Virginia’s college students: Reversing alcohol and other drug abuse problems

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The first in a two-part series on alcohol and substance abuse among the young in Virginia

Accidents and tragedies related to alcohol and drug consumption happen all too frequently, especially among college, high school, and even elementary school students. The unfortunate thing about these incidents is not just that they occur. The major tragedy is that they are preventable.

Each of us can do something to reverse many of the problems associated with substance abuse. But there are no easy solutions and no quick answers in our collective efforts to reshape student environments. The journey to get to this point has been unfolding for decades and will continue unfolding for decades to come.

This article focuses on drug and alcohol abuse by college students. The issue of college student drinking and drugging is one that needs more systematic and more thoughtful management. Unfortunately, it is not one that will be solved per se, but it is one that can be modified significantly.

Student drug and alcohol use
The use and abuse of alcohol and other drugs by students on college campuses is often “expected” since colleges have traditionally been viewed as a place where students experiment with new behavior, “let loose,” and act in defiance of traditional norms of responsibility. Yet, the vast majority of college students who consume alcohol and other drugs used these substances before leaving home. Once reaching college, many students embrace behaviors that may later be viewed—by them or by others—as irresponsible or inappropriate. Many think they will “outgrow” their use of drugs or alcohol, and students, parents, alumni, and administrators often view substance use as a “rite of passage.”

How many college students actually use drugs or alcohol? Most students predict a figure that is higher than the actual numbers. And many students use drugs or alcohol at levels higher than they would otherwise have chosen because of the psychological pressure of wanting to keep up with others or live up to peer expectations.

Over the past decade, substance usage patterns of college students have changed, according to annual research conducted by Lloyd Johnston and his colleagues at the University of Michigan. In looking at substance consumption during the previous 30 days—a measure of regular usage—the research found in 1980 that 81.8 percent of college students consumed alcohol; in 1999 the number fell to 69.6 percent. This 30-day measure demonstrates significant and fairly consistent reductions over this time period.

Another measure is the consumption of five or more drinks at least once in the previous two weeks. This rate was 43.9 percent in 1980 and 40.0 percent in 1999. The rate remained at 42-
44 percent for over a decade, and then began a five-year decline that ended in 1996 at 38.3 percent. This measure indicates relative resistance to change. But while the overall percentage of students drinking is much less and the percentage of students drinking at higher quantities is less, the proportion of student drinkers who are heavy drinkers is greater.

An overall decline has also occurred in the consumption of other substances. Marijuana use, however, has tended to increase, and, more recently; the use of Ecstasy has climbed. Another troubling finding is that the monthly consumption of cigarettes has remained virtually unchanged during these years.

While there is some good news, the disturbing news is two-fold. First, much of the substance abuse—heavy drinking and tobacco use, in particular—is not showing much change, despite many efforts to alter these behaviors. Second, many negative consequences continue to result from drug abuse; thus it continues as an area of concern.

The nature of the problem
Many discussions about drug and alcohol use focus on the quantity and frequency of use. Setting aside any discussion of legality for the moment, any discussion about drug and alcohol use should move beyond that of quantity and frequency. One major direction to examine is the specific consequences either caused by or associated with substance use. Because someone limits his or her consumption of a glass of wine to infrequent times does not automatically mean that that person is not harmed. A wide variety of circumstances contributes to harmful involvement, including genetic risk, pregnancy, combining alcohol with other drugs, personal tolerance, and how one generally responds to such use. Simply stated, it is not the use of drugs or alcohol per se that is the primary cause of concern but rather the negative consequences and effect on health and human potential.

A nationwide survey of college administrators—the most recent in 2000—indicates that alcohol is widely involved with violent behavior (60 percent), damage in the residence hall (60 percent), violation of campus policy (54 percent), lack of academic success (36 percent), and student attrition (30 percent). During the past decade, the figures for each of these behaviors have risen. The ongoing results of these surveys have been frustrating; while much of the emphasis has been on heavy drinking, the incidence of such drinking has not changed noticeably over this period of time. The use of illicit drugs was involved at a level approximately one-half of that found with alcohol. What does this say about our campus community or about our efforts to reduce these negative consequences? What does it say about our efforts to affect the causes of these negative consequences?

