental, to protect the campus community, and to maintain an environment conducive to learning. Violations of the MTSU alcohol and drug policy can detract from that learning environment. MTSU believes parents can assist students in fulfilling their educational goals through the use of open dialogue.

3. University Biennial Reporting Review Process

The 2018 – 2020 Biennial Report continues to be reviewed by several University departments. The below listed departments and management individuals work collaboratively to review the University's AOD prevention programming for effectiveness, as well as ensures the transparency and accuracy of the AOD data and statistics.

The following is a list of the 2018 – 2020 Biennial Report reviewers and/or contributors:

1. Alan Thomas, Vice President for the Division of Business and Finance
2. Dr. Debra Sells, Vice President for the Division of Student Affairs
3. Heidi Zimmerman, University Counsel – Office of University Counsel
4. Sondra Wade, Assistant General Counsel – Office of University Counsel
5. Jason Morton, J.D., Major – University Police
6. Lisa Schrader, Director of Health Promotion – University Health Services
7. Stephen White, Director of Financial Aid – Division of Student Affairs
8. Laura Lightsey, Director – Office of Student Conduct, Division of Student Affairs
9. Kathy Musselman, Assistant Vice President – Human Resources Department
10. Michelle Safewright, Director of Housing Administration
11. Gené Stephens, Assistant Vice President – Office of Compliance and Enterprise Risk Management
12. Allison McGoffin, Assistant to the Provost – Office of the Provost
13. Hector del Callar – Office of Compliance and Enterprise Risk Management

4. Program Strengths and Opportunities

Documentation of program elements identified the following continuing strengths:

- Ongoing collection of data on substance use and related attitudes that has allowed for the continued identification of trends and statistics;
- Use of environmental management strategies, including social norming campaigns, late-night alternative programming, and AOD coalitions;
- Ownership and responsibility of prevention programs shared among several departments;
- University participation in the CHASCo state-wide coalition with training opportunities and use of program funding;
- Active participating in county AOD prevention coalitions with expressed interest in partnering more with the University; and

- Staff willingness to work cooperatively and comprehensively to improve substance and alcohol abuse prevention efforts.

Identified weaknesses include:

- Increased rates of marijuana use and e-cigarettes and/or vaping use, along with decreased rates of risk perception
- Prescription drug misuse;
- Lack of resources to address the continued high incidence of dual diagnoses linking substance use and mental health; and
- Inconsistencies in AOD policy enforcement related to special events on campus.

5. Program Statistics for 2018 - 2020

The following are MTSU’s program statistics for 2019 and 2020, as well as 2018 – 2019 from the Offices of Student Conduct (formerly Judicial Affairs). Additionally included is data from Housing and Residence Life, as well as University Police.

Middle Tennessee State University Office of Student Conduct (formerly Judicial Affairs & Mediation Services) 2019-2020 Alcohol & Drug Statistics

Total Number of Disciplinary Cases: 272

A **disciplinary case** is defined as a student or organization that has been charged with a disciplinary offense. The case number does not reflect the total number of disciplinary referrals made to the office. One student may have multiple cases and one case may have multiple violations.

The following data presents a synopsis of the breakdown by gender and classification of the students who had discipline cases with the Office of Student Conduct during the specified time period.

<u>Gender</u>	<u>Total</u>	<u>%</u>	<u>Classification</u>	<u>Total</u>	<u>%</u>
Male	98	36	Freshman	175	64.3
Female	174	64	Sophomore	44	16.2
Organization	0**		Junior	31	11.4
			Senior	18	3.5
			Graduate	4	1.5
<u>Referral Source</u>	<u>Total</u>	<u>%</u>	<u>Incident Location</u>	<u>Total</u>	<u>%</u>
Residence Life	39	14.3	Off Campus/Online	21	7.7

MTPD	177	65.1	Housing	148	54.4
Faculty	13	4.8	On Campus (Not Housing)	103	37.9
Staff	37	13.6			
Student	2	0.7			
Community	2	0.7			
Title IX	2	0.7			

The following chart presents the number of violation types the office adjudicated. The violation type total number reflects the total number of times this violation was assigned to a student. The total number does not reflect how many times the student was found in violation of that specific rule. *The total number of violation types will exceed the total number of disciplinary cases handled by the office.* One student may have multiple violation types within one disciplinary case. The percentage reflects the percentage of the total number of all violations.

Violation Type:	Total Number:	Percentage:
A1. Alcoholic Beverages	26	4.2
A2. Drugs	125	20.1
A3. Drug Paraphernalia	55	8.8
A4. Public Intoxication	13	2.1
A5. Explosives, Fireworks, and Flammable Materials	1	.2
A6. Violation of General Policies	138	22.2
A7. Violation of State or Federal Laws	12	1.9
A8. Disorderly Conduct	19	3.1
A9. Misuse of or Damage to Property	17	2.7
A10. Obstruction of or Interference with University Activities or Facilities	8	1.3
A11. Unacceptable Conduct in Disciplinary Proceedings	0	0
A12. Unauthorized Access to University Facilities and/or Grounds	6	1
A13. Pornography or Obscenity	1	.2
A14. Student Identification Cards	0	0
A15. Gambling	0	0
A16. Attempts, Aiding, and Abetting	91	14.6

A17. Litter	0	0
A18. Sirens and Loudspeakers	0	0
A19. Graffiti	0	0
B1. Theft, Misappropriation, or Unauthorized Sale of Property	5	.8
B2. Failure to Cooperate with University Officials	38	6.1
B3. Providing False Information	19	3.1
B4. Misuse of Documents or Identification Cards	6	1
B5. Financial Irresponsibility	0	0
B6. Violation of Imposed Disciplinary Sanctions	3	.5
B7. Unauthorized Surveillance	0	0
B8. Unauthorized Duplication or Possession of Keys	0	0
B9. Fire Drills	0	0
C1. Harassment or Retaliation	0	0
D1. Threatening or Dangerous Conduct	25	4
D2. Hazing	3	.5
D3. Firearms and Other Dangerous Weapons	9	1.4
D4. Sexual Misconduct	2	.3

Sanction Type:	Total Number:	Percentage:
Apology	1	.3
Counseling Referral	3	.9
Educational Req. - Community Pathway	5	1.5
Educational Req. – Integrity Pathway	11	3.2
Educational Req. – Knowledge Pathway	2	.6
Educational Req. – Well-Being Pathway	0	0
Educational Requirement (Non-Pathway)	10	3
Expulsion	0	0

Fine	0	0
Follow-Up (Required Appointment)	7	2
Housing Probation	7	2
Housing Restriction/Removal	46	13.5
No Contact Order	2	.6
Parental Notification	64	18.7
Restriction (Location)	4	1.2
Restriction (Privilege)	3	.9
Organization Cease and Desist	0	0
Disciplinary Probation	91	26.6
Written Reprimand	65	19
Restitution	2	.6
Suspension	3	.9
Tenure Probation	5	1.5
Additional Sanctions/Stipulations	11	3.2

*Additional Sanctions include follow up meetings, requirements to report, and other non-specified sanctions.

The Office of Student Conduct implemented the Policy Education Letter practice in the 2018-2019 AY. Policy Education Letters are sent to students when a violation is suspected but there is no information leading to adjudication. Most frequently, it is used when a smell of marijuana is coming from a residence but contact cannot be made. These letters include information about the potential policy violation. **For the 2019-2019 year, 15 Policy Education Letters were sent.**

The statistics contained in this report represent disciplinary cases adjudicated by the Office of Student Conduct for the time period indicated. Formal charges may have also been filed with the MTSU police department and/or the Department of Housing and Residential Life. It is possible that a single violation may appear in reports from all three departments. Disciplinary matters that were adjudicated solely by the Department of Housing and Residential Life are not reflected in these statistics.

Noteworthy Observations

Compared to the previous academic year:

- This is the first AY where we have used the Maxient system for the entire year.
- Freshmen continue to account for the majority of students seen in the office. In contrast to last year, females made up the majority of the alleged.
- Cases involving drugs continue to *increase* and were higher than the previous year by ~1%. Drug Paraphernalia violations *increased* by less than .5%, Public Intoxication violations *decreased* by ~2.8%, and Alcohol violations *increased* by 2%.
- We continue to have high volumes of drug policy violations resulting in the removal of students from the residence halls, despite the fact that students are made aware that Housing & Residential Life has a zero-tolerance drug policy.

- Due to the Office of Student Conduct’s process, University Organizations are noted under a specific individual. The Office of Student Conduct did not implement any organizational cease and desist sanctions in the 2019-2020 AY.
- Not Enrolled is not listed as it was in previous years due to classification in the Maxient system. All students who are charged through the Office of Student Conduct are classified based on their classification rather than enrollment.

Other Noteworthy Observations

- 46 students were removed from housing for violations of the drug and/or drug paraphernalia policies.
- The most common disciplinary sanction is Disciplinary Probation with 91 assignments.
- The referral breakdown is as follows: 177 cases were referred by MTPD, 39 cases were referred by Housing, 13 cases were referred by Faculty, 37 cases were referred by Staff, 2 cases were referred by students, 2 cases were referred by the community, and 2 cases were referred by Title IX.
- 127 of the 177 MTPD-referred disciplinary cases involved suspicion of drugs/drug use within housing facilities. (Not all of those students were found in violation of the drug policies as many times there was insufficient evidence to hold a student responsible)
- 177 of the total 272 disciplinary cases involved residential students for a percentage of 65.1%.

Educational Outreach

The Office of Student conducted close to 30 educational presentations for the time period specified. The office did educational presentations for University 1010 classes, CUSTOMS staff, athletics, fraternities, sororities, IFC, Panhellenic, study abroad students, graduate teaching assistants, the Scholar’s Academy, the STAR Program, faculty members, and special student populations. In addition, the Office of Student Conduct re-framed their training for each of these presentations in order to better educate the current generation of students.

Members from the Office of Student Conduct attended various events on behalf of the office including Convocation and Week of Welcome events.

Middle Tennessee State University
Office of Student Conduct
(formerly Judicial Affairs & Mediation Services)
2018-2019 Alcohol & Drug Statistics

* Statistics reflect total number of referrals for each violation to the Office of Student Conduct and not the outcome (responsible/ not responsible).

**The statistics contained in this report represent disciplinary cases adjudicated by the Office of Student Conduct for the time period indicated. Formal charges may have also been filed with the MTSU Police Department and/ or the Department of Housing & Residential Life. It is possible that a single violation may appear in reports from all three departments. Disciplinary matters adjudicated solely by the Department of Housing & residential Life are not reflected in these statistics.

Violations:

Alcoholic Beverages - 25

Public Intoxication - 27

Drugs - 107

Drug Paraphernalia - 47

Smoking Violations (tobacco policy) - 0

Alcohol Sanctions:

Restitution - 0

Written Reprimand - 7

Educational Sanction/Counseling- 1

Parental Notification - 2

Housing Probation - 0

Disciplinary Probation -2

Restriction/ Removal- 1

Suspension- 0

Expulsion- 0

Drug Sanctions:

Restitution - 0

Written Reprimand - 12

Educational Sanction/Counseling - 8

Parental Notification - 45

Housing Probation - 5

Disciplinary Probation - 50

Restriction/ Removal - 29

Suspension - 0

Expulsion - 0

Smoking Violation Sanctions:

Educational Sanction/Counseling- 0

Housing Probation- 0

Disciplinary Probation- 0

****Typically smoking violations

occurred in conjunction with alcohol

and/ or drug violations and the

sanctions reflect the collective behavior.

*** Public Intoxication encompasses both alcohol AND drug violations. Per MTSU's Student Disciplinary Rules, Public Intoxication is defined as appearing on institution-owned or controlled property or at an institutional sponsored event while under the influence of a controlled substance or of any other intoxicating substance.

Housing Probation - 1
 Disciplinary Probation - 58
 Restriction/ Removal - 26
 Suspension - 3
 Expulsion - 0

*** Public Intoxication encompasses both alcohol AND drug violations. Per MTSU's Student Disciplinary Rules, Public Intoxication is defined as appearing on institution-owned or controlled property or at an institutional sponsored event while under the influence of a controlled substance or of any other intoxicating substance.

Alcohol, Drug, & Weapons Related Arrests for 2016 – 2019 by MTSU University Police

Arrest Type	2019	2018	2017	2016
Liquor Law Violations				
• On Campus	10	4	11	5
• Non-Campus	2	0	0	0
• Public Property	0	2	2	8
• Student Residence	10	1	1	2
Drug Violations				
• On Campus	36	32	40	28
• Non-Campus	0	0	0	0
• Public Property	0	14	6	30
• Student Residence	10	11	9	7
Weapons Violations				
• On Campus	4	0	2	2
• Non-Campus	0	0	0	0
• Public Property	0	0	1	1
• Student Residence*	0	0	0	0
Hate Crimes		1 (Vandalism/On-campus-motivated by religion)		1 (Aggravated Assault/Public Property-motivated by race)

Housing and Residence Life Alcohol and Smoking Violations for 2019 – 2020

The following information was reported by Housing and Residence Life regarding the number of alcohol and smoking violation cases that occurred on campus:

- Alcohol Violations: 32 cases
- Smoking Violations: 1 case

6. Progress on Prior Recommendations and Identification of Current/Future Recommendations

Progress on Prior Recommendations

The University's DFSCA AOD Biennial review team continues to make progress on the recommendations listed below:

- Implementation of the "True Blue Health" social norms campaign highlighting the true norms around alcohol, tobacco (including e-cigs and vaping products), and marijuana use by MTSU students.
- Marijuana use prevention and education messages
- Partnerships with the Coalition for Healthy and Safe Campus Communities (CHASCo) and with the Community Anti-Drug Coalition of Rutherford County (CADCOR) continue.
- Additional programming, addresses sexual violence, harassment, bystander intervention, and related issues in compliance with the Violence Against Women Act (VAWA).

The University has enhanced its AOD programming during this Biennial period through:

- Continued expansion of AOD prevention programming facilitated by the Office of Health Promotions.
- Continued funding from CHASCo for AOD prevention programming, as well as programming and social norming campaigns involving smoking prevention; mental health; stress management; diversity and inclusion; and sexual violence prevention.
- Virtual Zoom meetings on stress management and mental health offered by Counseling services, particularly during the COVID-19 pandemic.
- Telehealth and virtual-health services for students when in-person services are impractical due to COVID-19.
- Review of policies regarding sexual violence, student conduct, and other Universities policies supporting student development.
- Mandatory beverage service training of individuals and vendors who serve alcohol at any MTSU sporting event whenever such events are in session.

AOD Prevention Recommendations for 2020

The following are recommendations on which MTSU continues to work towards:

1. The continuation of social norming campaigns relating to misperceptions of substance use, and particularly marijuana and electronic, vaping cigarette products.
2. Switching from the Core Survey to the Healthy Minds Survey for 2021 to address the increasing concerns around the mental health of college students. The Healthy Minds Survey also has more mental health questions, as well as a subset of questions on substance abuse.
3. Increase marketing of e-Check Up to Go tools to get more alcohol and marijuana prevention messages to students in light of reduced in-person and/or classroom presentations due to COVID-19.

4. Increase virtual sessions and telehealth sessions of Counseling Services to promote individual counseling and/or coaching and group sessions due to the connections between social isolation, mental health, and substance abuse.
5. The continued promotion of the tobacco-free campus policy.
6. Investigation of potential sources for more mental health resources and continued, creative programming to support student mental health.
7. After the COVID-19 pandemic has passed, resuming poster-based social norms campaigns.
8. Continued coordination with University administration regarding programming that promotes the provisions of the Violence Against Women Act (“VAWA”), among other regulations regarding sexual violence prevention and elimination.
9. Continued, development of risk reduction practices and strategies regarding alcohol consumption at University Athletics events, when such sporting events are in session.

Closing Remarks

The AOD prevention programming and support services of MTSU continues to expand, as administrators, faculty, and staff work together to advocate for the mental health, wellness, and safety of students. The University’s continued collaboration among departments and divisions, as well as its work and commitment to AOD prevention will reduce instances of alcohol, drug, tobacco, and prescription-drug abuse.

The following Appendices demonstrate the University’s AOD programming outcomes for this 2018 – 2020 Biennial Report.

Middle Tennessee State University

Executive Summary

Spring 2019

American College Health Association
National College Health Assessment II



ACHA-NCHA II

The ACHA-NCHA II supports the health of the campus community by fulfilling the academic mission, supporting short- and long-term healthy behaviors, and gaining a current profile of health trends within the campus community.



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ACHA, the nation's principal advocate and leadership organization for college and university health, represents a diverse membership that provides and supports the delivery of health care and prevention and wellness services for the nation's 20 million college students. For more information about the association's programs and services, visit www.acha.org, and www.acha-ncha.org.

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American College Health Association. American College Health Association-National College Health Assessment II: Middle Tennessee State University Executive Summary Spring 2019. Silver Spring, MD: American College Health Association; 2019.

Introduction

The ACHA-National College Health Assessment II (ACHA-NCHA II) is a national research survey organized by the American College Health Association (ACHA) to assist college health service providers, health educators, counselors, and administrators in collecting data about their students' habits, behaviors, and perceptions on the most prevalent health topics.

ACHA initiated the original ACHA-NCHA in 2000 and the instrument was used nation wide through the spring 2008 data collection period. The ACHA-NCHA now provides the largest known comprehensive data set on the health of college students, providing the college health and higher education fields with a vast spectrum of information on student health. A revised survey, the ACHA-NCHA-II, has been in use since the fall 2008 data collection period.

Please note the ACHA-NCHA II is not appropriate for trend comparison with items from the original ACHA-NCHA survey. Directly comparing pre- and post-redesign estimates on similar data points, without taking into account the impact of the survey's redesign, can lead to an erroneous conclusion.

Notes about this report:

1. Missing values have been excluded from analysis and only valid percents are included in this document.
2. Students responding "not applicable" were excluded from several analyses, which are specifically noted throughout this document. This will often explain differences observed between this document and the full data report.
3. ***A note about the use of sex and gender in this report:*** Survey responses are reported by sex based on the responses to questions 47a, 47b, and 47c. For the purpose of the ACHA-NCHA report documents, respondents are reported as male or female only when their responses to these three questions are consistent with one another. If students' gender identity is consistent with their sex at birth AND the student selects "no" for transgender, then respondents are designated as either *male* or *female*. If respondents select "yes" for transgender OR their sex at birth is not consistent with their gender identity, then they are designated as *non-binary*. A respondent that skips any of the three questions is designated as *unknown*. Totals displayed in this report include *non-binary* and *unknown* students.

For additional information about the survey's development, design, and methodology, email Mary T Hoban, PhD, MCHES, (mhoban@acha.org), E. Victor Leino, PhD (vleino@acha.org), or visit www.acha-ncha.org.

This Executive Summary highlights results of the ACHA-NCHA II Spring 2019 survey for Middle Tennessee State University consisting of 815 respondents. The overall response proportion was 13.6%.

Findings

A. General Health of College Students

■ 42.4 % of college students surveyed (54.7 % male and 38.2 % female) described their health as *very good or excellent*.

■ 77.1 % of college students surveyed (83.9 % male and 74.5 % female) described their health as *good, very good or excellent*.

Proportion of college students who reported being diagnosed or treated by a professional for any of the following health problems within the last 12 months:

Allergies:	23.3 %	Hepatitis B or C:	0.0 %
Asthma:	7.9 %	High blood pressure:	5.3 %
Back pain:	13.3 %	High cholesterol:	4.4 %
Broken bone/Fracture/Sprain:	5.1 %	HIV infection:	0.3 %
Bronchitis:	7.3 %	Irritable Bowel Syndrome:	6.0 %
Chlamydia:	2.5 %	Migraine headache:	11.9 %
Diabetes:	1.6 %	Mononucleosis:	0.6 %
Ear infection:	9.0 %	Pelvic Inflammatory Disease:	0.2 %
Endometriosis:	2.3 %	Repetitive stress injury:	2.5 %
Genital herpes:	1.0 %	Sinus infection:	24.1 %
Genital warts/HPV:	0.8 %	Strep throat:	13.6 %
Gonorrhea:	0.4 %	Tuberculosis:	0.3 %
		Urinary tract infection:	11.5 %

■ 59.8 % of college students (48.5 % male, 66.3 % female) reported being diagnosed or treated by a professional with one or more of the above conditions within the last 12 months.

Proportion of college students who reported any of the following:

Attention Deficit and Hyperactivity Disorder (ADHD)	10.0 %
Chronic illness (e.g., cancer, diabetes, auto-immune disorders)	8.1 %
Deafness/Hearing loss	3.3 %
Learning disability	4.3 %
Mobility/Dexterity disability	1.9 %
Partial sightedness/Blindness	2.5 %
Psychiatric condition	11.7 %
Speech or language disorder	1.1 %
Other disability	3.3 %

B. Disease and Injury Prevention

College students reported receiving the following vaccinations (shots):

- 70.9 % reported receiving vaccination against hepatitis B.
- 46.7 % reported receiving vaccination against Human Papillomavirus/HPV (cervical cancer vaccine).
- 42.2 % reported receiving vaccination against influenza (flu) in the last 12 months (shot or nasal mist).
- 78.7 % reported receiving vaccination against measles, mumps, rubella.
- 70.4 % reported receiving vaccination against meningococcal meningitis.
- 73.1 % reported receiving vaccination against varicella (chicken pox).

Other disease prevention practices reported by college students:

- 65.6 % reported having a dental exam and cleaning in the last 12 months.
- 35.7 % of males reported performing a testicular self exam in the last 30 days.
- 39.3 % of females reported performing a breast self exam in the last 30 days.
- 35.8 % of females reported having a routine gynecological exam in the last 12 months.
- 44.9 % reported using sunscreen regularly with sun exposure.
- 28.9 % reported ever being tested for Human Immunodeficiency Virus (HIV) infection.

College students reported the following behaviors within the last 12 months:

<i>Percent (%)</i>	N/A, did not do this activity within the last 12 months		Never*	Rarely or sometimes*	Mostly or always*
Wear a seatbelt when you rode in a car	0.6		0.4	2.6	97.0
Wear a helmet when you rode a bicycle	67.2		49.8	24.0	26.2
Wear a helmet when you rode a motorcycle	85.9		9.7	3.5	86.7
Wear a helmet when you were inline skating	85.4		65.8	12.8	21.4

* Students responding "N/A, did not do this activity within the last 12 months" were excluded.

C. Academic Impacts

Within the last 12 months, students reported the following factors affecting their individual academic performance, defined as: received a lower grade on an exam, or an important project; received a lower grade in the course; received an incomplete or dropped the course; or experienced a significant disruption in thesis, dissertation, research, or practicum work; (listed alphabetically):

Alcohol use:	2.5 %	Gambling:	0.4 %
Allergies:	2.9 %	Homesickness:	4.4 %
Anxiety:	31.8 %	Injury:	1.6 %
Assault (physical):	1.3 %	Internet use/computer games:	11.1 %
Assault (sexual):	1.5 %	Learning disability:	4.1 %
Attention Deficit/Hyperactivity Disorder:	6.8 %	Participation in extracurricular activities:	5.9 %
Cold/Flu/Sore throat:	16.0 %	Pregnancy (yours or partner's):	0.6 %
Concern for a troubled friend or family member:	12.6 %	Relationship difficulties:	8.9 %
Chronic health problem or serious illness:	6.1 %	Roommate difficulties:	4.7 %
Chronic pain:	4.3 %	Sexually transmitted disease/infection (STD/I):	0.5 %
Death of a friend or family member:	8.4 %	Sinus infection/Ear infection/Bronchitis/Strep throat:	6.6 %
Depression:	23.5 %	Sleep difficulties:	24.3 %
Discrimination:	1.8 %	Stress:	36.3 %
Drug use:	2.4 %	Work:	19.7 %
Eating disorder/problem:	1.5 %	Other:	1.9 %
Finances:	9.3 %		

D. Violence, Abusive Relationships and Personal Safety

Within the last 12 months, college students reported experiencing:

	<i>Percent (%)</i>	Male	Female	Total
A physical fight		4.2	2.9	3.1
A physical assault (not sexual assault)		4.6	3.3	3.5
A verbal threat		25.9	19.5	21.7
Sexual touching without their consent		3.8	13.5	10.5
Sexual penetration attempt without their consent		1.7	5.6	4.5
Sexual penetration without their consent		0.4	4.1	3.0
Stalking		2.9	9.9	7.8
An emotionally abusive intimate relationship		8.3	14.5	12.7
A physically abusive intimate relationship		2.5	3.1	2.7
A sexually abusive intimate relationship		2.1	6.6	5.2

Findings continued

College students reported feeling *very safe* :

	Percent (%)	Male	Female	Total
On their campus (daytime)		83.3	78.2	80.0
On their campus (nighttime)		37.7	13.0	20.3
In the community surrounding their school (daytime)		45.8	35.1	38.0
In the community surrounding their school (nighttime)		15.9	8.9	10.9

E. Tobacco, Alcohol and Marijuana Use

Reported use versus perceived use - reported use for all students within the past 30 days compared with how often students perceived the typical student on campus used substances within the same time period. The last line of each table combines all categories of any use in the last 30 days.

Cigarette

	Percent (%)	Actual Use		
		Male	Female	Total
Never used		71.8	80.5	77.7
Used, but not in the last 30 days		14.1	12.9	13.0
Used 1-9 days		5.8	3.9	4.6
Used 10-29 days		2.1	0.2	0.9
Used all 30 days		6.2	2.5	3.9
<i>Any use within the last 30 days</i>		14.1	6.6	9.3

Perceived Use		
Male	Female	Total
14.6	5.2	8.1
11.7	5.8	8.1
35.0	37.5	36.7
20.0	23.2	21.7
18.8	28.2	25.3
73.8	89.0	83.7

E-Cigarette

	Percent (%)	Actual Use		
		Male	Female	Total
Never used		64.0	77.9	73.7
Used, but not in the last 30 days		17.6	10.1	12.7
Used 1-9 days		6.7	5.8	6.1
Used 10-29 days		4.2	1.7	2.4
Used all 30 days		7.5	4.5	5.1
<i>Any use within the last 30 days</i>		18.4	12.0	13.7

Perceived Use		
Male	Female	Total
5.9	4.9	5.2
3.8	2.5	3.0
28.2	23.9	24.8
29.0	23.9	26.1
33.2	44.9	40.9
90.3	92.6	91.8

Tobacco from a water pipe (hookah)

	Percent (%)	Actual Use		
		Male	Female	Total
Never used		80.8	82.1	82.2
Used, but not in the last 30 days		17.9	15.4	15.7
Used 1-9 days		1.3	1.9	1.7
Used 10-29 days		0.0	0.6	0.4
Used all 30 days		0.0	0.0	0.0
<i>Any use within the last 30 days</i>		1.3	2.5	2.1

Perceived Use		
Male	Female	Total
21.9	9.4	13.8
19.0	11.5	14.2
43.5	53.2	49.7
10.5	15.6	14.0
5.1	10.3	8.3
59.1	79.1	72.1

Findings continued

Alcohol

	<i>Percent (%)</i>	Actual Use		
		Male	Female	Total
Never used		23.7	29.0	28.3
Used, but not in the last 30 days		24.1	23.4	23.9
Used 1-9 days		36.9	38.4	36.9
Used 10-29 days		12.9	8.7	9.7
Used all 30 days		2.5	0.6	1.1
<i>Any use within the last 30 days</i>		52.3	47.7	47.8

Perceived Use

Male	Female	Total
3.8	3.5	3.6
0.8	0.8	0.9
37.7	33.0	34.8
41.0	40.9	40.4
16.7	21.8	20.4
95.4	95.8	95.5

Marijuana

	<i>Percent (%)</i>	Actual Use		
		Male	Female	Total
Never used		60.3	60.1	60.9
Used, but not in the last 30 days		22.6	23.5	23.1
Used 1-9 days		8.4	9.1	8.5
Used 10-29 days		3.3	3.5	3.4
Used all 30 days		5.4	3.9	4.1
<i>Any use within the last 30 days</i>		17.2	16.4	16.0

Perceived Use

Male	Female	Total
7.5	5.4	6.3
7.1	2.7	4.1
36.4	30.8	32.8
31.8	33.1	32.3
17.2	28.0	24.5
85.4	91.9	89.6

Drinking and Driving

- 2.0 % of college students reported driving after having **5 or more drinks** in the last 30 days.*
 - 22.3 % of college students reported driving after having **any alcohol** in the last 30 days.*
- *Students responding "N/A, don't drive" and "N/A don't drink" were excluded from this analysis.

Estimated Blood Alcohol Concentration (or eBAC) of college students reporting 1 or more drinks the last time they "partied" or socialized. **Students reporting 0 drinks were excluded from the analysis.** Due to the improbability of a student surviving a drinking episode resulting in an extremely high eBAC, all students with an eBAC of 0.50 or higher are also omitted from these eBAC figures. eBAC is an estimated figure based on the reported number of drinks consumed during the last time they "partied" or socialized, their approximate time of consumption, sex, weight, and the average rate of ethanol metabolism.

