Oregon State University

ALCOHOL & DRUG PREVENTION & EDUCATION PROGRAM

2018 Biennial Review

Posted in compliance with Part 86, the Drug and Alcohol Abuse Prevention Regulations, Education Department General Administrative Regulations (EDGAR).

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I. Introduction

The Drug Free Schools and Communities Act (DFSCA) and Part 86 of the Department of Education’s General Administrative Regulations (Edgar Part 86) requires institutions of higher education to adopt and implement drug and alcohol abuse prevention programs (DAAPP) for students and employees. Oregon State University (OSU) has developed and implemented drug and alcohol abuse education and prevention programming designed to prevent the unlawful possession, use, and distribution of drugs and alcohol on campus and at campus events. OSU is required to distribute written information about its DAAPP, as well as conduct a biennial review to measure its effectiveness and ensure a consistent enforcement of its disciplinary sanctions.

As a part of its activities, OSU distributes and has available written materials that include the following:

- Standards of conduct that prohibit the unlawful possession, use or distribution of illicit drugs and alcohol on University property or part of our activities
- A description of the health risks associated with the use of illicit drugs and abuse of alcohol
- Federal, state and local laws with applicable legal sanctions
- Information regarding counseling and treatment programs
- A list of prevention and education programming offered
- Specific information regarding disciplinary sanctions OSU will impose on students and employees who violate standards of conduct

The process of conducting a biennial review provides OSU with an opportunity to examine the reach and impact of our alcohol and drug prevention efforts. Through this review, we will acknowledge our achievements and most importantly, we will identify areas that need improvement. The spirit of improvement is our primary goal, as we are aware of the serious negative impacts alcohol and other drug abuse has on our campus community.

Specifically, OSU undertakes a biennial review to internally evaluate its alcohol and drug abuse prevention programming in the following areas:

- Determine program effectiveness and implement programmatic changes as needed;
- Determine the number of drug- and alcohol-related violations that occur on the institution’s campus or as part of any of the institution’s activities;
- Determine the number and type of sanctions that are imposed by the institution as a result of drug- and alcohol-related violations on the institution’s campus or as a part of any of the institution’s activities; and
- Ensure that the sanctions are consistently enforced.
II. Alcohol and Other Drug (AOD) Prevalence Rate, Incidence Rate, and Trend Data

A. AOD-related Incidents. There are several AOD-related incidents occurring in and around the OSU campus. [Data on the number of incidents is housed in the Office of Student Life, Student Conduct and Community Standards (SCCS)]. A summary of incidents is detailed below.

<table>
<thead>
<tr>
<th>Incident Description</th>
<th>AY 2016-2017</th>
<th>AY 2017-2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. On-campus alcohol-related incidents reported to the Office of Student Life/SCCS</td>
<td>685</td>
<td>878</td>
</tr>
<tr>
<td>2. On-Campus drug-related incidents reported to the Office of Student Life/SCCS</td>
<td>228</td>
<td>326</td>
</tr>
<tr>
<td>3. Alcohol-related student conduct violations managed by the Office of Student Life/SCCS and University Housing</td>
<td>300</td>
<td>518</td>
</tr>
<tr>
<td>4. Drug-related student conduct violations managed by the Office of Student Life/SCCS and University Housing</td>
<td>129</td>
<td>124</td>
</tr>
</tbody>
</table>

**Note:** Information reported only applies to students under university jurisdiction. When comparing these years, it is vital to report that the Code of Student Conduct (“code-level”) was updated during this time and changed what incidents were being referred and what behavior was a policy violation.

