A Team Effort: How to Work Effectively with Campus Athletics on Student-Athlete ATOD Issues.

IHEC October 27, 2011

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Who is The National Collegiate Athletic Association?

- Higher Education Association with services to support athletics departments at over 1000 IHE
- Membership-led association abiding by the NCAA principles of student-athlete welfare: shared responsibility to provide an environment that protects the health safety of student-athletes.
 Audiences

- Student-Athletes.
- Pre-Collegiate.
- Membership.
- National Office.
- Affiliate Organizations.
- Public.
NCAA Student Athlete Affairs provides programming, support and resources that promote...

- Fair Play
- Healthy Choices
- Positive Life Skills
- Safe Environments
- Academic Success
- Community Leadership
- Lifelong Learning

...for the total development of the student-athlete
Health and Safety Topics

NCAA Programming

www.ncaa.org/health-safety

+ Drug Testing
+ Mental Health Promotion
+ Hazing Prevention
+ Nutrition and Performance
+ Alcohol and Other Drugs Ed.
+ Sexual Health Promotion
+ Disease Prevention
+ Injury Research and Prevention
+ Sports Medicine Guidelines
To deter drug use

To protect student-athlete health and safety

To maintain the integrity of the game
Most Student-Athletes Don’t . . .

2009 NCAA Study of 20,000 Student-Athletes --

Percent Reporting “Never Used”

- Anabolic Steroids – 98.6%
- Ephedrine – 97.7%
- Amphetamines – 96.3%
- Cocaine – 95.7%
- Narcotics – 94.1%
- Spit Tobacco – 75.1%
- Cigarettes – 73.8%
- Marijuana – 62.3%
- Alcohol – 12.6%
What detracts from performance?

- Under-eating
- Poor nutrition
- Overtraining
- Lack of rest and recovery
- Dehydration
- Lack of sleep
- Too much stress
- Substance abuse
What substances are student-athletes at higher risk of abuse?

- Performance-enhancing drugs
- Alcohol
- Spit tobacco
What substances are they at same or reduced risk?

- Cigarettes
- Marijuana
- Street drugs
Banned Drug Classes

(a) Stimulants
(b) Anabolic agents
(c) Alcohol and Beta Blockers (banned for rifle only) *(renamed in 09-10)*
(d) Diuretics and other masking agents
(e) Street drugs
(f) Peptide hormones and analogues
(g) Anti-estrogens
(h) Beta 2 Agonists *(re-located in 09-10)*
NCAA Drug Testing

- Championship Program
  - All sports, all divisions over a 5-year period

- Year-Round Program
  - Division I & Division II
  - Summer Testing

- Appeals process available

- Medical Exceptions for documented medical need
## NCAA Year-Round Drug Test Results

*medical exception granted*

<table>
<thead>
<tr>
<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total No. of Tests</td>
<td>9078</td>
<td>9206</td>
<td>9206</td>
<td>9042</td>
<td>9256</td>
<td>8980</td>
<td>10,094</td>
<td>10,106</td>
<td>10,468</td>
<td>11,074</td>
<td>11,088</td>
</tr>
<tr>
<td>Ephedrine</td>
<td>x</td>
<td>x</td>
<td>x</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Steroids</td>
<td>90</td>
<td>92</td>
<td>93</td>
<td>71</td>
<td>80</td>
<td>46</td>
<td>49</td>
<td>46</td>
<td>27</td>
<td>57</td>
<td>72 [25]</td>
</tr>
<tr>
<td>Diuretics or Manipulators</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>2(2)</td>
<td>1</td>
<td>7(2)</td>
<td>5 (4)</td>
<td></td>
</tr>
<tr>
<td>Street Drugs (Exit Test)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Protocol issues</td>
<td>25</td>
<td>6</td>
<td>2</td>
<td>4</td>
<td>-</td>
<td>-</td>
<td>18</td>
<td>18</td>
<td>17</td>
<td>18</td>
<td>20</td>
</tr>
<tr>
<td>Total Positives</td>
<td>115</td>
<td>101</td>
<td>97</td>
<td>77</td>
<td>81</td>
<td>48</td>
<td>68</td>
<td>66(2)</td>
<td>45</td>
<td>83(2)</td>
<td>106 (6) [30]</td>
</tr>
</tbody>
</table>
NCAA Positive Tests for Marijuana