Estimated BAC	<i>Percent (%)</i>	Male	Female	Total
< .08		73.5	79.2	77.3
< .10		81.0	83.8	82.9

Mean	0.05	0.05	0.05
Median	0.03	0.02	0.03
Std Dev	0.07	0.06	0.06

Findings continued

Reported number of drinks consumed the last time students "partied" or socialized. Only students reporting one or more drinks were included.

Number of drinks*	Percent (%)	Male	Female	Total
4 or fewer		50.0	77.4	68.9
5		13.5	7.2	9.0
6		8.8	6.2	6.9
7 or more		27.7	9.2	15.2

Mean		5.23	3.35	3.94
Median		4.50	3.00	3.00
Std Dev		3.92	2.26	3.02

* Students reporting 0 drinks were excluded.

Reported number of times college students consumed five or more drinks in a sitting within the last two weeks:

	Percent (%)	Male	Female	Total
N/A don't drink		30.3	34.6	34.5
None		49.0	49.4	48.6
1-2 times		14.9	12.4	12.7
3-5 times		3.7	3.1	3.1
6 or more times		2.1	0.6	1.1

Percent of college students who reported using prescription drugs that were not prescribed to them within the last 12 months:

	Percent (%)	Male	Female	Total
Antidepressants		4.1	4.6	4.6
Erectile dysfunction drugs		2.9	0.8	1.6
Pain killers		4.1	4.8	4.5
Sedatives		3.7	3.5	3.7
Stimulants		5.8	4.6	5.1
<i>Used 1 or more of the above</i>		11.6	10.6	10.8

Findings continued

College students reported doing the following *most of the time* or *always* when they "partied" or socialized during the last 12 months:*

	Percent (%)	Male	Female	Total
Alternate non-alcoholic with alcoholic beverages		33.7	40.2	39.9
Avoid drinking games		42.4	46.3	45.3
Choose not to drink alcohol		30.7	30.6	31.3
Determine in advance not to exceed a set number of drinks		44.6	53.5	50.6
Eat before and/or during drinking		68.3	78.9	75.4
Have a friend let you know when you have had enough		38.9	53.7	48.6
Keep track of how many drinks being consumed		68.3	73.9	72.0
Pace drinks to one or fewer an hour		31.1	45.8	41.1
Stay with the same group of friends the entire time drinking		89.3	96.4	94.2
Stick with only one kind of alcohol when drinking		59.9	64.2	62.6
Use a designated driver		81.2	91.2	87.5
<i>Reported one or more of the above</i>		96.6	98.1	97.7

*Students responding "N/A, don't drink" were excluded from this analysis.

College students who drank alcohol reported experiencing the following in the last 12 months when drinking alcohol:*

	Percent (%)	Male	Female	Total
Did something you later regretted		25.6	28.2	26.7
Forgot where you were or what you did		22.9	22.7	22.5
Got in trouble with the police		0.6	0.3	0.6
Someone had sex with me without my consent		0.6	4.8	3.5
Had sex with someone without their consent		0.6	0.0	0.2
Had unprotected sex		28.7	25.5	26.4
Physically injured yourself		11.1	11.4	11.5
Physically injured another person		0.0	2.4	1.5
Seriously considered suicide		6.4	4.8	5.6
<i>Reported one or more of the above</i>		51.5	47.6	48.8

*Students responding "N/A, don't drink" were excluded from this analysis.

F. Sexual Behavior

College students reported having the following number of sexual partners (oral sex, vaginal or anal intercourse) within the last 12 months:

	Percent (%)	Male	Female	Total
None		31.4	28.7	30.8
1		46.2	51.6	49.4
2		9.3	9.7	9.0
3		3.0	3.8	3.4
4 or more		10.2	6.3	7.3

Number of partners among students reporting to have at least one sexual partner within the last 12 months:*

	Male	Female	Total
Mean	2.40	1.78	1.97
Median	1.00	1.00	1.00
Std Dev	6.28	2.19	3.93

*Students reporting 0 sexual partners within the last 12 months were excluded.

College students reported having oral, vaginal or anal sex in the last 30 days:

Oral sex within the past 30 days

	Percent (%)	Male	Female	Total
No, have never done this sexual activity		23.8	28.5	28.1
No, have done this sexual activity but not in the last 30 days		29.3	29.7	28.9
Yes		46.9	41.9	43.0

Vaginal sex within the past 30 days

	Percent (%)	Male	Female	Total
No, have never done this sexual activity		35.0	31.1	33.5
No, have done this sexual activity but not in the last 30 days		19.8	18.3	18.5
Yes		45.1	50.6	48.0

Anal sex within the past 30 days

	Percent (%)	Male	Female	Total
No, have never done this sexual activity		69.2	76.6	74.1
No, have done this sexual activity but not in the last 30 days		22.8	19.0	20.3
Yes		8.0	4.5	5.7

Findings continued

Using a condom or other protective barrier within the last 30 days (*mostly or always*):

	<i>Percent (%)</i>	Male	Female	Total
<i>Sexually active students reported*</i>				
Oral sex		2.3	4.8	4.1
Vaginal intercourse		38.0	36.3	36.8
Anal intercourse		28.6	20.8	26.0

**Students responding "Never did this sexual activity" or "Have not done this during the last thirty days" were excluded from the analysis.*

Contraceptive use reported by students or their partner the last time they had vaginal intercourse:

	<i>Percent (%)</i>	Male	Female	Total
Yes, used a method of contraception		45.8	52.4	49.0
Not applicable/Didn't use a method/Don't know		54.2	47.6	51.0

If YES to contraceptive use the last time student had vaginal intercourse, reported means of birth control used among college students or their partner to prevent pregnancy:

	<i>Percent (%)</i>	Male	Female	Total
Birth control pills (monthly or extended cycle)		56.0	59.4	58.6
Birth control shots		2.8	4.1	3.6
Birth control implants		10.1	9.3	9.7
Birth control patch		1.8	1.1	1.3
Vaginal ring		1.8	2.2	2.1
Intrauterine device		11.0	10.0	10.5
Male condom		63.3	54.8	57.4
Female condom		0.0	0.7	0.5
Diaphragm or cervical cap		0.0	0.0	0.0
Contraceptive sponge		0.9	0.0	0.3
Spermicide (foam, jelly, cream)		4.6	0.7	1.8
Fertility awareness (calendar, mucous, basal body temperature)		10.1	10.7	11.0
Withdrawal		31.5	33.9	33.1
Sterilization (hysterectomy, tubes tied, vasectomy)		4.6	3.3	3.8
Other method		5.6	1.9	2.8
<i>Male condom use plus another method</i>		55.0	46.1	49.1
<i>Any two or more methods (excluding male condoms)</i>		34.5	37.3	36.5

■ 18.1 % of sexually active college students reported using (or reported their partner used) emergency contraception ("morning after pill") within the last 12 months.

(male: 15.8 %; female: 19.9 %).*

**Students responding "Not sexually active" were excluded from the analysis.*

■ 2.3 % of college students who had vaginal intercourse within the last 12 months reported experiencing an unintentional pregnancy or got someone pregnant within the last 12 months.

(male: 2.1 %; female: 2.6 %).**

***Students responding "Have not had vaginal intercourse within the last 12 months" were excluded from the analysis.*

G. Nutrition and Exercise

College students reported usually eating the following number of servings of fruits and vegetables per day:

	Percent (%)	Male	Female	Total
0 servings per day		16.6	12.2	13.6
1-2 per day		66.8	63.9	65.0
3-4 per day		15.4	21.2	19.1
5 or more per day		1.2	2.7	2.4

College students reported the following behaviors within the past 7 days:

Do moderate-intensity cardio or aerobic exercise for at least 30 minutes:

	Percent (%)	Male	Female	Total
0 days		25.8	29.9	28.6
1-4 days		52.1	53.9	53.7
5-7 days		22.1	16.2	17.7

Do vigorous-intensity cardio or aerobic exercise for at least 20 minutes:

	Percent (%)	Male	Female	Total
0 days		50.8	56.5	55.0
1-2 days		29.8	25.9	27.3
3-7 days		19.3	17.6	17.7

Physical Activity and Public Health: Updated Recommendations for Adults. From the American College of Sports Medicine and the American Heart Association (2007): Moderate-intensity cardio or aerobic exercise for at least 30 minutes on 5 or more days per week, or vigorous-intensity cardio or aerobic exercise for at least 20 minutes on 3 or more days per week.

Students meeting the Recommendations for moderate-intensity exercise, vigorous-intensity exercise, or a combination of the two (2 moderate-intensity exercise periods = 1 vigorous-intensity exercise period).

	Percent (%)	Male	Female	Total
Guidelines met		39.6	37.3	37.8

Findings continued

Estimated average Body Mass Index (BMI): This figure incorporates reported height, and weight to form a general indicator of physical health. Categories defined by The World Health Organization (WHO) 2000, reprinted 2004. Obesity: Preventing and Managing the Global Epidemic. WHO Tech Report Series: 894.

BMI	Percent (%)	Male	Female	Total
<18.5 Underweight		2.5	4.3	3.9
18.5-24.9 Healthy Weight		44.4	44.0	43.7
25-29.9 Overweight		32.0	25.4	27.1
30-34.9 Class I Obesity		12.4	14.0	13.8
35-39.9 Class II Obesity		3.7	7.0	6.0
≥40 Class III Obesity		5.0	5.4	5.5
Mean		26.67	26.85	26.83
Median		25.10	25.51	25.35
Std Dev		6.55	6.79	6.76

H. Mental Health

Students reported experiencing the following within the last 12 months:

Felt things were hopeless

<i>Percent (%)</i>	Male	Female	Total
No, never	32.0	18.3	21.9
No, not last 12 months	18.7	20.3	19.6
Yes, last 2 weeks	17.8	23.4	22.1
Yes, last 30 days	11.2	12.9	13.0
Yes, in last 12 months	20.3	25.1	23.4
<i>Any time within the last 12 months</i>	49.4	61.4	58.5

Felt overwhelmed by all you had to do

<i>Percent (%)</i>	Male	Female	Total
No, never	14.1	3.1	6.4
No, not last 12 months	4.1	1.9	2.6
Yes, last 2 weeks	47.7	64.2	59.8
Yes, last 30 days	15.8	15.5	15.5
Yes, in last 12 months	18.3	15.3	15.7
<i>Any time within the last 12 months</i>	81.7	95.0	91.0

Felt exhausted (not from physical activity)

<i>Percent (%)</i>	Male	Female	Total
No, never	15.8	4.3	7.6
No, not last 12 months	8.3	2.3	4.1
Yes, last 2 weeks	45.8	62.4	57.9
Yes, last 30 days	15.8	16.5	16.4
Yes, in last 12 months	14.2	14.5	13.9
<i>Any time within the last 12 months</i>	75.8	93.4	88.2

Felt very lonely

<i>Percent (%)</i>	Male	Female	Total
No, never	29.2	14.0	18.1
No, not last 12 months	14.6	17.6	16.8
Yes, last 2 weeks	26.3	32.8	31.3
Yes, last 30 days	12.1	12.8	12.5
Yes, in last 12 months	17.9	22.9	21.3
<i>Any time within the last 12 months</i>	56.3	68.4	65.1

Findings continued

Felt very sad

<i>Percent (%)</i>	Male	Female	Total
No, never	21.8	9.9	13.3
No, not last 12 months	18.8	13.7	14.9
Yes, last 2 weeks	25.9	38.7	35.8
Yes, last 30 days	10.9	14.1	13.3
Yes, in last 12 months	22.6	23.6	22.8
<i>Any time within the last 12 months</i>	59.4	76.4	71.8

Felt overwhelming anxiety

<i>Percent (%)</i>	Male	Female	Total
No, never	31.7	14.1	19.0
No, not last 12 months	9.2	9.7	9.0
Yes, last 2 weeks	24.6	38.8	36.0
Yes, last 30 days	15.0	16.8	16.1
Yes, in last 12 months	19.6	20.7	20.0
<i>Any time within the last 12 months</i>	59.2	76.3	72.0

Seriously considered suicide

<i>Percent (%)</i>	Male	Female	Total
No, never	66.4	64.5	64.2
No, not last 12 months	15.8	19.1	19.0
Yes, last 2 weeks	3.3	4.3	3.9
Yes, last 30 days	2.5	1.6	1.9
Yes, in last 12 months	12.0	10.5	11.1
<i>Any time within the last 12 months</i>	17.8	16.4	16.9

Intentionally cut, burned, bruised, or otherwise injured yourself

<i>Percent (%)</i>	Male	Female	Total
No, never	81.3	70.2	72.9
No, not last 12 months	13.7	19.8	18.4
Yes, last 2 weeks	2.1	3.1	2.9
Yes, last 30 days	0.4	1.2	1.0
Yes, in last 12 months	2.5	5.8	4.9
<i>Any time within the last 12 months</i>	5.0	10.1	8.8

Felt so depressed that it was difficult to function

<i>Percent (%)</i>	Male	Female	Total
No, never	39.6	28.3	30.8
No, not last 12 months	19.2	20.2	19.8
Yes, last 2 weeks	13.3	20.2	18.8
Yes, last 30 days	7.1	10.7	9.6
Yes, in last 12 months	20.8	20.7	21.0
<i>Any time within the last 12 months</i>	41.3	51.6	49.4

Felt overwhelming anger

<i>Percent (%)</i>	Male	Female	Total
No, never	30.4	23.6	25.2
No, not last 12 months	22.1	21.2	21.8
Yes, last 2 weeks	15.8	17.6	17.1
Yes, last 30 days	10.0	15.1	13.6
Yes, in last 12 months	21.7	22.6	22.2
<i>Any time within the last 12 months</i>	47.5	55.2	52.9

Attempted suicide

<i>Percent (%)</i>	Male	Female	Total
No, never	88.4	81.3	83.0
No, not last 12 months	8.7	15.8	13.9
Yes, last 2 weeks	1.2	0.6	0.8
Yes, last 30 days	0.0	0.0	0.0
Yes, in last 12 months	1.7	2.3	2.3
<i>Any time within the last 12 months</i>	2.9	2.9	3.0

Findings continued

Within the last 12 months, diagnosed or treated by a professional for the following:

	<i>Percent (%)</i>	Male	Female	Total
Anorexia		0.8	1.6	1.5
Anxiety		17.9	27.7	26.3
Attention Deficit and Hyperactivity Disorder		7.1	7.2	7.6
Bipolar Disorder		3.7	3.7	4.1
Bulimia		1.3	1.0	1.1
Depression		16.7	23.6	23.2
Insomnia		7.9	8.4	9.0
Other sleep disorder		3.3	2.7	3.1
Obsessive Compulsive Disorder		2.9	4.6	4.2
Panic attacks		7.5	14.3	13.6
Phobia		0.4	1.4	1.5
Schizophrenia		1.3	0.6	0.8
Substance abuse or addiction		1.3	1.6	1.6
Other addiction		1.2	1.2	1.1
Other mental health condition		3.7	4.1	4.5
<i>Students reporting none of the above</i>		74.7	64.1	65.8
<i>Students reporting only one of the above</i>		7.5	9.8	8.7
<i>Students reporting both Depression and Anxiety</i>		13.3	20.3	20.0
<i>Students reporting any two or more of the above excluding the combination of Depression and Anxiety</i>		10.8	13.7	14.1

Within the last 12 months, any of the following been traumatic or very difficult to handle:

	<i>Percent (%)</i>	Male	Female	Total
Academics		46.7	62.1	57.5
Career-related issue		28.2	34.1	31.8
Death of family member or friend		15.4	20.5	19.6
Family problems		23.0	42.3	36.5
Intimate relationships		34.0	38.0	36.6
Other social relationships		28.2	38.1	35.2
Finances		37.5	50.4	46.4
Health problem of family member or partner		14.9	28.5	24.0
Personal appearance		24.5	42.4	37.9
Personal health issue		18.3	31.0	27.7
Sleep difficulties		32.1	40.2	37.8
Other		14.2	13.1	14.6
<i>Students reporting none of the above</i>		24.1	13.9	16.7
<i>Students reporting only one of the above</i>		17.8	10.0	12.2
<i>Students reporting 2 of the above</i>		12.4	9.1	9.6
<i>Students reporting 3 or more of the above</i>		45.6	67.0	61.5

Findings continued

Within the last 12 months, how would you rate the overall level of stress experienced:

	<i>Percent (%)</i>	Male	Female	Total
No stress		3.3	0.4	1.2
Less than average stress		7.9	3.1	4.4
Average stress		32.0	32.2	31.4
More than average stress		40.7	45.9	45.1
Tremendous stress		16.2	18.3	17.8

I. Sleep

Past 7 days, getting enough sleep to feel rested in the morning:

	<i>Percent (%)</i>	Male	Female	Total
0 days		12.4	16.0	15.1
1-2 days		29.0	37.8	35.4
3-5 days		43.6	39.0	40.0
6+ days		14.9	7.1	9.5

Past 7 days, how often felt tired, dragged out, or sleepy during the day:

	<i>Percent (%)</i>	Male	Female	Total
0 days		14.1	4.2	7.1
1-2 days		28.6	24.3	25.6
3-5 days		38.2	47.7	44.8
6+ days		19.1	23.7	22.6

Past 7 days, how much of a problem with sleepiness during daytime activities:

	<i>Percent (%)</i>	Male	Female	Total
No problem		16.6	4.6	8.0
A little problem		42.3	43.6	42.9
More than a little problem		24.9	28.4	27.7
A big problem		12.0	15.1	14.2
A very big problem		4.1	8.3	7.2

Demographics and Student Characteristics

■ Age:

18 - 20 years:	47.9 %
21 - 24 years:	32.8 %
25 - 29 years:	6.9 %
30+ years:	12.5 %

■ Gender*

Female:	65.4 %
Male:	30.4 %
Non-binary	4.3 %

■ Student status:

1st year undergraduate:	25.8 %
2nd year undergraduate:	21.6 %
3rd year undergraduate:	22.1 %
4th year undergraduate:	16.9 %
5th year or more undergraduate:	8.3 %
Graduate or professional:	4.9 %
Not seeking a degree:	0.0 %
Other:	0.5 %
Full-time student:	87.8 %
Part-time student:	12.0 %
Other student:	0.2 %

■ Relationship status:

Not in a relationship:	45.3 %
In a relationship but not living together:	32.2 %
In a relationship and living together:	22.5 %

■ Marital status:

Single:	83.7 %
Married/Partnered:	12.7 %
Separated/Divorced/Other:	3.6 %

■ Primary Source of Health Insurance:

College/university sponsored plan:	2.6 %
Parents' plan:	67.5 %
Another plan:	20.6 %
Don't have health insurance:	7.6 %
Not sure if have plan:	1.6 %

■ Students describe themselves as:

White:	72.6 %
Black or African American:	13.7 %
Hispanic or Latino/a:	6.7 %
Asian or Pacific Islander:	6.3 %
American Indian, Alaskan Native or Native Hawaiian:	2.1 %
Biracial or Multiracial:	3.8 %
Other:	2.0 %

■ International Student:

International:	3.7 %
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■ Students describe themselves as:

Asexual:	0.6 %
Bisexual:	8.0 %
Gay:	2.0 %
Lesbian:	1.7 %
Pansexual:	3.1 %
Queer:	1.1 %
Questioning:	3.0 %
Straight/Heterosexual:	79.7 %
Another identity:	0.7 %

■ Housing:

Campus residence hall:	20.4 %
Fraternity or sorority house:	0.5 %
Other university housing:	1.9 %
Parent/guardian home:	30.3 %
Other off-campus housing:	38.9 %
Other:	8.1 %

■ Participated in organized college athletics:

Varsity:	2.1 %
Club sports:	5.0 %
Intramurals:	6.5 %

■ Member of a social fraternity or sorority:

Greek member:	6.8 %
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* See note on page 2 regarding gender categories

CORE ALCOHOL AND DRUG SURVEY – LONG FORM

EXECUTIVE SUMMARY

The Core Alcohol and Drug Survey was developed to measure alcohol and other drug usage, attitudes, and perceptions among college students at two and four-year institutions. Development of this survey was funded by the U.S. Department of Education. The survey includes several types of items about drugs and alcohol. One type deals with the students' attitudes, perceptions, and opinions about alcohol and other drugs, and the other deals with the students' own use and consequences of use. There are also several items on students' demographic and background characteristics as well as perception of campus climate issues and policy.

Key Findings from students at Multiple Selection

Following are some key findings on the use of alcohol:

- 75.4 % of the students consumed alcohol in the past year ("annual prevalence").
- 55.7 % of the students consumed alcohol in the past 30 days ("30-day prevalence").
- 38.3 % of underage students (younger than 21) consumed alcohol in the previous 30 days.
- 24.0 % of students reported binge drinking in the previous two weeks. A binge is defined as consuming 5 or more drinks in one sitting.

Following are some key findings on the use of illegal drugs:

- 29.0 % of the students have used marijuana in the past year ("annual prevalence").
- 17.8 % of the students are current marijuana users ("30-day prevalence").
- 11.2 % of the students have used an illegal drug other than marijuana in the past year ("annual prevalence").
- 5.0 % of the students are current users of illegal drugs other than marijuana ("30-day prevalence").

The most frequently reported illegal drugs used in the past 30 days were:

- 55.7 % Alcohol (beer, wine, liquor)
- 17.8 % Marijuana (pot, hash, hash oil)
- 17.6 % Tobacco (smoke, chew, snuff)

Following are some key findings on the consequences of alcohol and drug use:

- 22.8 % reported some form of public misconduct (such as trouble with police, fighting/argument, DWI/DUI, vandalism) at least once during the past year as a result of drinking or drug use
- 27.0 % reported experiencing some kind of serious personal problems (such as suicidality, being hurt or injured, trying unsuccessfully to stop using) at least once during the past year as a result of drinking or drug use.

Following are some key findings on opinions about the school environment:

- 88.5 % of students said the school has alcohol and drug policies;
10.9 % said they "don't know"; and
0.6 % said there wasn't a policy.
- 28.0 % of students said the school has an alcohol and drug prevention program;
69.6 % said they "don't know"; and
2.4 % said there wasn't a program.
- 66.2 % of students said the school is concerned about the prevention of drug and alcohol use;
20.8 % said they "don't know"; and
13.1 % said the school is not concerned.

With regard to students' perceptions of other students' use:

- 84.1 % of students believe the average student on campus uses alcohol once a week or more.
- 68.6 % of students believe the average student on this campus uses some form of illegal drug at least once a week.
- 40.9 % of students indicated they would prefer not to have alcohol available at parties they attend.
- 80.9 % of students indicated they would prefer not to have drugs available at parties they attend.

The following percentages of survey respondents said they saw drinking as a central part of the social life of the following groups:

- 72.4 % of the respondents said they saw drinking as central in the social life of male students.
- 60.8 % of the respondents said they saw drinking as central in the social life of female students.
- 19.9 % of the respondents said they saw drinking as central in the social life of faculty/staff.
- 41.0 % of the respondents said they saw drinking as central in the social life of alumni.
- 52.1 % of the respondents said they saw drinking as central in the social life of athletes.
- 84.4 % of the respondents said they saw drinking as central in the social life of fraternities.
- 77.9 % of the respondents said they saw drinking as central in the social life of sororities.
- 27.7 % of the students said they believe the social atmosphere on campus promotes alcohol use.
- 16.1 % of the students said they believe the social atmosphere on campus promotes drug use.
- 11.8 % of the students said they do not feel safe on campus.

Compared to other campuses...

- 6.2 % feel that alcohol use is greater
- 35.6 % feel that alcohol use is less
- 58.2 % feel alcohol use is about the same

On the Core Alcohol and Drug Survey, respondents were asked to report whether students on this campus cared about a number of campus climate issues (with the response options being "not at all", "slightly", "somewhat", and "very much"). The following percentages of respondents on this campus indicated that their fellow students cared "somewhat" or "very much" about the following issues:

- 87.5 % said students cared about sexual assault
- 79.8 % said students cared about assaults that are non-sexual
- 78.3 % said students cared about harassment because of race or ethnicity
- 75.4 % said students cared about harassment because of gender
- 74.5 % said students cared about harassment because of sexual orientation
- 68.6 % said students cared about harassment because of religion
- 54.5 % said students cared about campus vandalism
- 36.8 % said students cared about alcohol and other drug use

Table 1 shows the percentage of students who reported having experienced any of the following within the last year and, if so, the percentage who reported consuming alcohol or other drugs shortly before these incidents.

Table 1 – Experiences of Harassment or Violence

<u>Experience</u>	<u>Use Alcohol or Drugs</u>	<u>Incident</u>
17.5%	1.1%	Ethnic or racial harassment
12.7%	12.7%	Threats of physical violence
5.5%	15.4%	Actual physical violence
2.7%	23.1%	Theft involving force or threat of force
11.2%	55.4%	Forced sexual touching or fondling
7.3%	58.3%	Unwanted sexual intercourse

On the Core Alcohol and Drug Survey, students were asked to rate the degree of risk people take when they act in certain ways, listed below. The response options were, "no risk", "slight risk", "moderate risk", "great risk", and "can't say". The numbers listed below indicate the percentage of respondents who felt there was "great risk" associated with the following behaviors:

- 5.3 % try marijuana once or twice
- 8.9 % smoke marijuana occasionally
- 22.1 % smoke marijuana regularly
- 39.6 % try cocaine once or twice
- 76.1 % take cocaine regularly
- 43.1 % try LSD once or twice
- 69.2 % take LSD regularly
- 14.3 % take one or two drinks of an alcoholic beverage (beer, wine, liquor) nearly every day
- 55.7 % take four or five drinks nearly every day
- 60.2 % have five or more drinks in one sitting
- 47.4 % take steroids for body building or improved athletic performance
- 40.2 % consume alcohol prior to being sexually active
- 36.3 % regularly engage in unprotected sexual activity with a single partner
- 78.6 % regularly engage in unprotected sexual activity with multiple partners

Sexual Behavior:

66.8 % of the students reported engaging in sexual intercourse within the past year. Of these, 12.0 % used alcohol the last time they had intercourse and 8.1 % used drugs.

In the last 30 days, the following percentages of students engaged in the behaviors described below:

- 47.4 % refused an offer of alcohol or other drugs
- 7.4 % bragged about alcohol or other drug use
- 54.3 % heard someone else brag about alcohol or other drug use
- 15.7 % carried a weapon such as a gun, knife, etc. (not hunting or job related)
- 19.4 % experienced peer pressure to drink or use drugs
- 6.8 % held a drink to have people stop bothering you about why you weren't...
- 13.4 % thought a sexual partner was not attractive because he/she was drunk
- 7.9 % told a sexual partner that he/she was not attractive because he/she was....

The following data describes how students say their friends would feel if they...

Tried marijuana once or twice	35.2 % of their friends would disapprove
Smoked marijuana occasionally	43.6 % of their friends would disapprove
Smoked marijuana regularly	64.0 % of their friends would disapprove
Tried cocaine once or twice	87.1 % of their friends would disapprove
Took cocaine regularly	97.2 % of their friends would disapprove
Tried LSD once or twice	81.9 % of their friends would disapprove
Took LSD regularly	95.5 % of their friends would disapprove
Took one or two drinks every day	60.9 % of their friends would disapprove
Took four or five drinks every day	91.7 % of their friends would disapprove
Had five or more drinks at one sitting	74.7 % of their friends would disapprove

The following are some key findings on the perceived effects of alcohol:

- 68.2 % say it breaks the ice
- 69.7 % say it enhances social activity
- 45.1 % say it makes it easier to deal with stress

- 53.7 % say it facilitates a connection with peers
- 58.7 % say it gives people something to talk about

- 51.5 % say it facilitates male bonding
- 48.1 % say it facilitates female bonding

- 59.1 % say it allows people to have more fun
- 61.5 % say it gives people something to do
- 22.3 % say it makes food taste better
- 18.7 % say it makes women sexier
- 14.9 % say it makes men sexier
- 18.5 % say it makes me sexier
- 24.5 % say it facilitates sexual opportunity

Use of Drugs

The following tables provide additional details about students' reported use of drugs at this institution. Unless otherwise indicated, percentages are based on the total number of students responding validly to a given item.

For comparison purposes, some figures are included from a reference group of 18370 students from the 2015 Annual Data.

In general, substantial proportions of students report having used alcohol, tobacco, and marijuana in response to the question, "At what age did you first use _____?" whereas comparatively few report having used each of the other substances. This question examines "lifetime prevalence" as opposed to annual prevalence.

Table 2 describes lifetime prevalence, annual prevalence, and high frequency use (3 times a week or more).

