

UNIVERSITY OF MASSACHUSETTS AMHERST  
OFFICE OF THE FACULTY SENATE

From the 667<sup>th</sup> Regular Meeting of the Faculty Senate held on November 15, 2007

PRESENTATION BY SALLY LINOWSKI,  
ASSOCIATE DIRECTOR, UNIVERSITY HEALTH SERVICES  
“SUCCESS AND SUSTAINABILITY: BASICS AT UMASS AMHERST”

A PDF version of her PowerPoint presentation is available at:  
[http://www.umass.edu/senate/fs/minutes/2007-2008/linowski\\_powerpoint\\_667\\_11-15-07.pdf](http://www.umass.edu/senate/fs/minutes/2007-2008/linowski_powerpoint_667_11-15-07.pdf)

First, thank you for letting me spend some time with you this afternoon. What I am going to share with you is a lot of data in a short amount of time. I promise not to do death by PowerPoint. I have done this presentation in different formats in a lot of ways. But, I have some really exciting news to share with you about the campus, the culture, the significant reductions we are seeing in our high-risk drinking rates, and the effect of this on some of our prevention programs. What I will do in next half hour or so is give you an overview of the University's comprehensive alcohol and other drug abuse prevention programs. I am going to share with you some of our data on recent trends in student behavior and some of the consequences we are seeing. I also would like to increase your understanding of students' perceptions of the campus climate and how that contributes to a climate of high-risk drinking or not. Then I would like to particularly highlight the successes of our BASICS program which is an individual intervention for our high-risk drinkers. I know it is an ambitious agenda, but I promise to keep you awake as we breeze through it.

To start out with, it is important to understand college drinking as a major public health problem. What this slide shows is that there is something that is sort of colloquially called the “College Effect.” This is our college-bound folks, and this is our non-college-bound. In high school, our non-college-bound people are drinking more drinks per month, and then, after college, you will see they sort of level off. Look at folks who go on to college. Their drinking levels almost skyrocket once they go to college. That is believed to be because of the environment and cultural norms that exist around drinking in college. In 2002, the NIAAA (National Institute on Alcohol Abuse and Alcoholism) really brought this to institutions of higher education's minds in a very significant way. They did a meta-analysis. They reviewed best practices. They tiered prevention strategies on evidence of effectiveness. In the past – and I've been doing this work for twenty years – we used to do prevention by what felt good or what seemed like it might work. Those days are done. What we are doing now is what has evidence of effectiveness and not wasting our time and energy on, for example, crashed cars as a deterrent to drunk driving, because what we know is those actually have a deleterious effect in that there is actually an increase in drinking and driving after an event like that.

The year 2002 was sort of a wake-up call to colleges and universities. As I mentioned, college drinking is a major public health problem. This slide sort of summarizes the major effects on an annual basis. We have 1,700 student deaths related to alcohol, over 1/2 million unintentional injuries, over 1/2 million assaults, and 79,000 sexual assaults. Other behavioral consequences that happen as a result of student drinking: driving under the influence, having unprotected sex, developing alcohol-related health problems. Twenty-five percent of students actually report academic difficulties as a result of their drinking. What we know nationally from the literature, and what we know on our own campus, is there is an inverse relationship between GPA and the amount a student drinks. As their consumption level goes up, their GPA drops. Now that does not hold true for every individual. We all know Uncle Arthur; Uncle Arthur who smoked 17 packs of cigarettes a day, lived to 99, and never even had so much as a cough. We always know public health exceptions, but, for the majority of students, it is that inverse relationship that happens.

Another key point that the NIAAA brought to bare for us is that 31 percent of students meet the criteria for the diagnosis of alcohol abuse. What is unique about a college environment is that the behavior that is often condoned and looked upon as sort of a rite of passage would be seen as problematic in a normal, non-college population. This is sort of the backdrop of what has been brought to our attention. How do we address this? Like any other public health problem, you use a theory-based approach and you look at data-driven programming. We use an ecological framework for organizing our prevention efforts on the campus, and this is based on recent scholarly reviews which have told us education alone does not change behavior. I could go as a health educator, as the

Director for the Center for Alcohol and Drug Abuse Prevention and talk to every individual student class that you would let me into about how to moderate their drinking. Education alone does not change the behavior. In order to really impact a public health problem, you have to change the environment.