Championship test results

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total No. of Tests</td>
<td>112 8</td>
<td>148 8</td>
<td>147 4</td>
<td>165 7</td>
<td>151 3</td>
<td>1561</td>
<td>1516</td>
<td>2565</td>
<td>2581</td>
<td>2512</td>
<td>2481</td>
<td>2568</td>
</tr>
<tr>
<td>Street Drugs</td>
<td>5</td>
<td>20</td>
<td>7</td>
<td>10</td>
<td>8</td>
<td>10</td>
<td>17</td>
<td>37</td>
<td>21</td>
<td>30</td>
<td>26</td>
<td>71</td>
</tr>
<tr>
<td>Percent positive</td>
<td>.4</td>
<td>1.3</td>
<td>.4</td>
<td>.6</td>
<td>.5</td>
<td>.6</td>
<td>1.1</td>
<td>1.4</td>
<td>.8</td>
<td>1.2</td>
<td>1.0</td>
<td>2.8%</td>
</tr>
</tbody>
</table>
Medical Exceptions for Banned Drug Use

Not available for Marijuana

Stricter Application for ADHD Stimulants August 2009

- New Guidelines published January 09
  - Written in consultation with MD’s, Psychiatrist, Psychologists

- Documentation requirements
  - Diagnostic evaluation
  - Treatment history
  - Current prescription (name and dosage)
Drug Education & Testing Research

Provides direction to CSMAS to recommend Association-wide and division-specific policy and programming.

- Student-Athlete Drug Use Survey
  - Administered by FAR
  - Every 4 years, All sports
  - 20,000 surveys

- Institutional Drug-Education and Testing Survey
  - Every 2 years
  - All institutions
Institutional Testing
2009 Survey of Institutions

Athletics department currently conducting drug-testing of student-athletes:

<table>
<thead>
<tr>
<th>Response Choice</th>
<th>I FBS</th>
<th>I FCS</th>
<th>I No FB</th>
<th>II</th>
<th>III</th>
<th>Total / (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>55 (98%)</td>
<td>37 (70%)</td>
<td>32 (89%)</td>
<td>74 (64%)</td>
<td>37 (21%)</td>
<td>235 (53%)</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
<td>4 (8%)</td>
<td>1 (3%)</td>
<td>9 (8%)</td>
<td>18 (10%)</td>
<td>32 (7%)</td>
</tr>
<tr>
<td>No, but actively planning one</td>
<td>1 (2%)</td>
<td>12 (23%)</td>
<td>3 (8%)</td>
<td>32 (28%)</td>
<td>125 (69%)</td>
<td>173 (39%)</td>
</tr>
</tbody>
</table>
NCAA on
Institutional Drug Education

• Required under NCAA Bylaw 14.1.4.
  – to disseminate list of banned drugs
  – to educate student-athletes about products that may contain them

• Minimum Guidelines-Conduct Alcohol/Other Drug Education
  • for NCAA, conference, institution and team
  • each semester
Institutional Drug Education

- 65% report having an education program currently in place for their student-athletes. Another 8% report they are actively planning one.

- 15% have programs for coaches and another 8% are planning a program.

- 11% percent have programs for department staff with 5% planning one.

- 50% spent between $1,000-5,000 during the last academic year on the education program. 16% report spending more than $5,000.

- 63% of the education program was funded by athletics department budgets; 15% by the university and 22% by grants.

- On average, Division I FBS institutions spent significantly more than the other divisions/subdivisions.
### NCAA Minimum Guidelines for Institutional Alcohol, Tobacco and Other Drug Education

- Review and develop individual team drug and alcohol policies.
- Review the department of athletics' drug and alcohol policy.
- Review institutional drug and alcohol policy.
- Review conference drug and alcohol policy.
- Review institutional or conference drug-testing programs (if applicable).
- Review NCAA alcohol, tobacco and drug policy including the tobacco ban, list of banned drug classes and testing protocol.
- View the NCAA drug-education and drug-testing video.
- Discuss nutritional supplements and their inherent risks.
- Allow time for questions from student-athletes.
Populations at High Risk for Alcohol Abuse

Core Survey 1999

Drinks per week

http://www.siu.edu/departments/coreinst/public_html/
NCHA II Overview

- Fall 2008 administration included 40 institutions and over 28,000 respondents.

- Although the characteristics of the responding institutions are diverse, including public/private, geographic location, student population, etc., due to the limited institutional participation, this is not considered nationally representative.

