Standards Used to Assess Collegiate Alcohol Programs
The Network is the national organization that proactively addresses the issue of alcohol, other drugs, and violence in order to promote healthy campus environments through self-regulatory initiatives, information dissemination, and technical assistance. The Network serves as a liaison between the U.S. Department of Education and member institutions as well as other higher education professional organizations. Member institutions encourage and enhance local, state, regional, and national initiatives through a commitment to shared standards for policy development, educational strategies, enforcement, evaluation, and community collaboration.
Are You a Member of The Network?

- 96 institutions are indicated
- If your institution is a member, then a chief executive officer has agreed that you would meet these standards.
The Network Standards

• Policy
• Education & Student Assistance
• Assessment
• Campus/Community Collaboration
The Network Standards Policy

• Annually promulgate policy, consistent with applicable federal, state and local laws, using such means as the student and faculty handbooks, orientation programs, letters to students and parents, residence hall meetings, and faculty and staff meetings.
The Network Standards Policy

- Develop policy that addresses both individual behavior and group activities
- Define the jurisdiction of the policy carefully to guarantee the inclusion of a campus property. Define campus-based standards to off-campus events involving students.
The Network Standards Policy

• Stipulate guidelines on marketing and hosting off-campus sponsored events involving students, faculty, staff, and alumni at which alcoholic beverages are served.

• State institutional commitment to the education and development of students, faculty, and staff regarding AODV issues.
The Network Standards Education & Student Assistance

- Provide a system of accurate, current information exchange on the adverse consequences related to alcohol abuse and other drug use for students, faculty, and staff.
- Promote and support alcohol-free programming options.
The Network Standards
Education & Student Assistance

• Provide, with peer involvement, a system of assessment, intervention, education, treatment, and/or referral services for students, faculty and staff utilizing collaborative relationships among and between community groups, agencies, and the institution.
The Network Standards
Education & Student Assistance

• Include alcohol and other drug information for students and their family members in student orientation programs.

• Support and encourage faculty in incorporating alcohol and other drug education into the curriculum, where appropriate.
The Network Standards
Education & Student Assistance

• Develop a coordinated effort across campus to offer a student assistance program encompassing alcohol, other drug, and related violence education, assessment, treatment and referral.
The Network Standards Enforcement

- Publicize all alcohol and other drug policies.
- Consistently enforce alcohol and other drug-related policies.
The Network Standards Enforcement

• Exercise appropriate sanctions for violent acts as harassment; verbal, physical and sexual abuse, as well as disruptive and destructive behavior.

• Exercise appropriate sanctions for the illegal sale or distribution of alcohol and illicit drugs.
The Network Standards Assessment

• Assess the institutional environment as it contributes to or mitigates against alcohol and other drug problems and related violence.

• Assess campus awareness, attitudes, and behaviors regarding alcohol and other drug use and apply results to program development.
The Network Standards Assessment

- Collect and related AODV information from police or security reports to guide program development.
- Collect summary data regarding alcohol and other drug related disciplinary actions, including violent and other disruptive behavior and use it to guide program development.
The Network Standards
Community Collaboration

• Establish and maintain effective working relationships with external agencies, groups, and individuals whose operations are relevant to our mission and goals.

• Address campus/community issues of alcohol and other drug access, availability, and enforcement at local, regional and state levels.
The Network Standards
Community Collaboration

• Consider the inclusion of the following agencies and groups: law enforcement, judicial system, state liquor control license agency, hospitality industry (including retailers), local government, neighborhood associations, faith community, family/parents, school systems, area health care & treatment providers, & others as appropriate.
The Network Standards
Community Collaboration

• Facilitate the development, implementation and evaluation of a strategic plan that addresses underage AODV issues in the community and state.
American College Health Association
Standards of Practice for Health Promotion in Higher Education, Revised 2004

Introduction and Guiding Principles

American College Health Association (ACHA) Guidelines
Standards of Practice for Health Promotion in Higher Education
Second Edition, August 2004

Introduction that welcomes multidisciplinary practitioners and delineates the premises that guide the Standards

The mission of health promotion in college and university communities is to achieve the health of students and contribute to the creation of healthy and safe student environments. Thus, health promotion practitioners strive to:
- Reduce the risk of individual illness and injury.
- Enhance health as a strategy to support student learning.
- Advocate for safe, social justice, economic opportunity, and human dignity.
- Support the academic mission of creating a healthy environment for learning and for healthy living by assisting students in finding healthy lifestyles.
- Engage individuals who will become political, social, and economic decision-makers, thereby improving the health of the community and the quality of life.
ACHA SPHPHE

Standard 1. Integration with the Learning Mission of Higher Education
Effective practice of health promotion in higher education requires practitioners to incorporate individual and community health promotion initiatives into the learning mission of higher education.
1.1 Develop health-related programs and policies that support student learning.
1.2 Incorporate health promotion initiatives into academic research, courses, and programs.
1.3 Disseminate research that demonstrates the effect of individual health behaviors and environmental factors on student learning.

