Keys to Alcohol and Other Drug Prevention
Preventing Drug Abuse in Institutions of Higher Education: Research-based Approaches to Understanding and Responding to the Problem
Why Be Concerned?

Alcohol and other drug abuse is a major factor in deaths, accidents, injuries, vandalism, and crime on all types of campuses – elite schools and lesser-known institutions; large schools and small ones; urban, small town, and rural schools.

What if I Don’t Drink?

- 69.5% had study or sleep interrupted
- 53.6% had to take care of a drunken student
- 29.3% had been insulted or humiliated
- 20.1% experienced an unwanted sexual advance (women)
- 18.6% had a serious argument or quarrel
- 13.6% had property damaged
- 9.5% had been pushed, hit, or assaulted
- 1.3% had been a victim of sexual assault or date rape (women)

ACHA Standards of Practice for Health Promotion in Higher Education

- Integration With the Learning Mission of Higher Education
- Collaborative Practice
- Cultural Competence
- Theory-Based Practice
- Evidence-Based Practice
- Professional Development and Service
Training Needs for AOD Prevention

Order of Importance (self-reported):

- Networking/Political Organizing
- AOD Task Force
- Campus/Community Coalition
- Strategic Planning

Source: Thomas Hall, Beth DeRicco, and William DeJong, Survey of AOD Prevention Professionals, 2007
Lessons from Prevention Research

Principles for Drug Prevention:

• Enhance protective factors and reverse or reduce risk factors
• Address all forms of drug abuse, alone or in combination
• Address the type of drug abuse problem in the local community
• Address risks specific to population

Source: NIDA InfoFacts, Feb. 2004
Lessons from Prevention Research

Principles for Drug Prevention:

• Family-based prevention should enhance family bonding and include skills training
• Increase academic and social competence
• Target key transition points
• Reach populations in multiple settings
• Prevention programs should be long-term
• Interactivity is critical

Source: NIDA InfoFacts, Feb. 2004
What is Being Done?

Comprehensive Prevention Approaches:
- Educational programs
- Physical environment
- Social environment
- Legal environment
- Economic environment
AOD Educational Programs

• 61.4% reported that they had received information on AOD from their university
• 27.9% say they are interested in receiving AOD information
• Top 3 sources of health information:
  – Health Center Medical Staff
  – Health Educators
  – Faculty
• 75.5% report getting their health information from parents
• 65.2% see parents as a believable source of health information

Source: American College Health Association, 2008
Environmental Management Approach

Student behavior is influenced at multiple levels:
– Personal
– Peer
– Institutional
– Community
– Public policy
Environmental Management

• We have the ability to create environments that help young adults make healthy decisions
• We have growing evidence that these strategies are effective
• Our greatest impact will likely come from adopting mutually-reinforcing policies and practices

Source: Bob Saltz, Prevention Research Center (PIRE)
Environmental Management

- Offer and promote social, recreational, extracurricular, and public service options that do not include alcohol and other drugs.
- Create a social, academic, and residential environment that supports health-promoting norms.
- Limit the availability of alcohol and other drugs both on and off campus.
- Restrict marketing and promotion of alcohol and other drugs.
- Develop and enforce campus policies and enforce local, state, and federal laws.

Source: Experiences in Effective Prevention, 2007
Programs & Policies That Make a Difference!

- Strengthening academic requirements
- Scheduling classes on Fridays
- Keeping the library and recreational facilities open longer
- Providing a wide range of alcohol and drug-free social and recreational activities
- Disciplining repeat offenders and those who engage in unacceptable behavior associated with substance use
- Notifying parents when students engage in serious or repeated violations of alcohol or other drug policies or laws

Source: U.S. Department of Education
Programs & Policies That Make a Difference!

- Social norms campaigns to correct misperceptions about the prevalence and acceptability of drug use
- Establishing medical amnesty
- Infusing curriculum with AOD education
- Providing AOD training for all residence advisors
- Engaging peer educators and peer facilitators
- Providing substance-free housing
- Implementing parent-based interventions

Source: U.S. Department of Education
Choosing Evidence-Based Programs

- Program developers (professionals)
- Clear program model
- Demonstrated effectiveness & science-based
- Reviews of literature by consensus panels or individual content experts

Source: Experiences in Effective Prevention, 2007
Correcting Misperceptions about Drug Use

• Primary
  – Use data from regular campus surveys to conduct traditional social norms campaigns

• Secondary
  – Group workshops (e.g., first-year, student-athletes, Greeks) to confront misperceptions and facilitate discussion about student norms

• Tertiary
  – Assessment and personalized feedback in a counseling setting

Source: H. Wesley Perkins, HWS Colleges
Specific Strategies for Prescription Stimulant Use