- Survey items address students’ behavior and attitudes on a broad mixture of health and safety issues. Of most interest to the NCAA were topics including: stress, aggressive behavior, mental health well-being and outside factors affecting academic performance.

- Added for the first time this year was a question regarding whether the respondent was a varsity athlete. Comparisons following are based on responses to this question.
Aggressive Behavior *in the last 12 months* – Comparison by Athlete Status

NCHA 2008

<table>
<thead>
<tr>
<th></th>
<th>Student-Athletes</th>
<th>Non-Athletes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Been in a physical fight</td>
<td>11%</td>
<td>7%</td>
</tr>
<tr>
<td>Been physically assaulted (excluding sexual assault)</td>
<td>5%</td>
<td>4%</td>
</tr>
<tr>
<td>Been verbally threatened</td>
<td>25%</td>
<td>21%</td>
</tr>
<tr>
<td>In an emotionally abusive relationship</td>
<td>9%</td>
<td>10%</td>
</tr>
<tr>
<td>In a physically abusive relationship</td>
<td>3%</td>
<td>2%</td>
</tr>
</tbody>
</table>

*highlighted items indicate a statistically significant difference, <.01*
Within the last 12 months, have any of the following affected your academic performance – Comparisons by Athlete Status

NCHA 2008

<table>
<thead>
<tr>
<th></th>
<th>Student-Athletes</th>
<th>Non-Athletes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Did not happen</td>
<td>Happened, but no negative impact</td>
</tr>
<tr>
<td>Alcohol Use</td>
<td>49%</td>
<td>46%</td>
</tr>
<tr>
<td>Chronic Pain</td>
<td>90%</td>
<td>8%</td>
</tr>
<tr>
<td>Drug Use</td>
<td>92%</td>
<td>6%</td>
</tr>
<tr>
<td>Finances</td>
<td>78%</td>
<td>18%</td>
</tr>
<tr>
<td>Extracurricular Activities</td>
<td>36%</td>
<td>41%</td>
</tr>
<tr>
<td>Eating Disorder</td>
<td>94%</td>
<td>5%</td>
</tr>
<tr>
<td>Stress</td>
<td>34%</td>
<td>40%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Did not happen</th>
<th>Happened, but no negative impact</th>
<th>Negative academic impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol Use</td>
<td>57%</td>
<td>40%</td>
<td>3%</td>
</tr>
<tr>
<td>Chronic Pain</td>
<td>90%</td>
<td>7%</td>
<td>3%</td>
</tr>
<tr>
<td>Drug Use</td>
<td>91%</td>
<td>7%</td>
<td>2%</td>
</tr>
<tr>
<td>Finances</td>
<td>67%</td>
<td>27%</td>
<td>5%</td>
</tr>
<tr>
<td>Extracurricular Activities</td>
<td>59%</td>
<td>32%</td>
<td>9%</td>
</tr>
<tr>
<td>Eating Disorder</td>
<td>95%</td>
<td>4%</td>
<td>1%</td>
</tr>
<tr>
<td>Stress</td>
<td>26%</td>
<td>47%</td>
<td>27%</td>
</tr>
</tbody>
</table>
### 2009 Studies—Comparative Data

Percent reported use in last *30 days; in last **12 Months

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol *</td>
<td>64.8%</td>
<td>71.8%</td>
<td>63.9%</td>
<td>44%</td>
<td>68.1%</td>
</tr>
<tr>
<td>Cigarettes*</td>
<td>7.9%</td>
<td>26.2% [tobacco]</td>
<td>27.1%</td>
<td>20%</td>
<td>23.5%</td>
</tr>
<tr>
<td>Spit Tobacco*</td>
<td>12.3%</td>
<td>[combined with above]</td>
<td>12.7%</td>
<td>8%</td>
<td>--</td>
</tr>
<tr>
<td>Marijuana</td>
<td>9.6%* 22.6%**</td>
<td>16.8%* 30.1%**</td>
<td>20.2%*</td>
<td>32%**</td>
<td>18.5%* 32.1%**</td>
</tr>
<tr>
<td>Amphetamines**</td>
<td>3.7%</td>
<td>6.2%</td>
<td>--</td>
<td>7.5%</td>
<td>--</td>
</tr>
<tr>
<td>Cocaine</td>
<td>0.5%* 1.3%**</td>
<td>2.2%* 5.2%**</td>
<td>1.4%* 5.3%**</td>
<td>3.5%**</td>
<td>1.8%* 5.7%**</td>
</tr>
<tr>
<td>Anabolic Steroids**</td>
<td>0.4%</td>
<td>0.6%</td>
<td>--</td>
<td>1.5%</td>
<td>--</td>
</tr>
</tbody>
</table>

