

Report from the Alcohol and Other Drugs subcommittee to the Student Success and Academic Excellence Task Force.

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Background

SDSU recognizes that student alcohol and other drug use can pose a significant impediment to academic success, may lead to life threatening and other serious consequences, and negatively impacts our community. The issue is not unique to SDSU; indeed it is a campus, community and national issue. It has been estimated that over 1,800 college students die each year in alcohol-related incidents. Further, there are hundreds of thousands of alcohol-related injuries, assaults, and rapes (Hingson, Zha, & Weitzman, 2009). SDSU students and our broader community have not been immune from these tragic consequences. Therefore, we have a comprehensive strategy of prevention that seeks to reduce the abuse of AODs and their harms. The strategy follows the model proposed by the Student Health Services AOD Initiatives office.

The model for comprehensive AOD strategies includes elements from five interacting domains (see Figure 1). This model puts into place a system whereby (1) student attitudes and motivations to use or abuse AODs are changed through *Individual Focus* programs, (2) *Behavioral Alternative* opportunities for students to act responsibly while fulfilling developmental and social, and (3) access to AODs or risky ancillary behaviors are reduced to limit excessive consumption or harm through *Enforcement and Access Limiting* programs. These domains act both within the campus and at the



Figure 1 Comprehensive Strategy for AOD Prevention

broader community level thereby often requiring *Community Action* and involvement. Finally, all programmatic activity should be developed and evaluated within an environment of rigorous *Research* using scientific methods that enable measurement of improvements in individual and public health outcomes, cost-efficiencies, program sustainability, and program improvement.

Leadership

SDSU has established a leadership role within the CSU and the nation with this model. The model was adopted by the CSU system to organize its AOD meetings for many years, and other campuses and national organizations have used variants of this model. Within the model are programmatic activities that have also established our leadership credentials. Below are a few examples.

Individual Focus

Within the *Individual Focused* domain, the e-Check-Up-To-Go, which is an online alcohol assessment and intervention, is required of all students. It was developed at SDSU's C/PS office and is now licensed for use on about 500 campuses across the nation. Independent peer-reviewed studies have demonstrated that this intervention can reduce student alcohol consumption (see "eCHECKUP TO GO": San Diego State University Research Foundation," 2012)

Behavioral Alternatives

The Aztec Nights program is jointly supported by Associated Students, Student Affairs and Business Affairs. Concentrated in the first 5 weeks of the fall semester, this program offers high-profile late-night alcohol and drug free events for SDSU students. The program is credited for setting a healthy tone for students as they enter the Aztec Community (Higher Education Center for AOD Abuse and Violence Prevention," 2010).

Access and Enforcement

Since many of the unhealthy behaviors associated alcohol and other drugs also conflict with the law, enforcement is an important component to prevention. The SDSU Police Department has been a leader in creating a cooperative enforcement response with other agencies in San Diego. Indeed we've been able to show that by combining enforcement with student awareness, reductions in vexing problems like drunk driving can be made (Clapp et al., 2005). The enforcement and judicial sanctions also represent an important contact point for at-risk students, allowing for interventions that are tailored to their needs. This means that Counseling and Psychological Services, Center for Student Rights and Responsibilities, and other departments are included in the team that addresses student AOD risky behavior. Sanctions, such as CSRR imposed probation or suspensions, and counseling programs, such as the C/PS ASPIRE program, are examples of this important element of SDSU's response to AOD problems.

Community Action

SDSU was recognized by the U.S. Department of Education for its C-CAPP program in 2004. That program created a coalition that spurred stepped up enforcement around the

campus. More recently, SDSU's Coordinator of AOD Initiatives was instrumental in the development of the RADD California Coalition that seeks to reduce college student drunk driving. To date thirteen campuses have joined the coalition and this number is ever expanding. SDSU also is represented in two county taskforces: (1) prescription misuse, and (2) underage and binge drinking.

Research

SDSU has hosted some of the seminal research studies on the topic of college alcohol and other abuse. Faculty here have been awarded millions of federal research dollars to advance the field and have published on measurement (e.g., Clapp et al., 2006; Clapp, Johnson, Shillington, Lange, & Voas, 2008; Lange, Lauer, & Voas, 1999; Lange & Voas, 2000; Lange, Devos-Comby, Moore, Daniel, & Homer, 2011), prevalence (e.g., Lange, Reed, Croff, & Clapp, 2008; Lange et al., 2002; Shillington, Reed, Lange, Clapp, & Henry, 2006), prevention (e.g., Clapp & Lange, 2006; Clapp et al., 2005; McCabe et al., 2007), and etiology of abuse (e.g., Clapp, Segars, & Voas, 2002; Clapp & Shillington, 2001; Reed, Clapp, Lange, & McCabe, 2011).