Table 2 – Substance Use

Substance	Lifetime Prevalence		Annual Prevalence		30-day Prevalence		3x/Week or more	
	Coll.	Ref.	Coll.	Ref.	Coll.	Ref.	Coll.	Ref.
Tobacco	36.6	42.2	24.2	32.4	17.6	21.1	11.3	10.6
Alcohol	78.7	84.4	75.4	81.5	55.7	68.7	12.3	20.0
Marijuana	46.4	46.1	29.0	33.6	17.8	19.9	10.9	8.2
Cocaine	9.3	7.6	3.8	4.4	0.8	1.8	0.0	0.2
Amphetamines	11.7	9.9	4.6	5.4	2.6	3.0	1.6	1.4
Sedatives	7.3	6.2	2.0	3.1	0.8	1.5	0.2	0.4
Hallucinogens	10.7	7.7	5.2	4.5	1.0	1.3	0.0	0.2
Opiates	2.5	2.4	0.8	1.3	0.5	0.8	0.3	0.3
Inhalants	2.2	2.7	0.9	1.0	0.5	0.5	0.2	0.2
Designer drugs	8.4	8.9	2.8	5.5	0.6	1.7	0.0	0.2
Steroids	0.8	1.0	0.3	0.6	0.1	0.4	0.1	0.2
Other illegal drugs	2.7	3.7	0.9	1.9	0.1	0.7	0.0	0.2

Notes:

Coll. = Middle Tennessee State University
 Ref. Reference group of 18370 college students

The average number of drinks consumed per week at this institution is 2.02 drinks. The national average is 3.8 drinks (based on a sample of 18370). The percentage of students who report drinking heavily in the last two weeks at this institution is 24.0 %, compared to the national average of 42.9%

Consequences of Alcohol and Drug Use

The proportion of students who report having had problems as a result of drinking or drug use is another indicator of the level of substance abuse. The percentages of students who reported that within the past year they had various problematic experiences are given in Table 3. The top group of items represents public misconduct or behaviors that involve actual or potential harm to others. The second group represents possibly serious personal problems. The last group may consist of less serious (and more common) experiences which nevertheless may indicate excessive use.

Table 3 - Problematic Experiences

<u>This Institution</u>	<u>Reference Group</u>	<u>Experience</u>
12.6%	17.6	Driven a car while under the influence
12.1%	26.5	Got into an argument or fight
2.3%	10.5	Been in trouble with police, residence hall, or other college authorities
1.2%	4.6	Damaged property, pulled fire alarm, etc
0.4%	1.1	Been arrested for DWI/DUI
16.2%	19.1	Performed poorly on a test or important project
8.8%	9.1	Thought I might have a drinking or other drug problem
7.3%	4.5	Seriously thought about suicide
6.8%	7.7	Been taken advantage of sexually
5.9%	4.4	Tried unsuccessfully to stop using
5.2%	14.1	Been hurt or injured
1.7%	1.3	Tried to commit suicide
0.4%	1.8	Taken advantage of another sexually
46.1%	59.1	Had a hangover
39.2%	50.1	Got nauseated or vomited
23.9%	33.1	Done something I later regretted
21.7%	24.5	Missed a class
21.2%	27.3	Been criticized by someone I know
8.0%	32.3	Had a memory loss

Differences among Student Groups

Table 4 compares substance use patterns and consequences of several campus groups: males and females, younger and older, academically more and less successful, and on and off-campus residents.

Table 4 - Differences among Student Groups

	Gender		Age		Average Grades		Campus Residence	
	Female	Male	16-20	21+	A-B	C-F	On	Off
Sample Sizes	708	389	451	648	947	156	209	897
Currently use (in the past 30 days) alcohol	53.0%	60.8%	38.3%	68.1%	55.5%	57.1%	40.9%	59.3%
Currently use (in the past 30 days) marijuana	17.8%	17.8%	19.4%	16.7%	16.7%	23.9%	20.2%	17.3%
Currently use (in the past 30 days) illegal drugs other than marijuana	9.9%	12.4%	12.2%	10.2%	11.6%	8.4%	12.0%	10.9%
Had 6 or more binges in the past 2 weeks	1.0%	2.6%	0.9%	2.0%	1.5%	1.9%	0.5%	1.8%
Have driven a car while under the influence during past year	11.8%	13.8%	10.1%	14.4%	12.6%	11.9%	9.1%	13.4%
Have been taken advantage of sexually during past year	8.2%	4.1%	8.1%	5.9%	6.8%	6.7%	7.2%	6.7%
Have taken advantage of another sexually during past year	0.5%	0.3%	0.2%	0.5%	0.2%	1.4%	0.5%	0.4%

Sample Demographics

Following are some summary characteristics of the students who completed and returned the questionnaire.

- 15.6 % were freshmen
- 20.4 % were sophomores
- 28.8 % were juniors
- 33.6 % were seniors
- 0.5 % were graduates
- 0.7 % were other
- 69.7 % were in the "typical" college age range of 18-22.
- 64.0 % were female.
- 81.1 % lived off campus.
- 71.9 % worked part-time or full-time.
- 90.1 % were full-time students.
- 16.2 % reported spending at least 5 hours per month in volunteer work.

Appendix B – CHASCo Meeting Participation and Professional Development Training



Membership Meeting Agenda Friday, February 16, 2018 at University of Memphis 11:00-2:00PM CST

11:00 – 11:05	Welcome (Lisa Schrader, CHASCo Chair)
11:05 – 11:15	CHASCo Campus Share: University of Memphis
11:15-11:45	CHASCo Chair (Lisa Schrader) <ul style="list-style-type: none">• New Vision Statement• Evaluation Plan Subcommittee Opportunity• Elections in April• Drug Free Schools & Campuses (Feedback)
11:45 – 12:15	Strategic Prevention Framework Strategies for Campuses (Director and ExComm)
12:15 – 1:30	Sexual Violence, Alcohol, and the Culture of Bars - Sharon Travis, Sexual Assault Center of Middle TN
1:30 – 1:45	CHASCo Director's Report <ul style="list-style-type: none">• Website: Members-Only Page• CORE Survey• Social Norms• THSO Cohort- Welcome Students!<ul style="list-style-type: none">• Training Plan, Upcoming Calls, etc.• Prevention Plans
1:45-2:00	CHASCo Standing Committee Reports: <ul style="list-style-type: none">• Membership Committee (Henrietta Kellum)• Programming Chair Committee (Jennifer Catlett)<ul style="list-style-type: none">• SN Campaigns, Updating Questions Document• Professional Development Committee (Ray White)<ul style="list-style-type: none">• PIP Update, Volunteers?
2:00	Closing & Action Steps (Lisa Schrader) <ul style="list-style-type: none">• Next Meeting will be via webinar on April 20, 2018.



This project is funded under a Grant Contract with the State of Tennessee Department of Mental Health and Substance Abuse Services.

MTSU Participants/Attendees for Spring 2018 CHASCo Meeting: Lisa Schrader – Director of Health Promotion; Sondra Wade – Assistant General Counsel; and Gené Stephens – Assistant Vice President for Compliance and Enterprise Risk Management.



BACCHUS Initiatives of NASPA

Region III Conference Guide

**Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina,
South Carolina, Tennessee, Texas, Virginia**

<http://www.naspa.org/constituent-groups/groups/bacchus-initiatives>

**Welcome to RVA:
Reaching Goals, Visualizing Success, Taking Action**



**Saturday, April 14, 2018
University of Richmond**

BACCHUS Initiatives of NASPA Region III Conference

University of Richmond • Richmond, VA

April 14, 2018

On behalf of the BACCHUS Initiatives of NASPA and the BACCHUS Region III Leadership Team, we are delighted to bring this year's regional conference to [University of Richmond](#). The conference is hosted by the [Wellness Education Bandits](#).

The Region III Conference is a great opportunity for your peer education group to:

- Get new program ideas on a variety of health and wellness issues relevant to working with college students
- Gain new knowledge and skills to support your peer education efforts
- Network with other peer educators and advisors from across the Southeast region
- Learn how to revitalize, recruit, and re-energize your organization
- Learn more about how the BACCHUS Initiatives of NASPA can support your efforts

Robins School of Business

All student breakout sessions will be on the 1st and 2nd floors. There are elevators as well as stairs. The Ukrop Auditorium (first floor) will be used for our keynote speaker and breakfast. The room will not be monitored during the day so please consider taking your belongings with you to breakout sessions.

Parking: Please park in lot R10 which is located next to the Robins Business School, no permits are required. Please see interactive map here: <http://virtualtour.richmond.edu/>

Spaces:

- Ukrop Auditorium (1st floor): Breakfast, Kick-off, Keynote, Awards Ceremony
- Room 1: Breakout Sessions (Robins School of Business Classroom 113)
- Room 2: Breakout Sessions (Robins School of Business Classroom 114)
- Room 3: Breakout Sessions (Robins School of Business Classroom 115)
- Room 4: Breakout Sessions (Robins School of Business Classroom 205)
- Heilman Dining Hall: Lunch

Restrooms: Located on each floor of the Robins School of Business.

Technology: There is computer/AV setup available in every breakout session room; please bring your own laptop. If you are planning to use a Mac please make sure to bring an adapter/HDMI cord. If you need help setting up your presentation to the projector, find Gibran Merchant or Slade Gormus to assist.

Lunch: Will be served at the Heilman Dining Hall, a short walk from Robins Business School.

Dietary Restrictions: For those that indicated a dietary restriction during registration, your name tag should have a small sticker on the back of it which you can show to University of Richmond staff and they will help you find food that meets your dietary needs.



Schedule Overview

<u>TIME</u>	<u>EVENT</u>	<u>ROOM</u>
7:45am-8:30am	Registration and Breakfast	Ukrop Auditorium Atrium
8:45am-9:00am	Conference Welcome	Ukrop Auditorium
9:00am-10:15am	Keynote: Matt Barnay	Ukrop Auditorium
10:30am-11:30am	Breakout Session 1	
	1.1 Building the Ideal Peer Education Program Tools for Success	Room 1
	1.2 Diversification of Peer Education: A Deep Dive Into Inclusivity Within Our Organizations	Room 2
	1.3 Sense & Sensitivity: Trauma-Informed Responses to Post-Program Testimonials	Room 3
	1.4 Effective Collegiate AOD Prevention: Lessons Learned From a Statewide Coalition	Room 4
11:40am-12:40pm	Breakout Session 2	
	2.1 Stand Up, Speak Out	Room 1
	2.2 Marijuana and Other Leafy Greens: What's the Risk?	Room 2
	2.3 Sleepy Knights: An Initiative to Promote Healthy Sleep on Campus	Room 3
	2.4 Collegiate Drug & Alcohol Use: How it Interacts with Mental Illness, General Health & Working Toward the De-Stigmatization of Addiction	Room 4
1:00pm-2:00pm	Lunch	Heilman Dining Hall
2:15pm-3:15pm	Breakout Session 3	
	3.1 Student Advisory Committee Candidate Session	Room 1
	3.2 Sex With The Greeks	Room 2
	3.3 Should I Stay or Should I Go?	Room 3
	3.4 Presentation on Consent	Room 4
3:25pm-4:25pm	Breakout Session 4	
	4.1 Pleasurefest, It's Not Just a Health Fair	Room 1
	4.2 Programming and Performing: the Anatomy of Successful Outreaches	Room 2
	4.3 Peer Educator Round Table	Room 3
	4.4 Advisors Round Table	Room 4
4:30pm-5:30pm	Keynote and Awards Ceremony	Ukrop Auditorium



Detailed Schedule

7:45am - 8:30am (*Ukrop Atrium*)

Registration and Breakfast

Join in the fun as we welcome you to the Region III Conference! If you have not already picked up your registration materials please make sure to see one of the Conference staff at the Registration Table. Please enjoy breakfast while getting to know the other attendees.

8:45am - 9:00am (*Ukrop Auditorium*)

Welcome and Opening Remarks

President Crutcher

Join us in the Ukrop Auditorium to kick off the Region III Conference with a warm welcome from University of Richmond's President, President Ronald Crutcher.

9:00 am - 10:15 am (*Ukrop Auditorium*)

Keynote Speaker:

Matt Barnay

Matt Barnay has helped to establish a tradition of excellence as the head swim coach at the University of Richmond. Out of the water, Barnay focuses on the "athletics is education" concept. The swimming & diving Spiders work hard to balance success in the water with the rigors of college academics at Richmond. The program has come to set the standard for academic excellence on campus.

- Arrived at Richmond 2005 as Head Women's Swim Coach
- Graduated from Robins School of Business with MBA in 2014 (2014 Outstanding Graduate of the Year)
- Named Director of Athletic Innovation in March 2017
- Coached 11 A-10 team championships (2006, 2007, 2008, 2009, 2011, 2012, 2013, 2014, 2015, 2016, 2017)
- 8-time A-10 Coach of the Year (2006, 2007, 2008, 2011, 2013, 2014, 2016, 2017)
- Seven Olympic Trials qualifiers since 2008

"We stumbled into the sleep revolution when we began to examine strain on the student-athletes. Understanding strain greatly helps us understand sleep."

Matt has worked extensively with his swimmers to understand the effects of lack of sleep on performance. Through this study he and his athletes have developed a better understanding of sleep and performance.

10:30 am - 11:30 am

Breakout Session 1

1.1 Building the Ideal Peer Education Program Tools for Success (Room 1)

Aimee Hourigan, Substance Abuse Prevention & Education Director

What makes a peer education program successful? If you could create a program from scratch, what would you include? Come explore ways to integrate evidence-based best practices and a solid framework to make your peer education program effective and sustainable. Be prepared to share what works on your campus and learn from others!



1.2 Diversification of Peer Education: A Deep Dive Into Inclusivity Within Our Organizations (Room 2)

Sonia Jindal, Health Outreach Peer Educators (HOPE) – College of William and Mary

William and Mary HOPE (Health Outreach Peer Educators) members will present on the challenges of recruiting, retaining, and conversing about diversity within peer education. This presentation will outline the difficulties in inclusive peer education and will give audience members a space to brainstorm potential ways to increase representation of diverse populations. This space will allow attendees to critically engage with each other and learn how to have a self-reflective conversation. Audience members will leave this program with a greater understanding of the cultural dimensionality embedded within peer education and with tools to create a more diverse space within their own peer health education programs.

1.3 Sense & Sensitivity: Trauma-Informed Responses to Post-Program Testimonials (Room 3)

Eric Marlow Garrison, Assistant Director, Office of Health Promotion - College of William and Mary

Did you know that the first response to a victim of sexual misconduct is the most crucial step in the serpentine path from victim to survivor to thriver? Done poorly, your actions could hinder a student from seeking further treatment or justice. Yet when done well, your trauma-informed response could help contribute to the healing process and eventual flourishing. Wouldn't you like to know more about handling these delicate situations, so that everyone from the survivor to the peer education team feels more comfortable and less anxious? Eric will help you become aware of your own comfort levels and build on your current knowledge and training, so that you and your team are prepared for that next SA testimonial. Furthermore, Eric will discuss the latest research within forensic sexology on the mind's response to trauma.

1.4 Effective Collegiate AOD Prevention: Lessons Learned From a Statewide Coalition (Room 4)

Laurie Jevons, Assistant Director of BACCHUS Initiatives

The Coalition of Colorado Campus Alcohol and Drug Educators (CADE) has been a source of training, technical assistance and support for collegiate prevention teams across the state for over a decade. With funding from SAMHSA each year, the CADE selects campuses to implement an evidence based program to address alcohol, marijuana or prescription medication abuse prevention. In this session, project staff will review best practices and share lessons learned for attendees to replicate institutional efforts.

**11:40 am - 12:40 pm
Breakout Session 2**

2.1 Stand Up, Speak Out (Room 1)

Julia Diesel, Stand Up, Speak Out Coordinator

Ever been to an unforgettable presentation? What about it stuck with you? Come build on your skills as a student facilitator at this presentation centered around student leadership experiences. This presentation will touch on facilitation tips and skills gained through a semester of presenting bystander intervention to on campus groups, using examples from UNC Asheville's bystander intervention program entitled "Stand Up, Speak Out". Along with building on presentation and personal facilitation skills this workshop seeks to educate attendees on general intervention tips in a fun, educational and interactive manner.



2.2 Marijuana and Other Leafy Greens: What's the Risk? (Room 2)

Aimee Hourigan, Substance Abuse Prevention & Education Director

Is marijuana harmless? Is it medicine? What does science and research tell us? From legal changes to new forms like concentrates, the landscape of cannabis use is changing. How do we educate students about edibles, oil, CBD, and the potential impact of using these substances without resorting to scare tactics and misinformation? What resources are available to guide evidence-based, harm reduction education for this drug? Come with questions and ready for an interesting discussion.

2.3 Sleepy Knights: An Initiative to Promote Healthy Sleep on Campus (Room 3)

Emily Werner, Associate Director of Campus Wellness

This presentation will discuss the development and implementation of an initiative focusing on sleep health. The American Academic of Sleep Medicine shares that "research is increasingly showing that more and more college students are not getting enough sleep, which can have a negative impact on their grades." Sleepy Knights is a comprehensive initiative promoting sleep health among college students. Come learn how you too can implement a similar initiative around sleep. Everyone deserves a good Knights rest!

2.4 Collegiate Drug & Alcohol Use: How it Interacts with Mental Illness, General Health & Working Toward the De-Stigmatization of Addiction (Room 4)

Lauren Bulla, Peer Educator

It has been addressed as a national epidemic at this point, but the use and misuse of opioids is causing great detriment to college campuses and their respective communities on an astronomical scale. Access to prescription medication, and opioids in general is incredibly easy. Many college students who are not medically prescribed such medications turn to such drugs as a means of coping & experimentation as well as an outcome of peer pressure. Opioids paired with Alcohol lead to an incredibly worrisome reality for many. Seeing as alcohol is the #1 drug used to commit sexual violence, the addition of opioids creates a very dangerous situation for many. The general health of the individual as well as the whole of the campus community takes a incredible hit when dealing with these issues. Though this is true, the unfortunately reality is that there is quite a lot of stigma surrounding issues of addiction and not enough resources on college campuses to effectively deal with these issues that many students face daily. PEPAH has worked around this initiative on a number of fronts, to the point where this semester we hired on a student 'Campus Opioid Educator' to deal with the issue peer to peer. Events and programs around this initiative have also proved to be fruitful and a discussion around effective means of having these conversations will be part of this presentation.

1:00pm -2:00pm (Heilman Dining Hall)

Lunch

Please enjoy lunch in the University of Richmond's main dining hall, the Heilman Dining Hall. We encourage students to sit with students from other schools, so they can get to know one another and discuss their experiences as peer educators. At each lunch table there will be index cards with talking points and questions to help get the conversation started.

2:15 pm - 3:15 pm Breakout Session 3

3.1 Student Advisory Committee Candidate Session (Room 1)

Sarah Kook, Region III SAC Representative



SAC directors and Region III Student Advisory Committee representative will host an information session for potential SAC applicants. The session will allow attendees to learn about the responsibilities of the SAC directors and regional representatives and receive information on the application process and requirements. Attendees will also have an opportunity to ask questions and receive advice.

3.2 Sex With The Greeks (Room 2)

Taylor Whitlow, Peer Education President

This program was created to educate our peers about sex in all aspects. We discuss topics such as: STDs, HIV, consent, condoms, positions, and etc. Since Greek-letter organizations are very prominent on our campus, we invite them to be a part of our panel to discuss sexual education and to share their knowledge about sex as well. Throughout this program we give out surveys, play games, and watch videos, so our peers can be comfortable and more knowledgeable when it comes to sexual education.

3.3 Should I Stay or Should I Go? (Room 3)

Katherine Chiu, REACH Peer Educator

Building and maintaining a healthy relationship can be hard, but how do you know when a partner's behavior has crossed a line? How do you talk to a friend who you might suspect is in an abusive relationship? In *Should I Stay, Or Should I Go*, we explore the sometimes complicated dynamics of abuse in an interactive, activity-based program designed specifically for and facilitated by college students. Learn about red flags of an abusive relationship, and gain a better understanding of how these red flags play out in the cycle of abuse. Equally as important, come discuss what defines a healthy relationship, and learn tips for increasing effective communication with a sexual/romantic partner. This program is gender and sexuality inclusive, and doesn't make assumptions about the health of a relationship based on its longevity – no matter how you define it, everyone deserves to be safe and happy in their relationship!

3.4 Presentation on Consent (Room 4)

Britnie Hopkins, Sexual Misconduct Education and Prevention Coordinator – University of Richmond

This presentation looks in-depth at how University of Richmond created and launched a campus-wide, ongoing consent campaign. In this presentation, you will see tools that can be implemented at your Institution, identify key stakeholders to partner with on your campus, and learn core concepts needed to create impactful programming.

3:25 - 4:25 pm

Breakout Session 4

4.1 Pleasurefest, It's Not Just a Health Fair (Room 1)

Slade Gormus, RN, Taylor Pak, Wellness Education Bandit (WEB) – University of Richmond

We call it Pleasurefest because if we called it a health fair no one would attend. It is important for students to get health related information in a way that is fun and interactive so that they can become engaged during the day. This program will not only describe how to run a wellness fair but it will also give some ideas on how to get students involved. We receive help from different sources on and off-campus to contribute to our interactive stations in order to develop an inclusive well-being community.

4.2 Programming and Performing: the Anatomy of Successful Outreaches (Room 2)

Lauren Welch, Outreach Coordinator Intern

Peer health outreaches at the University of Virginia (UVA) have grown to be highly credible and sought-after educational programs. What makes our outreaches successful? At UVA, PHE outreaches are both inviting to present and inviting to attend. Presentations are structured enough to ensure presenter comfort, but flexible

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enough to tailor to an organization's needs. This session will demonstrate a few key elements of an effective outreach system including 1) creating and performing outreaches, 2) making the process as simple as possible, and 3) gathering and using feedback. Participants can expect to learn different ways of making outreach activities engaging, discuss strategies to improve their outreach activities, understand methods for streamlining outreach processes, and identify opportunities to utilize audience and presenter feedback.

4.3 Peer Educator Round Table (Room 3)

Regional Volunteer Team

NASPA Staff and the Region III Student Advisory Committee representative will host an open discussion for peer educators. This space will allow attendees to seek advice and feedback from other peer educators, learn best practices from national leadership and effectively problem solve issues on their own campuses.

4.4 Advisors Round Table (Room 4)

Regional Volunteer Team

NASPA Staff and volunteer leadership will host an open discussion for peer education advisors. This space will allow attendees to seek advice and feedback from other advisors, learn best practices from national leadership and effectively problem solve issues on their own campuses.

4:30pm - 5:30 pm (Ukrop Auditorium)

Keynote and Award Ceremony with Refreshments

Join us in the Ukrop Auditorium as we wrap up the conference with closing remarks and the announcement of our award winners for:

- Outstanding Program
- Outstanding Peer Education Group
- Outstanding Peer Educator
- Outstanding Advisor

Enjoy light refreshments as we congratulate our fellow peer educators and advisors on all of their hard work and dedication to promoting wellness on college campuses across the Southeast.



Region III Resources

<http://www.naspa.org/constituent-groups/groups/bacchus-initiatives>

Leadership Team

Region III BACCHUS Regional Consultant: Aimee Hourigan, University of South Carolina (ahouriga@mailbox.sc.edu)

Region III Student Advisory Committee: Sarah Kook, College of William & Mary (ykook@email.wm.edu)

Alabama State Coordinator: Brittney Vigna, University of Alabama (bevigna@cchs.ua.edu)

Florida State Coordinator: Whitney Platzer O'Regan, University of Miami (w.oregan@miami.edu)

Georgia State Coordinator: Alma Keita, Georgia Southwestern State University (alma.keita@gsw.edu)

Kentucky State Coordinator: Emily Werner, Bellarmine University (ewerner@bellarmine.edu)

Louisiana State Coordinator: La'Tesha Hinton, Tulane University (lhinton1@tulane.edu)

North Carolina State Coordinator: Leslie Robinson, University of North Carolina at Charlotte (ldill2@uncc.edu)

South Carolina State Coordinator: Chris Donevant-Haines, Coastal Carolina University (cdhaines@coastal.edu),

Virginia State Coordinator: Eric Marlowe Garrison, College of William & Mary (emgarrison@wm.edu)

Interested in becoming more involved with the Regional Team? State Coordinator Positions for **Mississippi, Tennessee and Texas** are currently open!

Application materials for the Region III Student Advisory Committee position can be found [here](#) (including a position [description](#)). Applications are due by April 16, 2018.

Regional Conference Hosting

If your peer education group is interested in hosting the Region III Conference in the future, please contact Aimee Hourigan, Regional Consultant, for an application and details on hosting responsibilities. [Applications](#) are due by September 15, 2018.

Stay Connected...

Facebook: Sign into your profile on Facebook.com and search for "The BACCHUS Network". Click "Follow" on the group's page.

National Conferences: Look for current information at: <http://www.naspa.org/events>

NASPA Profile: To make the most of your participation with the BACCHUS Initiatives of NASPA, be sure to log in to your account and update your profile at www.naspa.org. Your profile gives you access to customize your areas of interest, join knowledge communities, set your email preferences, and include other demographic information about yourself. Make sure that you select BACCHUS Initiatives to receive regional and national communications.

Certified Peer Educator (CPE) Training

NASPA's Certified Peer Educator program is a unique opportunity for your peer education group to add a credential to your work on campus. This 8 module, 12 hour course provides foundational skills to aid you in a successful time as peer educators.

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**COALITION FOR HEALTHY
AND SAFE CAMPUS COMMUNITIES**

NEWS RELEASE

FOR IMMEDIATE RELEASE CONTACT: Kayce Matthews
(615) 242-6400, ext. 205
matthews@ticua.org

MTSU Director of Health Promotion Honored for Alcohol, Drug, and Violence Prevention Work



On May 24, 2018 the Coalition of Healthy and Safe Campus Communities (CHASCo) awarded Ms. Lisa Schrader the *Susanna L. Baxter Alcohol, Drug, and Violence Prevention in Higher Education Award* for her statewide efforts in alcohol, other drug, and violence prevention at the collegiate level. The Baxter Award, given biennially, recognizes an individual in the State who, like Baxter, has volunteered his or her time and energy to achieve positive results in the area of alcohol and other drug and violence prevention.

Schrader is the Director of Promotion at Middle TN State University in Murfreesboro, Tennessee. She has served in multiple roles on CHASCo's Executive Board. Most recently, in 2016, she was elected Vice-Chairperson and she served as the Chairperson of the CHASCo Executive Board from January of 2017 until June 2018. Lisa has been instrumental in ensuring CHASCo continues to be a proactive, statewide resource for colleges and their surrounding communities to combat alcohol and drug abuse and the violence often associated with it.

By bringing together campus leaders from 32 public and private college campuses across Tennessee, CHASCo has had a profound impact on reducing substance abuse and preventing violence statewide. Since its inception in 2002, CHASCo has received multiple state and federal grants to enable campuses to assess the prevalence of and reduce the misuse and abuse of alcohol and other drugs on college campuses. CHASCo offers multiple training sessions annually to staff from its member campuses on cutting-edge, research-based prevention tools including motivational interviewing and social norming.

More information about CHASCo is available on our website, www.tnchasco.org

Appendix C – Summary of MTSU’s Alcohol and Other Drug Prevention Programs

		Middle Tennessee State University AOD Prevention Plan Overview			
		Type of Prevention			
		Universal- all students	Selective- groups of students identified to be at an increased risk of AOD issues	Indicated- students violating policies, in need of crisis services, or self-declaring	Other groups
Domain of Intended Influence	Individual Students	Health Promotion website Nat'l Coll Alc. Awareness Wk Spring Break Safety Week Availability of e-CHUG, e-TOKE Late night programming Alternative Spring Break Job-required drug testing through Health Services Annual notification of policies True Blue campaign Notification of drug conviction impact on financial aid	AOD presentation- CUSTOMS Social norms pres- UNIV 1010 Safety pres- UNIV 1010 Student rules/AOD- UNIV 1010 Housing programming Greek New Member Education Sexual Assault prev training Athletics' drug testing Athletics education programs It's On Us- Fraternity/Sorority Life bystander intervention campaign	Tobacco Quit Kits & NRT Online sanction- (e-CHUG) 1st offense Housing sanction Zero tol. drug policy in Housing Counseling Services sanction- automatic for 3rd offense Counseling Services- referrals, motivational interviews, addiction education Court ordered drug testing	Student staff training & background checks Title IX training for student staff
	Parents	Prevention messages in parent newsletter	Parent AOD handout- CUSTOMS	Parental notification- Jud Aff Parental notification- Housing	
	Campus Environment	Dry campus policy Tobacco-free campus University Police safety escort service Social norms campaign Power of 1 bystander intervention campaign	Housing safety inspections Greek housing safety inspect. No alcohol ads in Housing University Police saturation patrols in high risk areas Add'l Security Guards in eastern campus core	Narcotics Anon. group Zero tolerance drug policy in Housing	
	Faculty & Staff	AOD policy notification to new and current employees EAP availability notification to new employees		Employee Assistance Program Arrests, referrals, citations Partnership Promise coaches for addictions	Staff training & background check Title IX training
	Community	No smoking in restaurants/ public bldgs DUI checkpoints Partnerships with Prevention Coalition 4 Success Social hosting laws Shoulder tap program Drug Take Back event Felony to distribute synthetic drugs		Arrests, referrals, citations Community mental health providers	

MTSU Q4 CHASCo Prevention Plan Quarterly Report, FY2020

State of Tennessee

Division of Substance Abuse Services

CHASCo Prevention Plan Quarterly Report

FY 2020

Institution Name: MTSU

Name of Reporting Individual: Lisa Schrader

Date Report Submitted: 7/2/20

Fiscal Year: 2020

Quarterly reports are required from all funded CHASCo Prevention Plan institutions with an approved implementation plan. Reports will be submitted electronically on a quarterly basis. Quarterly reports include information required by this form.