While negative consequences of substance use have been documented for the college campus, another perspective exists that has not been well documented: the damaged or unmet human potential, such as a college student whose academic performance is worse than it otherwise would have been. Presley et al. have found a correlation between a student’s average number of drinks per week and his or her grade point average: those with a grade average of A report 3.2 drinks per week, those with a B average report 4.6 drinks per week, those with a C average report 5.8 drinks per week, and those with a D or F average report 8.4 drinks per week. This link between student attrition and alcohol use has increased over the past decade: in 1985, 21 percent of student-attrition cases were alcohol related; the number was 25 percent in 1988, 28 percent in 1991, 29 percent in 1994, 29 percent in 1997, and 30 percent in 2000. The correlation data and the trend data document the need to further examine the academics-substance abuse link.

Reasons for use
What causes students to use drugs or alcohol? Why is use at the level that it is, and why is it
fairly resistant to change? Is this just the normal progression of behavior as students attend college? Are the excessive pressures of college causing this behavior? Is it related to the transition from a home environment to the college setting? Could it be the youthful “myth of immunity” or “feeling of invulnerability?” How about peer pressure or the expectations of others? And what about the perception that others drink or use other drugs at a higher level than they, in fact, do? What underlying developmental needs are students attempting to address through this drug and/or alcohol consumption? Each of these factors probably plays a role in substance use by students. Numerous reasons contribute to drug or alcohol use; similarly, many reasons underlie heavy drug or alcohol use. Consequently, a single solution for all individuals does not exist.

Campus-based efforts

Overall, college and university campuses exert tremendous efforts to address drug and alcohol abuse, especially when compared to efforts two decades ago. While 70 percent of four-year institutions allow alcohol on their campuses, 95 percent require that an alternative beverage also be served at functions where alcohol is served, up from 54 percent in 1979. Eighty-seven percent require that food be served at public functions where alcohol is available, up from 24 percent in 1979. Other policies—advertising an event; whether alcohol can be the primary focus of an event; and the permissibility of advertising on campus bulletin boards or radio stations or in student newspapers—have also become more restrictive during the past two decades. Virtually every four-year institution has a drug/alcohol education and prevention effort on its campus, contrasting with 69 percent in 1979. Organized efforts to address alcohol education with a task force are found on 65 percent of four-year campuses (compared with 37 percent in 1979) and 23 percent of the two-year campuses. Student programming groups (80 percent, up from 53 percent in 1988) assist in the implementation of educational activities. Four-year campuses employ a wide variety of other prevention and education initiatives, including locations for resource materials (98 percent), a designated alcohol/ substance abuse coordinator or specialist (75 percent), an undergraduate course (49 percent), alcohol awareness weeks or days (81 percent), and drug awareness weeks or days (46 percent). Similarly, two-year campuses have a resource center (87 percent), a designated coordinator (41 percent), undergraduate courses (45 percent), alcohol awareness weeks or days (73 percent), and drug awareness weeks or days (64 percent). Employee assistance programs exist on 78 percent of four-year campuses and 59 percent of two-year campuses.

Campus treatment and referral services at four-year colleges include identified locations where students who perceive that they have a drinking problem receive assistance. Forty-seven percent of the campuses have support groups for those whose lives are negatively affected by alcohol, up from 21 percent in 1979; a group counseling experience specifically for students who are problem drinkers can be found on 50 percent of the campuses, up from 33 percent in 1979. These support services peaked at about 70 percent in 1991 but have declined consistently since that time. Peer counselors, whose primary focus is alcohol and other drug abuse, are found on 61 percent of the campuses, an increase from 31 percent in 1988. Support groups for alcoholics or drug abusers are found on 26 percent of the two-year campuses.

Clearly, policy, education, and treatment efforts have increased on four-year college campuses. Some insight into the extent of these efforts can be obtained, however, by noting that the mean annual expenditure of funds for campus alcohol and other drug efforts (excluding personnel costs) for the two-year college is about $2,500 and for the four-year institution, about $13,000.

Although efforts designed for the campus have increased in scope and extent over the past several decades and student use of some substances has declined, such use may not have declined to a sufficient level to call the efforts “successful.” Some behavior—in particular, heavy drinking—has not changed significantly over time. Does this mean that our efforts over the past
20 years have been unsuccessful? Is it meaningless to continue with them? In fact, we have had to incorporate these strategies on campus to reach our current point. And regardless of what new directions we take in the future, it will be necessary to continue many of these approaches. What is important now is to determine ways in which the concept of drug- and alcohol-abuse prevention can be broadened. We need to determine strategies that can be implemented, in a meaningful and successful way, to address the variety of perspectives surrounding drug and alcohol abuse. The challenge today is to incorporate some of the current efforts and to identify, creatively, other more meaningful efforts.

