ALCOHOL TRENDS at the University of Arizona 2005-2015
Introduction

- High-risk alcohol use among UA students is declining.
- Students are employing more strategies to reduce alcohol consumption and alcohol-related harm.
- UA Campus Health Service’s comprehensive approach reaches individual students, high-risk groups, and the campus community at large.
- UA Campus Health has been collecting data and leading innovative programs for over 20 years.
- Progress is being made at the UA around student alcohol use, but challenges still remain.
Background

The University of Arizona (UA) Campus Health Service (CHS) has led innovative programs, policies, and strategies addressing high-risk and underage alcohol use for over 20 years.

Our work has been recognized as a model program by the U.S. Department of Education. Additionally, our Challenging College Alcohol Abuse program is listed on the Substance Abuse and Mental Health Services Administration’s (SAMHSA) National Registry of Evidence-based Programs and Practices (NREPP). Based on this distinction, we frequently offer training and technical assistance for campuses across the country.

Student alcohol use is a complex problem that demands a comprehensive approach that reaches individual students, high-risk groups, and the campus community at large. Inside this summary, you will find information and data points on the programs and initiatives that are having a sustained impact on this important student health issue.
Data from UA Campus Health Service’s annual Health & Wellness Survey provides an ideal snapshot showing changes in student alcohol use over time. The good news is that many alcohol-use measures are improving.

Based on the 2015 Health & Wellness Survey, a number of alcohol indicators are at all-time highs and all-time lows following steady improvements.

The graphs on subsequent pages illustrate these and other related trends since 2005.
All-time Highs in 2015

- Students who did not have alcohol in the past 30 days
  32% (2005) ▶ 42% (2015)

- Percent of students who usually party less than 1x/week
  56% in 2007 (first time asked in current format) ▶ 71% (2015)

- Alternate with non-alcoholic beverages
  43% (2005) ▶ 58% (2015)

- Refuse to ride with a driver who has been drinking
  85% (2005) ▶ 91% (2015)

All-time Lows in 2015

- Frequent heavy episodic drinking (3+ times in past 2 weeks)

- Drinks last time partied (lowest since 2005)
  4.5 drinks (2005), rose to 5.1 drinks in 2008 and gradually declined to 4.5 drinks (2015)

- Drove after drinking any amount of alcohol (past 30 days and past year)
  Past 30 days: 25% (2005) ▶ 11% (2015);

- Drove while under the influence

- Passed out due to drinking alcohol, in past 30 days
  35% (2005) ▶ 22% (2015)

- Percent of students who usually party 2 or more times per week
Frequent heavy episodic drinking (i.e., consuming 5 or more drinks in one sitting, 2 or more times in the past 2 weeks, often referred to as “binge drinking”) has also decreased over time (27%). This is a positive shift due to the risks associated with this level of drinking.
Prevention messaging and media from UA Campus Health often focuses on moderation if a student chooses to drink. This poster illustrates what a student can expect from drinking less (or not at all): more fun and fewer hangovers or regrets.
The average number of drinks that UA students report consuming in a week has decreased by 30% since 2005.
Since 1994, UA Campus Health has used social norm messaging, as seen in the poster above, to correct students’ misperceptions about alcohol use among their peers.
While the previous graphs show students’ alcohol consumption, it is worthwhile to note that more students report not having consumed alcohol in the past 30 days, an increase of 30% since 2005. This rate is higher than the national rate of 37%, based on data from the 2015 National College Health Assessment (NCHA).
On the Health and Wellness Survey, UA Campus Health continues to ask students about which protective strategies they use when they choose to drink. Those data inform posters like this one, which features commonly reported protective strategies.
Although alcohol use in the past 30 days has decreased among all students, the most significant decline has been among those under 21 (20% decrease in the same period).
UA Campus Health recently adopted “sweet spot” messaging as a way to communicate moderation to students. This poster is an example of that messaging: If students stop at the buzz, they are likely to avoid the negative effects of alcohol use.