*Banned for use by NCAA student-athletes*
## Trends in Use

### 2009 NCAA– Any Use in Last 12 Months

<table>
<thead>
<tr>
<th>Substance</th>
<th>2005</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol</td>
<td>77.5%</td>
<td>83.1%</td>
</tr>
<tr>
<td>Cigarettes</td>
<td>14.6%</td>
<td>15.5%</td>
</tr>
<tr>
<td>Spit Tobacco</td>
<td>15.7%</td>
<td>17.4%</td>
</tr>
<tr>
<td>Marijuana</td>
<td>21.2%</td>
<td>22.6%</td>
</tr>
<tr>
<td>Amphetamines</td>
<td>4.2%</td>
<td>3.7%</td>
</tr>
<tr>
<td>Cocaine</td>
<td>2.0%</td>
<td>1.8%</td>
</tr>
<tr>
<td>Anabolic Steroids</td>
<td>1.1%</td>
<td>0.4%</td>
</tr>
<tr>
<td></td>
<td>Female 2005</td>
<td>Female 2009</td>
</tr>
<tr>
<td>----------------------</td>
<td>-------------</td>
<td>-------------</td>
</tr>
<tr>
<td>Alcohol</td>
<td>77.3%</td>
<td>83.1%</td>
</tr>
<tr>
<td>Amphetamines</td>
<td>3.7%</td>
<td>3.3%</td>
</tr>
<tr>
<td>Anabolic Steroids</td>
<td>0.3%</td>
<td>0.2%</td>
</tr>
<tr>
<td>Cigarettes</td>
<td>16.3%</td>
<td>13.5%</td>
</tr>
<tr>
<td>Cocaine</td>
<td>1.3%</td>
<td>1.0%</td>
</tr>
<tr>
<td>Marijuana</td>
<td>17.9%</td>
<td>18.4%</td>
</tr>
<tr>
<td>Spit Tobacco</td>
<td>1.7%</td>
<td>2.4%</td>
</tr>
</tbody>
</table>
Main Reason for Use of Alcohol
2009 NCAA of Those Who Use --

- To improve athletics performance: 0.6%
- For sports related injuries: 0.3%
- Reasons not related to sports: 86.1%
<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concerned about health</td>
<td>19.2%</td>
</tr>
<tr>
<td>Against beliefs/values</td>
<td>21.8%</td>
</tr>
<tr>
<td>No desire to experience effects</td>
<td>27.4%</td>
</tr>
<tr>
<td>Hurt athletic performance</td>
<td>12.4%</td>
</tr>
<tr>
<td>Afraid of being caught</td>
<td>6.1%</td>
</tr>
<tr>
<td>Fear of getting drug tested</td>
<td>1.9%</td>
</tr>
</tbody>
</table>
### Typical # Drinks in One Sitting

**2009 NCAA – overall student-athlete population**

- 1 - 2 drinks: 16.9%
- 3 - 4 drinks: 24.2%
- 5 - 6 drinks: 23.7%
- 7 - 9 drinks: 17.8%
- 10 or more drinks: 17.4%
# Heavy Drinking Trends

2009 NCAA – of Those Who Drink

<table>
<thead>
<tr>
<th></th>
<th>2005</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall 5+ drinks in one sitting</td>
<td>59.7%</td>
<td>59%</td>
</tr>
<tr>
<td>Overall 10+ drinks in one sitting</td>
<td>18.4%</td>
<td>17.4%</td>
</tr>
<tr>
<td>Women 4+ drinks in one sitting</td>
<td>59.2</td>
<td>60.3</td>
</tr>
<tr>
<td>Men 5+ drinks in one sitting</td>
<td>72.5</td>
<td>68.8</td>
</tr>
<tr>
<td>Men 10+ drinks in one sitting</td>
<td>28.6%</td>
<td>26.1%</td>
</tr>
</tbody>
</table>
## Negative Consequences from Use