Definitions:

1. **On-campus alcohol related reports**
   - Case was adjudicated
   - Student was alleged of violating a code-level alcohol violation
   - Incident occurred on campus

2. **On-campus drug related reports**
   - Case was adjudicated
   - Student was alleged of violating a code-level marijuana or drug violation
   - Incident occurred on campus

3. **Alcohol-related student conduct violations**
   - Case was adjudicated
   - Student was found responsible for a code-level alcohol violation or off-campus violations of MIP, Open Container, or Hosting violations

4. **Drug-related student conduct violations**
   - Case was adjudicated
   - Student was found responsible for code-level marijuana, drug, or off-campus Driving-Related Incidents, which were drug related.
Only unique cases are reported in this data (i.e. if the student violated multiple alcohol sub-policies at the same time, they are only counted once). Although, if the individual violated alcohol and drug policies at one time, they are included in all data sets above.

Consider that 2016-2017 data included MIP, Open Container, Hosting, and Driving-Related Incidents (that specifically included alcohol or drug concerns) in numbers 3 and 4 (above). These were included to represent code-level violations for off-campus incidents, based on old jurisdictional limits.

If the location was listed as unknown, we did not include these cases in the on-campus statistics (1 & 2, above). In 2016, there are two unknown location cases related to alcohol. In 2017, there is one unknown location case related to alcohol. There are no unknown location cases regarding drugs.

B. Assessment Data. Assessment data is available for the OSU population from sources including the National College Health Assessment (NCHA), as well as annual data for incoming students completing AlcoholEdu. OSU has utilized the NCHA survey as the main assessment tool (administered every two years, beginning in 2000). NCHA data allows us to observe trends over time on the OSU campus as well as compare to national standards.

<table>
<thead>
<tr>
<th>NCHA Data</th>
<th>OSU 2016</th>
<th>OSU 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total percentage of students who reported never using alcohol</td>
<td>20.3%</td>
<td>17.4%</td>
</tr>
<tr>
<td>Total percentage of students who reported using alcohol within the last 30 days</td>
<td>65.5%</td>
<td>69.7%</td>
</tr>
<tr>
<td>Total percentage of students who reported consuming five or more drinks in a sitting (one or more times) within the last two weeks</td>
<td>32.1%</td>
<td>27.4%</td>
</tr>
<tr>
<td>Total percentage of students who reported never using marijuana</td>
<td>52.7%</td>
<td>47.6%</td>
</tr>
<tr>
<td>Total percentage of students who reported using marijuana in the last 30 days</td>
<td>28.0%</td>
<td>29.9%</td>
</tr>
</tbody>
</table>

As shown, the number of students surveyed who have never used alcohol has fallen in recent years and our percentage of high-risk drinking is also down. However, the total percentage of students who reported consuming alcohol or marijuana in the past 30 days has increased.

The AlcoholEdu data highlights results from all incoming students and was administered pre-matriculation and approximately six weeks post-matriculation.
AlcoholEdu Data

<table>
<thead>
<tr>
<th>AlcoholEdu Data</th>
<th>AlcoholEdu: Six weeks post-matriculation AY2016-17</th>
<th>AlcoholEdu: Six weeks post-matriculation AY2017-18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consumed alcohol</td>
<td>Past year</td>
<td>Past year</td>
</tr>
<tr>
<td></td>
<td>67%</td>
<td>66%</td>
</tr>
<tr>
<td>High-risk alcohol use</td>
<td>Past 2 weeks</td>
<td>Past 2 weeks</td>
</tr>
<tr>
<td>(&gt;5 drinks within two-hour period)</td>
<td>57%</td>
<td>60%</td>
</tr>
<tr>
<td>Marijuana use</td>
<td>Past 2 weeks</td>
<td>Past 2 weeks</td>
</tr>
<tr>
<td></td>
<td>16%</td>
<td>16%</td>
</tr>
<tr>
<td>Non-prescription use of stimulants</td>
<td>Past 2 weeks</td>
<td>Past 2 weeks</td>
</tr>
<tr>
<td></td>
<td>0.49%</td>
<td>0.57%</td>
</tr>
<tr>
<td>Illegal drug use</td>
<td>Past 2 weeks</td>
<td>Past 2 weeks</td>
</tr>
<tr>
<td>(excluding marijuana)</td>
<td>6.2%</td>
<td>6.4%</td>
</tr>
<tr>
<td>Prescription opioid use</td>
<td>Past 2 weeks</td>
<td>Past 2 weeks</td>
</tr>
<tr>
<td></td>
<td>0.61%</td>
<td>0.7%</td>
</tr>
</tbody>
</table>