This slide shows us, in essence, sort of the key points of the ecological framework. What it suggests to us is that the effective strategy is called “Environmental Management.” These are factors that we need to address to have an impact on the problem. Individual factors. Those are things particular to an individual. That may be their family history, whether they have an alcoholic in the family, whether they have been allowed to drink, what the drinking rates are in their town where they come from, what the alcohol policies are, the laws, the level of enforcement, the individual level things. Peer factors. The impact of peers on peers. In fact, with alcohol abuse, what we know is it is usually the most socially-connected students who have the highest drinking rates. Social capital is a risk factor for high risk drinking – important to understand. Institutional factors. Those are things particular to our University. Those are things like our architecture. We have an architecture problem on this campus, and it is called Southwest. We have 5,000 students living in a highly dense population. That is a ripe environment for negative peer influences. We have a lot of positive things going on in Southwest in terms of our first-year programs and our RAPs and TAPs and things like that. Other things that have an effect on drinking on a particular college campus are whether you want to have Division I athletics, whether you have an active Greek system, whether you are rural, public and have a predominately white population. Guess who that is? That is us. So, those are institutional risk factors. Community factors are things about our local environment: Amherst, Hadley, Pioneer Valley, Western Massachusetts, and, to a larger level, the state of Massachusetts. There is a term we use in the field called the state sets the rates. Often times, what we see is the alcohol use rates that are prevalent in the State get brought down to the local level at the University, campus, and then public policy. In order to address this problem we need to have impact and strategies in all of these areas. If we were to focus on just one, we would be missing some things.

You may have seen this last year (referring to the slides). When we think about an environment that promotes high-risk drinking – do folks remember seeing this billboard – right over the Coolidge Bridge as you come in from Northampton into Amherst – “Expect Everything.” Would you see this in Newton on the side of the road? Would you see this in Longmeadow on the side of the road? Why is it in a college town? We know why. It is direct marketing and promotion to college students. Another example, a local business: Four Seasons Liquors. Nothing against Four Seasons Liquors, but the reason this photo is on here is it has been brought to our attention by a number of folks. “We have ice luges.” Do people know what an ice luge is? It is a block of ice. It has a little river cut into it. You put it onto your table, you pour hard alcohol on it, and you get an instant frozen shot. This is not what we are doing at our parties. Who is? It is underage and college students. This very advertisement is saying we support high-risk drinking. We support ways of getting mass consumption of alcohol in quickly. These are just some of the influences that I took snapshots of to show you.

Environmental management. There are five strategies for environmental change, and these are based on factors in the environment that are shown to increase drinking on a campus. Limiting alcohol availability. These are things like controlling access to underage people, limiting the amount of alcohol available on campus, having strict enforcement of policies. What we know is, as retail outlet density increases – so if you have a lot of bars, liquor stores, and restaurants in your local community – you see a higher rate of drinking on your campus. That holds true nationally. Every time there is a new liquor license being proposed for the town of Amherst, we just need to think about that and what the impact is going to be on our campus. Restricting alcohol, marketing and promotion is another effective strategy. We saw some examples of that: offering alcohol-free social and recreational options. The more there is for people to do, the less likely they are to spend their time drinking. The flip side of this – and this is one that has not gotten a lot of support in academic venues but is true and has been shown to be effective on a lot of campuses – is having more Friday classes, more Friday morning classes, Thursday morning classes. As an institution, as we bulk load all of our required courses and have everything on Monday, Tuesday, Wednesday, or allow someone to graduate a four-to five-year program by having all of their classes having never taken a Friday class, we are sending the message that Thursdays and Fridays are party days. You can get away with that. A lot of campuses are actually reviewing their curricula. In fact, when we talk with parents in the summer at orientation, we will say things like: “If your son or daughter calls up and says, ‘I cannot get any classes. There are no classes here.’ Ask them if they are looking at Thursdays and Fridays.

Get on SPIRE. Take a look at all of the courses. There is a wonderful load of courses.” If you are trying to bulk everything on Monday, Tuesday, Wednesday, I would hope that you cannot take all of your classes. Having a lot of free time, having a lot of dispensable income, and not having a lot of expectations, correlate with increased drinking rates.

Increasing enforcement of laws and policies. Most campuses that have started to do environmental management have focused here, and that has been the case here at the University. If we focused on enforcement and tightening up our laws and policies – that is where you get the biggest bang for the buck in the beginning. If there is inconsistent policy enforcement and inconsistent law enforcement, that sends the message that, you know: we will look the other way. Kids will be kids and that sort of thing. We have done a major initiative there. We continue to do that, but not to the absence of other strategies.