### 2009 NCAA – How many times in 12 months

<table>
<thead>
<tr>
<th>Experienced as a result of alcohol/drug use</th>
<th>Never</th>
<th>1-2</th>
<th>3-5</th>
<th>6+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hangover</td>
<td>33.6%</td>
<td>25.7%</td>
<td>16.1%</td>
<td>24.6%</td>
</tr>
<tr>
<td>Missed Class</td>
<td>66%</td>
<td>17.8%</td>
<td>9%</td>
<td>7.3%</td>
</tr>
<tr>
<td>Poor Test or Project Performance</td>
<td>76.1%</td>
<td>15.6%</td>
<td>5.4%</td>
<td>2.8%</td>
</tr>
<tr>
<td>Missed or Late to Practice</td>
<td>93.8%</td>
<td>4.9%</td>
<td>1%</td>
<td>.3%</td>
</tr>
<tr>
<td>Poor Athletic Performance</td>
<td>79.3%</td>
<td>14%</td>
<td>4.4%</td>
<td>2.2%</td>
</tr>
<tr>
<td>Driven Under the Influence</td>
<td>76.9%</td>
<td>13%</td>
<td>4.8%</td>
<td>5.3%</td>
</tr>
<tr>
<td>Memory Loss</td>
<td>70%</td>
<td>17.3%</td>
<td>6.8%</td>
<td>6%</td>
</tr>
<tr>
<td>Done Something Later Regretted</td>
<td>62.4%</td>
<td>23.6%</td>
<td>10.4%</td>
<td>3.8%</td>
</tr>
</tbody>
</table>
Alcohol on Performance

• Causes dehydration which slows healing
• Requires increased conditioning to manage weight
• Slows muscle recovery
• Inhibits absorption of nutrients
• Interferes with ability to sharply focus
• Hampers memory and retention
Lingering Effects of Alcohol

- Alcohol use 24 hours before athletic activity significantly reduces aerobic performance

- Weekly alcohol consumption doubles the rate of injury

Hazing Behaviors

Allan, 2005
# Reported Marijuana Use by Division

## 2009 NCAA Survey

<table>
<thead>
<tr>
<th></th>
<th>DI</th>
<th>DII</th>
<th>DIII</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Never Used</strong></td>
<td>67.6%</td>
<td>64.8%</td>
<td>59.8%</td>
</tr>
<tr>
<td><strong>Used in last 30 days</strong></td>
<td>5.8%</td>
<td>9.0%</td>
<td>13.2%</td>
</tr>
<tr>
<td><strong>Used in last 12 months</strong></td>
<td>11.1%</td>
<td>12.3%</td>
<td>15.1%</td>
</tr>
<tr>
<td><strong>Used, but no in last 12 months</strong></td>
<td>15.6%</td>
<td>13.8%</td>
<td>11.9%</td>
</tr>
</tbody>
</table>
Main Reason to Use Marijuana
2009 NCAA

- To improve athletics performance: 1.4%
- For sports related injuries: 2.1%
- Reasons not related to sports: 96.5%
Main Reason to Quit or Never Use Marijuana
2009 NCAA

- Concerned about health: 20.4%
- Against beliefs/values: 21.1%
- No desire to experience effects: 37.1%
- Hurt athletic performance: 5.5%
- Afraid of being caught: 4.5%
- Fear of getting drug tested: 11.3%
Marijuana Effects/NIDA

- euphoria and relaxation
- slowed reaction time
- distorted sensory perception
- impaired balance and coordination
- increased heart rate and appetite

- impaired learning and memory
- anxiety, panic attacks, psychosis
- cough, frequent respiratory infections
- possible mental health decline
- addiction
Figure 2. Percentage of high school students who currently use marijuana, and used prescription drugs, inhalants, and ecstasy during their lifetime, by type of grades earned (mostly A’s, B’s, C’s, or D’s/F’s)—United States, Youth Risk Behavior Survey, 2009
Prescription Drug Use
2009 NCAA Use in Last 12 Months

• Adderall or Ritalin
  – 4.3% report use with a prescription.
  – 6.4% report use without a prescription.

• Vicodin, Oxycontin or Percocet
  – 13.2% report use of with a prescription.
  – 4.9% reported use without a prescription.

• Asthma Medications
  – 12% report use with a prescription.
  – 1% report use without a prescription.
• No NCAA prevalence data.

• K2-Spice -- Synthetic cannabinoids -- banned under NCAA Street Drug Class -- no NCAA test yet.