Understanding campus challenges
People attempting to diminish substance abuse on college campuses face many challenges, including the following:

Campus drug and alcohol abuse is viewed as a problem to be solved. In fact, this is an issue for which a more appropriate perspective is to manage it. Strategies can be helpful in reducing or addressing problems but not in fully eliminating them. Our goals must be realistic.

All too often, policymakers look for simple and quick solutions. This issue will not be addressed overnight, nor will it be addressed with simplistic approaches. The nature of alcohol abuse is complex and many years in the making; similarly, it will take complex actions sustained over a long period of time to address such abuse in a reasonable manner.

Many believe that college drinking begins during the college years. In fact, drinking and drug use patterns are, for the most part, established prior to a student’s college life. Colleges “inherit” most of these problems and thus are attempting to undo previously acquired behaviors.

Many people believe that by the time students reach college it is just too late to do anything about the issue. While it would be desirable to have approaches that fully address the problem earlier, the fact that students arrive at college with a significant amount of experience, exposure, and knowledge demands that colleges do something while the students are part of their academic, social, and cultural community. Students do learn new information, gather new perspectives, gain new skills, and demonstrate new behaviors during their college years; the issues surrounding substance abuse should be no exception.

Most college students have knowledge about drugs and alcohol. Some of this knowledge, however, is not correct, not complete, or misleading. Thus, leaders should make some reasonable effort to address this challenge.

Many agencies, organizations, and people believe that it is someone else’s problem to address. While different individuals or groups may have varying responsibilities, the issue of college student use of drugs and alcohol is everyone’s responsibility. Each person and organization can easily play a role in addressing the issue.

Campuses like to address their own problems internally. Campuses, however, would benefit from collaboration and cooperation in addressing substance abuse. Such an approach requires some frank conversations regarding current needs, strategies that hold promise, approaches that do not work, and ways of working smarter.

College campuses often deal with drug and alcohol issues by identifying a coordinator and by doing “things.” While having these resources and personnel may be helpful, they are not sufficient. All too often, the coordinator becomes the “do all” for the campus wide effort. And, in most cases, the coordination responsibility is but one of that individual’s job
responsibilities. While approaches used by the coordinator—activities, awareness days, campaigns, and materials—may be helpful as part of an overall campus wide effort, they are not sufficient to address drug and alcohol concerns.

Overall, a wide range of challenges exists regarding campus drug- and alcohol- abuse efforts. The ones discussed above are commonly heard, yet countless others exist. The range of these challenges—or barriers or obstacles—can be more fully identified by asking those trying to address this issue what they face.

Building meaningful strategies
What is appropriate and reasonable in establishing meaningful strategies to address college student substance abuse? What should leaders—on the campus, in the community, and statewide—be doing to make a difference?

Many good things have already been done to address the problem. These approaches can be attributed to the hard work, perseverance, and expertise of dedicated individuals throughout the campuses, communities, and the state. It is also important to acknowledge the leadership, resource assistance, and direction provided by two Virginia agencies. The Office of the Attorney General has provided a significant initiative that holds great promise for helping change the culture on campuses. The task force established by the attorney general to review and make recommendations about college student drinking has promoted a thoughtful, comprehensive approach for campuses to address drinking issues. The Department of Alcoholic Beverage Control has sponsored a statewide conference for college and community leaders for 15 years, bringing together, training, and empowering campus leaders and students for their campus-based approaches. More recently, this agency has demonstrated tremendous foresight with mini-grant programs, ongoing training, regional consortia approaches, materials for parents, resource assistance, and community partnerships.

What else can be done? Policymakers should consider the following:

1. **Each organization—campus, state agency, statewide organization, community group—should identify specifically what it can do to help address the issue of college student use of drugs and alcohol.** This approach is not the responsibility of one state agency or of the campuses independently. Each agency should determine ways in which it can be helpful. Just as the attorney general’s office and the Department of Alcoholic Beverage Control have demonstrated leadership in this arena, so also should the state Departments of Education, Health, Public Safety, and Transportation, at a minimum, identify ways in which they can provide leadership and/or support. This should be done in a public manner and compiled in an accountability document.