The last effective strategy is changing the normative environment and correcting misperceptions of social norms, and I will talk a little bit about what those are. This is a slide we use with students because sometimes when you are the Alcohol and Drug Abuse Prevention people, people think you are the prohibitionist, have no fun, Carrie Nation sort of people. Like good public health trained professionals, we believe in the philosophy of harm reduction which is giving people educated information so that they can make responsible decisions and also having an environment that supports health, safety, and well-being. This slide is the mouse with the helmet going for the cheese. At least if he is going to go for the mouse trap, he has got some protection on, and that is what we are trying to do – build the skills and capacity of individuals and of the environment to have a healthy and safe campus. It is not about prohibition; it is not a dry campus; it is about harm reduction. We use that with students, and I thought you might get a kick out of it.

This slide I like a lot because it shows you sort of the spectrum of intervention responses that we have in place. I mentioned earlier that you cannot just focus on one of the areas in order to have an impact. You have to diversify your efforts and look at many levels. This is actually from the National Institute of Medicine. This is their spectrum of intervention. What it shows us is universal secondary and tertiary prevention approaches. What you will see here is this is the vast majority of people. They are people who may drink in low-risk ways. They may not drink at all. They do not really have any risk factors other than being a college student which is a risk factor for high-risk drinking. In here, we have our other folks. These are folks who have already indicated some problems – maybe a brush with the law, maybe a policy violation. They may be a member of a particular at-risk youth such as a student athlete or a member of a fraternity or sorority. We want to do different levels of intervention for these folks. Out here are people who are already addicted, people who are alcoholics, drug addicted or having serious consequences of their use. In order to impact this issue – if we were to focus all of our resources here – this is not the vast majority of people. However, there are people there who need services, so you diversify across.

What you will see here is that some of our programs sort of put into the tiers and the spectrums. We have MyStudentBody which is the online alcohol education course which is now required for all first-year students. Thank you very much to the Faculty Senate and the Health Council two years ago for making that a requirement. I have some great data for you about that. We have peer educators, our Not Ready for Bedtime players, our social norms marketing campaign which is the number one effort at changing the normative environment in what students believe about other student behavior – because, as we know, perception is often times reality. Across the bottom, we have our campus community coalition to reduce high-risk drinking which is working at multiple levels, and I’ll talk about them a little bit more in a second. In the middle, we have our BASICS program which is our individual intervention. Smart Choices is a program for student athletes, and Fresh & Sober is a resource and social networking group for students in recovery or students who are interested in exploring a life of recovery. They go to meetings together, and that has been a growing, growing program. That is sort of the overview, some of our innovative approaches.

The Campus & Community Coalition to Reduce High-Risk Drinking (CCC) was formed in 2004. This is sort of our overseeing body for all of the initiatives that we are doing. We have a number of active subcommittees this year looking at different issues. We have a new web site that is being launched very soon. We have a leadership reception later in December to give some awards. But, the important thing to know is the community problem. If the University alone addresses the problems, we would push things out into the community. If the community tightened down things, we would get pushed on together. We work together, collaboratively, to look at the factors in our environment. I

am going to take you through what some of those are, and that will make a little bit more sense in terms of why we have these particular subcommittees in place. The bottom line is we are using a data-driven approach. These committees are based on the particular needs and risks in our environment as well as the protective factors.

Some of the municipal impact that our Campus & Community Coalition has had: last year, there was a petition before the Amherst Select Board to change the open container bylaw, to have it be a non-criminal offense. The CCC wrote a letter in support of the police department, saying that it is often the first line of defense for police in breaking up big parties. Hadley, then, as a result of one of our roundtables, implemented an open container bylaw and a keg registration bylaw. That is a direct result of working on the Campus & Community Coalition. In Amherst right now, under consideration, is a Nuisance House Ordinance for problem houses, party houses which brings a lot of support to our neighbors who are bothered. There is increased cooperation between the police, landlords, and the University, and we have had a number of roundtables addressing key issues. Those are some of the impacts beyond the footprint of the campus that I wanted to make sure that you had an understanding of.