Campus level data on drug and alcohol consumption and alcohol and drug use disorders among employees is not available. It should be noted, however, that the state of Oregon faces significant challenges related to drug and alcohol use among its population (both adults and youth). A summary of substance use disorders in Oregon from 2017 included the following data:

- In 2014, the Oregon Health Authority reported that 4.7 percent of Oregonians engaged in illegal use of opioids, the fourth highest rate in the country.
- In 2014, approximately 7 percent of Oregonians were dependent on or abused alcohol, slightly higher than the national average of 6.5 percent.
- In 2014, 16.5 percent of Oregon teens reported binge drinking alcohol, compared to 14 percent nationally.
- Oregonians suffer more from substance use disorder than the national average. Almost one of every 10 adults in Oregon depends upon or abuses illicit drugs or alcohol, as well as one of every 15 Oregon youth.

III. University Policy

A. Alcohol. The following behavior is prohibited:
   1. use, possession, or procurement of alcohol by persons under the legal drinking age; students are also considered to be in possession if the substance is in their bodies or the use is otherwise detectable;
   2. furnishing, manufacturing, distributing, or selling alcohol except as expressly permitted by law and the University’s policies regarding alcohol;
   3. driving under the influence of alcohol in excess of the applicable legal limit;
   4. public intoxication, possession, or use while on University property or at events except as expressly permitted by University policies regarding alcohol;
   5. disruptive behavior or other Code violations due to alcohol intoxication regardless of location;
   6. failure of a Student Organization to take all necessary steps to ensure that no person under the legal drinking age possesses alcoholic beverages at functions it sponsors or organizes, or within any property or transportation it owns, operates, and/or rents; or
   7. using alcohol to facilitate incapacitation or forcing ingestion of alcohol without consent.

B. Marijuana. The following behavior is prohibited:
   1. use, possession, or procurement of marijuana or its derivatives or paraphernalia related to use by persons under the legal age; students are also considered to be in possession if the substance is in their bodies or the use is otherwise detectable;
   2. public intoxication, possession, or use of marijuana or its derivatives or paraphernalia related to use while on University property or at University events;
   3. furnishing, manufacturing, distributing, or selling marijuana or its derivatives except as expressly permitted by law;
   4. driving under the influence of marijuana or its derivatives;
   5. disruptive behavior or other Code violations due to marijuana intoxication regardless of location;
   6. failure of a Student Organization to take all necessary steps to ensure that no person under the legal age possesses or consumes marijuana or its derivatives at functions it sponsors or organizes, or within any property or transportation it owns, operates, and/or rents; or
   7. facilitating incapacitation or ingestion without consent through the use of marijuana or its derivatives.
C. Drugs. The following behavior is prohibited, where “drugs” includes but is not limited to federally controlled substances, synthetic drugs or inhalants, natural substances used for drug effects, and medication used/possessed/handled in non-prescribed manners:

1. use, possession, or procurement of drugs or paraphernalia related to use; students are also considered to be in possession if the substance is in their bodies or the use is otherwise detectable;
2. furnishing, manufacture, distribution, or sale of drugs except as expressly permitted by law;
3. public intoxication due to drug use;
4. driving under the influence of drugs;
5. disruptive behavior or other Code violations due to drug intoxication regardless of location;
6. failure of a Student Organization to take all necessary steps to ensure that no person possesses or consumes drugs at functions it sponsors or organizes, or within any property or transportation it owns, operates, and/or rents; or
7. facilitating incapacitation or ingestion without consent through the use of drugs.

IV. Programs & Interventions

The following includes programming and interventions to support alcohol and drug prevention for students on campus.