2. **Collaboration should be actively promoted at the state and local level.** Campuses should work collaboratively with their surrounding communities, and parents and alumni should be actively involved. Statewide, collaboration among state agencies, between state agencies and state associations of professionals, between state agencies and college campuses, and among college campuses should be strongly encouraged. The plan for this collaboration should be documented in a planning resource for each jurisdiction.

3. **Listening sessions—with openness and honesty—should be established on a formalized, organized basis.** It is critical to know what various constituents think and feel about the issues surrounding drug and alcohol use; to this end, campuses should formally engage their key constituencies, primarily students, in processes that help understand their needs, wants, and perspectives vis à vis this issue. Similarly, state agencies should actively engage in discussions with the range of their constituents. These
may take the form of town meetings or problem-solving discussions. Findings should be compiled and reported publicly.

4. **Each organization should prepare and annually update a detailed plan of action based on local- and state-appropriate needs; these plans should demonstrate their full commitment to taking substantive action.** These plans should include overall visions, goals, objectives, strategies, and evaluation criteria. They should result from inclusive processes that engage key individuals and groups. They should draw upon locally and nationally available resources to inspire helpful strategies and approaches. These documents should be shared widely and be publicly available.

5. **All organizations and agencies should be inspired to think creatively regarding their strategies.** The importance of “thinking outside the box” should be actively encouraged and rewarded through incentive funding, grant activities, and public recognition. Innovative approaches to identifying more meaningful approaches should be actively pursued.

6. **Widespread dissemination of strategies, findings, insights, successes, and resources should occur.** Each organization’s results, as well as its plan of action, should be made publicly available. This would inspire sharing of ideas, innovation, efficiency, public recognition, and accountability.

7. **Accountability should be widely promoted.** State agencies and institutions should be required to have a plan and to make serious attempts to address drug and alcohol problems. These issues are not problems just for planning; there must be long-range planning accompanied by reasonable action steps for both the short- and long-term. Standards for all colleges should be clearly established through an inclusive, participatory process.

8. **Funding and resources should be significantly increased to sustain comprehensive efforts.** Statewide and campus-based resources must be allocated to address the issue. If the problem is to be taken seriously, funding must be provided. However, merely funding a program is not sufficient; it must be grounded, thoughtful, and locally appropriate, and personnel guiding the efforts must be well trained and proficient in their efforts. Funding may be clearly allocated within an accountability framework: certain resources may be provided to accomplish specific objectives, complete with objective outcome measures as well as monitoring and reporting mechanisms.

9. **Campus and state efforts should be sustained and rewarded over time.** Reward systems should be established to encourage and support quality efforts; concurrently, systems and review structures must be prepared to help coordinate, facilitate, and oversee local and statewide approaches.

10. **All processes used should be participatory, engaging, inviting, and supportive of genuinely making a difference.** Collaboration among and between agencies, organizations, associations, groups, campuses, and others should be actively promoted. Not becoming engaged and not taking this issue seriously should be considered unacceptable. While locally appropriate approaches are desired, no approach or making minimal efforts is not appropriate. The good will of personnel and resources should be nourished and encouraged and, in fact, rewarded.

Will implementing these recommendations and addressing these issues in such a way make a difference? No one knows the answer. We have seen many of the efforts that have been
promoted and the challenges that have been encountered. Current efforts have been necessary, and they continue to be necessary. Clearly, they are not sufficient, and we owe it to our students, to their parents, to our state, and to our shared future to try much, much harder to address campus drug and alcohol problems. We know we can do more and that we can do better. We have a wide range of strategies already identified—and many more waiting to be identified—as we plan and think systematically about how to address this issue.

Which campuses, which leaders, which state agencies, which communities will demonstrate their “will” to make a difference for their constituents? Only time can provide the answers. The approaches identified in this article, while not a panacea for solving campus drug and alcohol problems, can be helpful in addressing and reformulating the ways we address drug and alcohol abuse. They seem to be our logical next step. Perhaps small steps like these will turn into larger steps, thus preventing the needless tragedies found among college students with substance abuse problems—and thousands of others we can see down the road if our efforts fail.

References


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