MyStudentBody is the alcohol education course. It is an online course. It takes about an hour. We have required it for first-year students for the past two years. The update I have is that 96 percent of them have passed the course. About 300 of them have registration holds right now. What that means is they have been told since they were accepted into the University back in the summer and they came to new students program – they have known and have been getting e-mails from us since August saying, “You need to do this. You need to do this. You need to do this.” This last 300 of the laggards, they are the ones who disregard everything and assume if I just ignore it, it is going to go away. We have about 300 of them. We are doing e-mail targeted follow-ups with those folks. We do put a registration hold on if they have not completed the course. Once they complete it, we will lift the hold. That is important for you to know. If a student comes in and says, “I have a MyStudentBody hold and I do not know what that is,” they know.

Whenever you put into place requirements, you expect students to not like it. This is some of the evaluation data from MyStudentBody in terms of students’ ratings of the course. This, to me, is very powerful. Eighty-eight percent are saying the course is average to excellent; it increased their knowledge of alcohol, made them pay attention to their drinking. They feel that the course can answer their questions about drinking, and they would recommend it to a student with a drinking problem. The nice thing about online education is it guarantees – to some extent, you know, people can cheat at anything – that we can get alcohol education and personalized feedback in the hands of each individual student. With my staff of seven health educators, there is no way we could get all 4,500 students with this information. We are really delighted with the results of MyStudentBody.

Now, we are going to get into the good stuff, the survey data. What I am going to share with you is information from our campus-wide survey. We do a web-based survey of a random representative group of students every single year. We have been doing the current instrument since March 2005. I will give you some comparisons from 2005-2007 – 2005 being when we really implemented some of our comprehensive approaches – and then I am going to take you back to 1997. We are going to do a little retrospective here. You know, the Grateful Dead has a course here. We are going to go back to 1997 if you remember that far back, because sometimes we may get the idea that drinking is worse on the campus. I am going to shed a little light on that for you.

First, we start off with: what do students think? Do students believe that alcohol use is a problem on their campus? Here what you will see is that the majority of them believe that it is. Seven percent say that it is not a problem. Ninety-three percent are saying, “Yeah, it is causing some problems on my campus.” In fact, you have over half saying it is a problem of some magnitude. That is important for us to understand because, individually, students may not say that to us. They may not admit that because the social norm is against that. They think their peers have really permissive views about alcohol. They think that their peers are drinking more than they do. This belief becomes silenced. You feel like you are the minority, when actually you are the majority.

This slide is one we use with parents, also with students, just to sort of give an idea. We talked about the College Effect – that there is something that happens when students come to college where we see their drinking start to escalate. In our case, we know from our UMass students that 83 percent of them had their first drink before 18 or younger, and of those I think it is about 78 percent who were

drunk. They have had alcohol, and they have been drunk before they came to us. They have some patterns in place already. We always say to the parents, “that was when they lived with you. You need to give us some slack here when we are trying to deal with them on this University campus.” They are coming with experience already. The old social inoculation model is not going to work here. The other piece is that the majority, almost 80 percent, do so nine days or less per month. Now, if you were to ask students – although I think it has changed some – how often do students drink? They are going to say, Thursday, Friday, Saturday, sometimes Wednesday, Monday if it is Monday Night Football, and Tuesday for Thursday/Tuesday. But, the reality is it is nine or fewer days per month. That is important. If the student says, “I drink like everybody else, and it is four days a week,” they are not drinking like everybody else. They are in that top-tier of high-risk drinkers. That is just a little background.

Here we get into some of the differences by age. This looks at prevalence of use per underage students and of-age students. The dark bar is our underage students, and the lighter colored bar is our of-age. The first one asks, “Have you had alcohol in your life?” Less interesting, lifetime use is not a particularly interesting measure, but we put it in there anyway. Just to show, 97 percent, by the time they are 21, have had alcohol. Eighty-seven percent of our underage folks have as well. This is really where we get interested, is thirty-day use. This is what we consider current drinkers. Eighty-eight percent of legal-age and 72 percent of underage folks are current drinkers. I need you to do the flipside on there with me, too, because here we have 28 percent of our underage students who did use alcohol in the past thirty days. That is a pretty significant majority, but, often times, they feel like a minority.