Standard 2. Collaborative Practice
Effective practice of health promotion in higher education requires practitioners to support campus and community partnerships to advance health promotion initiatives.
2.1 Advocate for a shared vision that health promotion is the responsibility of all campus and community members.
2.2 Develop and participate in campus and community partnerships that advance health promotion initiatives.
2.3 Utilize campus and community resources to maximize the effectiveness of health promotion initiatives.
2.4 Advocate for campus, local, state, and national policies that address campus and community health issues.
2.5 Advocate for the institutionalization of health promotion initiatives through inclusion in campus strategic planning and resource allocation processes.

Standard 3. Cultural Competence
Effective practice of health promotion in higher education requires practitioners to demonstrate cultural competency and inclusiveness in advancing the health of individuals and communities.
3.1 Identify the social, cultural, political, and economic dimensions that influence the health of students.
3.2 Design health promotion initiatives that reflect the social, cultural, political, and economic diversity of students.
3.3 Develop health promotion program statements, program policies, staff recruitment and retention practices, and professional development goals that reflect the social, cultural, political, and economic diversity of the campus.
3.4 Provide leadership for campuswide understanding of the connection between culture, identity, social justice, and student health status.

Standard 4. Theory-Based Practice
Effective practice of health promotion in higher education requires practitioners to understand and apply professionally recognized and tested theoretical approaches that address individual and community health.
4.1 Review health promotion theories from inter-disciplinary sources as a guide for the development of health promotion initiatives.
4.2 Apply professionally recognized methods and tested theories to the development of health promotion initiatives.
4.3 Articulate the theoretical frameworks used in health promotion decision-making at the campus community.

Standard 5. Evidence-Based Practice
Effective practice of health promotion in higher education requires practitioners to understand and apply evidence-based approaches to health promotion.
5.1 Review data gathered from published research on campus, local, state, and national health priorities.
5.2 Conduct population-based assessments of health status, needs, and assets of students.
5.3 Conduct environmental assessments of campus/community health needs and resources.
5.4 Develop measurable goals and objectives for health promotion initiatives.
5.5 Evaluate health promotion initiatives using valid and reliable quantitative and qualitative approaches.
5.6 Report evaluation data and research results to students, faculty, staff, and campus community.

Standard 6. Continuing Professional Development and Service
Effective practice of health promotion in higher education requires practitioners to engage in ongoing professional development and service to the field.
6.1 Apply ethical principles to the practice of health promotion.
6.2 Participate regularly in formal professional development.
6.3 Assist others in strengthening their health promotion skills.

6 Standards of Practice
24 Indicators

Acknowledgements
The 2005-2006 Standards of Practice for Health Promotion in Higher Education Committee thanks previous task force members (1999-2003) for their important contributions to the development of the Standards.
Written By
The 2005-2006 Standards of Practice for Health Promotion in Higher Education Committee, Patricia Edmunds, PhD, and Susan Kennedy, PhD, Co-Chair.
ACHA SPHPHE

• Six Standards
  – Integrate with the Learning Mission of Higher Education
  – Collaborative Practice
  – Cultural Competence
  – Theory-Based Practice
  – Evidence-Based Practice
  – Continuing Professional Development and Service
Integrate with the Learning Mission of Higher Education

• Effective practice of health promotion in higher education requires professionals to incorporate individual and community health promotion initiatives into the learning mission of higher education.
Integrate with the Learning Mission of Higher Education

• Develop health-related programs and policies that support student learning

• Incorporate health promotion initiatives into academic research, courses, and programs

• Disseminate research that demonstrates the effect of individual health behaviors & environmental factors on student learning
Collaborative Practice

- Effective practice of health promotion in higher education requires professionals to support campus and community partnerships to advance health promotion initiatives.
Collaborative Practice

• Advocate for a shared vision that health promotion is the responsibility of all campus and community members

• Develop and participate in campus and community partnerships that advance health promotion initiatives

• Utilize campus and community resources to maximize the effectiveness of health promotion initiatives
Collaborative Practice

• Advocate for campus, local, state and national policies that address campus and community health issues

• Advocate for the institutionalization of health promotion initiatives through inclusion in campus strategic planning and resource allocation processes
Cultural Competence

• Effective practice of health promotion in higher education requires professionals to demonstrate cultural competency and inclusiveness in advancing the health of individuals and communities
Cultural Competence

• Identify the social, cultural, political, and economic disparities that influence the health of students.
• Design health promotion initiatives that reflect the social, cultural, political, and economic diversity of students.
Cultural Competence

• Develop health promotion mission statements, program policies, staff recruitment, retention practices and professional development goals that reflect the social, cultural, political, and economic diversity of the campus.