Report Period: 1st Qtr. 2nd Qtr. 3rd Qtr. 4th Qtr.
 (July – Sept) (Oct – Dec) (Jan – Mar) (April – June)

Provide (1000 characters or less) your Plan’s major accomplishments for this quarter.

1st Qtr. (July - Sept)	MTSU was successful in launching many of its activities this quarter. Our Connection Point activities began, offering multiple substance-free social activities for students during the first six weeks of the fall semester. They continue to be well attended. We wrapped up our orientation calendar for the year, during which time students saw videos about the wellness culture of campus and its social norms and parents were encouraged to talk with their college-aged children about substance use. We also trained the Presidents of all active student organizations on bystander intervention skills.
2nd Qtr. (Oct - Dec)	MTSU launched some new activities this quarter, including an event for National Prescription Drug Take Back Day, increased marketing for the e-CheckUpToGo tool, and late night social activities through “MT After Dark” programming. Additionally, we sent seven student members of Raider Health Corps to the BACCHUS Initiatives of NASPA General Assembly for training in substance use prevention and peer-to-peer education strategies.

3rd Qtr. (Jan - Mar)	MTSU made a big step forward towards implementing its social norms campaign by completing the design and printing phases of its annual True Blue Health calendar. Additionally, we had a successful “MT After Dark” event in January to help students early in the semester to build social connections that didn’t require alcohol. We also successfully launched our “Mazed and Confused” Spring Break Decision Quest activity which had originally been planned for 1 st quarter, but was delayed until Spring semester.
4th Qtr. (April - June)	The 4 th Quarter was challenging, as precautions for COVID19 led to shifting all classes into an online format and to the cancellation of all on campus events. Our greatest accomplishment was the completion of our 2020-2021 True Blue Health social norms calendar creation and distribution plan. We also were able to include many social norms messages in our CUSTOMS virtual orientation package.

Report Item	Item Information
Implementation plan <i>(Ex: Binge Drinking, Tobacco, Non-Medical Prescription Drug)</i>	Indicate the Implementation Plan for this reporting section (items 1 through 8 below): Binge Drinking
Intervening Variable <i>(Ex: Enforcement; Retail Access; Social Access; Preserved Risk; Promotion)</i>	Indicate the intervening variable for this report section (items 1 through 8 below): Easy Social Access
<p>Start Date: July 2019</p> <p>Periodicity:</p> <p>Ongoing</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Send letters to parents of students under 21 found responsible for alcohol policy violations 2. Offer prescription drug lock boxes to students filling new controlled prescriptions. 3. Require first year students to attend six alcohol-free social events in first six weeks of fall semester. <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of parental notifications 2. # of boxes distributed 3. # of Connection Point events offered, # of attendees
1st Qtr. (July- Sept)	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Send letters to parents of students under 21 found responsible for alcohol policy violations. <i>MTSU successfully continued this activity in the 1st quarter. Our numbers of alcohol violations have declined in recent years, but will be totaled cumulatively in July 2020.</i> 2. Offer prescription drug lock boxes to students filling new controlled prescriptions. <i>MTSU successfully launched this activity over the summer. Many of the boxes that were distributed were for incoming first year students whose parents heard about the box availability during CUSTOMS orientation sessions.</i>

Report Item	Item Information
	<p>3. Require first year students to attend six alcohol-free social events in first six weeks of fall semester. <i>MTSU launched its Connection Point activities for this academic year in August, offering a total of 23 events during the opening weeks of the Fall 2019 semester. Activities included a welcome back carnival, a dance showcase, a community fair, a comedian, and more.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of parental notifications- Unknown; numbers are tabulated on an annual basis in July 2. # of boxes distributed- 6 3. # of Connection Point events offered, # of attendees- 23 events, 15,986 total participants
<p>2nd Qtr. (Oct- Dec)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Send letters to parents of students under 21 found responsible for alcohol policy violations. <i>MTSU successfully continued this activity in the 2nd quarter. Number are currently unavailable, but will be totaled cumulatively in July 2020.</i> 2. Offer prescription drug lock boxes to students filling new controlled prescriptions. <i>MTSU continued distributing lock boxes through its Campus Pharmacy when a new controlled prescription was filled.</i> 3. Require first year students to attend six alcohol-free social events in first six weeks of fall semester. <i>While most of these activities took place in the 1st quarter, MTSU did complete one additional Connection Point event, a substance free Homecoming event, in the 2nd quarter.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of parental notifications- Unknown; numbers are tabulated on an annual basis in July 2. # of boxes distributed- 4 3. # of Connection Point events offered, # of attendees- 1 event, 342 total participants
<p>3rd Qtr. (Jan-Mar)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Send letters to parents of students under 21 found responsible for alcohol policy violations. <i>MTSU successfully continued this activity in the 3rd quarter. Numbers are currently unavailable, but will be totaled cumulatively in July 2020.</i>

Report Item	Item Information
	<p>2. Offer prescription drug lock boxes to students filling new controlled prescriptions. <i>MTSU continued offering lock boxes through its Campus Pharmacy when a new controlled prescription was filled. However, none were given away this quarter. Our Spring semester started a week later than normal, and students left campus early in March for Spring Break/COVID-19, so we had fewer prescriptions filled than would have been typical.</i></p> <p>3. Require first year students to attend six alcohol-free social events in first six weeks of fall semester. <i>MTSU successfully completed this activity in the Fall semester.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of parental notifications- Unknown; numbers are tabulated on an annual basis in July 2. # of boxes distributed- 0 3. # of Connection Point events offered, # of attendees- 0 new events, 0 participants
<p>4th Qtr. (Apr- June)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Send letters to parents of students under 21 found responsible for alcohol policy violations. <i>MTSU successfully continued this activity in the 4th quarter. As of June 29, Student Conduct had not yet tabulated totals; I expect them in early July.</i> 2. Offer prescription drug lock boxes to students filling new controlled prescriptions. <i>MTSU successfully accomplished this activity in previous quarters; however, no lock boxes were distributed in the 4th quarter. Due to COVID-19 and the associated move to remote instruction, our patient count in the clinic was dramatically lower than usual.</i> 3. Require first year students to attend six alcohol-free social events in first six weeks of fall semester. <i>MTSU successfully completed this activity in the Fall semester.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of parental notifications- Unknown; numbers are tabulated on an annual basis in July 2. # of boxes distributed- 0 3. # of Connection Point events offered, # of attendees- 0 new events, 0 participants

Report Item	Item Information
<p>2. Providing Information</p> <p>Start Date: July 2019</p> <p>Periodicity: Ongoing</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Notify campus of drug and alcohol policies. 2. Sponsor social norms campaign highlighting the number of students who don't drink or who drink in moderation. 3. Screen health and wellness video at CUSTOMS orientation events. 4. Offer "Rethinking Drinking" presentation to student groups addressing usage facts, standard drink sizes, abstinence and harm reduction <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. Date stamp of email notification 2. # of posters displayed, # of locations displaying poster(s) 3. # of screenings, # of student viewers 4. # of presentations, # of participants
<p>1st Qtr. (July- Sept)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Notify campus of drug and alcohol policies. <i>MTSU successfully completed this activity in early September. The policies are sent to all currently enrolled students and all employees after the final census is announced each semester.</i> 2. Sponsor social norms campaign highlighting the number of students who don't drink or who drink in moderation. <i>MTSU has not yet sponsored this campaign. However, materials from the previous year's campaign are still hanging in many locations.</i> 3. Screen health and wellness video at CUSTOMS orientation events. <i>MTSU successfully completed this activity during all of the CUSTOMS orientations that took place in July and August.</i> 4. Offer "Rethinking Drinking" presentation to student groups addressing usage facts, standard drink sizes, abstinence and harm reduction- <i>This presentation was made available during the 1st quarter; however, no groups requested it during this time period.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. Date stamp of email notification- Sept. 9 2. # of posters displayed, # of locations displaying poster(s)- 0 new posters, 0 locations 3. # of screenings, # of student viewers- 8 screenings, 1,748 viewers 4. # of presentations, # of participants- 0 presentations, 0 participants

Report Item	Item Information
<p>2nd Qtr. (Oct- Dec)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Notify campus of drug and alcohol policies. <i>MTSU successfully completed this activity in the 1st quarter.</i> 2. Sponsor social norms campaign highlighting the number of students who don't drink or who drink in moderation. <i>MTSU has not yet sponsored this campaign. However, materials from the previous year's campaign are still hanging in many locations.</i> 3. Screen health and wellness video at CUSTOMS orientation events. <i>MTSU successfully completed this activity in the 1st quarter.</i> 4. Offer "Rethinking Drinking" presentation to student groups addressing usage facts, standard drink sizes, abstinence and harm reduction- <i>MTSU successfully facilitated this presentation to one student group in the 2nd quarter.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. Date stamp of email notification- Sept. 9 2. # of posters displayed, # of locations displaying poster(s)- 0 new posters, 0 locations 3. # of screenings, # of student viewers- 0 screenings, 0 viewers 4. # of presentations, # of participants- 1 presentation, 17 participants
<p>3rd Qtr. (Jan-Mar)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Notify campus of drug and alcohol policies. <i>MTSU successfully completed this activity in early February. The policies are sent to all currently enrolled students and all employees after the final census is announced each semester.</i> 2. Sponsor social norms campaign highlighting the number of students who don't drink or who drink in moderation. <i>MTSU began work on this campaign by designing a 2020-2021 True Blue Health calendar, highlighting a new social norms message each month. They will be distributed in the 4th quarter.</i> 3. Screen health and wellness video at CUSTOMS orientation events. <i>MTSU did not host any orientation sessions this quarter, but successfully completed this activity in the Fall semester.</i> 4. Offer "Rethinking Drinking" presentation to student groups addressing usage facts, standard drink sizes, abstinence and harm reduction- <i>This presentation was made available during the 3rd quarter; however, only one group requested in. Most of those requests would typically come in March and April, but the move to remote learning for COVID-19 has practically cancelled all outreach requests.</i>

Report Item	Item Information
	<p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. Date stamp of email notification- February 5 2. # of posters displayed, # of locations displaying poster(s)- 0 new posters, 0 locations 3. # of screenings, # of student viewers- 0 screenings, 0 viewers 4. # of presentations, # of participants- 1 presentation, 18 participants
<p>4th Qtr. (Apr- June)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Notify campus of drug and alcohol policies. <i>MTSU successfully completed this activity in the 3rd quarter.</i> 2. Sponsor social norms campaign highlighting the number of students who don't drink or who drink in moderation. <i>MTSU successfully completed this campaign in the 4th quarter. The 2020-2021 True Blue Health calendars were printed in May and have been distributed.</i> 3. Screen health and wellness video at CUSTOMS orientation events. <i>MTSU had to shift all orientation events to a virtual environment due to COVID19 precautions. The video is featured on the Health Services website, and the orientation material received by students links to it. We doubt that as many students see it as would typically happen in the on ground version; however, we continue to make it available.</i> 4. Offer "Rethinking Drinking" presentation to student groups addressing usage facts, standard drink sizes, abstinence and harm reduction- <i>This presentation was not facilitated in the 4th quarter. It has been revised to allow for remote delivery upon request in the upcoming academic year.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. Date stamp of email notification- Feb. 5 2. # of posters displayed, # of locations displaying poster(s)- 500 new posters, 500 locations 3. # of screenings, # of student viewers- 68 views 4. # of presentations, # of participants- 0 presentations, 0 participants

Report Item	Item Information
<p>3. Building Skills</p> <p>Start Date: August 2019</p> <p>Periodicity: Ongoing</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Send Raider Health Corps (peer health educators) officers and other active members to BACCHUS trainings. 2. Attend and invite campus colleagues to CHASCo meetings, webinars, events, and conferences. 3. Train student organization leaders in risk management and bystander intervention. <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of trainings, # of attending peer educators 2. # of CHASCo activities, # of invitations extended, # of attending colleagues 3. # of presentations, # of participants, # of represented organizations
<p>1st Qtr. (July- Sept)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Send Raider Health Corps (peer health educators) officers and other active members to BACCHUS trainings. <i>MTSU has not completed this activity. The first BACCHUS training will take place in the 2nd quarter.</i> 2. Attend and invite campus colleagues to CHASCo meetings, webinars, events, and conferences. <i>Campus colleagues were invited to the September CHASCo meeting in East Tennessee, which addressed suicide prevention laws for institutions of higher education in Tennessee.</i> 3. Train student organization leaders in risk management and bystander intervention. <i>MTSU successfully completed this activity by conducting a bystander intervention training during Presidium, the annual retreat for all student organization presidents. Additionally, all athletic teams and new fraternity/sorority members received the same training.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of trainings, # of attending peer educators- 0 trainings, 0 peer educators 2. # of CHASCo activities, # of invitations extended, # of attending colleagues- 1 CHASCo activity, 3 invitations extended, 1 attending colleague (Student Health Services director) 3. # of presentations, # of participants, # of represented organizations – 18 presentations, 1,326 participants, 351 represented organizations
<p>2nd Qtr. (Oct- Dec)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Send Raider Health Corps (peer health educators) officers and other active members to BACCHUS trainings. <i>MTSU successfully completed this</i>

Report Item	Item Information
	<p><i>activity by sending 7 students to the BACCHUS Initiatives of NASPA General Assembly, Nov. 21-24, in Baltimore, MD.</i></p> <p>2. Attend and invite campus colleagues to CHASCo meetings, webinars, events, and conferences. <i>Campus colleagues were invited to the November CHASCo meeting at Watkins College, which addressed social norms best practices and electronic nicotine delivery systems.</i></p> <p>3. Train student organization leaders in risk management and bystander intervention. <i>MTSU will continue offering these trainings in the 3rd and 4th quarters; however, no Power of One trainings were held in the 2nd Qtr, as our lead facilitator took a job outside of the University.</i></p> <p>Approved Process Indicators:</p> <p>1. # of trainings, # of attending peer educators- 1 training, 7 peer educators</p> <p>2. # of CHASCo activities, # of invitations extended, # of attending colleagues- 1 CHASCo training, 2 invitations, 2 attending colleagues</p> <p>3. # of presentations, # of participants, # of represented organizations- 0 presentations, 0 participants, 0 represented organizations</p>
<p>3d Qtr. (Jan-Mar)</p>	<p>Approved Implementation Activity:</p> <p>1. Send Raider Health Corps (peer health educators) officers and other active members to BACCHUS trainings. <i>MTSU was unsuccessful at completing this activity this quarter. We were planning to send 7 students to the NASPA Region III Peer Educator Conference at Stetson University April 3-4; however, it was cancelled due to COVID-19.</i></p> <p>2. Attend and invite campus colleagues to CHASCo meetings, webinars, events, and conferences. <i>Campus colleagues were invited to the February CHASCo meeting at Lane College, which addressed best practices for conducting student focus groups.</i></p> <p>3. Train student organization leaders in risk management and bystander intervention. <i>MTSU was successful in hosting two trainings this quarter, including one specifically for athletes and one that was open to all students as part of Sexual Responsibility and Consent Week. Our numbers remain down for this activity as we have yet to replace the primary trainer who took a new job outside the university back in October.</i></p> <p>Approved Process Indicators:</p> <p>1. # of trainings, # of attending peer educators- 0 trainings, 0 peer educators</p>

Report Item	Item Information
	<p>2. # of CHASCo activities, # of invitations extended, # of attending colleagues- 1 CHASCo training, 2 invitations, 3 attending colleagues</p> <p>3. # of presentations, # of participants, # of represented organizations- 2 presentations, 252 participants, 13 represented organizations (athletics teams)</p>
<p>4th Qtr. (Apr- June)</p>	<p>Approved Implementation Activity:</p> <p>1. Send Raider Health Corps (peer health educators) officers and other active members to BACCHUS trainings. <i>MTSU was unsuccessful at completing this activity this quarter. We were planning to send 7 students to the NASPA Region III Peer Educator Conference at Stetson University April 3-4; however, it was cancelled due to COVID-19.</i></p> <p>2. Attend and invite campus colleagues to CHASCo meetings, webinars, events, and conferences. <i>Campus colleagues were invited to the virtual Partners in Prevention conference in May, which addressed best practices language around substance use, implicit bias, and restorative justice. Due to the virtual nature, I am unsure how many MTSU employees participated.</i></p> <p>3. Train student organization leaders in risk management and bystander intervention. <i>MTSU was unsuccessful in completing this activity in the 4th quarter. We still have not replaced the primary trainer and are looking into options for remote delivery training opportunities in the interim.</i></p> <p>Approved Process Indicators:</p> <p>1. # of trainings, # of attending peer educators- 0 trainings, 0 peer educators</p> <p>2. # of CHASCo activities, # of invitations extended, # of attending colleagues- 1 CHASCo training, 3 invitations, unknown number of attending colleagues</p> <p>3. # of presentations, # of participants, # of represented organizations- 0 presentations, 0 participants, 0 represented organizations</p>
<p>4. Providing Support</p> <p>Start Date: July 2019</p> <p>Periodicity: Ongoing</p>	<p>Approved Implementation Activity:</p> <p>1. Provide parents with talking points regarding alcohol use among college students.</p> <p>2. Promote completion of itMatters online alcohol education curriculum by all first year students.</p> <p>3. Include audience response technology in all ATOD-related presentations.</p>

Report Item	Item Information
	<p>4. Participate with county Prevention Coalition for Success.</p> <p>5. Sponsor volunteer activities during fall and spring breaks.</p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of orientation sessions, # of parents attending 2. % of students who completed assignment 3. # of presentations, # of respondents 4. # of PC4S meetings attended, # of activity partnerships 5. # of students participating
<p>1st Qtr. (July- Sept)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Provide parents with talking points regarding alcohol use among college students. <i>MTSU successfully completed this activity by distributing handouts to parents attending orientation sessions moderated by our Dean of Students and Counseling Services director.</i> 2. Promote completion of itMatters online alcohol education curriculum by all first year students. <i>MTSU successfully completed this activity by partnering with UNIV 1010 leadership and Scholars' Academy leadership and by distributing post cards about the curriculum to all first year students attending Convocation. Additionally, all first year students were contacted via email about itMatters.</i> 3. Include audience response technology in all ATOD-related presentations. <i>MTSU successfully continues using Poll Everywhere to encourage audience engagement in our ATOD presentations.</i> 4. Participate with county Prevention Coalition for Success. <i>MTSU continues to partner with our local prevention coalition with one employee currently serving as the Chair of the coalition's Governing Board.</i> 5. Sponsor volunteer activities during fall and spring breaks. <i>MTSU has not yet launched this activity.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of orientation sessions, # of parents attending- 8 sessions, 1,330 parents 2. % of students who completed assignment- Numbers have not yet been released from the itMatters research team 3. # of presentations, # of respondents- 1 presentation, 40 participants 4. # of PC4S meetings attended, # of activity partnerships- 0 meetings attended, 1 partnership 5. # of students participating- 0

Report Item	Item Information
<p>2nd Qtr. (Oct- Dec)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Provide parents with talking points regarding alcohol use among college students. <i>MTSU successfully completed this activity in the 1st quarter.</i> 2. Promote completion of itMatters online alcohol education curriculum by all first year students. <i>MTSU successfully completed this activity in the 1st quarter.</i> 3. Include audience response technology in all ATOD-related presentations. <i>MTSU successfully continues using Poll Everywhere to encourage audience engagement in our ATOD presentations. This quarter, our presentations were all conducted for first year students enrolled in the UNIV 1010 seminar.</i> 4. Participate with county Prevention Coalition for Success. <i>MTSU continues to partner with our local prevention coalition with one employee currently serving as the Chair of the coalition’s Governing Board. We also partnered with PC4S on National Prescription Drug Take Back Day.</i> 5. Sponsor volunteer activities during fall and spring breaks. <i>MTSU did not offer an alternative fall break this year, choosing instead to focus volunteer resources on a Habitat for Humanity build that would run for a longer period of time. There will be volunteer activities during the spring break period in the 3rd quarter.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of orientation sessions, # of parents attending- 0 sessions, 0 parents 2. % of students who completed assignment- Numbers have not yet been released from the itMatters team 3. # of presentations, # of respondents- 9 presentations, 163 respondents 4. # of PC4S meetings attended, # of activity partnerships- 1 meeting attended, 1 partnership 5. # of students participating- 0 students
<p>3rd Qtr. (Jan-Mar)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Provide parents with talking points regarding alcohol use among college students. <i>MTSU successfully completed this activity in the Fall semester.</i> 2. Promote completion of itMatters online alcohol education curriculum by all first year students. <i>MTSU successfully completed this activity in the Fall semester. We did receive a final report from the research team this quarter</i>

Report Item	Item Information
	<p><i>showing that the majority of first year freshmen did NOT consume alcohol in the 30 days prior to completing the curriculum. Approximately 40% reported <u>NEVER</u> using alcohol.</i></p> <p>3. Include audience response technology in all ATOD-related presentations. <i>MTSU successfully continues using Poll Everywhere to encourage audience engagement in our ATOD presentations. This quarter, we planned a presentation during Sexual Responsibility and Consent Week, which focused on the connections between alcohol and consent.</i></p> <p>4. Participate with county Prevention Coalition for Success. <i>MTSU continues to partner with our local prevention coalition with one employee currently serving as the Chair of the coalition’s Governing Board and one current student serving as a coalition intern.</i></p> <p>5. Sponsor volunteer activities during fall and spring breaks. <i>MTSU successfully offered volunteer spring break opportunities for students. Those participating spent four days volunteering with local food banks.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of orientation sessions, # of parents attending- 0 sessions, 0 parents 2. % of students who completed assignment- 12.3% 3. # of presentations, # of respondents- 1 presentation, 30 participants 4. # of PC4S meetings attended, # of activity partnerships- 1 meetings attended, 1 partnership 5. # of students participating- 15
<p>4th Qtr. (Apr- June)</p>	<p>Approved Implementation Activity:</p> <p>1. Provide parents with talking points regarding alcohol use among college students. <i>MTSU was unsuccessful in completing this activity in the 4th quarter. The decision was made to move all orientation programs online due to COVID-19. Parents may potentially be viewing the content with their students, but no specific parent handouts were mailed.</i></p> <p>2. Promote completion of itMatters online alcohol education curriculum by all first year students. <i>MTSU successfully completed this activity in the Fall semester. We did receive a final report from the research team in the 3rd quarter showing that the majority of first year freshmen did NOT consume alcohol in the 30 days prior to completing the curriculum. Approximately 40% reported <u>NEVER</u> using alcohol.</i></p>

Report Item	Item Information
	<p>3. Include audience response technology in all ATOD-related presentations. <i>MTSU did not conduct any ATOD presentations in the 4th quarter.</i></p> <p>4. Participate with county Prevention Coalition for Success. <i>MTSU continues to partner with our local prevention coalition with one employee currently serving as the Chair of the coalition’s Governing Board.</i></p> <p>5. Sponsor volunteer activities during fall and spring breaks. <i>MTSU successfully completed this activity in the 3rd quarter.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of orientation sessions, # of parents attending- 0 sessions, 0 parents 2. % of students who completed assignment- 12.3% 3. # of presentations, # of respondents- 0 presentations, 0 participants 4. # of PC4S meetings attended, # of activity partnerships- 2 meetings attended, 0 partnerships 5. # of students participating- 0
<p>5. Increase Barriers/ Reduce Access</p> <p>Start Date: October 2019</p> <p>Periodicity: Biannually</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Participate in national prescription drug take back events. <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of take back events, # of pounds of medication turned in
<p>1st Qtr. (July- Sept)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Participate in national prescription drug take back events. <i>MTSU has not yet launched this activity as the first national event doesn’t take place until late October.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of take back events, # of pounds of medication turned in – 0 events, 0 pounds
<p>2nd Qtr. (Oct- Dec)</p>	<p>Approved Implementation Activity:</p>

Report Item	Item Information
	<p>1. Participate in national prescription drug take back events. <i>MTSU successfully completed this activity by sponsoring a take back event on October 24, 2019.</i></p> <p>Approved Process Indicators:</p> <p>1. # of take back events, # of pounds of medication turned in- 1 event, 83 lbs of medication</p>
<p>3rd Qtr. (Jan-Mar)</p>	<p>Approved Implementation Activity:</p> <p>1. Participate in national prescription drug take back events. <i>MTSU successfully completed this activity in the second quarter, but will not be repeating it in the 4th quarter due to the cancellation of the national event for COVID-19 concerns.</i></p> <p>Approved Process Indicators:</p> <p>1. # of take back events, # of pounds of medication turned in – 0 events, 0 pounds</p>
<p>4th Qtr. (Apr- June)</p>	<p>Approved Implementation Activity:</p> <p>1. Participate in national prescription drug take back events. <i>MTSU successfully completed this activity in the second quarter, but will not be repeating it in the 4th quarter due to the cancellation of the national event for COVID-19 concerns.</i></p> <p>Approved Process Indicators:</p> <p>1. # of take back events, # of pounds of medication turned in: 0 take back events, 0 pounds of medicine</p>
<p>6.Reduce Barriers/ Increase Access</p> <p>Start Date: August 2019</p> <p>Periodicity: Ongoing on Thursday, Friday, and Saturday nights</p>	<p>Approved Implementation Activity:</p> <p>1. Sponsor student led alcohol-free activities during peak drinking times.</p> <p>Approved Process Indicators:</p> <p>1. # of MTSU After Dark activities sponsored, # of students attending</p>
<p>1st Qtr. (July- Sept)</p>	<p>Approved Implementation Activity:</p> <p>1. Sponsor student led alcohol-free activities during peak drinking times. <i>MTSU will continue to sponsor MT After Dark events; however, none of them will</i></p>

Report Item	Item Information
	<p><i>take place this quarter, as there are so many Connection Point events offering safe, social experiences for students.</i></p> <p>Approved Process Indicators:</p> <p>1. # of MTSU After Dark activities sponsored, # of students attending- 0 activities, 0 students</p>
<p>2nd Qtr. (Oct- Dec)</p>	<p>Approved Implementation Activity:</p> <p>1. Sponsor student led alcohol-free activities during peak drinking times. <i>MTSU successfully completed this activity, offering a midnight breakfast to students the day before Study Day.</i></p> <p>Approved Process Indicators:</p> <p>1. # of MTSU After Dark activities sponsored, # of students attending- 1 activity, 700 students</p>
<p>3rd Qtr. (Jan-Mar)</p>	<p>Approved Implementation Activity:</p> <p>1. Sponsor student led alcohol-free activities during peak drinking times. <i>MTSU successfully completed this activity, offering a free night of bowling and nerf games on January 30.</i></p> <p>Approved Process Indicators:</p> <p>1. # of MTSU After Dark activities sponsored, # of students attending- 1 activity, 284 students</p>
<p>4th Qtr. (Apr- June)</p>	<p>Approved Implementation Activity:</p> <p>1. Sponsor student led alcohol-free activities during peak drinking times. <i>MTSU was not able to complete this activity in the 4th quarter. The midnight movie we had planned was cancelled due to COVID-19. We look forward to resuming these activities when it is safe to do so.</i></p> <p>Approved Process Indicators:</p> <p>1. # of MTSU After Dark activities sponsored, # of students attending: 0 activities, 0 students</p>
<p>7. Changing Incentives/Consequences</p> <p>Start Date: July 2019</p>	<p>Approved Implementation Activity:</p> <p>1. Offer e-CheckUpToGo to Housing and Student Conduct administrators as possible sanction.</p> <p>2. Offer incentives to students attending promotional events such as Alcohol Awareness Week and Spring Break Safety Week.</p> <p>Approved Process Indicators:</p>

Report Item	Item Information
Periodicity: Ongoing	<ol style="list-style-type: none"> 1. # of e-CheckUps completed 2. # of activities, # of distributed incentives, # of participating students
1st Qtr. (July- Sept)	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Offer e-CheckUpToGo to Housing and Student Conduct administrators as possible sanction. <i>MTSU continues to offer e-CheckUpToGo to administrators and faculty for use as a sanction or a teaching tool. Feedback has been positive with reports that they like having the program as an option in their dealings with students.</i> 2. Offer incentives to students attending promotional events such as Alcohol Awareness Week and Spring Break Safety Week. <i>MTSU has not yet launched this activity as no awareness weeks fell in the 1st quarter.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of e-CheckUps completed- 20 2. # of activities, # of distributed incentives, # of participating students- 0 activities, 0 incentives, 0 students
2nd Qtr. (Oct- Dec)	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Offer e-CheckUpToGo to Housing and Student Conduct administrators as possible sanction. <i>MTSU continues to offer e-CheckUpToGo to administrators and faculty for use as a sanction or a teaching tool. Feedback has been positive with reports that they like having the program as an option in their dealings with students. Additionally, faculty teaching the UNIV 1010 course and HLTH 1530 course use the tool as an extra credit opportunity for students in the month of October.</i> 2. Offer incentives to students attending promotional events such as Alcohol Awareness Week and Spring Break Safety Week. <i>MTSU did not sponsor any Alcohol Awareness Week events this quarter, due to the timing of the health promotion director's return from FMLA leave. Plans will continue for a Spring Break Safety Week.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of e-CheckUps completed- 91 2. # of activities, # of distributed incentives, # of participating students- 0 activities, 0 incentives, 0 students
3rd Qtr. (Jan-Mar)	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Offer e-CheckUpToGo to Housing and Student Conduct administrators as possible sanction. <i>MTSU continues to offer e-CheckUpToGo to</i>