NOTE: For some people, no amount of alcohol is safe.
While fewer underage students consumed alcohol in 2015 compared to previous years, the blood alcohol concentration (BAC) of those who do drink underage remains higher than the BAC for those 21 years of age or older.
### safer* drink level guidelines for MEN

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*EXAMPLE: A 160 LB. MAN WHO HAS 4.8 DRINKS OR LESS IN 4 HOURS IS “SAFER.”

### safer* drink level guidelines for WOMEN

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*EXAMPLE: A 120 LB. WOMAN WHO HAS 3.0 DRINKS OR LESS IN 4 HOURS IS “SAFER.”

These wallet-sized cards are given to students by UA Campus Health to estimate how many drinks are recommended to stay in a safer BAC range, based on weight and time spent drinking.
Male/Female Comparisons

AVERAGE DRINKS PER WEEK

Gender gap has decreased over time
Another comparison of interest is between males and females. While males (on average) continue to drink more than females, the gender gap is decreasing among UA students. During this period, males had a 33% decrease in average drinks per week over time. Females decreased 24% in the same timeframe.
Consequences of alcohol consumption are also of interest. Similar to national trends, the percentage of UA students who reported driving after consuming any alcohol is currently at an all-time low (a 55% decrease). On the NCHA, the 2015 rate for driving after consuming any alcohol was 19% compared to the UA rate of 11% shown in the graph above.
Using student data to highlight positive protective strategies, such as not driving after drinking and arranging a designated driver, encourages students to stay safe while drinking.

91% of UA students do not drive while under the influence of alcohol.

89% arrange to have a designated driver if they plan to drink.

If you drink, have a plan:

- Call a friend.
- Call a cab.
- Stay overnight.
- Have a sober designated driver.
UA Campus Health programming emphasizes harm- and risk-reduction strategies. As a result, we’ve seen increases in the percentage of students who report doing things that reduce their risk, including a 34% increase in students who usually or always alternate with non-alcoholic beverages.
UA Campus Health utilizes Health and Wellness Survey data for programming, as seen in the graphic to the left. The poster emphasizes that a majority of students drink a relatively small amount of alcohol at the UA, and vice versa.
How We’re Creating Change

Alcohol Media Campaigns

Highly visible print and video campaigns to promote risk reduction strategies, as well as social norms messaging to correct misperceptions on student alcohol use, with a goal of reducing consumption.

- UA Campus Health was recognized as a Model Program by the U.S. Department of Health and Human Services for our comprehensive alcohol prevention strategies, including social norms media.
- UA Campus Health’s Challenging Collegiate Alcohol Abuse was recognized by SAMHSA on the National Registry of Evidence-based Programs and Practices (NREPP).

Brief Alcohol Screening & Intervention for College Students (BASICS)

Students meet one-on-one with an alcohol specialist for two sessions. The program utilizes motivational interviewing techniques to reduce alcohol use and related consequences.

- BASICS is the most extensively researched college program to reduce student alcohol use.
- BASICS is recognized as a SAMHSA NREPP program.

Indicates program created at The University of Arizona Campus Health Service
The Buzz

An alcohol education/prevention program that encourages student engagement and connection through meaningful game-based learning.

- Over 1,500 students participated in The Buzz during the 2014-15 academic year.
- 89% of participants said The Buzz will cause them to think differently about their alcohol use and 97% said it was better or much better than other alcohol education programs.
- The Buzz was developed at the UA in 2010.

eCHECKUP TO GO

A brief online program that provides personalized feedback on alcohol use and its risks. All first-year students are asked to complete eCHECKUP TO GO.

- This program is recognized as a highly effective and low-cost personalized feedback intervention for college students.³
- eCHECKUP TO GO has been part of UA’s alcohol prevention programming since 2005.

Messaging to UA Parents

UA Campus Health sends informational emails to parents of first-year students throughout the academic year to encourage conversations on alcohol.