• Provide leadership for campus wide understanding of the connection between culture, identity, social justice, and student health status.
Theory-Based Practice

• Effective practice of health promotion in higher education requires professionals to understand and apply professionally recognized and tested theoretical approaches that address individual and community health.
Theory-Based Practice

• Review health promotion research from interdisciplinary sources as a guide for the development of health promotion initiatives.
• Apply professionally recognized methods and tested theories to the development of health promotion initiatives
• Articulate the theoretical frameworks used in health promotion decision making to the campus community
Evidence-Based Practice

• Effective practice of health promotion in higher education requires professionals to understand and apply evidence-based approaches to health promotion.
Evidence-Based Practice

- Review data gathered from published research on campus, local, state, and national health priorities.
- Conduct population-based assessments of health status, needs, and assets of students.
- Conduct environmental assessments of campus-community health needs and resources.
Evidence-Based Practice

• Develop measurable goals and objectives for health promotion initiatives

• Evaluate health promotion initiatives using valid and reliable quantitative and qualitative approaches

• Report evaluation data and results to students, faculty, staff, and campus community.
Continuing Professional Development and Service

• Effective practice of health promotion in higher education requires professionals to engage in on-going professional development and service to the field.
Continuing Professional Development and Service

• Apply ethical principles to the practice of health promotion
• Participate regularly in formal professional development
• Assist others in strengthening their health promotion skills.
ACHA SPHPHE

• 24 Indicators
• Vision Into Action
  – Health Promotion Program Development Guidebook
  – Individual Professional Development Assessment Tool
  – Program Development Assessment Tool
SPHPHE will be used as the functional area, Health Promotion CAS standards, like the College Health Services and ATOD standards functional areas.
Overview of CAS

• Founded in 1979 in response to efforts to establish specialized accreditation for student affairs preparation programs

• CAS is a consortium of 34 professional associations

• Twenty-nine standards and guidelines have been promulgated (and sometimes revised) by fall 2001
CAS Functional Areas include:

3. Alcohol, Tobacco and Other Drug Programs (2003)
5. Campus Information and Visitor Services (2002)
13. Educational Services for Distance Learners (2002)
17. International Student Programs & Services (2002)
27. Student Orientation Programs (2002)
29. Women Student Programs & Services (2002)
30. Masters Level Student Affairs Administration Preparation Programs (2002)
CAS Member Associations

- American Association for Collegiate Independent Study (AACIS)
- American Association for Employment in Education (AAEE)
- American College Counseling Association (ACCA)
- American College Health Association (ACHA)
- American College Personnel Association (ACPA)
- American Counseling Association (ACA)
- Association of College and University Housing Officers -- International (ACUHO-I)
- Association of College Unions International (ACUI)
- Association of Collegiate Conference & Events Directors-Int'l (ACCED-I)
- Association of Fraternity Advisors (AFA)
- Association for Student Judicial Affairs (ASJA)
- Association on Higher Education and Disability (AHEAD)
- Canadian Association of College and University Student Services (CACUSS)
- College Reading and Learning Association (CRLA)
- Collegiate Information and Visitor Services Association (CIVSA)
- Council for Opportunity in Education (COE)
- NAFSA -- Association of International Educators (NAFSA-AIE)
- National Academic Advising Association (NACADA)
- National Association for Campus Activities (NACA)
- National Association for College Admission Counseling (NACAC)
- National Association for Developmental Education (NADE)
- National Association of College Auxiliary Services (NACAS)
- National Association of Colleges and Employers (NACE)
- National Association of Student Financial Aid Administrators (NASFAA)
- National Association of Student Personnel Administrators (NASPA)
- National Clearinghouse for Commuter Programs (NCCP)
- National Consortium of Lesbian, Gay, Bisexual, and Transgender Resources in Higher Education
- National Council on Student Development (NCSD)
- National Intramural and Recreational Sports Association (NIRSA)
- National Orientation Directors Association (NODA)
- National Society for Experiential Education (NSEE)
- The Network: Addressing Collegiate Alcohol and Other Drug Issues (The Network)
- Southern Association for College Student Affairs (SACSA) -- Associate Member (SACSA)
CAS Mission