Report Item	Item Information
	<p><i>administrators and faculty for use as a sanction or a teaching tool. Feedback has been positive with reports that they like having the program as an option in their dealings with students. Additionally, faculty teaching the UNIV 1010 course and HLTH 1530 course use the tool as an extra credit opportunity for students when approaching Spring Break. We did not have any completions this quarter compared to last quarter, which is probably due to a combination of fewer UNIV 1010 courses meeting in the spring and the shift to remote delivery of classes throwing everyone off of their routines and plans.</i></p> <p>2. Offer incentives to students attending promotional events such as Alcohol Awareness Week and Spring Break Safety Week. <i>MTSU successfully completed a Spring Break Safety decision quest, which allowed participants the opportunity to learn potential outcomes of decisions made around spring break issues like excessive alcohol consumption and drinking and driving. We also hosted information tables with Spring Break Safety trivia the week before the break began. Students received a pair of sunglasses for attempting the trivia questions.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of e-CheckUps completed- 39 2. # of activities, # of distributed incentives, # of participating students- 3 activities, 50 incentives, 250 students
<p>4th Qtr. (Apr- June)</p>	<p>Approved Implementation Activity:</p> <p>1. Offer e-CheckUpToGo to Housing and Student Conduct administrators as possible sanction. <i>MTSU continues to offer e-CheckUpToGo to administrators and faculty for use as a sanction or a teaching tool. Feedback has been positive with reports that they like having the program as an option in their dealings with students.</i></p> <p>2. Offer incentives to students attending promotional events such as Alcohol Awareness Week and Spring Break Safety Week. <i>MTSU successfully completed this activity in a virtual format as we awarded t-shirts, hand sanitizer, and tissue packs to students selected via raffle after participating in a virtual Destress Fest event.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of e-CheckUps completed- 51 2. # of activities, # of distributed incentives, # of participating students: 1 activity, 9 distributed incentives, 34 participants

Report Item	Item Information
<p>8. Changing the Physical Design of the Environment</p> <p>Start Date: August 2019</p> <p>Periodicity: Ongoing</p>	<p>Approved Implementation Activity:</p> <p>1. Coordinate welcoming environments for safe, alcohol-free social events and recreation (ex., tailgating, BAE Watch, MTOP trips, etc.)</p> <p>Approved Process Indicators:</p> <p>1. # of events, # of attendees</p>
<p>1st Qtr. (July- Sept)</p>	<p>Approved Implementation Activity:</p> <p>1. Coordinate welcoming environments for safe, alcohol-free social events and recreation (ex., tailgating, BAE Watch, MTOP trips, etc.). <i>MTSU successfully continues to offer alcohol-free environments for students. Activities this quarter included two tailgating experiences, the BAE Watch beach party, and outdoor trips like canoeing, kayaking, and hiking. We are unsure of numbers regarding the tailgating experiences, as students do not check in at those activities; however, the attendee number provided below includes the BAE Watch beach party and 11 outdoor trips.</i></p> <p>Approved Process Indicators:</p> <p>1. # of events, # of attendees- 14 events, 906+ attendees</p>
<p>2nd Qtr. (Oct- Dec)</p>	<p>Approved Implementation Activity:</p> <p>1. Coordinate welcoming environments for safe, alcohol-free social events and recreation (ex., tailgating, BAE Watch, MTOP trips, etc.) <i>MTSU successfully continues to offer alcohol-free environments for students. Activities this quarter included a tailgating experience and outdoor trips like mountain biking, kayaking, and hiking. We are unsure of numbers regarding the tailgating experience, as students do not check in at those activities; however, the attendee number provided below includes 15 outdoor trips.</i></p> <p>Approved Process Indicators:</p> <p>1. # of events, # of attendees- 8 events, 57+ attendees</p>
<p>3rd Qtr. (Jan-Mar)</p>	<p>Approved Implementation Activity:</p> <p>1. Coordinate welcoming environments for safe, alcohol-free social events and recreation (ex., tailgating, BAE Watch, MTOP trips, etc.) <i>MTSU successfully continues to offer alcohol-free environments for students. Activities</i></p>

Report Item	Item Information
	<p><i>this quarter included a ski trip and a spring break camping/backpacking trip to Savannah, GA.</i></p> <p>Approved Process Indicators:</p> <p>1. # of events, # of attendees- 2 events, 71 attendees</p>
4 th Qtr. (Apr- June)	<p>Approved Implementation Activity:</p> <p>1. Coordinate welcoming environments for safe, alcohol-free social events and recreation (ex., tailgating, BAE Watch, MTOP trips, etc.) <i>MTSU was unable to complete this activity due to COVID-19. We look forward to resuming these social events when it is safe to do so.</i></p> <p>Approved Process Indicators:</p> <p>1. # of events, # of attendees: 0 events, 0 attendees</p>

MTSU Q4 CHASCo Prevention Plan Quarterly Report, FY2018

State of Tennessee

Division of Substance Abuse Services

CHASCo Prevention Plan Quarterly Report

FY 2018

Institution Name: MTSU

Name of Reporting Individual: Lisa Schrader

Date Report Submitted: 7/5/18

Fiscal Year: FY18

Quarterly reports are required from all funded CHASCo Prevention Plan institutions with an approved implementation plan. Reports will be submitted electronically on a quarterly basis. Quarterly reports include information required by this form.

Report Period: 1st Qtr. 2nd Qtr. 3rd Qtr. 4th Qtr.
 (July – Sept) (Oct – Dec) (Jan – Mar) (April – June)

Provide (1000 characters or less) your Plan’s major accomplishments for this quarter.

1st Qtr. (July - Sept)	MTSU began its fiscal year by providing substance abuse prevention education to incoming students and parents during orientation. We also launched our 2017 Connection Point program series, which provides alcohol-free programming to students during the first six week and had record attendance. Additionally, all student organization leaders, elected student government officials, and athletes were trained in bystander intervention.
2nd Qtr. (Oct - Dec)	Our fiscal year continued with an increase in substance abuse prevention curriculum infusion. Between the provision of training to new Greek members, the introduction of an online curriculum to all students in our first-year experience course, and classroom-based workshops, MTSU students had multiple opportunities and avenues to participate in substance abuse prevention education. Additionally, we were able to send five students to a national conference specifically for training students in peer-to-peer substance abuse prevention.
3rd Qtr. (Jan - Mar)	The third quarter of our fiscal year marked the continuation of our social norms campaign and the additional distribution of social norms calendars to campus partners. We also hosted a statewide Safety Summit to address how campuses can work with local bars to prevent the harms that can be associated with substance use. Additionally, we offered an increased amount of alcohol-free weekend programming.
4th Qtr. (April - June)	Our fiscal year ended with additional conference travel for our peer health educators to further their skills in addressing substance abuse with their peers. We revised and debuted an updated version of our health and wellness video that is shown to students during CUSTOMS orientation. We also had the highest level of attendance ever from our University at the Partners in Prevention Conference held at Lipscomb University, including representatives from Student Health Services, Counseling Services, and the June Anderson Women's Center.

Report Item	Item Information
Implementation plan <i>(Ex: Binge Drinking, Tobacco, Non-Medical Prescription Drug)</i>	Indicate the Implementation Plan for this reporting section (items 1 through 8 below): Binge Drinking
Intervening Variable <i>(Ex: Enforcement; Retail Access; Social Access; Preserved Risk; Promotion)</i>	Indicate the intervening variable for this report section (items 1 through 8 below): Easy Social Access
1. Policy, Practice, or Procedure Change Start Date: Aug 2017	Approved Implementation Activity: 1. Send letters to parents of students under 21 found responsible for alcohol policy violations 2. Offer prescription drug lock boxes to students filling new controlled prescriptions. 3. Require first year students to attend six alcohol-free social events in first six weeks of fall semester.

Report Item	Item Information
<p>Periodicity:</p> <p>Ongoing, as needed</p>	<p>Approved Process Indicators:</p> <p># of parental notifications</p> <p># of boxes distributed</p> <p># of Connection Point events offered, # of attendees</p>
<p>1st Qtr. (July- Sept)</p>	<p>Approved Implementation Activity:</p> <p>1. Send letters to parents of students under 21 found responsible for alcohol policy violations. <i>MTSU continues to implement this practice. The Office of Student Conduct provides a report of notification letters annually, typically in the summer. In the 2017 FY, 20 parental notifications were sent.</i></p> <p>2. Offer prescription drug lock boxes to students filling new controlled prescriptions. <i>MTSU has not yet completed this activity. We have waited to order the boxes to see if our county prevention coalition has funding to buy in bulk with us.</i></p> <p>3. Require first year students to attend six alcohol-free social events in first six weeks of fall semester. <i>MTSU was successful in again launching its Connection Point social programming series. Connection Point events took place from the weekend prior to classes starting through the first week in October. We have noticed dramatic increases in participation since the program was originally implemented three years ago.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of parental notifications- Unknown; Judicial Affairs provides a report of notification letters annually, typically in the summer. In the 2017 FY, 20 parental notifications were sent 2. # of boxes distributed- 0 3. # of Connection Point events offered, # of attendees- 15 events, 15,258
<p>2nd Qtr. (Oct- Dec)</p>	<p>Approved Implementation Activity:</p> <p>1. Send letters to parents of students under 21 found responsible for alcohol policy violations. <i>MTSU continues to implement this practice. The Office of Student Conduct provides a report of notification letters annually, typically in the summer. In the 2017 FY, 20 parental notifications were sent.</i></p> <p>2. Offer prescription drug lock boxes to students filling new controlled prescriptions. <i>MTSU has not yet completed this activity. We are still waiting to see if our county prevention coalition has funding to buy in bulk with us.</i></p> <p>3. Require first year students to attend six alcohol-free social events in first six weeks of fall semester. <i>MTSU successfully completed this activity in the 1st quarter. No additional activities happened in the 2nd quarter.</i></p>

Report Item	Item Information
	<p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of parental notifications- Unknown; Judicial Affairs provides a report of notification letters annually, typically in the summer. In the 2017 FY, 20 parental notifications were sent 2. # of boxes distributed- 0 3. # of Connection Point events offered, # of attendees- 0 events
<p>3rd Qtr. (Jan-Mar)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Send letters to parents of students under 21 found responsible for alcohol policy violations. <i>MTSU continues to implement this practice. The Office of Student Conduct provides a report of notification letters annually, typically in the summer. In the 2017 FY, 20 parental notifications were sent.</i> 2. Offer prescription drug lock boxes to students filling new controlled prescriptions. <i>MTSU has not yet completed this activity. We may table it until next fiscal year.</i> 3. Require first year students to attend six alcohol-free social events in first six weeks of fall semester. <i>MTSU successfully completed this activity in the 1st quarter. No additional activities happened in the 3rd quarter.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of parental notifications- Unknown; Judicial Affairs provides a report of notification letters annually, typically in the summer. In the 2017 FY, 20 parental notifications were sent 2. # of boxes distributed- 0 3. # of Connection Point events offered, # of attendees- 0 events
<p>4th Qtr. (Apr- June)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Send letters to parents of students under 21 found responsible for alcohol policy violations. <i>MTSU continues to implement this practice. The Office of Student Conduct provides a report of notification letters annually. In the 2018 FY, 20 parental notifications were sent. This number is consistent with previous years, so our trend is one of stability at this time.</i> 2. Offer prescription drug lock boxes to students filling new controlled prescriptions. <i>MTSU did not complete this activity this year. We have the opportunity to get lock boxes from a neighboring county coalition, and we opted not to purchase any until seeing what they might be able to send to us.</i> 3. Require first year students to attend six alcohol-free social events in first six weeks of fall semester. <i>MTSU successfully completed this activity in the 1st quarter. No additional activities happened in the 4th quarter.</i>

Report Item	Item Information
	<p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of parental notifications- 20 2. # of boxes distributed- 0 3. # of Connection Point events offered, # of attendees- 0 events
<p>2. Providing Information</p> <p>Start Date: July 2017</p> <p>Periodicity: Annually</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Notify campus of drug and alcohol policies. 2. Sponsor social norms campaign highlighting the number of students who don't drink or who drink in moderation. 3. Screen health and wellness video at CUSTOMS orientation events. 4. Offer "Rethinking Drinking" presentation to student groups addressing usage facts, standard drink sizes, abstinence and harm reduction <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. Date stamp of email notification 2. # of posters displayed, # of locations displaying poster(s) 3. # of screenings, # of student viewers 4. # of presentations, # of participants
<p>1st Qtr. (July- Sept)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Notify campus of drug and alcohol policies. <i>MTSU successfully completed this activity after the fall census date. All currently enrolled students and currently employed faculty and staff received an email notification of the university's drug and alcohol policies.</i> 2. Sponsor social norms campaign highlighting the number of students who don't drink or who drink in moderation. <i>MTSU was successful in distributing the first poster in its social norms series this quarter, which stated that 75% of students who don't drink alcohol in a typical week maintain a B average or higher.</i> 3. Screen health and wellness video at CUSTOMS orientation events. <i>MTSU successfully completed this activity by screening our health and wellness videos at the three orientation events that took place during this quarter.</i> 4. Offer "Rethinking Drinking" presentation to student groups addressing usage facts, standard drink sizes, abstinence and harm reduction. <i>MTSU was successful in launching this activity by presenting to an audience of first year student athletes. We anticipate additional presentation requests will follow as the academic year progresses.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. Date stamp of email notification- Distributed 09/25/17

Report Item	Item Information
	<ol style="list-style-type: none"> 2. # of posters displayed, # of locations displaying poster(s)- 150 posters in 24 buildings 3. # of screenings, # of student viewers- 3 screenings for 1,258 student viewers 4. # of presentations, # of participants- 1 presentation for 17 participants
2nd Qtr. (Oct- Dec)	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Notify campus of drug and alcohol policies. <i>MTSU successfully completed this activity in the first quarter.</i> 2. Sponsor social norms campaign highlighting the number of students who don't drink or who drink in moderation. <i>MTSU was successful in distributing the second poster in its social norms series this quarter, which stated that 76% of MTSU students consume 2 or fewer alcoholic drinks in a typical week.</i> 3. Screen health and wellness video at CUSTOMS orientation events. <i>MTSU successfully completed this activity by during the first quarter.</i> 4. Offer "Rethinking Drinking" presentation to student groups addressing usage facts, standard drink sizes, abstinence and harm reduction. <i>MTSU successfully continued this activity by presenting to an audience of new fraternity and sorority members.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. Date stamp of email notification- Distributed 09/25/17 2. # of posters displayed, # of locations displaying poster(s)- 150 posters in 24 buildings 3. # of screenings, # of student viewers- 0 screenings 4. # of presentations, # of participants- 1 presentation for 300 participants
3rd Qtr. (Jan-Mar)	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Notify campus of drug and alcohol policies. <i>MTSU successfully completed this activity on February 7, 2018, when all students and employees were sent the policy through university email.</i> 2. Sponsor social norms campaign highlighting the number of students who don't drink or who drink in moderation. <i>MTSU was successful in distributing the third poster in its social norms series this quarter, which stated that 80% of MTSU students have never driven a car after drinking. We also distributed 500 calendars featuring a different social norms message each month to offices across campus where students are likely to be seen (i.e., academic advisors' offices, financial aid, etc.). We continue to get comments from those employees about how the students read the calendar messages and ask questions about them.</i>

Report Item	Item Information
	<p>3. Screen health and wellness video at CUSTOMS orientation events. <i>MTSU successfully completed this activity during the first quarter and began working on an updated video for CUSTOMS events scheduled this summer.</i></p> <p>4. Offer “Rethinking Drinking” presentation to student groups addressing usage facts, standard drink sizes, abstinence and harm reduction. <i>No additional “Rethinking Drinking” presentations were offered during the 3rd quarter, although MTSU staff did facilitate an alcohol safety workshop to students, staff, and community members attending a statewide Safety Summit on March 22.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. Date stamp of email notification- Distributed 2/7/18 2. # of posters displayed, # of locations displaying poster(s)- 150 posters in 24 buildings 3. # of screenings, # of student viewers- 0 screenings 4. # of presentations, # of participants- 1 presentation for 40 participants
<p>4th Qtr. (Apr- June)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Notify campus of drug and alcohol policies. <i>MTSU successfully completed this activity in the first and third quarters.</i> 2. Sponsor social norms campaign highlighting the number of students who don't drink or who drink in moderation. <i>MTSU successfully completed this activity in the previous quarters, and most of our previously distributed posters are still on display across campus.</i> 3. Screen health and wellness video at CUSTOMS orientation events. <i>MTSU successfully completed this activity during the first quarter and completed and debuted our video revision for use in CUSTOMS orientations during the 4th quarter.</i> 4. Offer “Rethinking Drinking” presentation to student groups addressing usage facts, standard drink sizes, abstinence and harm reduction. <i>While we did not offer any of these presentations during the fourth quarter, we successfully conducted this activity in all previous quarters.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. Date stamp of email notification- Distributed 02/07/18 2. # of posters displayed, # of locations displaying poster(s)- 0 new posters in 24 buildings 3. # of screenings, # of student viewers- 12 screenings, 3100 student viewers 4. # of presentations, # of participants- 0 presentations, 0 participants

Report Item	Item Information
<p>3. Building Skills</p> <p>Start Date: July 2017</p> <p>Periodicity:</p> <p>Ongoing</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Send Raider Health Corps (peer health educators) officers and other active members to BACCHUS trainings. 2. Attend and invite campus colleagues to CHASCo meetings, webinars, events, and conferences. 3. Participate with county Prevention Coalition for Success. <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of trainings, # of attending peer educators 2. # of CHASCo activities, # of invitations extended, # of attending colleagues 3. # of PC4S meetings attended, # of activity partnerships
<p>1st Qtr. (July- Sept)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Send Raider Health Corps (peer health educators) officers and other active members to BACCHUS trainings. <i>MTSU has not yet completed this activity, as the BACCHUS training takes place during the second quarter.</i> 2. Attend and invite campus colleagues to CHASCo meetings, webinars, events, and conferences. <i>MTSU has been successful in this activity. Invitations were extended and accepted for the September CHASCo business meeting which covered the connection between substance use and suicide.</i> 3. Participate with county Prevention Coalition for Success. <i>MTSU continues to participate with the county prevention coalition. One of the coalition's board members is an MTSU employee, and the CHASCo liaison for MTSU also attends the monthly membership meetings when possible.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of trainings, # of attending peer educators- 0 2. # of CHASCo activities, # of invitations extended, # of attending colleagues- 1 meeting, 2 invitations extended (Housing and Counseling), 2 colleagues attended 3. # of PC4S meetings attended, # of activity partnerships- 2 meetings attended, 0 current partnerships
<p>2nd Qtr. (Oct- Dec)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Send Raider Health Corps (peer health educators) officers and other active members to BACCHUS trainings. <i>MTSU was successful in completing this</i>

Report Item	Item Information
	<p><i>activity by sending five Raider Health Corps members to the BACCHUS Initiatives of NASPA General Assembly held in Denver, CO, November 16th-20th.</i></p> <p>2. Attend and invite campus colleagues to CHASCo meetings, webinars, events, and conferences. <i>MTSU has been successful in this activity. Invitations were extended and accepted for the November CHASCo business meeting which covered best practices for completing a biennial review.</i></p> <p>3. Participate with county Prevention Coalition for Success. <i>MTSU continues to participate with the county prevention coalition. One of the coalition’s board members is an MTSU employee, and the CHASCo liaison for MTSU also attends the monthly membership meetings when possible. Additionally, we partnered together to sponsor a drug take back event on campus in conjunction with the National Prescription Drug Take Back event. 77 pounds of medication were collected at our campus event.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of trainings, # of attending peer educators- 1, 5 peer educators 2. # of CHASCo activities, # of invitations extended, # of attending colleagues- 1 meeting, 3 invitations extended (University Counsel, Institutional Compliance and Equity, University Police), 2 colleagues attended 3. # of PC4S meetings attended, # of activity partnerships- 1 meetings attended, 1 current partnerships
<p>3rd Qtr. (Jan-Mar)</p>	<p>Approved Implementation Activity:</p> <p>1. Send Raider Health Corps (peer health educators) officers and other active members to BACCHUS trainings. <i>MTSU was successful in completing this activity in the 2nd quarter.</i></p> <p>2. Attend and invite campus colleagues to CHASCo meetings, webinars, events, and conferences. <i>MTSU has been successful in this activity. Invitations were extended and accepted for the February CHASCo business meeting which covered ways to partner with community business owners to prevent alcohol-related sexual violence.</i></p> <p>3. Participate with county Prevention Coalition for Success. <i>MTSU continues to participate with the county prevention coalition. One of the coalition’s advisory board members is an MTSU employee, and the CHASCo liaison for MTSU also serves on the governing board. The governing board meeting for the 3rd quarter was cancelled by the coalition staff. There were also no events or programs this quarter which were jointly sponsored.</i></p> <p>Approved Process Indicators:</p>

Report Item	Item Information
	<ol style="list-style-type: none"> 1. # of trainings, # of attending peer educators- 0 trainings 2. # of CHASCo activities, # of invitations extended, # of attending colleagues- 1 meeting, 3 invitations extended (University Counsel, Institutional Compliance and Equity, Housing and Residence Life), 2 colleagues attended 3. # of PC4S meetings attended, # of activity partnerships- 0 meetings attended, 0 current partnerships
<p>4th Qtr. (Apr- June)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Send Raider Health Corps (peer health educators) officers and other active members to BACCHUS trainings. <i>MTSU was successful in completing this activity by sending three Raider Health Corps members to the BACCHUS Initiatives of NASPA Region III Conference held in Richmond, VA, April 13th-15th.</i> 2. Attend and invite campus colleagues to CHASCo meetings, webinars, events, and conferences. <i>MTSU has been successful in this activity. Invitations were extended and accepted for the April CHASCo business meeting, which was a webinar about marijuana trends, and to the May Partners in Prevention conference, held at Lipscomb University May 23rd-24th.</i> 3. Participate with county Prevention Coalition for Success. <i>MTSU continues to participate with the county prevention coalition. One of the coalition's board members is an MTSU employee, and the CHASCo liaison for MTSU also attends the monthly membership meetings when possible. During the June meeting, the CHASCo liaison conducted the Community Partner Presentation highlighting prevention efforts at MTSU.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of trainings, # of attending peer educators- 1, 3 peer educators 2. # of CHASCo activities, # of invitations extended, # of attending colleagues- 2 meetings, 3 invitations extended (Housing, Counseling Services, Women's Center), 8 colleagues attended 3. # of PC4S meetings attended, # of activity partnerships- 1 meetings attended, 1 current partnership
<p>4. Providing Support</p> <p>Start Date: July 2017</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Provide parents with talking points regarding alcohol use among college students. 2. Require completion of itMatters online alcohol education curriculum by all students enrolled in UNIV 1010. 3. Include audience response technology in all ATOD-related presentations. <p>Approved Process Indicators:</p>

Report Item	Item Information
<p>Periodicity:</p> <p>Ongoing</p>	<ol style="list-style-type: none"> 1. # of orientation sessions, # of parents attending 2. # of students who completed assignment 3. # of presentations, # of respondents
<p>1st Qtr. (July- Sept)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Provide parents with talking points regarding alcohol use among college students. <i>MTSU successfully completed this activity by providing a handout to all parents attending our July orientation sessions. This handout was distributed at the end of a presentation on transition issues, including substance use, that was facilitated for parents by our Dean of Students.</i> 2. Require completion of itMatters online alcohol education curriculum by all students enrolled in UNIV 1010. <i>This activity opened up for student participation in September, but it will not conclude until Oct. 8. Process indicators will be provided in the 2nd quarter report.</i> 3. Include audience response technology in all ATOD-related presentations. <i>MTSU continues to be successful in the implementation of real time audience response technology in its ATOD presentations. This technology is very persuasive in showing students that they often over-perceive the use of substances by their college peers.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of orientation sessions, # of parents attending- 3 sessions, 1171 attending parents 2. # of students who completed assignment- to be determined in 2nd quarter 3. # of presentations, # of respondents- 3 presentations, 302 respondents
<p>2nd Qtr. (Oct- Dec)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Provide parents with talking points regarding alcohol use among college students. <i>MTSU successfully completed this activity in the first quarter.</i> 2. Require completion of itMatters online alcohol education curriculum by all students enrolled in UNIV 1010. <i>MTSU successfully launched this activity September, and it concluded November 22 (the initial deadline was extended to allow for more participation).</i> 3. Include audience response technology in all ATOD-related presentations. <i>MTSU continues to be successful in the implementation of real time audience response technology in its ATOD presentations. This technology is very persuasive in showing students that they often over-perceive the use of substances by their college peers.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of orientation sessions, # of parents attending- 0 sessions 2. # of students who completed assignment- 592 3. # of presentations, # of respondents- 7 presentations, 133 respondents

Report Item	Item Information
<p>3rd Qtr. (Jan-Mar)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Provide parents with talking points regarding alcohol use among college students. <i>MTSU successfully completed this activity in the first quarter.</i> 2. Require completion of itMatters online alcohol education curriculum by all students enrolled in UNIV 1010. <i>MTSU successfully launched this activity September, and it concluded November 22 (the initial deadline was extended to allow for more participation).</i> 3. Include audience response technology in all ATOD-related presentations. <i>MTSU continues to be successful in the implementation of real time audience response technology in its ATOD presentations. This technology is very persuasive in showing students that they often over-perceive the use of substances by their college peers.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of orientation sessions, # of parents attending- 0 sessions 2. # of students who completed assignment- 0 3. # of presentations, # of respondents- 2 presentations, 28 respondents
<p>4th Qtr. (Apr- June)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Provide parents with talking points regarding alcohol use among college students. <i>MTSU successfully completed this activity by providing a handout to all parents attending our 4th quarter orientation sessions. This handout was distributed at the end of a presentation on transition issues, including substance use, which was facilitated for parents by our Dean of Students.</i> 2. Require completion of itMatters online alcohol education curriculum by all students enrolled in UNIV 1010. <i>MTSU successfully completed this activity in the 2nd quarter.</i> 3. Include audience response technology in all ATOD-related presentations. <i>MTSU continues to be successful in the implementation of real time audience response technology in its ATOD presentations. This technology is very persuasive in showing students that they often over-perceive the use of substances by their college peers.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of orientation sessions, # of parents attending- 12 sessions, 2747 attending parents 2. % of students who completed assignment- 0 3. # of presentations, # of respondents- 1 presentation, 15 respondents

Report Item	Item Information
<p>5. Increase Barriers/Reduce Access</p> <p>Start Date: July 2017</p> <p>Periodicity: Daily</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Train student organization leaders in risk management and bystander intervention. 2. Increase campus police patrols in near-campus apartment complexes. <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of presentations, # of participants, # of represented organizations 2. Summary description of efforts to limit consequences of substance abuse
<p>1st Qtr. (July- Sept)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Train student organization leaders in risk management and bystander intervention. <i>MTSU successfully launched this activity by facilitating a training for all newly elected student organization presidents during their annual leadership retreat. Additionally, all Student Government Association (SGA) members received bystander intervention training, and all fall sport athletes were trained prior to beginning team practices.</i> 2. Increase campus police patrols in near-campus apartment complexes. <i>MTSU began work on this activity by entering into a formal Memorandum of Understanding with the City of Murfreesboro Police Department. This agreement will allow University Police to engage in prevention programming in off-campus apartment complexes that are located in close proximity to campus and that cater to college students. The MOU also paves the way for a formalized apartment complex safety program to be facilitated jointly by Murfreesboro Police and University Police.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of presentations, # of participants, # of represented organizations- 18 presentations, 1,304 participants, 101 represented organizations 2. Summary description of efforts to limit consequences of substance abuse- see above description
<p>2nd Qtr. (Oct- Dec)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Train student organization leaders in risk management and bystander intervention. <i>The report organizer feels confident that this activity continued into the second quarter. However, the coordinator of the bystander intervention trainings has been out of town and has not responded to requests for information. When additional information becomes available, I will update this section for the 3rd quarter's report.</i>