Complex behavior that should be viewed in the larger context of alcohol and drug involvement

1. Dispel the popular myths regarding nonmedical prescription stimulant use by disseminating research findings.

2. Promote awareness of the legal risks for diversion and nonmedical use of prescription stimulants

3. Encourage physicians to increase their vigilance regarding prescription stimulants to ensure proper and safe use and to prevent diversion
Specific Strategies for Prescription Stimulant Use

4. Continue research regarding the relative benefits of abuse-resistant formulations of prescription stimulants.

5. Empower parents to take a central role in the prevention of nonmedical use of prescription stimulants.

6. Develop multidisciplinary campus action plans to reduce nonmedical prescription stimulant use.

7. De-stigmatize college students who do not divert their medications or engage in illicit drug use.

8. Develop early intervention strategies to assess risk, and prevent progression to dependence.

Source: Arria & DuPont, Journal of Addictive Diseases
Considering The Full Spectrum Of Evidence

- Detailed literature review and analysis
- Data collection from credible web sources
  - Higher Education Center
  - Social Norms Institute
  - National Institute on Drug Abuse
  - National Institute on Alcohol Abuse and Alcoholism
- Discussions with key informants in the field
The Whole is More Than the Sum of Its Parts

Multisite RCT to examine the efficacy of a parenting handbook intervention and BASICS in reducing alcohol use and consequences.

• PBI alone had a “null effect”
• BASICS alone had a moderate effect
• Combining both efforts yielded the greatest impact

Source: Turrisi, Larimer, et al., 2009
Multiple Policies Drive Success


• Campus communities with a minimum of 4 underage drinking policies; and
• Campus communities with a minimum of 4 high volume sales policies
Multiple Policies Drive Success


Reductions for underage students in:

• Annual alcohol use
• 30-day drinking prevalence
• Heavy episodic drinking
A primary mission of the NCAA is to provide guidance and resources to help student-athletes stay healthy and make proper decisions about alcohol and other drug use.
NCAA Minimum Guidelines for AOD Education

• review all conference, institutional, athletic department, and individual team substance use policies
• review any institutional or conference drug-testing programs
• review the NCAA’s ATOD policy including the tobacco ban, list of banned drug classes, and drug testing protocol
• view the NCAA drug education and drug testing videos
• discuss nutritional supplements and their inherent risks
NCAA Expectations

NCAA guideline:
• One drug and alcohol education program per semester

Adherence to the policy:
• Less than half of the athletic directors report per semester programming (41%)

Source: NCAA Member Institution’s Drug-Education/Testing Survey, 2009
AOD Educational Programs
NCAA Athletic Departments

- 65% have a Drug/Alcohol education programs in operation
- 15% have a Drug/Alcohol education program for coaches
- 11% have a Drug/Alcohol education program for non-coaching staff
- Majority of education is in the form of outside speakers
- 47% offer peer education programs
- 75% require student-athletes to attend when outside speakers
- 50% require participation in other education
- 17% make banned substance list available in common viewing area

Source: NCAA Member Institution’s Drug-Education/Testing Survey, 2009
AOD Educational Programs
NCAA Athletic Departments

- Average of $3,017 spent on Drug/Alcohol education during the last academic year
- 64% of Drug/Alcohol education funded by the Athletics Department

- 91% of Athletic Departments spend more than $5,000/year on nutritional supplements
- 100% of funds for nutritional supplements provided by Athletic Departments

Source: NCAA Member Institution’s Drug-Education/Testing Survey, 2009
Southern Conference Process Evaluation

• 12 colleges/universities
• 11 participated
• Pilot myPlaybook
  – Pre/post surveys
• Site visits
  – Audit of Drug & Alcohol Education programming
  – More than 70 interviews
Site Visit Interviews

- Athletic Trainers
- Faculty Athletic Representatives
- Athletic Administrators
- CLS Coordinators
- Coaches
- Student-Athletes
- Campus Collaborators
SoCon Site Visits

Common messages from Coaches:

• Drug education programming should be implemented once a semester at minimum

• Team AOD policies are very common
  – Policies across teams vary dramatically
  – Policies and codes of conduct are strong recruiting tools

• 24/48 hour rule for alcohol use very common

• Most coaches not aware of the specifics of the Department AOD policy

• Coaches are not aware of the REC
Common messages from Administrators:

- Beginning of year compliance meetings cover so much that drug testing and AOD prevention messages are covered minimally
- Funding is the critical element for drug testing/education
  - Financial support for standardized AOD education such as myPlaybook would be greatly appreciated
- Drug education programming should be conducted once per semester at minimum
- Internet is a great way to disseminate AOD information to student-athletes
  - Parents would also be interested in this information
Common messages from Athletic Trainers:

• All trainers were very familiar with drug testing/education policies and procedures
• All trainers knew of the REC and how to use it
• Understand that they are often the go-to person for questions about alcohol and other drugs
• Most common questions from athletes and coaches are about supplements and nutrition
• Professional development opportunities around AOD education are really needed
• Trainers appear to love their jobs but all-to-often feel overworked
Common messages from student-athletes:

- Somewhat familiar with drug testing procedures
- Not able to distinguish between the NCAA drug testing program and the institutional program
- There is no such thing as a dry campus and administrators know it
- Only responsible student-athletes are chosen to host recruits while the “partiers” are off the hook
  - Coaches know who the “partiers” are
- Enforcement of team AOD policies is weak
  - Enforcement often left up to the team captains
SoCon Site Visits

Common messages from student-athletes:

• AOD education needs to be targeted to student-athletes
• Very comfortable with information being presented over the Internet
• Very few student-athletes reported that they were aware of the REC
• Want to know why certain substances are banned
• Desire sport specific nutritional information
• Comfortable going to coaches and trainers regarding AOD issues
General Findings & Challenges:

- Overall there is a lack of collaboration for AOD programming across campus
- Funding Funding Funding
  - Difficult to make AOD education a funding priority
- Student-athletes will benefit greatly from standardized AOD education
- Student planners are commonly provide and usually include the banned list, department policies, etc.
  - Student-athletes were rarely familiar with what information was included in the planners
- Erroneous AOD norms among student-athletes, staff, and administrators
SoCon Site Visits

General Findings & Challenges:

• Inconsistent AOD practices
• Lack of policy enforcement
• Lack of evidence-based programming
• Promotion of sound nutrition as a viable alternative for over-the-counter nutritional & dietary supplements
Lessons from Prevention Research

Principles for Drug Prevention:

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Source: NIDA InfoFacts, Feb. 2004
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Source: NIDA InfoFacts, Feb. 2004
NCAA Drug Use Deterrence

A shared responsibility!

- Strong written policy with significant sanctions
- Comprehensive education
- Drug testing
NCAA Elements of Promising Athletics Prevention Programs

• leadership from administrators
• clear, consistent and comprehensive policies
• inclusive practices: students, staff and faculty
• comprehensive and targeted prevention activities
• supportive environmental conditions
• intervention and treatment services in place
• cooperation with broader community
• student-athletes empowered to collaborate in policy development
Team Approach

- Building Relationships with Campus Providers
- Collaboration with: (examples)
  - Athletics Administrators
  - Team Physician
  - Athletic Trainers
  - Life Skills Coordinators
  - Coaches
  - SAAC Advisors/Captains
  - Sports Dietitian
  - Clinical Sports Psychologist
  - Health and Counseling Center Staff
  - Residence Life Staff
  - Campus dining services
## The Silent Majority

### Perceived vs. *Actual* Support

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<td>Use stricter disciplinary sanctions for students who engage in alcohol-related violence</td>
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<td>Use stricter disciplinary sanctions for students who repeatedly violate campus alcohol policies</td>
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<td>Apply stricter penalties for the use of false IDs to purchase alcohol illegally</td>
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<td>Conduct undercover operations at bars, restaurants, and liquor stores to increase compliance with underage laws</td>
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The Vital Role of NCAA Coaches in AOD Education/Prevention for Student-Athletes

NASPA Strategies
2011 National Meeting
American Football Coaches Association

- Professional organization for all high school and college football coaches
- 2011 National Convention
- Dallas, TX
- > 5,000 football coaches in attendance
American Football Coaches Association

Special keynote panel on social issues:
• Bobby Bowden: surrogate fathers
• Dick Thomey: violence against women
• Ray Seals: being an effective mentor
• David Wyrick: AOD prevention
AFCA General Observations

• Do not realize the extent of the problem
• View athletics as protective
• Do not distinguish between education and prevention
• Natural cheerleaders/motivators
• Do not recognize partners/resources
• Need prevention roles defined
• Need basic levels of training
Job Description for Coaches
Job Description for Coaches
Job Description for Coaches

• What would it include:
  – Player development
  – Team performance
  – Graduation rates/Academic performance
  – Community engagement/involvement
  – Fund raising
  – Teaching/tutoring
  – Mentoring
  – Good communicator
  – Parent relations
Job Description for Coaches

• Supervisor/manager
• Counselor
• Recruiting
• Scheduling
• Advisor
• Public relations/marketing
Who is on the Coach’s Team
Who is on the Coach’s Team
Who Is on the Coach’s Team

- Head coaches/Assistant coaches
- Players
- Media
- Graduate assistants
- Managers
- Academic advisors
- Sports medicine
- Athletic directors
- Administrative assistants
- Financial supporters
Who is on the Coach’s Team?