A. Individual Level Programs and Interventions

1. IMPACT.
   An evidenced-based program designed to engage students in meaningful discussion about alcohol and marijuana use. IMPACT was developed utilizing components of the Brief Alcohol Screening and Intervention for College Students (BASICS) and Alcohol Skills Training Program (ASTP). The educational programming is provided by Student Health Services with coordination support from Student Conduct and Community Standards and University Housing and Dining Services. Referrals to the program come from multiple sources, including both on- and off-campus agencies. On-campus students are typically referred from University Housing and Dining Services or the Office of Student Conduct and Community Standards. Off-campus students are referred from Corvallis Municipal Court, Benton County Circuit Court, and occasionally other municipal courts from around the state. Students are most often referred to the program due to an alcohol or marijuana-related violation. The courts recognize IMPACT as a diversion program for eligible Oregon State students. Students may also self-refer to the program. The program fee is waived for self-referrals.
Based on specific information about their marijuana or alcohol usage, students are screened into a particular intervention (either two 90-minute group sessions for alcohol education, one 90-minute group session for marijuana education, or a 1:1 appointment with a Certified Alcohol and Drug Counselor). Upon completion of the IMPACT program, students have a foundational understanding of 1) Alcohol or marijuana and the effects of each on the body, 2) myths and realities associated with substance induced effects, and 3) skills to limit the negative ramifications of underage and excessive alcohol use or other substance use. Overall, the IMPACT program is guided by the mission of Oregon State University and is committed to stimulate a lasting attitude of inquiry, openness, and social responsibility. IMPACT is periodically revised to reflect student needs and available resources.

2. e-CHUG.
e-CHUG is a brief, anonymous, online assessment tool. This individual assessment takes approximately 10 minutes to complete and helps students understand their use of alcohol.

3. e-TOKE.
e-TOKE is a brief, interactive marijuana-specific assessment and feedback tool that provides individual insight into marijuana use, utilizing personalized information about students’ behaviors and risk factors. The anonymous, self-guided assessment takes approximately 10-15 minutes to complete.

4. Referral Programs to Off-Campus Treatment Providers for Students.
Student Health Services and Counseling and Psychological Services utilize trained individuals who are available to assist students requiring treatment referral.

5. Individual Assessment for Employees.
The Employee Assistance Program (EAP) has counselors who meet one-on-one with employees to provide counseling for many areas including alcohol or drug use. Employees initiate contact on their own or EAP may be suggested as a result of a sanction or disciplinary action. Employees can identify drug and alcohol abuse as a presenting concern, or the counselor may determine through the assessment process that a substance abuse issue exists. The counselor can make recommendations for referral to a treatment provider or other community resource for more long term support.

6. Referral Programs to Off-Campus Treatment Providers for Employees.
As stated above, EAP counselors may make referrals to treatment centers or other more long term support options based on employee needs.
B. Institutional-level Programs and Interventions

1. Educational Workshops.
   Educational workshops are the cornerstone of early intervention practices at Oregon State. Multiple departments and offices engage in workshop activities that are instrumental in reducing the burden of excessive and underage alcohol and substance use. “Up2u” is an education-based prevention effort focusing on the reduction of high-risk alcohol use. Up2u is a voluntary program, and presentations are available upon request by students, faculty, staff, coaches, residence halls and student organizations. Students can also meet with Up2u staff to ask questions or receive more information.

2. AlcoholEdu.
   AlcoholEdu is a comprehensive online education program designed to provide students with the information they need to make informed decisions about alcohol, link their choices about drinking to academic and personal success, and help cope with the drinking behavior of peers, as well as respond effectively in situations where others are at risk of alcohol-related harm. AlcoholEdu has been a mandatory requirement for all incoming first-year OSU students since the fall of 2014. We believe the implementation of AlcoholEdu on OSU’s campus continues to help us:
   a. Decrease high-risk drinking during critical times, especially the first 8 weeks of the fall term.
   b. Increase basic knowledge of alcohol.
   c. Track and monitor students’ alcohol use.
   d. Decrease alcohol-related disruptions in residence halls.
   e. Change culture and expectations around alcohol use.