Report Item	Item Information
	<p>2. Increase campus police patrols in near-campus apartment complexes. <i>MTSU continued its formal Memorandum of Understanding with the City of Murfreesboro Police Department into the second quarter. This agreement will allow University Police to engage in prevention programming in off-campus apartment complexes that are located in close proximity to campus and that cater to college students. The MOU also paves the way for a formalized apartment complex safety program to be facilitated jointly by Murfreesboro Police and University Police.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of presentations, # of participants, # of represented organizations- unknown at this time 2. Summary description of efforts to limit consequences of substance abuse- see above description
<p>3rd Qtr. (Jan-Mar)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Train student organization leaders in risk management and bystander intervention. <i>MTSU successfully trained more student leaders by facilitating additional “Power of One” workshops. These workshops were open to the campus at large, rather than being sponsored by specific student organizations or departments. We were also given information regarding the number of trainings and number of participants to include the missing 2nd quarter process indicators.</i> 2. Increase campus police patrols in near-campus apartment complexes. <i>MTSU continued its participation in the formal Memorandum of Understanding with the City of Murfreesboro Police Department. This agreement will allow University Police to engage in prevention programming in off-campus apartment complexes that are located in close proximity to campus and that cater to college students. The MOU also paves the way for a formalized apartment complex safety program to be facilitated jointly by Murfreesboro Police and University Police.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of presentations, # of participants, # of represented organizations- (since October 1) 22 trainings, 736 participants, unknown number of organizations 2. Summary description of efforts to limit consequences of substance abuse- see above description
<p>4th Qtr. (Apr- June)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Train student organization leaders in risk management and bystander intervention. <i>MTSU successfully completed this activity in the first three quarters of the fiscal year. No additional trainings were scheduled during the fourth quarter.</i> 2. Increase campus police patrols in near-campus apartment complexes. <i>MTSU continued its participation in the formal Memorandum of Understanding with the City of Murfreesboro Police Department. This agreement will allow University</i>

Report Item	Item Information
	<p><i>Police to engage in prevention programming in off-campus apartment complexes that are located in close proximity to campus and that cater to college students. The MOU also paves the way for a formalized apartment complex safety program to be facilitated jointly by Murfreesboro Police and University Police.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of presentations, # of participants, # of represented organizations- 0 presentations, 0 participants 2. Summary description of efforts to limit consequences of substance abuse- Although direct cause and effect are hard to measure, there have been fewer violent incidents at the near-campus apartments since the MOU was formalized last summer.
<p>6.Reduce Barriers/ Increase Access</p> <p>Start Date: August 2017</p> <p>Periodicity: Annually</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Sponsor student led alcohol-free activities during peak drinking times. 2. Sponsor volunteer activities during fall and spring breaks. <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of MTSU After Dark activities sponsored, # of students attending 2. # of students participating
<p>1st Qtr. (July- Sept)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Sponsor student led alcohol-free activities during peak drinking times. <i>MTSU has not yet offered any MTSU After Dark activities due to the large number of Connection Point activities on the calendar. We anticipate rolling out more of these as the Connection Point activities cease and the academic year continues.</i> 2. Sponsor volunteer activities during fall and spring breaks. <i>MTSU has not yet implemented this activity as neither of these breaks take place during the 1st quarter.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of MTSU After Dark activities sponsored, # of students attending- 0 2. # of students participating- 0
<p>2nd Qtr. (Oct- Dec)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Sponsor student led alcohol-free activities during peak drinking times. <i>MTSU Student Programming and Raider Entertainment (SPARE) sponsored an MTSU After Dark event on December 7 called Exam Jam. The event included a midnight breakfast buffet, photo booth, and DJ.</i>

Report Item	Item Information
	<p>2. Sponsor volunteer activities during fall and spring breaks. <i>MTSU opted to offer a Habitat for Humanity build in lieu of an alternative fall break this year.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of MTSU After Dark activities sponsored, # of students attending- 1 MTSU After Dark activity; 1,227 students attending 2. # of students participating- 0
<p>3rd Qtr. (Jan-Mar)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Sponsor student led alcohol-free activities during peak drinking times. <i>MTSU Student Programming and Raider Entertainment (SPARE) sponsored two MTSU After Dark events in January and in March. The January event provided free bowling, laser tag, and arcade games during late night hours, and the March event offered students their choice of free midnight movies at a local movie theater.</i> 2. Sponsor volunteer activities during fall and spring breaks. <i>MTSU successfully completed this activity by offering alternative spring break activities each day during spring break. These activities included volunteering at a local Head Start, assisting with a Habitat for Humanity build, and sorting food at two food pantries.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of MTSU After Dark activities sponsored, # of students attending- 2 MTSU After Dark activities; 1,013 students attending 2. # of students participating- 15
<p>4th Qtr. (Apr- June)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Sponsor student led alcohol-free activities during peak drinking times. <i>MTSU Student Programming and Raider Entertainment (SPARE) sponsored an MTSU After Dark event on April 26 called Exam Jam. The event included a midnight breakfast buffet, photo booth, and DJ.</i> 2. Sponsor volunteer activities during fall and spring breaks. <i>MTSU successfully completed this activity in the second and third quarters.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of MTSU After Dark activities sponsored, # of students attending- 1 MTSU After Dark activity; 849 students attending 2. # of students participating- 0

Report Item	Item Information
<p>7. Changing Incentives/Consequences</p> <p>Start Date: Aug. 2017</p> <p>Periodicity: Ongoing</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Offer e-CheckUpToGo to Housing and Student Conduct administrators as possible sanction. 2. Assess fines to students found responsible for alcohol policy violations. 3. Offer incentives to students attending promotional events such as Alcohol Awareness Week and Spring Break Safety Week. <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of e-CheckUps completed 2. # of fines assessed 3. # of activities, # of distributed incentives, # of participating students
<p>1st Qtr. (July- Sept)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Offer e-CheckUpToGo to Housing and Student Conduct administrators as possible sanction. <i>MTSU continues to implement this activity as an educational sanction. There is a lower number of e-CheckUp users in the 1st quarter than will likely be seen in other quarters due to low headcount in the summer term months of July and August.</i> 2. Assess fines to students found responsible for alcohol policy violations. <i>MTSU continues to use fines as an alcohol policy violation sanction. The exact number for this quarter is unknown, as the Office of Student Conduct only provides that information to the CHASCo liaison on an annual basis. In the 2017 FY, however, there were 25 students who were sanctioned with a \$40 fine.</i> 3. Offer incentives to students attending promotional events such as Alcohol Awareness Week and Spring Break Safety Week. <i>MTSU has not yet implemented this activity as neither awareness week occurred during the first quarter.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of e-CheckUps completed- 13 2. # of fines assessed- 40 in FY 2017 3. # of activities, # of distributed incentives, # of participating students- 0
<p>2nd Qtr. (Oct- Dec)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Offer e-CheckUpToGo to Housing and Student Conduct administrators as possible sanction. <i>MTSU continues to implement this activity as an educational sanction. We had a higher usage of this activity in the second quarter, in part due to its promotion during Alcohol Awareness Week.</i>

Report Item	Item Information
	<p>2. Assess fines to students found responsible for alcohol policy violations. <i>MTSU continues to use fines as an alcohol policy violation sanction. The exact number for this quarter is unknown, as the Office of Student Conduct only provides that information to the CHASCo liaison on an annual basis. In the 2017 FY, however, there were 25 students who were sanctioned with a \$40 fine.</i></p> <p>3. Offer incentives to students attending promotional events such as Alcohol Awareness Week and Spring Break Safety Week. <i>MTSU successfully implemented multiple activities for Alcohol Awareness Week. These activities included a “Think Before You Drink” panel program, and four days of game-based tabling activities in our student union.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of e-CheckUps completed- 77 2. # of fines assessed- unknown 3. # of activities, # of distributed incentives, # of participating students- 5 activities, 123 incentives, 123 participants
<p>3rd Qtr. (Jan-Mar)</p>	<p>Approved Implementation Activity:</p> <p>1. Offer e-CheckUpToGo to Housing and Student Conduct administrators as possible sanction. <i>MTSU continues to implement this activity as an educational sanction. We had a surge of completions prior to spring break from the University Seminar courses, but there are fewer sections of that course in the spring semester compared to fall, and our number of completions is consequently less than 2nd quarter.</i></p> <p>2. Assess fines to students found responsible for alcohol policy violations. <i>MTSU continues to use fines as an alcohol policy violation sanction. The exact number for this quarter is unknown, as the Office of Student Conduct only provides that information to the CHASCo liaison on an annual basis. In the 2017 FY, however, there were 25 students who were sanctioned with a \$40 fine.</i></p> <p>3. Offer incentives to students attending promotional events such as Alcohol Awareness Week and Spring Break Safety Week. <i>Unlike in previous years, we did not complete any activities for Spring Break Safety Week. Due to a decreased involvement from our student volunteers and ongoing challenges with our IRB for Core Survey approval, we elected to prioritize our staff time in other ways. We do hope to resume the Spring Break Safety Week in 2019.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of e-CheckUps completed- 40 2. # of fines assessed- unknown 3. # of activities, # of distributed incentives, # of participating students- 0 activities

Report Item	Item Information
<p>4th Qtr. (Apr- June)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Offer e-CheckUpToGo to Housing and Student Conduct administrators as possible sanction. <i>MTSU continues to implement this activity as an educational sanction. There is a lower number of e-CheckUp users in the 4th quarter than will likely be seen in other quarters due to low headcount in the summer term months of May and June.</i> 2. Assess fines to students found responsible for alcohol policy violations. <i>MTSU has discontinued the use of fines as an alcohol policy violation sanction. The fine was applied at the time of an educational sanction conducted by a community organization, and that partnership fell through before the academic year began.</i> 3. Offer incentives to students attending promotional events such as Alcohol Awareness Week and Spring Break Safety Week. <i>MTSU successfully completed this activity in the 2nd quarter.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of e-CheckUps completed- 22 2. # of fines assessed- 0 3. # of activities, # of distributed incentives, # of participating students- 0
<p>8. Changing the Physical Design of the Environment</p> <p>Start Date: Aug. 2017</p> <p>Periodicity: Ongoing</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Coordinate welcoming environments for safe, alcohol-free social events and recreation (ex., tailgating, BAE Watch, MTOP trips, etc.) 2. Monitor and remove advertisements for off-campus parties and alcohol drink specials. <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of events, # of attendees 2. # of ads removed
<p>1st Qtr. (July- Sept)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Coordinate welcoming environments for safe, alcohol-free social events and recreation (ex., tailgating, BAE Watch, MTOP trips, etc.). <i>MTSU successfully launched this activity by offering alcohol-free tailgating areas at all home football games; however, an accurate headcount is unknown at this time because there was not process in place to have students sign in or out of those areas. Additionally, all student organization-sponsored social events on campus are alcohol-free. The exact number of those activities is unknown at this time.</i>

Report Item	Item Information
	<p>2. Monitor and remove advertisements for off-campus parties and alcohol drink specials. <i>MTSU continues to monitor and remove inappropriate advertisements that run contrary to our prevention plan. This quarter, the CHASCo liaison was notified of one advertisement series that was reported and removed from all known locations. This indicator does not include single ads that may have been removed by campus employees who did not notify the Health Promotion office of the removal.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of events, # of attendees- 2 home football games, unknown number of student organization social events and unknown number of attendees 2. # of ads removed- 1
<p>2nd Qtr. (Oct- Dec)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Coordinate welcoming environments for safe, alcohol-free social events and recreation (ex., tailgating, BAE Watch, MTOP trips, etc.). <i>MTSU successfully launched this activity by offering alcohol-free tailgating areas at all home football games; however, an accurate headcount is unknown at this time because there was not process in place to have students sign in or out of those areas. Additionally, all student organization-sponsored social events on campus are alcohol-free. The exact number of those activities is unknown at this time.</i> 2. Monitor and remove advertisements for off-campus parties and alcohol drink specials. <i>MTSU continues to monitor and remove inappropriate advertisements that run contrary to our prevention plan. This quarter, the CHASCo liaison was not notified of any advertisements removed. This indicator does not include ads that may have been removed by campus employees who did not notify the Health Promotion office of the removal.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of events, # of attendees- 4 home football games, unknown number of student organization social events and unknown number of attendees 2. # of ads removed- 0
<p>3rd Qtr. (Jan-Mar)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Coordinate welcoming environments for safe, alcohol-free social events and recreation (ex., tailgating, BAE Watch, MTOP trips, etc.). <i>MTSU continued to successfully offer alcohol-free social activities. Now that football season has concluded, there were no tailgating events. However, we offered 7 alcohol-free trips through our Outdoor Pursuits (MTOP) office, including hiking, caving, biking, and rock climbing, as well as 9 campus social events, including Relay for Life and "MT's Next Top Raider" talent contest.</i> 2. Monitor and remove advertisements for off-campus parties and alcohol drink specials. <i>MTSU continues to monitor and remove inappropriate advertisements that run contrary to our prevention plan. This quarter, the CHASCo liaison was not notified of any advertisements removed. This indicator does not include ads</i>

Report Item	Item Information
	<p><i>that may have been removed by campus employees who did not notify the Health Promotion office of the removal.</i></p> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of events, # of attendees- 16 alcohol-free social events/activities, 1683 attendees 2. # of ads removed- 0
<p>4th Qtr. (Apr- June)</p>	<p>Approved Implementation Activity:</p> <ol style="list-style-type: none"> 1. Coordinate welcoming environments for safe, alcohol-free social events and recreation (ex., tailgating, BAE Watch, MTOP trips, etc.). <i>MTSU continued to successfully offer alcohol-free social activities. We offered 2 alcohol-free trips through our Outdoor Pursuits (MTOP) office, as well as 4 campus social events.</i> 2. Monitor and remove advertisements for off-campus parties and alcohol drink specials. <i>MTSU continues to monitor and remove inappropriate advertisements that run contrary to our prevention plan. This quarter, the CHASCo liaison was not notified of any advertisements removed. This indicator does not include ads that may have been removed by campus employees who did not notify the Health Promotion office of the removal.</i> <p>Approved Process Indicators:</p> <ol style="list-style-type: none"> 1. # of events, # of attendees- 6 alcohol-free social events/activities, 572 attendees 2. # of ads removed- 0

Appendix E – Request for Exemption to Tobacco-Free Campus Policy Form

REQUEST FOR EXCEPTION TO ALLOW USE OF TOBACCO ON MTSU PROPERTY

Requesting Individual (name, address, M-number, phone number):	Requesting Department:
Detailed description of proposed activity:	
Description of requested location:	
Age and number of expected participants:	
Anticipated safety measures/protection from secondary effects of tobacco use:	

Applicant

Date

CONCUR:

Print name:
Campus Planning

Date

Print name:
Environmental Health and Safety Services

Date

APPROVED:

Provost or Vice President as applicable

Date

**Appendix F – MTSU Annual
Higher Education Opportunity Act Notifications**

Higher Education Opportunity Act Notification #1

Any student who is convicted of any offense under any Federal or State law involving the possession or sale of a controlled substance while enrolled in an institution of higher education and receiving any federal financial aid (such as a grant, loan or work assistance) may lose his/her eligibility for such federal assistance.

The following information is located on the [MTSU Financial Aid Policies and Procedures website](#).

Drug Convictions

Students convicted of a federal or state offense of selling or possessing illegal drugs may not be eligible for federal student aid (grants, loans, and work-study). Students who answer “Yes” to question 23 on the FAFSA will be required to answer additional questions on the FAFSA to determine if the conviction affects eligibility for aid. Also, if the Financial Aid Office is notified that a student has been convicted of possession or sale of illegal drugs during the academic year, all federal student aid will be suspended immediately.

Convictions only count if they were for an offense that occurred during a period of enrollment for which the student was receiving federal student aid. Also, a conviction that was reversed, set aside, or removed from the student’s record does not count.

The chart below illustrates the period of ineligibility for federal student aid funds, depending on whether the conviction was for sale or possession and whether the student had previous offenses. (A conviction for sale of drugs includes convictions for conspiring to sell drugs.)

	Possession of illegal drugs	Sale of illegal drugs
1st offense	1 year from date of conviction	2 years from date of conviction
2nd offense	2 years from date of conviction	Indefinite period
3+ offenses	Indefinite period	

Students regain eligibility the day after the period of ineligibility ends or when they successfully complete a qualified drug rehabilitation program. Further drug convictions will make them ineligible again. Students denied eligibility for an indefinite period can regain it only after successfully completing a rehabilitation program or if a conviction is reversed, set aside, or removed from the student’s record so that fewer than two convictions for sale or three convictions for possession remain on the record. In such cases, the nature and dates of the remaining convictions will determine when the student regains eligibility.

It is the student's responsibility to certify to the Financial Aid Office the date of the conviction and if (s)he has completed a drug rehabilitation program.

Higher Education Opportunity Act Notification #2

Information concerning drug and alcohol use and abuse; legal sanctions; health risks; available resources; disciplinary sanctions for violations may be found at:

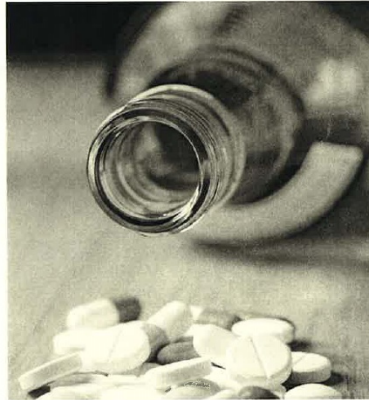
<http://www.mtsu.edu/student-conduct/drug.php>

Contact information:

Mr. Rick Chapman, Director, Student Health Services

(615)898-2988, richard.chapman@mtsu.edu

**MIDDLE
TENNESSEE**
STATE UNIVERSITY.



**Drugs and Alcohol
Don't Work at MTSU**

Middle Tennessee State University prohibits the possession, use, or distribution of illegal drugs and alcohol on the campus proper or on institutionally owned, leased, or otherwise controlled property.

Various federal and state statutes make it unlawful to manufacture, distribute, dispense, deliver, sell or possess with intent to manufacture, distribute, dispense, deliver, or sell controlled substances. The penalty imposed depends upon many factors, which include the type and amount of controlled substance involved, the number of prior offenses, if any, and whether any other crimes were committed in connection with the use of the controlled substance. Possible sanctions include incarceration up to and including life imprisonment and imposition of substantial monetary fines.

Tennessee statutes make it unlawful for any person under the age of 21 to buy, possess, transport (unless in the course of his or her employment), or consume alcoholic beverages, wine, or beer. Any violation of this law results in an offense classified as a Class A misdemeanor punishable by imprisonment for not more than 11 months and 29 days or by a fine of not more than \$2,500, or both. The receipt, possession, or transportation of alcoholic beverages without the required revenue stamp is also a misdemeanor punishable by imprisonment of not more than 30 days or a fine of not more than \$50, or both.

I AM *true* **BLUE**

0017-0340 Middle Tennessee State University does not discriminate against students, employees, or applicants for admission or employment on the basis of race, color, sex, religion, national origin, age, marital status, sexual orientation, gender identity/expression, disability age status as a protected person's genetic information, or any other legally protected characteristics except in its employment, programs, and activities sponsored by MTSU. The Director of the President's Office and Compliance has been designated to handle inquiries regarding the non-discrimination policies and can be reached at: Compliance Building #26, 1301 East Main Street, Murfreesboro, TN 37132, (615) 898-3900 ext. 2600, or 615-898-2745. The MTSU policy on non-discrimination can be found at www.mtsu.edu/afis.

**The Drug-Free Schools and Communities Act
and the Drug-Free Workplace Act of 1988**
Human Resource Services
Middle Tennessee State University

The use of alcohol can lead to serious health risks.

- Loss of muscle control, poor coordination, slurred speech
- Fatigue, nausea, headache
- Increased likelihood of accidents
- Impaired judgment
- Possible respiratory paralysis and death
- Birth defects/fetal impairment

Heavy drinking can lead to

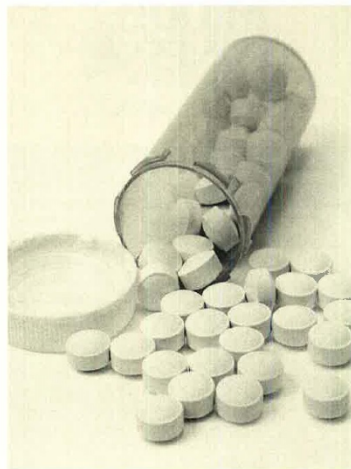
- alcoholism;
- damage to brain cells;
- increased risk of cirrhosis, ulcers, heart disease, and heart attack and cancers of the liver, mouth, throat, and stomach;
- hallucinations; and
- personality disorders.

Health risks associated with the use of illegal drugs include

- increased susceptibility to disease due to a less-efficient immune system;
- increased likelihood of accidents;
- personality disorders;
- addiction;
- death by overdose;
- anemia;
- poor concentration; and
- fetal impairment/addiction.

Additional information about how the use of drugs and/or alcohol affects your health is available through the Health Promotion office of Student Health Services in the Health, Wellness, and Recreation Center.

Middle Tennessee State University does not currently provide drug/alcohol counseling, treatment, or rehabilitation programs for



students. Referral to community treatment facilities may be made in appropriate cases.

MTSU regular employees with full benefits have available to them the statewide Employee Assistance Program, which provides confidential assistance for assessment and short-term counseling. Up to five visits are provided free of charge. Treatment for chemical dependencies on both an inpatient and outpatient basis are generally covered expenses under the state group health insurance plan. Please refer to your health insurance brochures for specific coverages and limitations. Referral to community treatment

facilities may be made by the MTSU Human Resource Services office if assistance is desired.

Middle Tennessee State University will impose sanctions against individuals who have violated rules prohibiting the use, possession, or distribution of illegal drugs or alcohol.

Sanctions for students using or possessing illegal drugs or alcohol include disciplinary probation and, in appropriate cases, suspension from the University. Residence hall students who violate these rules will be removed from the housing system. Referral for criminal prosecution may be made in appropriate cases.

Individuals involved in the sale or distribution of illegal drugs or alcohol will be suspended from the University and referred to the appropriate authorities for criminal prosecution.

All employees, including student employees, agree as a condition of employment to abide by this policy. Sanctions against employees for use or possession of illegal drugs or alcohol in the workplace include termination of employment by means of the termination procedures available by contract and/or in policy. Additionally, employees are required to notify the institution of any drug convictions no later than five days after the conviction.

MTSU provides this information as a service to the campus community in compliance with the Drug-Free Schools and Communities Act and the Drug-Free Workplace Act of 1988.

Rethinking Drinking: Straight Up with a Twist

Lisa Schrader, MPH, MCHES
Director of Health Promotion

OH NO!
Another alcohol and drug speech



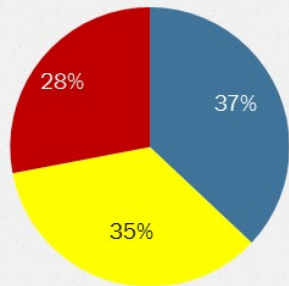
Wait!
This is
different!

HOW IS THIS DIFFERENT?

- We WON'T tell you what to do.
- We are here to share information YOU gave us.
- We TRUST you to make educated decisions.

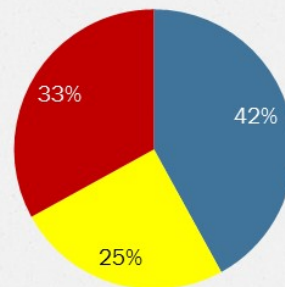
Alcohol 101: The Basics

Alcohol Use by American Adults



■ Low Risk ■ Abstain ■ At Risk

Alcohol Use by MTSU Students



■ Low Risk ■ Abstain ■ At Risk

Levels of Risk

o Low Risk

- o Males
 - o No more than 2 drinks per day
- o Females
 - o No more than 1 drink per day

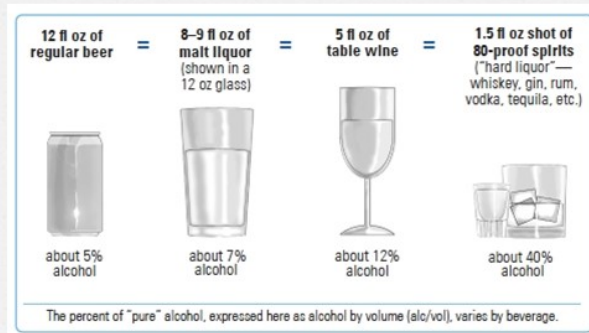
o High Risk

- o Males
 - o More than 14 drinks per week
 - o 5 or more drinks per occasion
- o Females
 - o More than 7 drinks per week
 - o 4 or more drinks per occasion

What counts as a drink?

- o “Standard drink” sizing
 - o 0.6 fl oz of alcohol
- o Beer vs. wine vs. liquor
- o Common containers

- o Solo cup
- o A “40”
- o A “pint”
- o A “fifth”



Physiological Impacts on BAC

- o Gender
- o Body composition
- o Hormones

Absorption & Oxidation of Alcohol

Factors affecting Absorption

- What you're drinking
- How fast you're drinking
- Effervescence
- Food in stomach

Factors affecting Oxidation

- Only TIME!
- We oxidize off 0.016% of our blood alcohol content per hour (roughly one drink per hour)

What that means....

- If you stop drinking at 3:00am with a BAC of .08%
 - .08%.... .064%.... .048%.... .032%.... .016%.... .000%
 - You're not sober until 8:00am
- If you stop drinking at 3:00am with a BAC of .16%
 - .16%.... .144%.... .128%.... .112%.... .096%.... .08%.... .064%.... .048%.... .032%.... .016%.... .000%
 - You're not sober until 1:00pm
- If you stop drinking at 3:00am with a BAC of .24%
 - .24%.... .224%.... .208%.... .192%.... .176%.... .16%.... .144%.... .128%.... .112%.... .096%.... .08%.... .064%.... .048%.... .032%.... .016%.... .000%
 - You're not sober until 6:00pm!

Impairment in Males

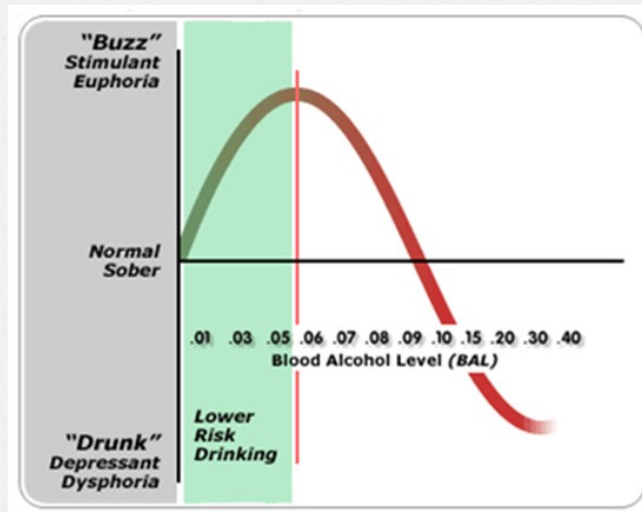
Men	Approximate blood alcohol percentage									
Drinks	Body weight in pounds									
	100	120	140	160	180	200	220	240		
0	.00	.00	.00	.00	.00	.00	.00	.00	.00	Only safe driving limit
1	.04	.03	.03	.02	.02	.02	.02	.02	.02	Impairment begins
2	.08	.06	.05	.05	.04	.04	.03	.03		Driving skills significantly affected Possible criminal penalties
3	.11	.09	.08	.07	.06	.06	.05	.05		
4	.15	.12	.11	.09	.08	.08	.07	.06		
5	.19	.16	.13	.12	.11	.09	.09	.08		Legally intoxicated Criminal penalties
6	.23	.19	.16	.14	.13	.11	.10	.09		
7	.26	.22	.19	.16	.15	.13	.12	.11		
8	.30	.25	.21	.19	.17	.15	.14	.13		
9	.34	.28	.24	.21	.19	.17	.15	.14		
10	.38	.31	.27	.23	.21	.19	.17	.16		

Impairment in Females

Women	Approximate blood alcohol percentage										
Drinks	Body weight in pounds										
	90	100	120	140	160	180	200	220	240		
0	.00	.00	.00	.00	.00	.00	.00	.00	.00	.00	Only safe driving limit
1	.05	.05	.04	.03	.03	.03	.02	.02	.02	.02	Impairment begins
2	.10	.09	.08	.07	.06	.05	.05	.04	.04		Driving skills significantly affected Possible criminal penalties
3	.15	.14	.11	.10	.09	.08	.07	.06	.06		
4	.20	.18	.15	.13	.11	.10	.09	.08	.08		
5	.25	.23	.19	.16	.14	.13	.11	.10	.09		Legally intoxicated Criminal penalties
6	.30	.27	.23	.19	.17	.15	.14	.12	.11		
7	.35	.32	.27	.23	.20	.18	.16	.14	.13		
8	.40	.36	.30	.26	.23	.20	.18	.17	.15		
9	.45	.41	.34	.29	.26	.23	.20	.19	.17		
10	.51	.45	.38	.32	.28	.25	.23	.21	.19		

Alcohol 202: Higher Order

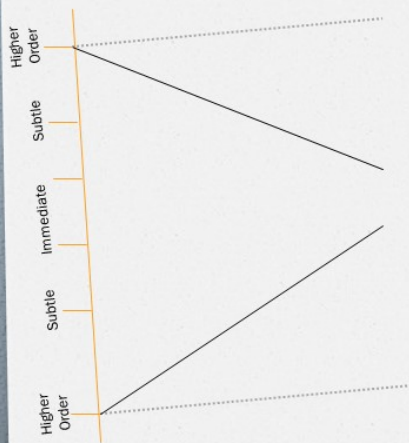
The “Biphasic Curve”



Alcohol Myopia & Judgment

BAC

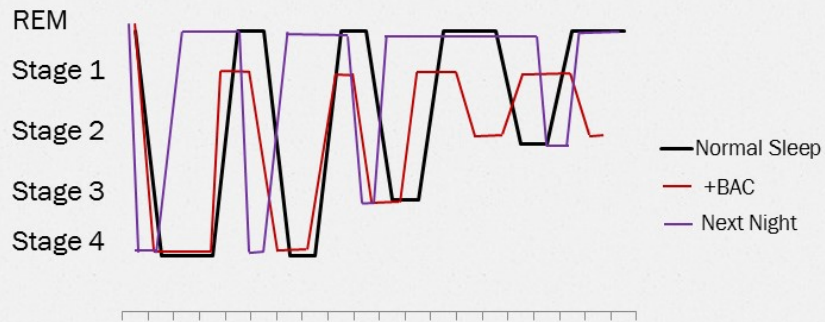
- .02% Relaxed
- .04% Relaxation continues, buzz develops
- .06% Cognitive judgment is impaired



Impact on Sleep

- o Quality vs. Quantity
- o Stages of sleep
 - o REM- where we dream & where memories and learning are processed
 - o Stage 4- deep sleep
- o Effects of altered sleep
 - o Too little REM- sleepiness, anxiety, irritability
 - o Too much REM- fatigue

Sleep Effects



Tolerance

- Impacts how you feel effects of alcohol
- No impact on actual BAC
- May be more related to environmental factors than physiological factors

Alcohol 2.0: Self-application

Alcohol Facts: The Good, the Bad, and the Ugly

o Good

- o Fun, social, relaxing
- o May like taste
- o Health benefits

o Bad

- o 7 calories per gram and an appetite stimulant
- o Diuretic that can lead to dehydration
- o Can be easy to overindulge

o Ugly

- o 31% of college students met criteria for alcohol dependence
- o 97,000+ victims of alcohol-related sexual assaults annually
- o Alcohol is a factor in 60% of homicides and drownings
- o Approximately 1800 college students die annually from alcohol-related causes

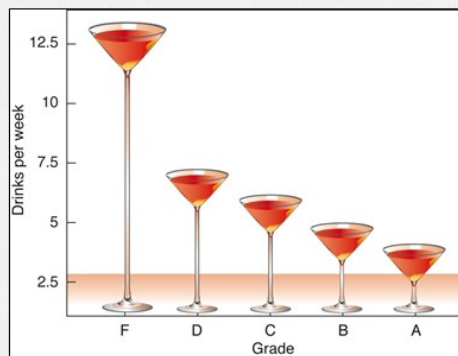
Student-Reported Alcohol-Related Consequences

	% Males	% Females
Had unprotected sex	27.6	20.2
Did something you later regretted	23.3	24.4
Forgot where you were or what you did	19.4	16.7
Physically injured yourself	10.4	4.9
Seriously considered suicide	4.5	2.8
Physically injured another person	1.5	0.3
Got in trouble with police	1.5	1.1

Students who reported that they do not drink and were excluded from analysis.