- In the 2015-2016 school year, UA Campus Health sent emails to parents in August, over winter break, and again before spring break.
- SAMHSA recommends parent engagement as an effective prevention strategy for high-risk college drinking.⁴
How We’re Creating Change (continued)

Project 21

Online intervention that gives UA students personalized feedback on their projected alcohol use in advance of their 21st birthday. Includes a dynamic BAC calculator and tips for a fun and safe celebration.

- The Project 21 link is emailed to over 500 students each month.
- Of students who celebrated with alcohol on their 21st birthday, 62% reported that the website helped them moderate their drinking while celebrating. ²
- Project 21 was recognized with a National Digital Health Award in 2015.

Red Cup Q&A

Q&A column that “separates alcohol fact from fiction” and appears each week in the Arizona Daily Wildcat.

- In addition to appearing weekly in print and online, the Red Cup Q&A was delivered to students at residence halls with higher rates of alcohol violations during the 2015-2016 academic year.

wildfact

Average drinks per week reported by students has decreased by 34% between 2005 and 2015.
(2015 Health and Wellness Survey n = 2,705)
Student Health Alcohol and Drug Education (SHADE)

A six-hour UA alcohol diversion class.

- After participation in the course, 88% of heavy drinkers and 52% of moderate drinkers say they plan to drink less.⁶
- Nearly all participants (98%) said the instructor communicated very well and 95% reported that the topics covered were relevant to them.⁶
- At their 3-month post-test, SHADE participants reported significantly lower alcohol consumption levels and related negative consequences compared to before the class.⁷

Student Recovery Programming

Substance Abuse Counselors at the UA Campus Health Service are coordinating recovery programming for students, including on-campus AA meetings and working with the Tucson community to offer resources on-campus.

- Recovery programming was initiated through a state grant in 2015.
- Supporting students in recovery on college campuses can prevent relapse and support academic achievement.

50% of freshmen report not using alcohol in the past 30 days. (2015 Health and Wellness Survey n = 2,705)
While the UA is nationally recognized for evidenced-based alcohol prevention programs that support student health, we simply cannot be successful without your help. That’s because students say their parents, along with their peers, are the two groups they go to most for advice, support and modeling.

Here are seven things you can do to help:

1. Set clear and realistic goals on academic performance. Being upfront about expectations helps students put their education first.

2. Check in on Thursdays, Fridays or Saturdays. It’s no surprise that these are the days students drink most. Research suggests that parent phone calls, emails or text messages can reduce alcohol consumption by their student on the day of contact.

3. Encourage volunteerism. Students who connect with their community while they are here will have a fuller, more enriching college experience. Research suggests they will also drink less.

4. Correct misperceptions. Students tend to overestimate how much their peers drink. In reality, most drink moderately, if they drink at all (see “Just the Facts” to the right).

5. Communicate the risks. Scare tactics don’t work, but discussing the obvious risks openly and evenly can help discourage their participation in drinking games, hazing, 21st birthday dangers and other high risk behaviors.

6. Show your student how to intervene if they need to. Explain how to prevent alcohol poisoning before it happens, and how to step up when someone needs help.

7. State the obvious. Underage drinking and impaired driving are against the law. Avoid messages that obscure these facts.

For more ways you as a parent can help, please visit the UA Campus Health Service website at www.health.arizona.edu.

Adapted from: The College Parent Advisor, published by College Parents of America.

JUST THE FACTS: UA Freshmen & Alcohol

- 45% did not drink alcohol in the past 30 days.
- 90% arrange to have a designated driver if they plan to drink.
- 85% did not get in trouble with the school authorities or police during the past year.
- 68% party less than weekly.

Source: 2014 Health and Wellness Survey (n=1,941), administered to a random sample of undergraduate classes at The University of Arizona.