- Parents
- Faculty
- Health and Counseling
- Academic support services
- Career development
- Outside community
- Grounds crews
- Building and Maintenance crews
Advice for Coaches

• Remind your student-athletes that they are attending an institution of higher education and the number one focus should be on their academic development.

Adapted from Higher Ed Center
Advice for Coaches

• Student-athletes need to know that alcohol and drug abuse can result in serious injury and even death. The point in discussing this is not to scare the student-athlete but rather to make them aware of the fact that high school and college students die every year from alcohol poisoning and drug overdoses.

Adapted from Higher Ed Center
Advice for Coaches

• Discuss with your student-athlete the importance of being a good teammate. Encourage them to intervene when they think teammates are in trouble with alcohol and/or drugs.

Adapted from Higher Ed Center
Advice for Coaches

- All student-athletes should be encouraged to advocate for healthy and safe academic and athletic environments.
- As with the general college student population, student-athletes who identify as abstainers report that they are still negatively affected by the behavior of those who abuse AOD.

Adapted from Higher Ed Center
Advice for Coaches

• Promote norms of non-abuse and responsible behavior. Student-athletes exaggerate the use of alcohol and other drugs by their peers (e.g., performance enhancing drugs).

Adapted from Higher Ed Center
Advice for Coaches

• Coaches should not share tales of their own drinking exploits when in high school or college. Entertaining student-athletes with stories of drinking back in “the good old days” normalizes the behavior and contributes to the misperceptions of what is prevalent and acceptable.

Adapted from Higher Ed Center
Advice for Coaches

• Encourage your student-athletes to get involved in community/campus service. Community/Campus service is consistently shown to be a protective factor across a broad range of health outcomes and is also positively related to academic success and retention.

Adapted from Higher Ed Center
Advice for Coaches

- Coaches should always remind their student-athletes that underage alcohol consumption, drinking and driving, and illicit drug use are against the law. Make sure that your student-athletes understand the penalties for underage drinking, possession, aiding and abetting, public drunkenness, using a fake ID, driving under the influence, and other alcohol-related offenses.

Adapted from Higher Ed Center
Advice for Coaches

• Scheduling team and athletic department sponsored activities are an excellent way to make sure student-athletes have alcohol and drug-free social events to choose from.

Adapted from Higher Ed Center
Advice for Coaches

• Coaches should clearly communicate departmental and team policies for alcohol and drug use violations. Disciplining those student-athletes who violate departmental and team policies is critical.
Model Expected/Responsible Behavior

- AOD expectations
- Positive relationships w/ women
- Anger management
- Response to success
- Response to failure
- Behavior w/ media
- Role on campus/live within rules
- Academic expectations
Personal Responsibility

• Lastly, it is important to remind student-athletes that at the beginning of the academic year, they made commitments to avoid alcohol and drug abuse and that have committed to being a clean NCAA student-athlete at your institution.
Be Prepared to Help

• Unfortunately, college student-athletes are not immune to problem AOD use and addiction.
• This begs the question of how coaches and administrators can effectively approach a student-athlete about his or her drinking and get them the help they need?
• Helping requires planning and a strong commitment.
Recognizing Potential Problems: Not an Exact Science

- Changes in behavior
- Drop in grades
- Late for meetings/practice
- Sports performance
- Physical appearance
- Personal risk indicators
  - Negative statements
  - Self-destructive behaviors
Getting Help

• *Get Sound Advice*. Go to a college/university counselor, a campus nurse, or someone else you trust.

• Explaining your predicament to a third party may help you figure out how to proceed.
Getting Help

• *Have a plan.* Before you speak to your student-athlete, have a definite plan for how you’ll start helping him or her.
• Find out about support group meetings or counseling available through campus resources.
• Plan to accompany your student-athlete to at least a few meetings.
Getting Help

- *Keep it Personal.* Begin the conversation with your student-athlete by letting him/her know you care, and that’s why you’re going to be straight.
- Use your own feelings about the situation. Be up front and list the negative effects you’ve seen alcohol have on the student-athlete, including athletic/academic performance, memory loss, poor grades, isolation from coaches and teammates, etc.
- Your student-athlete won’t be able to ignore the hard evidence.
Getting Help

• *Expect Denial.* It won’t be easy getting your student-athlete to admit to a problem with alcohol.
• Accepting that you’ve developed a dependency on alcohol can be humiliating and shameful.
• Do what you can to reassure your student-athlete’s dignity.
Getting Help

• *Follow Through*. Ultimately, it must be your student-athlete’s choice to seek help.

• Once that decision is made, show your support. Knowing you’re there to lean on during the moments of weakness and to celebrate sobriety will help set your student-athlete on the path to recovery.

• Have patience and remind yourself that you’re being a true and good friend/coach.