Alcohol Use & Academic Success

- Heavy drinking associated with lower GPA
- Frequent binge drinking associated with lower GPA



The more alcoholic drinks consumed per week, the lower your grade point average.

Risk Reduction

- o Set limits and keep track
- o Pace yourself
- o Include food
- o Alternate with water or other non-carbonated, non-alcoholic drinks
- o Avoid drinking games
- o ALWAYS use a designated driver

Alcohol Poisoning Signs and Symptoms

- o Cold, clammy skin
- o Unconscious and can't be roused
- o Pale, or blue-tinged skin
- o Slow or irregular breathing
- o Low body temperature
- o Vomiting

If You Suspect Alcohol Poisoning

- o Call 911!!
- o Do not leave the person
- o Turn the person on his/her side
- o Cover him/her with a sheet or light blanket



Alcohol Abuse as a Virus?

H1N1

Aug 2009- Feb 2010

- o 4 deaths
- o 169 hospitalizations
- o 94,000 flu-like cases

Preparation:

Hand sanitizer, face masks, preparedness plans, coughing/sneezing education, vaccine clinics

Alcohol

Aug 2009- Feb 2010

- o 1000 deaths
- o 250,000 unprotected sexual encounters
- o 350,000 injuries

What will you do???????

Resources

- o Online assessments
 - o e-Check Up To Go available at www.mtsu.edu/healthpro
- o Counseling Services
 - o KUC 326S, 615-898-2670
- o Health Services
 - o REC, 615-898-2988
- o Campus Pharmacy
 - o REC, 615-494-8888



PREVENTION

101:

Things to Know when Prevention was
NOT your Training Background



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Introduction

Congratulations! You've landed a job at an institution of higher education, or maybe you've been working there for a while, and you've been told that part of your job is now going to involve "prevention." But what does that mean? Preventing failing grades? Preventing drop outs?

No.... Your job is about preventing substance misuse, violence, and other negative health and social outcomes. And, yes, that is now mandated by the federal government.

Your training in higher education administration, counseling, student development, social work, or any number of other backgrounds that might lead into working on a college campus probably included very little (one course? one academic assignment?), if any, didactic training on the topic. But now you are the "prevention person" on your campus and are expected to be the resident expert. What's a person supposed to do? Draw on memories of what prevention looked like back when you were in grade school or college?

Take a deep breath. While you may have some positive memories to fall back on, CHASCo is here to help give you a more structured guide. This manual is a crash course in the history, theory, best practices, and guiding documents of the field. We hope you find it helpful as a foundation for your work and that, combined with ongoing professional development from CHASCo, you can chart a new path for prevention at your own unique institution.



**COALITION FOR HEALTHY
AND SAFE CAMPUS COMMUNITIES**

History of Prevention



“Public health saved your life today. You just don’t know it.” - Author unknown

Philosopher and author Mokokoma Mokhonoana once wrote, “It is usually impossible to know when you have prevented an accident.” Then-president of the American Public Health Association, Dr. Linda Rae Murray, expressed a similar sentiment at a commencement address when she said, “When public health works, we’re invisible.” It is somewhat of a puzzle of the senses that, in the field of prevention, when everything is working like it should, nothing happens. Nothing happening is exactly our goal.

A side effect of this invisible nature of prevention is that few people outside of those who have studied it truly know what it is or understand the science behind it. But the field of prevention has more than 70 years of research guiding its best practices, the development of theories behind why people do what they do, and how practitioners can intervene to make healthier choices become easier choices.

Here is a sampling of some of the key milestones in the field of wellness and collegiate alcohol and other drug prevention:

Timeline of Prevention ^(1,2,3,4,5)

1953: Straus and Bacon conduct the first wide scale research study of drinking at 57 institutions of higher education.

1958: The World Health Organization issues a more comprehensive definition of health, defining it as “a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity.”

1976: The University of Wisconsin-Stevens Point becomes the first institution of higher education to launch a campus wellness program.

1985: 64% of institutions of higher education report having a task force or committee focused on alcohol prevention.

1987: The Fund for the Improvement of Post-Secondary Education (FIPSE) begins providing grants to institutions of higher education to support collegiate alcohol and drug prevention programs. \$7,780,000 was awarded in 1987 among 92 schools, and the program continued annually through 1994 when \$14,412,719 was awarded among 144 schools. As part of the awards, campuses receive funding to administer the Core Alcohol and Drug Survey (often abbreviated as Core Survey) as a measure of baseline status and of program evaluation. These grants make the Core Institute, based out of Southern Illinois University, the keeper of the nation's largest database of statistics on the use of alcohol and drugs among college students.

1988: The minimum legal drinking age is moved to 21 in all 50 states.

1994: The term "binge drinking" is coined by Henry Wechsler of Harvard University in the publication of results from the College Alcohol Study (CAS) to describe a pattern of drinks in which men consume 5 or more standard drinks in a sitting and women consume 4 or more standard drinks in a sitting. The CAS conducted 4 national surveys involving over 14,000 students at 120 four-year colleges in 40 states in 1993, 1997, 1999, and 2001. The schools and students selected for the study provided a nationally representative sample. In addition, CAS colleges with high levels of heavy alcohol use were resurveyed in 2005.

1995: The Higher Education Center for Alcohol, Drug Abuse, and Violence Prevention (HEC) is founded under the umbrella of the U.S. Department of Education. The mission of the Center is to help college and community leaders develop, implement, and evaluate programs and policies to reduce problems experienced by students related to alcohol and other drug use. Due to federal budget cuts, the Center was closed in 2012. The former co-director of HEC, Dr. John Clapp, came to The Ohio State University in 2013 to open the Higher Education Center for Alcohol and Other Drug Prevention (HECAOD) to meet this still existent national need.

2000: The Department of Health and Human Services launches Healthy People 2010 as a blueprint for improving the nation's health status. That same year, the American College Health Association launches the companion Healthy Campus 2010 document.

2002: The National Institute for Alcohol Abuse and Alcoholism (NIAAA) creates the Task Force on College Drinking and implemented the Rapid Response to College Drinking initiative. Its central report, *A Call to Action: Changing the Culture of Drinking at U.S. Colleges* introduces four "Tiers of Effectiveness" which document the efficacy of various prevention programs through a review of published scientific research.

2015: The College Alcohol Intervention Matrix (College AIM) is released as an update to *A Call to Action* and allows readers to compare effectiveness and cost of multiple individual and environmental level prevention strategies.

Definitions, Theories, and Models of Prevention

Like any professional field, prevention comes with its own language of key terms, acronyms, theories, and models. While not an exhaustive list, this section details some of the most commonly used terms to help bring you up to speed quickly.

Some of the first terms to understand relate to the “*who*” and the “*when*” of prevention. In terms of *audiences* (the “*who*”) that prevention programs will attempt to influence, you will hear of three categories of prevention:

- **Universal prevention**- refers to activities targeting the entire population within your sphere of influence; ex., all students at your university
- **Selective prevention**- refers to activities targeting groups within your population considered to be “at risk;” ex., fraternity members, residential students, athletes, etc.
- **Indicated prevention**- refers to activities targeting individuals who are already experiencing symptoms or consequences; ex., students in recovery, sanctioned students, etc.

Additionally, you will hear of three terms that describe the *timing* (the “*when*”) of a prevention intervention:

- **Primary prevention**- refers to measures designed to forestall the onset of illness, injury, or consequences; ex., educational workshops, poster campaigns, etc.
- **Secondary prevention**- refers to measures leading to early diagnosis and prompt treatment; ex., depression screenings, Alcohol Screening Day, etc.
- **Tertiary prevention**- refers to measures aimed at preventing relapse following illness, injury, or consequences; ex., drug courts, Alcoholics Anonymous, recovery communities, etc.

As you will see in the subsequent section on theories and models, the factors that drive our decision making and our behaviors are varied and complex. Those factors that influence whether or not behavioral change occurs are broken down into three categories:

- **Predisposing factors**- precede behavior and provide the rationale or motivation for a behavior; ex., knowledge, attitudes, beliefs, personal preferences, existing skills, and self-efficacy beliefs
- **Enabling factors**- precede behavior and allow for a motivation to be realized; ex., programs, services, resources, training in new skills, environmental factors that affect behavior
- **Reinforcing factors**- follow a behavior and provide continuing reward or incentive to repeat that behavior; ex., includes social support, peer influence, significant others, material incentives, etc.

Common Acronyms

In addition to the aforementioned definitions, it will also be helpful to familiarize yourself with the alphabet soup of prevention-related acronyms. These include:

- **AOD**- “alcohol and other drug”
- **AODV**- “alcohol, other drug, and violence”
- **CADCA**- “Community Anti-Drug Coalitions of America”-a nonprofit organization that is committed to creating safe, healthy and drug-free communities globally. CADCA is the umbrella organization of most of the county prevention coalitions that operate in Tennessee.
- **EDGAR 86**- “Education Department General Administrative Regulations Part 86”- the specific section of federal law that lays out the requirements for institutions of higher education regarding drug and alcohol abuse prevention; it mandates, among other things, annual notification to all employees and students of the school’s AOD policies and a biennial review process to document effectiveness of prevention efforts and consistent enforcement of sanctions.
- **NASPA**- “National Association of Student Personnel Administrators”- the professional association for the advancement, health, and sustainability of the student affairs profession in higher education
- **NIAAA**- “National Institute of Alcohol Abuse and Alcoholism”- one of the 27 institutes and centers that comprise the National Institutes of Health (NIH). NIAAA supports and conducts research on the impact of alcohol use on human health and well-being.
- **SAMHSA**- “Substance Abuse and Mental Health Services Administration”- the agency within the U.S. Department of Health and Human Services that leads public health efforts to advance the behavioral health of the nation. SAMHSA’s mission is to reduce the impact of substance abuse and mental illness on America’s communities.
- **TDMHSAS**- “Tennessee Department of Mental Health and Substance Abuse Services”- the mental health and substance abuse authority for the State of Tennessee. TDMHSAS is the funding source for most of the administrative and programming dollars provided to and by CHASCo.

Three Prevention Models

Multiple textbooks exist explaining the theories, models, and research behind behavior and the complex reasons that people do what they do when it comes to their personal health. This manual will address three such models that will provide some baseline information on the interplay of these influences and how prevention interventions can target various elements of that interplay to increase the likelihood of successful outcomes.

First up is the ***Health Belief Model***. It is a type of value-expectancy theory. The desire to avoid illness or to get well (value) and the belief that a specific action would prevent or improve illness

(expectation) can help predict what behaviors an individual will engage in. The Health Belief Model was originally formulated by a group of social psychologists in the US Public Health Service in the 1950s, and it helped explain why simply knowing that a behavior was good or bad did little to predict whether or not an individual took part in that behavior.

Figure 1. Health Belief Model ⁽⁶⁾

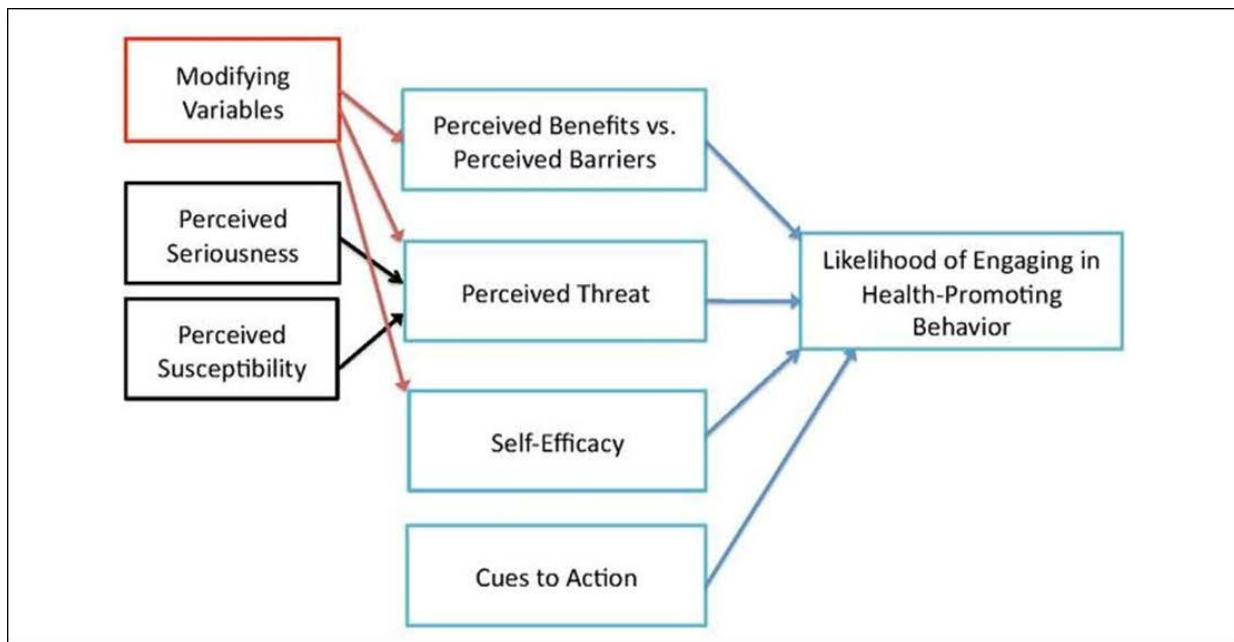


Figure 1 shows the various components of the Health Belief Model and how they interact with each other. These components, listed alphabetically, include:

- Cues to action: strategies to activate one’s readiness (i.e., a sign at the local drug store motivates you to consider a flu shot)
- Modifying variables: demographic, sociopsychological, and structural variables that may affect one’s perceptions and thus indirectly influence behavior; ex., educational attainment can have an indirect effect on behavior by influencing the perception of susceptibility, severity, benefits, and barriers. Other variables could include age, sex, ethnicity, personality, socioeconomic status, etc. (i.e., females are more likely to engage in preventative health care like flu shots than males)
- Perceived barriers: one’s belief about the tangible and psychological costs of the advised action (i.e., you believe going to get a flu shot will take too much time)
- Perceived benefits: one’s belief in the efficacy of the advised action to reduce risk or seriousness of impact (i.e., you believe that getting the flu shot last year helped keep you well during the previous winter)

- Perceived seriousness/severity: one’s belief of how serious a condition and its associated symptoms/consequences are (i.e, you believe having to miss work due to the flu would be detrimental to your efforts to get a promotion)
- Perceived susceptibility: one’s belief regarding the chance of getting a condition (i.e., you believe you will be exposed to the flu in your day-to-day interactions and could contract it)
- Perceived threat: the amount of personal risk one feels based on perceptions of seriousness and susceptibility (i.e., you believe you could catch the flu and become ill, which is undesirable)
- Self-efficacy: one’s confidence in one’s ability to take action (i.e., you know where to access the flu shot if you want one)

To give an example, if we are considering creating a campus safe rides program to deter drunk driving, we should not assume that simply building the service and telling students it exists will lead to a full schedule for the drivers. Our intervention and marketing campaign would need to consider, from a potential user’s perspective, what benefits the service would provide (ex., free, safe transportation) and what barriers it might entail (ex., could take longer to get home, increase in student fees). How seriously do our students view drunk driving, and how susceptible do they personally feel to being caught engaging in drunk driving? Do they have the self-efficacy necessary to schedule a ride pickup? Are there cues in places from which they might need a safe ride in order to help activate their motivation? Do they see people who look like themselves using a safe ride program? The more of these questions an intervention can address, the greater the likelihood of targeted students actually choosing a safe ride program over getting behind the wheel themselves.

For brief video explanations of the Health Belief Model, check out <https://www.youtube.com/watch?v=hI5LDiz8Le0> or <https://www.youtube.com/watch?v=uXLUBjzZVOM>.

Another commonly applied model is the ***Transtheoretical Model***, introduced by Prochaska and DiClemente and also known as “Stages of Change.” This model developed in the late 1970s/early 1980s as an effort to integrate processes and principles of change from across various theories, including things like consciousness raising as proposed by Sigmund Freud and contingency management as proposed by B. F. Skinner. Early research into this effort documented that individuals used different strategies depending on where they were in the change process.

Those stages of change included:

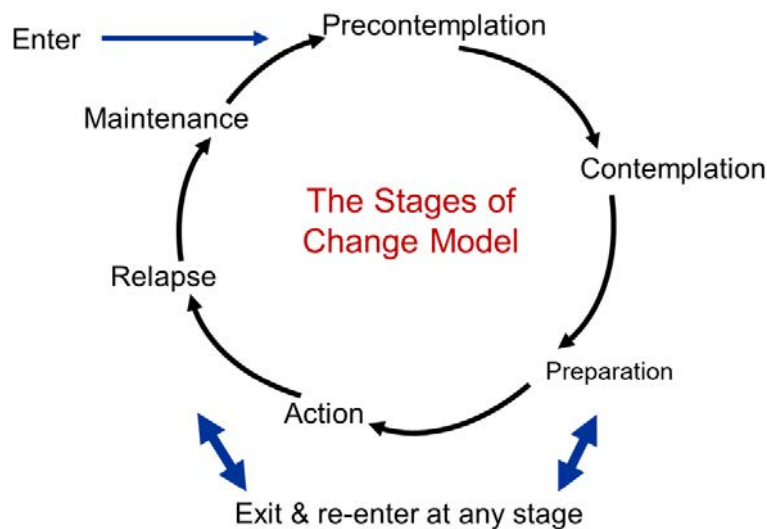
- Precontemplation- having no intention to take action within the next six months
- Contemplation- intending to take action within the next six months
- Preparation- intending to take action within the next 30 days and already taking some behavioral steps in that direction
- Action- has changed behavior for less than six months
- Maintenance- has changed behavior for more than six months

These changes are not linear, and an individual can move back and forth between them as they cycle through the different stages. Figure 2 shows how this model is commonly depicted.

Some of the processes of change that the researchers documented and which were being applied at different stages of change were:

- Consciousness raising- increasing awareness about causes, consequences, and cures for a particular problem behavior
- Contingency management- increasing the rewards for healthy behaviors and decreasing the rewards for unhealthy behaviors
- Counterconditioning- substituting healthier alternative behaviors for the unhealthy behavior
- Dramatic relief- experiencing the negative emotions that go along with unhealthy behavioral risks (ex., fear, anxiety, worry)
- Helping relationships- seeking and using social support for the healthy behavior change
- Self-liberation- making a firm commitment to change
- Self-reevaluation- seeing behavior change as an important part of one's identity
- Stimulus control- removing reminders or cues to engage in the unhealthy behavior and adding cues or reminders to engage in the healthy behavior

Figure 2. The Transtheoretical Model ⁽⁷⁾



In early stages, individuals are most likely to apply cognitive and affective strategies like consciousness raising and dramatic relief to get closer to their change goals. In latter stages, they are most likely to apply counterconditioning, contingency management, support, and environmental controls to get closer to maintenance. (See Table 1.)

Although originally tested with people trying to quit smoking, this model can be applied to multiple health behaviors requiring individual change, including alcohol or other drug abuse, treatment of mental

illnesses, diet and/or exercise, cancer screenings, STI/HIV prevention, and more. Prevention practitioners should first assess the current stage of the client(s) and then plan interventions using the appropriate processes of change.

Table 1. Processes of Change that Mediate Progression between the Stages of Change.

Stages of Change	
	Precontemplation Contemplation Preparation Action Maintenance
Processes	Consciousness raising
	Dramatic relief
	Self-reevaluation
	Self-liberation
	Counterconditioning
	Helping relationships
Contingency management	
	Stimulus control

To watch a brief video explaining the Transtheoretical Model, check out <https://www.youtube.com/watch?v=Twlow2pXsv0>.

The final model we will consider in this manual is the **Social Ecological Model**. The Social Ecological Model was developed in the 1980s but was continually revised by Urie Bronfenbrenner until his death in 2005. It recognizes that human behaviors and decision making do not happen in a vacuum and describes the different levels of influence that can impact behavior. Those levels are diagrammed in Figure 3.

The levels of influence identified by Bronfenbrenner were:

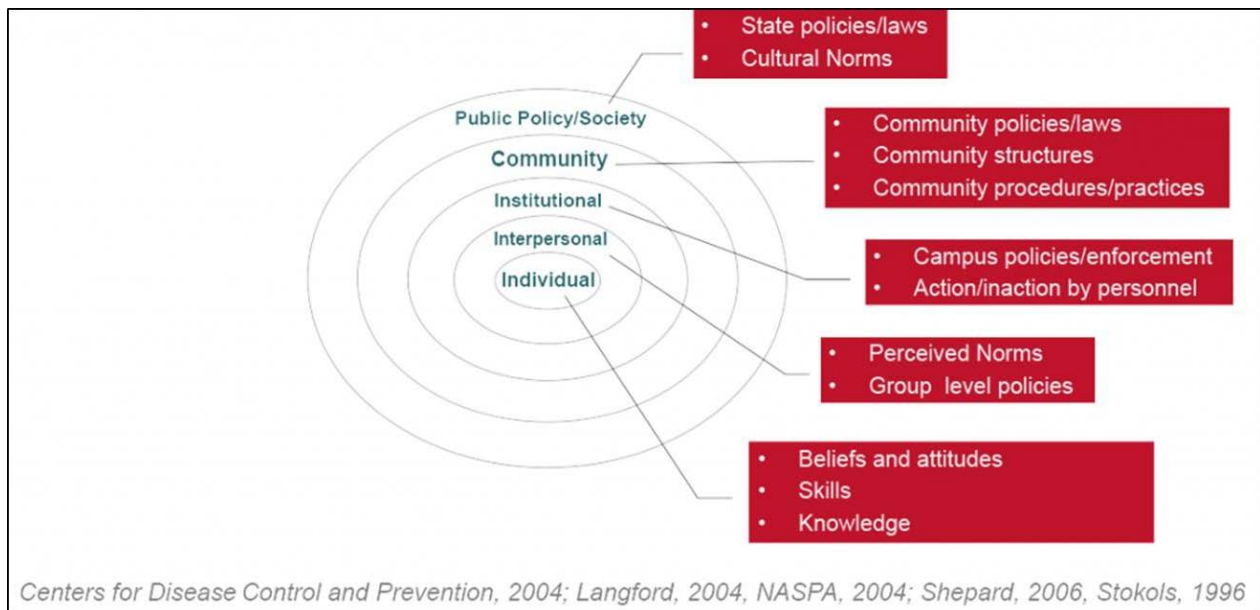
- Individual -- identifies biological and personal history factors that impact behavior, including knowledge, attitudes, behavior, self-efficacy, developmental history, gender, age, religious identity, racial/ethnic identity, sexual orientation, economic status, financial resources, values, goals, expectations, literacy, stigma, and others. Specific approaches at the individual level may include education and life skills training.
- Interpersonal -- examines close relationships, formal and informal, that may influence behavior, including family, friends, peers, co-workers, religious networks, customs or traditions; the interpersonal level not only influences an individual’s behavior, but it also contributes to their experience. Prevention strategies at the interpersonal level may include parenting or family-focused prevention programs, mentoring and peer programs, faith-based programs, etc.
- Institutional and Community -- these levels explore the settings (with defined boundaries), such as schools, workplaces, and neighborhoods, in which social relationships occur and seek to identify the characteristics of these settings that are associated with behaviors of interest;

includes the built environment (e.g., parks), village associations, community leaders, businesses, and transportation. Strategies at these levels impact the social and physical environment – for example, by reducing social isolation, improving economic and housing opportunities in neighborhoods, and cultivating positive climates, processes, and policies within school and workplace settings.

- Public Policy/Society -- looks at the broad societal factors without defined boundaries that help create a climate; includes social and cultural norms that support or reject behaviors of interest. Strategies at this most encompassing level include local, state, national and global laws and policies, as well as policies regarding the allocation of resources, or a lack of policies.

A comprehensive prevention program should take into account all of these levels and have elements supporting all of them. For example, a comprehensive violence prevention program could have bystander intervention training, a poster campaign around attitudes towards sexual violence, clearly communicated and easily accessible campus resources for survivors and reporting, coordination with local domestic violence shelters and hospitals, and state or national media campaigns to normalize and promote healthy attitudes.

Figure 3. The Social Ecological Model ⁽⁸⁾



To watch a brief video explaining the Social Ecological Model, check out <https://www.youtube.com/watch?v=e9UyplfevyQ>.

As you can see, one takeaway message for prevention strategies is that **knowledge is necessary, but not sufficient**, to change behavior. While increasing knowledge will likely be an outcome of most prevention programs, we should not expect measurable behavior change if increasing knowledge is our only outcome. How many of us know that eating a fresh from the oven chocolate chip cookie is probably not in our best dietary interest, and yet we still partake at least occasionally in that treat? Or we know that consistently getting eight hours of sleep at night will help us feel and perform our best during the day, and yet we allow ourselves to watch “just one more” episode of whatever we’re currently binging on Netflix? The theories and models we have just addressed help us think through what other elements of human decision-making we need to consider and try to influence if we truly want to increase the likelihood of a sustainable behavior change.



Best Practices for Prevention

Having now examined different theoretical models that can guide our prevention strategies, this section will introduce some best practices in prevention intervention, including general principles and specific approaches.

Elements of Successful Prevention Programs

Back in 2003, a team of researchers led by Maury Nation conducted a review of successful prevention programs and identified nine elements that were common to all of them.⁽⁹⁾ Those elements included:

- **Comprehensiveness:** multicomponent programs that address critical domains (ex., family, peers, community) that influence the development and perpetuation of the behaviors to be prevented; these programs could include a combination of interventions in multiple settings
- **Varied teaching methods:** programs involve diverse teaching methods that focus on increasing awareness and understanding of the problem behaviors and on acquiring or enhancing skills; programs should be careful not to rely on knowledge, information, or group discussion as the major change mechanism
- **Sufficient dosage:** programs provide enough intervention to produce the desired effects and provide follow-up as necessary to maintain effects; effects of most prevention programs decline over time, so booster sessions focusing on prior skills or the development of new ones can be helpful to sustain results
- **Theory driven:** programs have a theoretical justification, are based on accurate information, and are supported by empirical research
- **Positive relationships:** programs provide exposure to adults and peers in a way that promotes strong relationships and supports positive outcomes
- **Appropriately timed:** programs are initiated early enough to have an impact on the development of the problem behavior and are sensitive to the developmental needs of participants
- **Socioculturally relevant:** programs are tailored to the community and cultural norms of the participants and make efforts to include the target group in program planning and implementation
- **Outcome evaluation:** programs have clear goals and objectives and make an effort to systematically document their results relative to the goals; effectiveness should not be judged primarily on the basis of anecdotal or case study results
- **Well trained staff:** program staff support the program and are provided with training regarding the implementation of the intervention; implementation is most effective when staff are sensitive, competent, and well-supervised

A Comprehensive Prevention Process

Programming is really just the tip of the iceberg in terms of effective prevention. A good prevention program is part of a larger, more comprehensive prevention process. EverFi has created a graphic

depicting just that phenomenon, with programming sitting atop a pyramid of prevention components (see Figure 4).