UA Campus Health works with parents of UA students to address high-risk alcohol use, such as this message to parents of incoming first-year students. Research supports engaging parents as an key, evidence-based approach to improve alcohol-related outcomes among students.
UA-specific data from the annual Health & Wellness Survey regularly informs UA Campus Health’s alcohol prevention programming. This poster highlighted the link between student alcohol use and grade point average (GPA).
Challenges Still Remain

% STUDENTS REPORTING 5+ DRINKS IN ONE SITTING AT LEAST ONCE IN THE PAST 2 WEEKS (2015)

*students who participate in intercollegiate athletics, sports clubs, or intramural sports*
Student Level:

- Heavy alcohol use is still persistent. The previous graph shows those who had 5 or more drinks in one sitting at least once in the past 2 weeks (2015 data only). The UA rate of 35% is higher than the national rate of 33% as reported on the 2015 NCHA.

- Hard alcohol misuse continues to be a concern.

- The gender gap is decreasing. Men’s alcohol use is declining at a faster rate than women’s.

- Fraternity/sorority members continue to consume the most (see previous graph of 5 or more drinks by group).

- Heavy episodic alcohol use is common for freshmen before going out (63%) or before going to a party (71%) among those who had 5 or more drinks at least once in the past 2 weeks.

Campus-wide Level:

- There is a need to inventory all campus alcohol-related programs to assess needs and effectiveness and to avoid duplication.

- There is a lack of consistent messaging regarding student alcohol use across campus, including messages that promote or normalize alcohol use as part of the student experience.

wildfact

65% of students did not engage in heavy episodic drinking (5+ drinks in one sitting) within the past two weeks.

(2015 Health and Wellness Survey n = 2,705)
How We’re Collaborating Across Campus

When it comes to high-risk drinking prevention, CHS realizes it takes many collaborators. Below are a list of some of the partners CHS works with.

Working with Campus Partners

• **Residence Life** - CHS collaborates with Residence Life by offering media packets for Resident Assistants (RAs) to create bulletin boards, offering presentations to residents on different health topics (including alcohol prevention), and providing prevention resources during RA training.

• **UA Police Department** - UAPD shares regular updates about student behavior with our office. UAPD officers also participate in the SHADE program as part of a Q&A session with students as part of diversion.

• **Dean of Students Office** - The Dean of Students works closely with our health educators and mental health providers to refer students for intervention when they are sanctioned for violating the student code of conduct or deemed at risk.

• **Off-Campus Housing** - CHS works with the Off-Campus Housing office within Residence Life to share alcohol prevention messaging and resources with properties that house UA students.
• **Community Relations** - Community Relations invites us to share alcohol prevention resources every semester to representatives from the Tucson and greater Pima County community.

• **UEMS** - CHS partners with the University Emergency Medical Service on programming and data sharing.

**Councils/Committees**

• **Sexual Assault Prevention Council** (on-campus)

• **Cats After Dark**, late night alcohol-free programming committee (on-campus)

• **Community Prevention Coalition** (Tucson community)

• **Pima County Commission on Addiction Prevention and Treatment**
The University of Arizona is employing many best practices in the field of alcohol prevention and education for students. Research shows there are additional individual and environmental strategies that are proven effective, and may be worth exploring on our campus, including:

- Institutionalizing late-night, alcohol-free programming for students to curb high-risk alcohol use.
- Continuing mandated education for high-risk student drinkers, including fraternity and sorority members.
- Working to change the culture of alcohol consumption during tailgating.
- Continuing to collaborate with campus partners to address high-risk alcohol use at specific times (e.g. beginning of the semester, Family Weekend, Homecoming, campus events, and holidays).

Conclusion


5. 2015-2016 *Project 21* evaluation data (n=953)

6. Fall 2015 SHADE evaluation data (n=59)

7. 2006 SHADE pre/3-month post evaluation data (n=273)

This report was produced by the Health Promotion and Preventive Services unit at The University of Arizona Campus Health Service.

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