Here we get into our blast from the past. I have taken you back to 1997 up to 2007. The red bar is the UMass rates, and the blue is the national. The heavy episodic binge rate is also called the binge drinking rate. It is the measure of five drinks for men, four for women in a sitting. It is the minimum threshold for which we start to see consequences appear related to drinking. It is not a very sensitive measure. However, what you will see here is in 1997, we were at 63 percent. If you go across to 2007, we are at 56.8 percent. But, hopefully you are seeing that we are higher than the national average on all of those. That is because of some of the factors that I named earlier in terms of being rural public in the Northeast, having Division I athletics, Greeks, and a predominately white population. Since 1997, we have had a 10 percent decrease in our heavy episodic drinking rate; since 2005, 3 percent.

Let us get a little bit deeper. Our underage drinking rates. Here is our heavy episodic drinking, that five or four measure, for students who are underage. This has given us a little bit more information. We are seeing a statistically significant decrease since 2005, when our campus community coalition got underway, when we put in place our BASICS program, our Social Norms program, MyStudentBody, and a lot more of the comprehensive approaches in addition to reviewing alcohol policy and enforcement initiatives. Looking at this, we see a 14 percent reduction in a two-year time period. This is phenomenal. This is absolutely the stuff that I am delighted to see.

An unidentified speaker asked if other factors such as availability or money could have affected the drop in the drinking rate. Can Associate Director Linowski really take full-credit for that drop?

I am going to take full-credit because we have a comprehensive approach. We do not look at the monetary. We do not look at how much money is available. But, when we get into the frequent heavy episodic drinking rates, you are going to see some more there. What we know is that because we are doing evidence-based approaches, and we are addressing the effective strategies that we can have good confidence that there is a result. There could be other factors that are contributing in a positive way to that. But, the fact that we did not see these levels of changes previously, and the fact that in 2003 we were much higher, would suggest that.

Let us go on to the frequent heavy episodic rate, and this is considered our highest risk drinkers. These are folks who drink in that five and four way, three or more times in a two-week period. These are the folks that you would consider the hardest to change, and they are also the ones who set the tone for your campus environment. These are the ones who are sort of the social mavens of the party reputation of your school, so to speak. Looking again, we have UMass up at the top then the national rate. What I hope you are seeing here is that, as time has gone on, we have approached and met the national rate. That is great news. What this represents is a 41 percent decrease since 1997. Since we have put in place our comprehensive initiatives right here, we have seen a significant decrease as well. These are the folks who are considered the hardest to change, and they are also the ones who

have the greatest impact on your campus community. Since 2005, if I were just to look from here, this is a 25 percent reduction, statistically significant. We are delighted with that.

This one everyone tells me to take out, but sometimes I leave it in because people say, “What about other drugs?” At the bottom you have cocaine and everyone is like, “Why do you keep cocaine on there?” Just to show it is a very small minority of our students – in thirty-day measure, less than one percent of people. It has held pretty steady across the bottom. But, look up here. We have marijuana and tobacco which are the other two primary drugs of abuse on the campus. We had a little inverse situation going on here. But, in 2007, we have more marijuana smokers than tobacco – fascinating – and look at the drop since 1997. What we see on campus is as you address the high-risk drinking, you see your drug use rates go down. For all thirty-day measures of other substances – heroin, cocaine, prescription drugs, LSD – we are less than a 5 percent use rate.

Now we get into where are students drinking? This is among people who reported drinking in the past thirty days. Where did they go to drink? Off-campus parties, residence halls, fraternities and sororities, on-campus athletic events, campus pubs, on-campus concerts or dances. The reason this is important for us to know is we need to know where to focus our efforts. We know and the town can say, “Well, students are going off-campus to drink.” Then what we want to do is say, “Well, yeah they are.” They can choose multiple options here, that is why it does not add up to a hundred percent. We can partner with them, and then also identify what those places are. Drinking that happens in the residence halls – as much as we have policy – they still continue to drink. I looked back to 1997. Fraternities and sororities were 67 percent. On-campus athletic events, this is primarily tailgating, is where they find easy access to alcohol, although athletics just put in place a new tailgating policy. They are doing community policing. From what I understand, that is really going very well. We do not really have a campus pub. We have a graduate lounge. That is something we have to keep an eye on. It is not a problem right now. We do not have problems with underage students getting access in there, but remember we talked about availability. If we see that start to go up, we just might want to consider that.