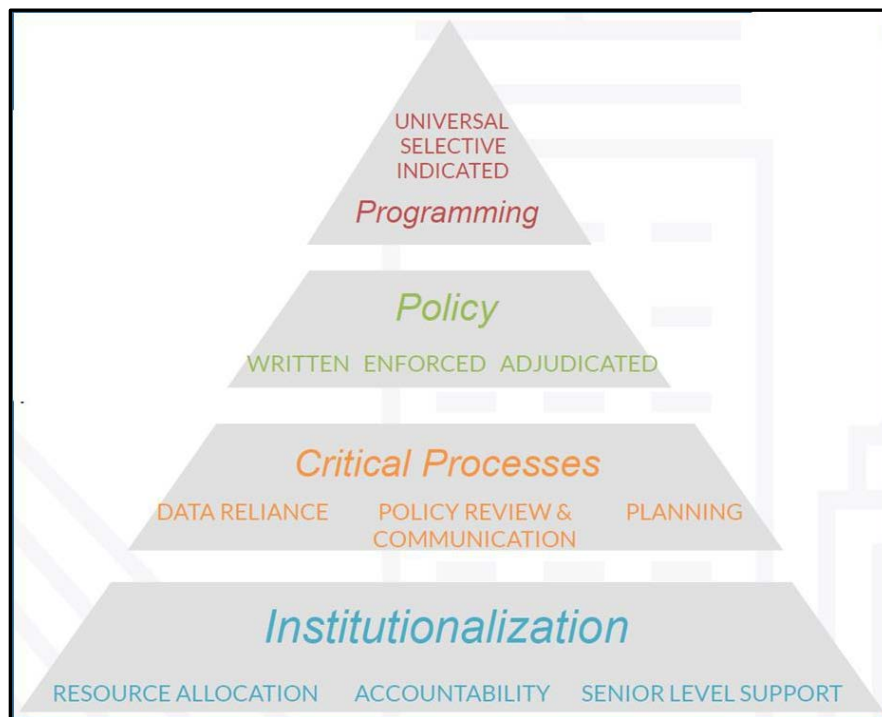
At the base of the pyramid is Institutionalization. In many instances, the staff member tasked with prevention work is buried in the college or university’s organizational structure under multiple layers of supervision. In order for prevention efforts to be successful in higher education settings, senior administrators need to buy in to the process and be willing to support the efforts through resource allocation and accountability.

The next level up the pyramid is Critical Processes. This level involves the behind the scenes efforts to ensure that prevention strategies are based on strategic planning and localized data when possible. It is also at this level that processes are put in place for policy review and communication across the campus’s affected constituents.

Nearing the top of the pyramid is the Policy level. Effective prevention efforts have well written policies that are enforced and efficiently adjudicated. Policies set the tone for the values and expectations of the campus, and no amount of work by a prevention practitioner will overcome a conflicting policy or a supportive policy that is not enforced.

Lastly, the Programming level sits on top. Remember that programming should involve universal, selective, and indicated target audiences and contain the nine elements previously mentioned as components of effective prevention programs. When all levels of the pyramid are in place, prevention efforts are highly likely to be successful.

Figure 4. The Process of Successful Prevention.⁽¹⁰⁾



In summary, there are things we know make for good prevention programming and things that are not so good. A prevention program is most likely to be effective when it is rooted in theory and evidence, is comprehensive in scope, is repeatable, is relevant to your community, and is collaborative. In contrast, programs least likely to be effective are single shot, standalone programs that rely primarily on scare tactics or an increase in knowledge alone to change behavior.

A Note on Scare Tactics (Don't Use Them!!)

It is worth mentioning that a default approach to prevention, particularly among individuals with no formal training in the field, is to use fear based messages as a way to “scare” their population into healthy behavior. You have probably witnessed many of these approaches yourself—a presentation showing pictures of diseased genitalia intended to deter sexual activity, a crashed car and/or other staged accident scene intended to discourage drunk driving, testimonials from people who have served jail time for the choices they made around substance use or illegal activity, etc. But as common as they are, scare tactics have never been documented in the literature as effective at changing behavior. In fact, some of them have even been shown to increase the chances of a target audience engaging in the very behavior organizers were trying to prevent!

In spite of the organizers’ good intentions, the use of scare tactics can have one or more of the following less than helpful effects on the target audience:

- A behavioral “paralysis” where participants don’t know what to do to avoid the described consequence, especially if abstinence from a particular behavior is not seen as a viable option
- A “game” mentality where the participants are determined to continue a negative behavior to “prove” to the organizers that the consequence they described won’t happen to them
- A loss of the organizers’ credibility as the participants process that behaviors they and their peers have engaged in previously did not lead to the consequences being featured in the intervention

For all of these reasons, CHASCo encourages its member schools to avoid the use of scare tactics in their prevention efforts and to instead consider some or all of the specific strategies that follow and are currently considered best practices in our field.

Environmental Prevention Strategies

Environmental prevention strategies seek to address the underlying conditions in a community that can lead to healthy or unhealthy behaviors. These could include policies, programs, and practices that promote well-being or reduce risk. Environmental prevention could take place in many formats, and ideally, would utilize multiple designs. Here are some general examples, but you can also consider some specific examples compiled by CHASCo of practices used by member schools. Check the CHASCo website for the most current listing.

- Campus policies**

College and university policies that restrict the accessibility of alcohol can effectively deter student drinking **when they are well enforced**. Such policies could include bans on alcohol advertisements on campus, dry campus policies, scheduling Friday classes, or party registration policies, to name a few. CHASCo institutions who elect to complete prevention plans will find that the planning process will require consideration of their local policies and if and how they could be improved.
- Mandated population-level education**

Requiring all students complete some type of evidenced-based in person or online education curriculum can change the environment and culture around behaviors you wish to prevent. Some schools choose to assign the curriculum as an online pre-matriculation requirement and tie its completion to a student’s ability to enroll in classes for the upcoming semester.

“AlcoholEdu” by EverFi and “eCheck Up To Go (eCHUG)” by San Diego State University probably have the most name recognition in this category, but there are other options available through various vendors. CHASCo has negotiated discounted rates for its member schools to utilize eCHUG, so contact the CHASCo director if you would like more information about that product.
- Late night social activities**

The use of school-sponsored social activities during typical peak drinking times is another common tactic universities use to alter the environment of their campuses. The activities would generally be held on Thursday, Friday, or Saturday nights with a 9:00pm or later start time and a midnight or later end time to coincide with time frames that tend to be common drinking periods for students. They could also be held around holidays like Halloween, St. Patrick’s Day, or Cinco de Mayo that are associated with alcohol consumption. The activities are never advertised as “alcohol-free alternatives,” but that is, in effect, the purpose they serve. San Diego State University has one of the most well-established programs of this sort called Aztec Nights. Additional information about its program can be found at <https://as.sdsu.edu/aztecnights/>. Many CHASCo member schools use money available from their prevention plans to fund similar late night activities.
- Universal screenings**

A newer effort at changing the environment is the use of universal screenings in student health clinics and counseling centers. When implemented, all students seen in one or both of those settings are asked a standard set of questions around their use of alcohol, experience with depression, suicide ideation or other area of interest. The screening allows for the gathering of information that might not have come up in the student’s appointment otherwise, and students who screen positive can quickly be referred to the appropriate resource.
- Community partnerships**

One last example of how environmental factors can be used as a best practice is community partnerships. All of our campuses exist as part of a larger community, and working with your local partners is key to preventing problems within one sphere bleeding over into the other. To

give a specific example, the Safer California Universities Project was an NIAAA-funded grant that allowed 14 schools in the California State University system to implement a variety of interventions aimed at curbing high risk alcohol use among their students. The schools in the program partnered successfully with local law enforcement to offer well-publicized DUI check points, off campus party patrols, crackdowns on sales of alcohol to minors, and a wide-scale media campaign during the first few weeks of the academic year. You can read more about the project and download a free toolkit if you are interested in trying something in your own community at <https://prev.org/SAFER/interventions.html>.

Many counties in Tennessee have local prevention coalitions. If you are unsure about your own county, the State of Tennessee has a website that lists community based prevention coalitions at <https://www.tn.gov/behavioral-health/substance-abuse-services/prevention/prevention/join-an-anti-drug-coalition0.html>. CHASCo encourages its member campuses to partner with their community coalitions when possible.

Social Norms Marketing

Another well-researched best practice is the strategy of social norms marketing. Social norms in general refer to the perceptions we all have of what is typical behavior (descriptive norms) or what is considered acceptable or unacceptable behavior (injunctive norms). Those perceptions commonly guide our behavioral decision making (i.e., “when in Rome, do as the Romans do”). The social norms marketing strategy involves publicizing messaging around the healthy behaviors of the students on your campus that might fly in the face of ingrained stereotypes. If students become aware of the true attitudes and behaviors of their fellow students around substance use and violence prevention, they may feel less pressure to engage in behavior that goes against their values or comfort levels.

Figure 5. Sample Social Norms Marketing image from University of Tennessee Chattanooga.⁽¹¹⁾



Social norms marketing can take place as a universal campaign or as a targeted campaign for particular groups of students. In a universal campaign, you are likely to see messages along the lines of “Most University of X students don’t drive after drinking” or “88% of University of X students did not use tobacco in the past 30 days.” The messages are often accompanied by a campaign branded tag line and always include a source statement for the data being referenced. Targeted campaigns would have similar messaging but use images and specific phrasing to make them relevant to the desired population. For example, a targeted campaign message could look something like “3 out of 4 fraternity men at University of X say they would confront a brother who made a racist comment.”

If you choose to use the social norms marketing strategy, be sure to consider the contexts in which your students would most likely see the messages. The traditional social norms marketing campaign relies on posters, fliers, and other print materials to display its messages. However, those formats may not be the best options in today’s digital world. Consider things like social media ads, computer lab screen savers, online platforms students use to conduct university business, etc. Even if you go with traditional print materials, think about locations where students are most likely to see them. Things like billboards, cafeteria table tents, and shuttle bus stops might get more looks like a poster stuck on a departmental bulletin board.

Additional information on social norms theory and social norms marketing campaigns can be found through the National Social Norms Center housed at Michigan State University, <http://socialnorms.org/>.

CHASCo has a long history of providing funding to its member schools for social norms marketing campaigns. The CHASCo website, www.tnchasco.org, has examples of some of those campaigns (see Figure 5), and the CHASCo director and Executive Committee Programming Chairperson are also available to offer technical assistance to any campus working on a campaign.

Motivational Interviewing

A third example of a best practices strategy is motivational interviewing (MI). MI is a technique that has been used in counseling environments for decades but has also established a strong foothold in the realm of AOD prevention work. It involves a meeting or series of meetings with individual students or small groups to uncover each student’s personal rationale for substance use and openness to the idea of change. The trained facilitator uses open-ended questions to elicit a student’s “hook,” that is, a potential motivating factor relevant to the student for moving towards a healthier behavior. For some students, the hook could be a realization that their alcohol use has cost them some friendships or perhaps has negatively impacted their grades. For others, it could be that they don’t like the weight they have gained from drinking or that they find they lose motivation and productivity when they are high. Perhaps it’s even something as simple as they don’t like their clothes smelling of cigarette smoke all the time. Whatever is important to that student becomes the driving force behind the facilitator’s follow up questions to assess how motivated the person is to trying to change.

When using MI, the Transtheoretical Model becomes key in determining where a person is regarding their readiness to change. A student who is assigned a motivational interviewing intervention due to a sanction for a policy violation may be in precontemplation with no interest in changing his behavior. On the other hand, a student who has experienced a medical emergency or who has self-selected into your

intervention may very well be in the contemplation, preparation, or even action stages. Depending on the stage, you can expect varying levels of resistance and/or ambivalence to change. Keep in mind that students are the “experts” in their sessions, so roll with whatever resistance they present rather than trying to immediately debate their logic or convince them of a need they don’t perceive. If students are pre-contemplative, you can try to increase their risk perception by providing normative feedback on how their drinking behaviors compare with local or national norms. If students are contemplative, help elicit reasons for change or risks of not changing that they identify. In preparation or action stages, help your clients determine their best next steps to change and provide them with positive reinforcement. With any of the stages, asking clients where they would rate themselves on interest in or ability to change and then following up with what it would take for them to rate themselves higher can shine light on their motivations and provide potential hooks for further discussion.

It is important to remember that with motivational interviewing, any step towards positive change is considered a win. You may not get the students to the ideal health behavior during your sessions, but moving them along the motivation and behavior change continuum is a desirable outcome.

Brief Alcohol and Screening Intervention for College Students (BASICS)

One example of a specific intervention based on motivational interviewing is the Brief Alcohol Screening and Intervention for College Students (BASICS). There is no official certification involved in becoming a BASICS facilitator, but trainers are available around the country to provide background, skill building, and technical assistance for campuses. CHASCo has periodically sponsored BASICS trainings over the years, as well. The book “Brief Alcohol Screening and Intervention for College Students: A Harm Reduction Approach” by Linda A. Dimeff, John S. Baer, Daniel R. Kivlahan, and G. Alan Marlatt and available from Guilford Press (www.guilford.com) is an excellent resource with reproducible handouts and assessment instruments for individuals who may be interested in learning more about BASICS.

Bystander Intervention

A final best practice that we will discuss is bystander intervention. This practice is based on the fact that most of the social and personal problems associated with alcohol, drugs, and violence are witnessed by others, the healthy majority. Activating that majority to intervene can thus help prevent many harms. Unfortunately, human nature seems to pull us towards inaction when we are bystanders, assuming that someone else will deal with a situation or that it is none of our business. However, research in the field of social psychology documents that people trained to feel responsible for addressing things they see and armed with skills to act are much more likely to intervene. Bystander intervention has been used successfully in many prevention areas, including both violence prevention and substance abuse prevention.

Multiple curricula exist to train individuals and groups in bystander intervention, but a common element of them is the recognition that there are different strategies through which a person could intervene.

For example, some of the commercially available programs refer to the “3 D’s.” Those D’s of intervention are:

- Direct,
- Distract, and
- Delegate

A Direct intervention involves the direct confrontation of the offender, such as directly taking the keys from an intoxicated person about to drive. A Distraction intervention could be directed at the offender or at other bystanders with a goal of creating a diversion that allows for the potential victim to be removed from the situation or that distracts the offender from completing his plan of action. For example, someone intervening could strike up a conversation with the offender or potential victim (i.e., “Excuse me, but you look really familiar to me. Do we have class together?” or “I’m so sorry, but I think your car may be getting towed!”). A Delegation intervention involves seeking help from other bystanders or from authority figures who may be better equipped to address a situation, like contacting campus security when you smell marijuana from a residence hall room. Individuals may feel more comfortable with one or more of these options than others, but the important thing is that acting in any way is better than not acting at all.

To view specific examples of bystander intervention programs and curricula, consider Green Dot Bystander Intervention, created by Dorothy Edwards (<https://alteristic.org/services/green-dot/green-dot-colleges/>), Step UP! Be a Leader Make a Difference, created by the University of Arizona (<http://stepupprogram.org/>), or Response Ability: A Complete Guide to Bystander Intervention, created by Alan Berkowitz (www.alanberkowitz.com).

Implementation Science

While each of the previously described strategies is considered a current best practice, it is important to keep in mind that “best practices” are constantly evolving as additional research is done on existing or new interventions. This evolution also means that the way a best practice was implemented at one or more specific institutions may not translate exactly to how it could look at your school. The relatively new field of Implementation Science aims to help us understand how to take research findings and actually put them into practice with our unique populations. In general, implementation science recognizes that every intervention may need to be tweaked in order to fit unique campus environments and cultures.

Although you don’t want to change things so much that you break away from the theoretical underpinnings of the intervention, you do need to consider your organizational context, population characteristics, and local resources to know what is feasible for your campus. Don’t be afraid to fail. Culture change is hard, and it takes time. There is a plethora of published research covering successful interventions, but as a field, we have not done as well at explaining in that research exactly how those interventions were implemented, or at publishing our intervention failures from which others could learn. In your own efforts to implement best practices, keep notes of what you tried, and if you fail, revisit your theoretical models and see what could be tweaked to try again.

A Word of Caution

Regardless of the strategies you may ultimately decide to employ, be aware that the most commonly used strategies among colleges and universities are not necessarily the most effective, and vice versa. Administrators at 330 4-year colleges and universities in the United States have been surveyed every three years as a part of the College Alcohol Survey run by George Mason University. Included among the survey questions is for the respondents to rank on a scale of 1 to 5 (with 1 being strongly disagree and 5 being strongly agree) the accuracy of the statement “Our campus utilizes the most effective alcohol abuse prevention strategies based on professional literature, conference workshops, training, etc.” The mean score on that item in 2015 was 3.64, which is hardly an improvement over the 3.57 mean score when the question was originally introduced in 2003⁽¹²⁾.

A review of results from the 38 schools who participated in EverFi’s Sexual Assault Diagnostic Inventory⁽¹³⁾ shows that three of the five most commonly reported sexual violence prevention strategies (awareness events, tabling events/health fairs, and invited speakers) are shown by research to be least effective, while four of the five least used sexual violence prevention strategies (social norms marketing, academic course engagement, bystander intervention, and small group social norms) are among the most promising.

These numbers can increase confusion for administrators and other professionals new to the prevention field, as they often look to peer institutions for programming ideas. If you can’t always trust that peer institutions are using effective strategies, where can you turn for ideas? This questions leads into our next and final section on research tools and guiding documents.



Guiding Documents and Research You Should Know

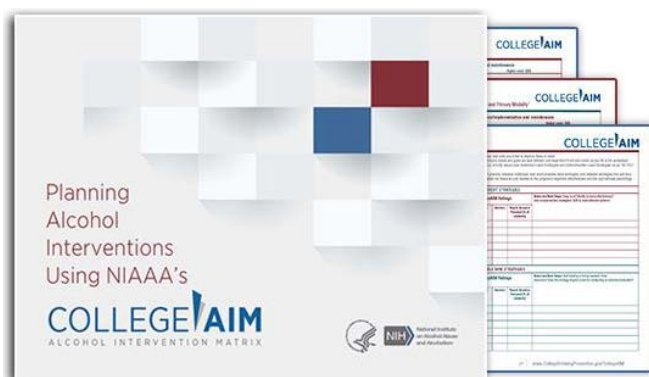
Fortunately, there are lots of free tools available in online and print versions to help you plan your prevention efforts and assess their efficacy.

NIAAA Tools

A great starting point for prevention, specifically in higher education environments, is the website www.collegedrinkingprevention.gov, which is maintained by the NIAAA. The website is a repository of information, including fact sheets, reports, and presentations that can be helpful to both the beginner and the more seasoned prevention practitioner. To ground yourself in how the website seeks to categorize interventions, check out the 2002 document, “A Call to Action: Changing the Culture of Drinking at U.S. Colleges,” as well as its 2007 update, “What Colleges Need to Know: An Update on College Drinking.” “A Call to Action” reviews many of the strategies used at the time of publication to prevent high risk drinking and ranks them into “Tiers of Effectiveness” based on the amount of published research that supports their success rates at reducing substance misuse. “What Colleges Need to Know” provides a follow up on how colleges were utilizing the 2002 report and offers updated recommendations and statistics.

Once you are familiar with the ranking system, you should next familiarize yourself with the “College Alcohol Intervention Matrix (AIM).” This tool was published in 2015 and updated in 2019. It is available as a print copy (see Figure 6) or digital download through the website or as an interactive tool while on the website. The tool is divided into sections, with matrices that review current environmental and individual interventions, and with planning worksheets. If using the interactive version online, the environmental interventions are categorized based on effectiveness and cost at <https://www.collegedrinkingprevention.gov/CollegeAIM/EnvironmentalStrategies/default.aspx>. Click on any of the bolded strategies to learn more about them, as well as see how much supporting research they have. Similarly, the individual strategies can be viewed at <https://www.collegedrinkingprevention.gov/CollegeAIM/IndividualStrategies/default.aspx>. A strategy planning worksheet can be downloaded or completed online at https://www.collegedrinkingprevention.gov/CollegeAIM/Resources/Worksheet_for_Choosing_Alcohol_Interventions.pdf and allows a practitioner or task force to think through current strategies and their effectiveness, strategies they may wish to add, and what next steps should be considered to improve the overall efforts on their campuses.

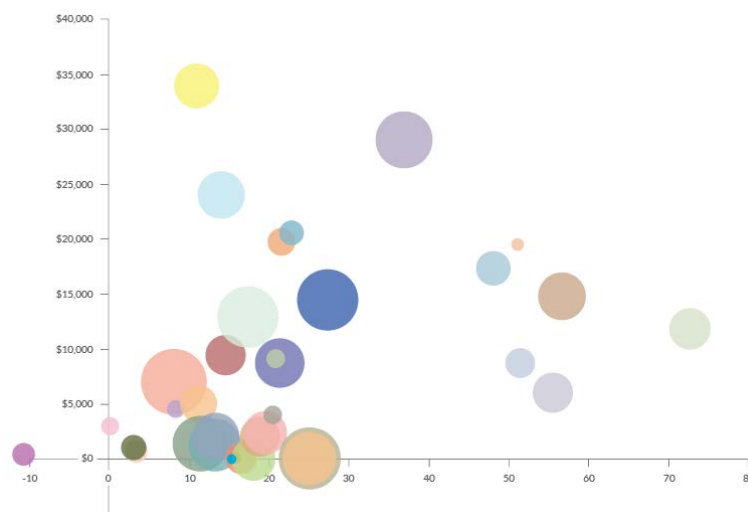
Figure 6. The College AIM Print Edition.⁽¹⁴⁾



Alcohol Prevention Compass

Another great tool is the Alcohol Prevention Compass, developed by EverFi and available at <https://compass.everfi.com/tool/compass/>. This visualization depicts 34 different strategies and plots their effectiveness, cost, and scale of impact on a graph. On the website, you can click on a strategy to see where it falls on the graph, learn more about the strategy, and see the available research that led to its placement on the compass. Print versions of the compass can be obtained by contacting an EverFi representative. The website also provides an avenue for campuses to receive a custom compass depicting the strategies currently used by individual institutions, which can be useful for guiding discussions with decision makers and senior administrators at your school. Keep in mind, though, that EverFi is a for-profit company, and while they offer many consultative services for free, their end goal is to sell you their online education products, so expect some frequent sales pitches.

Figure 7. Alcohol Prevention Compass Image.⁽¹⁵⁾



Evidenced-Based Practice Resource Center

SAMHSA also offers a free tool called the Evidenced-Based Practice Resource Center. This tool is not specific to higher education environments, but it is a database of various interventions, toolkits, resources, and information on a variety of substance use and mental health topics that is easily searchable. From its website, <https://www.samhsa.gov/ebp-resource-center>, you can search by topic, population, or target audience to review relevant materials and other documents that might be similar to your search terms.

This section in no way provides an exhaustive list of the resources currently available to help with prevention efforts, but it will hopefully give you enough information to get started and to feel more confident that you are selecting proven strategies for your unique campus. Additional resources and supporting documentation are available in the appendix of this manual.

Conclusion

As you are now aware, there is a great deal of science underlying prevention work to help increase the chances of meeting our goal of “nothing” happening. CHASCo is here to help you each step of the way as you begin navigating your new responsibilities and making decisions about the strategies you want to employ at your institution. Keep in mind that culture change will take time, and anticipate having to explain on occasion why you are using the specific strategies you select rather than just providing more educational information or attempting to scare students into positive behaviors. Those of us within CHASCo are in the fight together, and we stand in solidarity with you in your efforts to utilize effective strategies for your students.

In the words of John F. Kennedy during his 1961 inaugural address:

“All of this will not be finished in the first one hundred days. Nor will it be finished in the first one thousand days, nor in the life of this Administration, nor even perhaps in our lifetime on this planet. ***But let us begin.***”



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14. The College AIM Print Edition image. Accessed June 17, 2019 from <https://www.collegedrinkingprevention.gov/CollegeAIM/>.
15. Alcohol Prevention Compass image. Accessed June 17, 2019 from <https://compass.everfi.com/tool/compass/>.

Appendix- Additional Resources

Textbook Resources

Bensley, R.J. and Brookins-Fisher, J. (2003). Community health education methods: A practical guide. 2nd edition. Jones and Barlett Publishers.

Glanz, K., Rimer, B.K., Lewis, F.M. (2002). Health behavior and health education: Theory, research, and practice. 3rd edition. Jossey-Bass Publishing.

Green, L.W. and Kreuter, M.W. (1999). Health promotion planning: An educational and ecological approach. 3rd edition. Mayfield Publishing Company.

Web-based Resources

[Coalition for Healthy and Safe Campus Communities \(CHASCo\)](#)

This website of the statewide prevention coalition for higher education institutions in Tennessee includes prevention resources, training opportunities, and information about upcoming in person and online business meetings and professional development.

[Centers for Disease Control and Prevention \(CDC\)](#)

[The Guide to Community Preventive Services](#) is a resource for evidence-based recommendations from the Community Preventive Services Task Force about what works to improve public health.

[Center for the Advancement of Public Health at George Mason University](#)

[Creating a Strategic Plan for College Students](#) provides resources around strategic planning, including a “Promising Practices Action Planner” and a “Promising Practices Task Force Planner.” [Implementation in the College](#) contains multiple documents, standards, and workbooks about interventions taking place on college campuses. Although some of the information is becoming dated, like the [“Promising Practices: Campus Alcohol Strategies”](#) from 2001, it is still a useful resource in learning about efforts at a variety of campuses. [Reviewing College Initiatives](#) offers guidance and self-assessment tools for evaluating prevention efforts. This site also offers access to the most recent results of the College Alcohol Survey.

[Center for Community Health at the University of Kansas](#)

[Community Tool Box](#) offers step by step guides and models related to community building to address social determinants of health, engaging stakeholders, action planning, building leadership, improving cultural competency, evaluation, and sustainability over time. [Toolkits](#) are available for 16 areas of planning and program administration.

[Higher Education Center for Alcohol and Drug Misuse, Prevention, and Recovery](#)

[Prevention 101](#) is a five-part video series designed for new prevention professionals that explores the foundations of collegiate substance misuse prevention.

[National Institute on Alcohol Abuse and Alcoholism \(NIAAA\)](#)

[Alcohol Policy Information System](#) provides detailed information on alcohol-related policies in the United States at both state and federal levels. Detailed state-by-state information is available for more than 30 policies.

[Safer Campuses and Communities](#) website is based on an NIAAA-funded study that examined a variety of environmental-level strategies that could be implemented on campuses and in their surrounding communities. A free toolkit for implementing the collaborative model is available online.

[National Institute on Drug Abuse \(NIDA\)](#)

[NIDA's College-Age and Young Adults page](#) provides the most recent data on substance use among this age group, including patterns of marijuana use, non-medical use of prescription drugs, cocaine, and newer trends like synthetic drugs, e-cigarettes, and hookah use. It also provides other links of interest to educators, residence hall supervisors, counselors, clinicians, and researchers who work with this age group, as well as students and parents.

[Substance Abuse and Mental Health Services Administration](#)

[Center for the Application of Prevention Technologies](#) is a national substance abuse prevention training and technical assistance site. Resources on the site include:

- Evaluation tools and resources from federal and nonfederal sources
- Strategic Prevention Framework, a five-step planning process that guides the selection, implementation, and evaluation of evidence-based, culturally appropriate, sustainable prevention activities

[Report to Congress on the Prevention and Reduction of Underage Drinking](#) (2013) includes policy summaries and state summaries identifying current legislative and other ongoing efforts. This report is compiled by the Interagency Coordinating Committee on the Prevention of Underage Drinking and is available through www.StopAlcoholAbuse.gov and the SAMHSA Store.

[U.S. Department of Education](#)

[National Center on Safe Supportive Learning Environments](#) offers training, technical assistance activities, and resources to support assessment, capacity building, strategic planning, implementation, and evaluation. Resources on this site include:

- [Using a Public Health and Quality Improvement Approach to Address High-Risk Drinking with 32 Colleges and Universities](#) (2014)
- [College Alcohol Risk Assessment Guide: Environmental Approaches to Prevention](#) (2009)

- [*Methods for Assessing College Student Use of Alcohol and Other Drugs*](#) (2008)

U.S. Department of Justice

[Underage Drinking Enforcement Training Center](#) provides federal and non-federal resources, such as:

- College e-kit web section
- *Preventing Binge Drinking on College Campuses: A Guide to Best Practices* (2012)
- Promising Practices: Campus Alcohol Strategies (includes an Alcohol Task Force Action Planner)
- *Party Patrols: Best Practice Guidelines for College Communities* (2010)