Looking Forward – Recommendations to the Strategic Task Force

That we have been innovative, effective and a model for others does not imply that for SDSU (a) the problem of AOD abuse has gone away, nor (b) that there are not more steps we can do to improve the situation. This is partially due to the persistent nature of the problem, but also partly due to the ever-changing nature of AOD abuse, and the steady influx of new young students exploring the developmentally expected aspects of independence and social bonding.

Therefore, it is our expectation that SDSU should seek to maintain its leadership, focus and actions to further enhance the prevention goals.

Leadership

To be a leader, SDSU must foster, support and value expertise in the field. To date, this has meant allowing for faculty initiated projects and research to flourish. The C-CAPP project (J.D. Clapp & Stanger, 2003), the Alcohol Research Collaborative project (Lange, PI), and e-CHUG initiatives (VanSickle, PI) are all examples of this. Faculty departments and Student Affairs should be encouraged to continue to recruit and support faculty whose research interest and expertise can help benefit the campus on this important issue.

One way to support this is through a structure of research resources that facilitate the study of college-student AOD issues. A system of regular surveys, alcohol and drug indicators (such as arrests and medical transports) and graduate students are the basic infrastructure for this type of research. This research would also feed into a proposed Annual Report (see below) that would guide continued strategic planning. Costs of this effort could include funding for two graduate assistants to be supervised by the Coordinator of AOD Initiatives and \$7,500 in data collection costs.

Leadership also relies on communication. Our work to date has been recognized across the country as cutting-edge and valuable. However, on campus, and to some extent within our local community, it is not always recognized. Use of open forums, topic teach-ins, the proposed Annual Report (see below) to the Faculty Senate and other venues may help assure that the SDSU community is better engaged in the topic and those in a position to help can be tapped. It is critical that we engage faculty support for our programming, allowing those who have direct contact with students every day to see the value of AOD prevention programs and encourage curriculum and research infusion of AOD topics into faculty expertise domains.

Leadership also means bringing together various interest groups to accomplish large changes in campus and community norms. For instance, it has been suggested that the physical structure of our Fraternity Row buildings and their management under various jurisdictions helps to foster an environment that allows and possibly even encourages excessive consumption of AODs. To make changes to the physical environment that such an observation suggests will require leadership at the highest levels of SDSU, the SDSU Research Foundation, Associated Students and the fraternities themselves.

Focus

SDSU has always acknowledged the importance of managing the problems of student AOD use and abuse. However, the degree to which new initiatives are generated and embraced waxes and wanes. This can sometimes lead to reactive instead of strategic actions. Creating a system whereby student AOD use is regularly measured and reviewed at the highest levels can serve to maintain the focus and continued leadership. A taskforce that is comprised of high-level cabinet officers as well as relevant department heads should review the data and programmatic progress on a quarterly basis. This taskforce will also serve to inform the creation of an *Annual Report* discussed below.

Specific Actions

Several programs and areas are currently understood to need attention now. These are:

1. Annual AOD Strategic Assessment Report to Faculty Senate. On an annual basis the Coordinator of AOD Initiatives, with the help of a committee of relevant campus representatives, will submit a report on the state of AOD use, prevention programming and policies to the Faculty Senate. This document will serve as a basis for disseminating program activities, explicating challenging areas and engaging the broader campus community in efforts to reduce identified problems. The report will also form the basis for the federally mandated biennial Drug Free Schools and Community Act review, and the CSU mandated biennial reporting. The assessment will require some annual expenditure to support graduate assistants and data collection efforts.
2. Fraternity supervision. Those within the greek community are recognized to comprise a disproportionate share of the problems associated with AOD use. To make inroads in this community, a restructuring of the way student organizations are recognized is recommended. Each organization should be capable of periodically demonstrating that their recognition fits within the broader SDSU institu-

tional mission. Holding all organizations accountable to fulfilling this obligation for continued recognition should be a priority.

3. Emerging drugs. Prescription drugs are proving to be a substantial threat to the wellbeing of our students. However, as of this date, there are no evidence-based approaches to preventing prescription drug abuse. New initiatives should be developed and evaluated to make progress towards reducing this problem.
4. Proactive Contact. Many of the opportunities to engage students in AOD prevention occur in the context of judicial action. To contact students before problems are noticed, a *screening and brief intervention or referral to treatment* (SBIRT) program should be implemented within the Student Health Services. Such a program would reach a much more broadly representative group of students than our current residence hall and fraternity oriented programs. Costs for this program would include staff for intern supervision, and counselors for students who meet the referral screen criteria.

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