This one is of interest because it looks at local community in terms of availability and access, our students being carded. What you will see here is the darker bar is our underage students, and the pink is of-age. This was asked, only of students who are current drinkers in the past thirty days, “Where did you go?” Look at this one here. We have, “went to a local bar with the intent to purchase.” Twenty-two percent of underage, seventy percent of of-age. Okay, not so bad. Look what happens here. Almost a hundred percent of of-age students are being carded; only eighty percent of the underage. What do you make of that? The same thing happens here with going to a local liquor store with the intent to purchase. If you are of-age, you are being carded. If you are not, you are less likely to. What I mentioned for our Campus & Community Coalition – we have a Retail Partners Committee, and the Retail Partners Committee is to work with our establishments not as a shaming approach but to reward best practices. We have been talking with students about what do you think this is? What is this about? Probably that there are one or two places that are known that are easy to get into. You go before there is a bouncer on duty. We do not see a high percentage of students using fake IDs, and there can be someone at the door who knows people and lets them in.

(Answering an inaudible question). The survey asks, “Did you intend to buy, and then were you carded?” It is looking at: are you carding, because they are supposed to card everybody.

(Answering another inaudible question). All the survey asked was, “Did you intend to buy, and were you carded?”

This information is based on the survey asking students about the consequences of their drinking. Earlier I brought up the national perspective. These are some of the consequences that our students report. Here I have only given 2005-2007 because to get into the national gets too confusing. What you will see is that everything, for the most part, is on a downward trend. Thirty-six percent of students did something they later regretted. This was asked since the beginning of the school year. This was a September to March measure. At least once, 33 percent of students had a black-out – that is not remembering what you did; 25 percent had an argument with a friend; and got into trouble with police. What we see with peer institutions is we are higher on the consequences. We are higher on the overall binge rate and lower in getting into trouble. I would actually hope to see that increase a little bit more as the years go on because what we know is policy enforcement is a strong deterrent for dangerous behavior.

Driving behaviors. The first question asked – this is only of students who drank – “Have you gotten into a car in the past thirty days after drinking?” Twenty-two percent in 2007 said that they had. Six and a half percent said they did so after 5+ drinks. Not a majority, but clearly not a number we like to see. And, 25.9 in 2007, “got into a car with someone who was drinking.” I looked back to 1997. Driving after drinking was much higher. It was on the magnitude of 40. Getting into a car was around 40. The good news is they are doing more sobriety check-points. There is more law enforcement, and the perception of getting caught while drinking and driving is up. There has been some laxity in that education and enforcement since the 1980s when MADD was really prevalent. These students did not grow up with that. They were too young. We are seeing some more enforcement.

Let us look at the academic consequences. You are faculty. This is what you care about, right? Well, I know you care about everything else. Missing a class. This asks, “Since the beginning of the school year, have you missed a class as a result of your drinking?” Twenty-four percent of students said that they had missed a class. Now, let us go back a minute. If you schedule yourself so that you never have classes on Thursday and Friday, you are not going to report that you have missed a class, right? That is just something else to consider. Fell behind in schoolwork? Nineteen percent of our students are falling behind in their schoolwork. We are seeing some decrease there. We hope to continue to see that.

The second-hand effects of drinking. Drinking affects the quality of life for all students. The highest risk students at twenty-five percent that are the frequent heavy episodic drinkers have become the culture custodians of the campus. This question asks, “Have you been bothered by others drinking?” These are some of the ways. Sixty percent have had to babysit a drunken student, taken care of them. I am less concerned about that number because it is a one-time measure, and one of the things we do at Health Services is to try to encourage students to look out for one another. There is a phenomenon that happens where people are like, “Oh, they are drunk. Let us just let them sleep it off.” We see this happening in emergency rooms. People drive up. They dump a body out that is overdosed on drugs and alcohol, and they cruise off because they do not want to get into trouble. That is not healthy and protective, and that is not a good friend. We are trying to encourage students to look out for one another, and, if there is someone who needs some attention, take care of them and get them some help. This one does not concern me too much, but it does tell you that students are taking a lot of time taking care of people. The next conversation is, “How do you then talk to your friends if this is a more than a one-time occurrence?” Having interrupted your sleep time or study time – this is a statistically significant drop here, so that is good news. It is less but still 53 percent are saying, “Yeah. It is bothering me.” This is one point where students and our community members would agree. Drunken people are taking away from my study time and my sleep time – hence the community problem. Had a serious argument or quarrel with someone who was drinking, or you were assaulted or humiliated from someone else’s drinking? These are the health effects, the safety effects. That is, if drinking rates go down, we expect to see these drop.