- Promulgate standards and guidelines for practice and preparation
- Promote assessment in educational practice
- Promote the use of standards in practice
- Promote quality assurance within higher education
The CAS Approach to: Self-Regulation & Self Assessment

The essential elements of self-regulation include:

• Institutional culture that values involvement of all its members in decision making

• Quality indicators that are determined by the institution

• Use of standards and guidelines in quality assurance
The CAS Approach to Self-Regulation & Self-Assessment

- Collection and analysis of data on institutional performance
- Commitment to continuing improvement that presupposes freedom to explore and develop alternative directions for the future
Other Uses of CAS Standards

• Program establishment
• Staff development
• Academic preparation
• Credibility
What is the difference between a CAS standard and a CAS guideline?

A CAS Standard, which is printed in BOLD TYPE, is considered to be essential to successful professional practice and uses the auxiliary verbs "must" and "shall." Compliance with the CAS standards indicates that a program meets essential criteria as described in each standard statement and that there is tangible evidence available to support that fact.

A CAS Guideline, printed in LIGHT FACE TYPE, is a statement that clarifies or amplifies a CAS standard. CAS guidelines use the auxiliary verbs "should" and "may."
Alcohol, Tobacco, and Other Drug Program
CAS Standards & Guidelines

• For the purpose of this document the term “alcohol, tobacco and other drug use or abuse” includes:

1. The illegal use of alcohol, tobacco, prescription medications and other drugs.

2. The high-risk use and/or abuse of alcohol, tobacco, prescription medications, over-the-counter medications and nutritional supplements.
CAS Standards & Guidelines

Part 1. Mission
Part 2. Program
Part 3. Leadership
Part 4. Organization & Management
Part 5. Human Resources
Part 6. Financial Resources
Part 7. Facility, Technology & Equipment
CAS Standards & Guidelines

Part 8. Legal Responsibilities
Part 9. Equity & Access
Part 10. Campus & External Relations
Part 11. Diversity
Part 12. Ethics
Part 13. Assessment & Evaluation
Part 1. Mission

- The alcohol, tobacco, and other drugs program (ATOD) must incorporate student learning and student development in its mission.

- The program must enhance overall educational experiences.

- The program must develop, record, disseminate, implement and regularly review its mission and goals.

- Mission statements must be consistent with the mission and goals of the institution and with the standards in this document.

- The program must operate as an integral part of the institution’s overall mission.
Part 2. Program
Desirable Student Learning & Development Outcomes

- Intellectual growth
- Effective communication
- Enhanced self-esteem
- Realistic self-appraisal
- Values clarification
- Career choices clarification
- Leadership development
- Healthy behavior
- Meaningful interpersonal relationships
- Independence
- Collaboration
- Social responsibility
- Satisfying & productive lifestyles
- Appreciating diversity
- Spiritual awareness
Part 2. Program
The ATODP must include:

- Environmental management strategies
- Institutional policies
- Enforcement strategies
- Biennial review
- Community collaboration
- Training & education
- Assistance & referral
- Student leadership
Part 2 - Program

• ATODP staff must serve as positive role models for ethical and healthy behaviors.

• ATODP must develop and provide education on policies, laws, prevention, intervention and treatment resources, and training for students, including student organizations.
Part 2 - Program

• ATODP must provide access to support services for students with alcohol or other drug-related concerns.
Part 3

- articulate a vision and mission for their programs and services
- set goals and objectives based on the needs of the population served and desired student learning and development outcomes
- advocate for their programs and services
- promote campus environments that provide meaningful opportunities for student learning, development, and integration
Part 3

• identify and find means to address individual, organizational, or environmental conditions that foster or inhibit mission achievement

• advocate for representation in strategic planning initiatives at appropriate divisional and institutional levels
Part 3

• initiate collaborative interactions with stakeholders who have legitimate concerns and interests in the functional area
• apply effective practices to educational and administrative processes
• prescribe and model ethical behavior
• communicate effectively
Part 3 - Leadership

• manage financial resources, including planning, allocation, monitoring, and analysis

• incorporate sustainability practices in the management and design of programs, services, and facilities

• manage human resource processes including recruitment, selection, development, supervision, performance planning, and evaluation
Part 3 - Leadership