   The Collegiate Recovery Community (CRC) opened its doors in fall of 2013 to offer support for students in recovery from drug or alcohol use. Before its creation, there was a need for recovery support on the OSU campus. In addition to the CRC, OSU opened the Recovery Living Community (RLC) in the fall of 2016. The RLC is located in Dixon Lodge and is Oregon State University’s first building dedicated to collegiate recovery support. Dixon Lodge is now home to both the CRC and RLC. Students participating in either the CRC or RLC are offered various events and programs including weekly check-in meetings, recovery birthday parties, team-building opportunities, movie nights and sober tailgating on home football game days. Dixon Lodge also offers meeting space for 12-step meetings, which are open to the community when at least one CRC member is present.
C. Community and Environmental-level Programs and Interventions

1. Late Night Programs (substance-free social options).
   Throughout the academic year, OSU provides students with substance-free social options. These activities are supported by Student Leadership & Involvement and include a variety of engaging events such as AMC Movie Night, After Dark, Haunted Memorial Union, OSU Foam Party, and much more.

2. Medical Amnesty Law.
   In order to remove barriers and reduce the number of alcohol poisoning-related deaths, Oregon State University put forth great effort to help pass the Medical Amnesty Law. Since January 1, 2015, this law protects minors in the state of Oregon from being charged with underage possession when calling 911 for someone they think has alcohol poisoning. This law also applies to any minor in need of medical attention.

3. OSU Prevention and Advocacy Coalition.
   The Prevention and Advocacy Coalition was formed in 2016 to ensure strategic and coordinated campus-wide efforts related to alcohol and drug prevention, violence prevention, hazing prevention and advocacy and the broad use of evidence-informed best practices. The Coalition employs a multi-unit stakeholder approach to reach across the campus and within the community. The Coalition’s charge is to:
   a. Develop specific goals, with implementation timelines and measures of success, to realize a vision of an OSU culture characterized by:
      › Respectful interactions and relationships, free of sexual assault and other forms of harassment and violence
      › Safe and healthy attitudes, decision-making, and behaviors related to alcohol and other drugs
   b. Develop evidence-based strategies and implementation plans to achieve the identified goals, with proposed:
      › Roles and responsibilities
      › Milestones
      › Timelines
      • Identify and employ measures to assess progress toward achievement of goals
      • Report periodically to senior administration and the broader campus community on priority projects and milestones toward accomplishing Coalition goals
V. Goals and Recommendations for the Next Biennium

A. Central Goal
   
   Increase efforts to address high-risk consumption in all student populations.

B. Individual Strategies (Goals for 2020 Biennium)
   
   1. Ongoing improvements to the IMPACT program and continue to expand the consistent use of IMPACT for all student alcohol and marijuana violations and citations.
   2. Identify improved collection/documentation methods for employee AOD violations and sanctions.
   3. Expand access to clinical services related to substance use disorders.

C. Institutional Strategies (Goals for 2020 Biennium)
   
   1. Continue to promote and support the growth of the Collegiate Recovery Community and the Recovery Living Community, including on-boarding new professional staff position.
   2. Launch a comprehensive AOD social marketing campaign.
   3. Conduct an institutional review of all campus units serving alcohol on a periodic basis.

D. Community/Environmental Strategies (Goals for 2020 Biennium)
   
   1. Utilize OSU Prevention and Advocacy Coalition as thought partners, creators, and editors of the annual and biennial reviews.
   2. Maintain collaboration with Benton County and Corvallis Police Department on awareness and educational opportunities for students.

VI. Conclusion

Oregon State University is committed to the process of continuous improvement. We look forward to the opportunity to focus on our goals and recommendations for the next biennium. These goals will form the basis for continued campus efforts and additional strategic planning.