One of the things I mentioned was policy. In 2005, the University reviewed its residence hall policies based on patterns of behavior that were becoming particularly problematic. Beer pong games, funnels which have been around a long time. Large volumes of alcohol and 11 code violations were added to address dangerous drinking practices. One of the things you need to ask is: Do students read the policy? Do they know it? Here, what you will see, is 67 percent of students said they read the alcohol policy. There was an administrative decision that was made this year that we need to monitor, and I will be looking at March’s survey to see that. The decision was not to mail the policy to parents and to every student. There was a little book they used to get that explained it. The decision was made to put it online so that students would sign a residence hall agreement when they moved in, but that we would make it available online because that is how they get information. In January 2005, we changed the alcohol policy, and that was out of the norm. You never change the alcohol policy in the middle of the year. The fact that we did meant we had to do a massive media effort. There was extra education to do that. That year, we saw that 87 percent of students said they read the policy. Next year, when we do this survey in March, I am going to see, did this number drop? If it does, then that tells us we need to do a little bit better job at getting the information out to students. The other concern I have is: How are off-campus students being informed of the alcohol policy on-campus? If they come into the residence halls, do they know what they are going to be held accountable for? That is why data is really important to us. If we see something change there we can

say, “What happened?” I already told you one thing that happened, so we pieced together the puzzles.

The other thing is: do you know the different components of what your alcohol policy prohibits? Even though 66 percent are the only ones who read it, the majority can correctly identify the policy particulars. What that tells me is that they are learning by what is being done, and that is that RAs are enforcing the policy. They are seeing people being held accountable, and so they know it because they see it being enforced whether they read it. That is good news.

This is a slide we use with Residence Life, police and audiences. Here is where we get into some of our social norming information. It says that most students want more not less enforcement. Given the activities of today, you might not believe that. Let me show you some of the data. Opinions about campus alcohol policies. This particular item asks, “Do you believe that the campus alcohol policy is too strict, too lenient, or about right?” The blue bar is the perception, and the red is the actual. The perception means, “What do you think your peers think?” The red is, “What do you think?” Here what you will see is that 25 percent of students think the alcohol policy is too strict, but they think that 66 percent of their peers think that it is too strict. Sixty-two percent say it is about right, but they think that about half as many think it is about right. What this tells us is that about 73 percent say the alcohol policy is about right or it is too lenient. Think about that. What are the factors that prohibit students from speaking out about that? Again, it is sort of that social norming that happens. Here is another interesting one: students want stricter sanctions. They are asking us to do more. This particular item asks – and again, the blue is the perception, and the red is the actual – “Do you support stricter sanctions and penalties for repeat alcohol policy violators?” Here you will see, 54 percent are saying yes. Alcohol related violence – eighty-one percent are saying, “Yeah, do something more with these people. They are taking away from the quality of our life. They are taking away from our experience here. They are taking away from our academics and the value of our degree.” But, they think that only 39 percent believe that. This one is fascinating – over half want stricter penalties and sanctions for fake IDs. I do not know what to make of that. The walk-away message here is that students have more restrictive attitudes towards alcohol policy and enforcement than we believe that they do – and that they believe their peers do.

When I talk about changing the normative environment, part of it is putting out the true beliefs of students and sort of correcting that misperception. Here is some of our good news in a nutshell, from the data that I just shared, and I have a lot more. I tried to make it as concise as I could. We have a 41 percent decrease in our frequent heavy episodic drinking rates since 2003. We have a 25 percent decrease since 2005. Those are changes that we are going to be monitoring. We are doing data collection every single year. We are going to hope to see those going in that direction. We have continued student support for stricter sanctions and increased policy enforcement. Sixty-six percent of students agree that police should break up out-of-control parties. That is important.

Other good news: perceptions of law enforcement are up. Ninety-six percent are seeing our Social Norms message. Any advertiser would be delighted with that. I will show you our Social Norms message is a minute. MyStudentBody has been really successful. We have got half of the students on this campus right now – undergraduates – who have completed that course. Next year, we will have three-quarters, the year after we will have 100 percent. That is really, really great.

Now I am going to go into our BASICS program. This data is going to really blow you away, if the last has not. BASICS is an individual intervention. It is evidence-based, meaning that it is science-based. It helps students explore their drinking in a non-judgmental environment. All first and second alcohol policy offenders are mandated to go to BASICS. Students can also go if they are medically referred or self referred. It is important to know that 95 percent of people being sent to our BASICS program are judicial mandates.