• empower professional, support, and student staff to accept leadership opportunities
• encourage and support scholarly contribution to the profession
• be informed about and integrate appropriate technologies into programs and services
Part 3 - Leadership

• be knowledgeable about federal, state/provincial, and local laws relevant to the programs and services and ensure that staff members understand their responsibilities by receiving appropriate training
Part 3 - Leadership

• develop and continuously improve programs and services in response to the changing needs of students and other populations served and the evolving institutional priorities

• recognize environmental conditions that may negatively influence the safety of staff and students and propose interventions that mitigate such conditions
Part 4 – Human Resources

• must establish procedures for staff selection, training, and evaluation; set expectations for supervision; and provide appropriate professional development opportunities to improve the leadership ability, competence, and skills of all employees.
Part 4 – Human Resources

• ATODP professional staff members must hold an earned graduate or professional degree in a field relevant to the position they hold or must possess an appropriate combination of educational credentials and related work experience.

• ATODP prevention specialists must hold a minimum of a bachelor's degree in a related field and have relevant training and experience.
Part 4 – Human Resources

• Intern Training
• Student Employees
• Training on Institutional Policies
• Adequate technical and support staff
• Training – technology & records
Part 4 – Human Resources

• Training – emergency procedures
• Salary & benefits commensurate with experience
• Maintained and updated position descriptions
• Regular performance planning and evaluation
Part 5 - Ethics

• New staff must be oriented to relevant ethical statements/standards
• Privacy and confidentiality must be ensured
• Be aware of and follow IRB/human subjects policies
• Staff must recognize and avoid conflicts of interest
Part 5 - Ethics

• Insure fair, objective and impartial treatment of all
• Handle funds in accordance of established and responsible procedures
• Promotional and descriptive information must be accurate and free of deception
• Staff must perform within the limits of their training, competence
Part 6 Legal Responsibilities

• Must have written policies on all relevant operations, transactions and tasks that may have legal implications

• No harassment or creation of hostile/offensive environments

• Use reasonable and informed practices to limit institutional liability
Part 6 – Legal Responsibilities

- Institution must provide legal advice for ATODP staff members
- ATODP staff members must be aware of and seek advice from legal
Part 7 – Equity and Access

• Discrimination must be avoided
• Staff must take action to remedy significant imbalances in student participation and staffing patterns
• Ensure physical and program access for persons with disabilities
• Recognize the needs of distance learning students; provide appropriate services and assist in Id’ing and gaining access to services
Part 8 - Diversity

• Promote environments that are characterized by open and continuous communication that deepens understanding of identity, culture, heritage.

• Recognize, honor, respect commonalities and differences

• Address characteristics and needs of diverse populations while implementing policies and procedures
Part 9 – Organization and Management

• ATODP must be structured purposefully
• Must monitor websites used for distributing info to ensure accuracy
• Use of effective mgt including use of comprehensive and accurate info for decision making
**Part 9 – Organization and Management**

- ATODP director/coordinator must be placed within institution organizational structure to promote cooperative interaction; develop support of high-level admins.

- ATODP must collaborate in development of policies
Part 10 – Campus and External Relations

• ATODP must reach out to relevant others

• Must have procedures and guidelines for responding to threats and emergencies

• Policies for communicating with the media

• Gather and disseminate info on ATODP programs and topics
Part 11 – Financial Resources

• Must have adequate funding
• Must demonstrate fiscal responsibility
Part 12 - Technology

• Must have adequate technology
• Must maintain policies and procedures that address security and data back up
• When used for learning & development, technology must reflect current best practices
• Workstations must be accessible
Part 13 – Facilities and Equipment

• ATODP must have adequate, accessible, and suitably located facilities and equipment
• Well equipped work space, adequate in size.
• Must have work space to secure work adequately
• Facility design should guarantee record security and confidentiality
Part 14 – Assessment and Evaluation

• Must establish systematic plans and processes to meet accountability expectations
• Must evaluate regularly how they complement and enhance institutional mission
• Must assess ATOD attitudes, beliefs, and behaviors
Part 14 – Assessment and Evaluation

• Must assesses
  – ATOD related consequences
  – property damage
  – policy violations
  – counseling caseloads
  – Perceptions and social norms
  – Environmental scans
Putting the CAS Standards to Work

- Establish and prepare the self-study team
- Conduct the self-study
- Identify and summarize evidence
- Identify discrepancies
- Determine appropriate corrective action
- Recommend action for program enhancement
- Prepare an action plan
Process

- What standards are you using?
- Benefits of using these tools to assess?
- Disadvantages of using these tools?
- Roadblocks to using these tools?