What is BASICS? It is a two-session intervention. It is based on clinical evidence, clinical research of evidence of effectiveness. This is our Prevention Specialist staff. The first session is an intake. They build rapport. They fill out an online survey about their drinking, and when they come back they get personalized feedback about their drinking.

How do our BASICS compare to other UMass students? One of the things in doing an individual intervention for policy violators is: do we have the right population? Is our alcohol policy too strict? Are we catching that person who was just a one-time offender, in the wrong place at the wrong time?

What this research shows us is that we have the right population. For our students who have been through our BASICS program, they drink more on average when they party than other students. A larger percentage of them are higher-risk drinkers, the frequent binge drinkers, and more have smoked marijuana. They are a high-risk population. Eighty-six percent of them screen in clinically to this program. We have seen significant changes. We are monitoring our BASICS students. We have 2,000 of them going through the program. This is grant-funded through June 2008. We started it in January 2006. In a year and half, we have had 2,000 students go through our BASICS program. We are the largest program in the country that I know of. We have huge numbers, huge ends to be looking at. We are following them six months after this intervention. We are seeing statistically significant decreases in all of these measures. I will show you some slides that sort of break that down for us.

We have done a comparison group. We have taken a group of students who are high-risk drinkers but have not yet violated the policy to see what happens to them after six-months in comparison to what happens to our students who get this evidence-based intervention. What you will see is that we have a statistically significant decrease for our BASICS males, and a statistically significant increase for people who do not get BASICS. For females, we see significant decreases for both. So, there is a gendered effect happening here. What we know is that the sophomore year is the highest risk for males; the first year is the highest for females. That is something I think needs more research.

Peak Blood Alcohol Level (BAL). This is on the occasion that you drank the most. The red bar is our BASICS students. This is an intake, and this is our comparison group. We see a statistically significant decrease for our BASICS males, and the comparison group shows an increase. What we are doing with this program is taking our highest risk drinkers and speeding up a maturation rate that happens. Getting them through that hurdle of sophomore year, junior year, whatever the case may be, when their drinking tends to increase, and lowering their rate, bringing them down to a lower-risk level. This is for females. Again, we see a significant decrease for both the comparison group and the BASICS group. Frequent heavy episodic – remember this is the group I told you about, the 25 percent of our hardest core people, the culture custodians? We see a statistically significant decrease at six months for BASICS only. Our comparison group stays the same.

For our females, you will see a statistically significant decrease for only those who have gone through the BASICS program. This is our first pass through the data. We are monitoring a six-month follow-up. Our grant ends in June. What we are proposing to do is we need to institutionalize this, so obviously we have a budget proposal to maintain the program because it is working. We know that it is working. We want to follow these people a year out. We also want to track their graduation rates because I think that would be interesting as well. Here is some of the participant feedback. Again, a mandated population. They come in. They are not too happy. They leave happy. They have changed their drinking. Even though they do not recognize it, they have. Most students say it was comfortable. They recommend that we continue it. That is a good bill of success for a mandated population.

Why do we like BASICS at UMass? It is cost-effective. It has evidence of a reduction in dangerous drinking for our policy violators as well as our self-referrals and medical referrals. Students can come to BASICS regardless. We call it the “drinkers’ check-up.” You know if you go to a group aerobics class to get fit – that might work. But, you are going to have a better outcome if you go to a personal trainer that says, “Okay. What are your goals? Let us look. What is your body mass? What are you trying to build?” That sort of thing. Individual interventions have greater effectiveness in changing high-risk behaviors. BASICS is individualized. It is sort of like having a personal trainer sit down with you and talk about your risk and protective factors. Decreased recidivism, increased improved retention, and good public relations. Those are some of the reasons we like BASICS.

This is our Social Norms Campaign. You may have seen this on the buses. This is to communicate that the majority of students drink in low-risk or healthy ways. These are all student models, and we test the messages. All the data comes from our surveys. This is this year’s message which the students chose showing that they know how to have fun without alcohol. These are some of the things our Campus & Community Coalition has done with our communities, keys to living off campus. This is the review of the state laws around alcohol, Amherst town bylaws. We are currently working one in Hadley. These are in the buses. They are in the football stadium. They are in apartment complexes. Again, to educate students about the expectations. This is an overview of the Center, some of the resources we have available for you.