  On March 1, 2011, the U.S. Drug Enforcement Administration invoked its "emergency scheduling authority" to make most "legal high" products illegal. The relatively inactive herbs used in these products are spiked with potent designer drugs. The DEA action applies to five of these drugs: JWH-018, JWH-073, JWH-200, CP-47,497, and cannabicyclohexanol. The drugs are now on the DEA's Schedule I, meaning they have no accepted medical use and high potential for abuse. The emergency action will remain in effect for a year, during which time the government is expected to call for permanent control of the drugs.

• Bath Salts -- Synthetic stimulants -- banned under NCAA Stimulant Class -- NCAA is testing for these substances.

  On Sept. 7, 2011, the U.S. Drug Enforcement Administration (DEA) invoked its "emergency scheduling authority" to control three synthetic stimulants -- mephedrone, MDPV, and methylone -- commonly called "bath salts" or "plant food" and marketed under such names as "Ivory Wave," "Purple Wave," Vanilla Sky," and "Bliss." The DEA plans to make possessing and selling these chemicals, or products that contain them, illegal in the United States. The emergency action will remain in effect for at least a year, during which time the government is expected to call for permanent control of the drugs.
# Energy, Weight and Sleep Aids

## NCAA 2009 Study

While in College I have taken:

<table>
<thead>
<tr>
<th>Product Type</th>
<th>Female (%)</th>
<th>Male (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have not taken any items below</td>
<td>47.3%</td>
<td>29.4%</td>
</tr>
<tr>
<td>Diuretics (water pills)</td>
<td>1.6%</td>
<td>1.6%</td>
</tr>
<tr>
<td>energy boosters</td>
<td>10.0%</td>
<td>16.4%</td>
</tr>
<tr>
<td>energy drinks</td>
<td>41.0%</td>
<td>46.8%</td>
</tr>
<tr>
<td>weight loss products</td>
<td>7.5%</td>
<td>5.7%</td>
</tr>
<tr>
<td>protein products</td>
<td>18.4%</td>
<td>51.4%</td>
</tr>
<tr>
<td>weight gain products</td>
<td>.8%</td>
<td>18.2%</td>
</tr>
<tr>
<td>sleep aids (eg Ambien)</td>
<td>10.0%</td>
<td>7.7%</td>
</tr>
</tbody>
</table>
## Substance Use by Sport

2009 NCAA—Select sports reporting higher use in 30 days

<table>
<thead>
<tr>
<th>Substance</th>
<th>Sport</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Alcohol</strong></td>
<td>Men’s Ice Hockey</td>
<td>90.8%</td>
</tr>
<tr>
<td></td>
<td>Men’s Lacrosse</td>
<td>87.3%</td>
</tr>
<tr>
<td></td>
<td>Women’s Field Hockey</td>
<td>82.3%</td>
</tr>
<tr>
<td></td>
<td>Women’s Ice Hockey</td>
<td>80.2%</td>
</tr>
<tr>
<td></td>
<td>Women’s Lacrosse</td>
<td>82.5%</td>
</tr>
<tr>
<td><strong>Marijuana</strong></td>
<td>Football</td>
<td>13.6%</td>
</tr>
<tr>
<td></td>
<td>Men’s Lacrosse</td>
<td>25.1%</td>
</tr>
<tr>
<td></td>
<td>Men’s Soccer</td>
<td>14%</td>
</tr>
<tr>
<td></td>
<td>Wrestling</td>
<td>16.5%</td>
</tr>
<tr>
<td></td>
<td>Field Hockey</td>
<td>13%</td>
</tr>
<tr>
<td></td>
<td>Women’s Ice Hockey</td>
<td>14.6%</td>
</tr>
<tr>
<td><strong>Spit Tobacco</strong></td>
<td>Baseball</td>
<td>41.8%</td>
</tr>
<tr>
<td></td>
<td>Men’s Ice Hockey</td>
<td>41.1%</td>
</tr>
<tr>
<td></td>
<td>Wrestling</td>
<td>35.8%</td>
</tr>
<tr>
<td><strong>Cigarettes</strong></td>
<td>Men’s Golf</td>
<td>22.1%</td>
</tr>
</tbody>
</table>
NCAA Nutritional/Dietary Supplements Warning:

Before consuming any nutritional/dietary supplement product, review the product with your athletics department staff!

- Dietary supplements are not well regulated and may cause a positive drug test result.
- Student-athletes have tested positive and lost their eligibility using dietary supplements.
- Many dietary supplements are contaminated with banned drugs not listed on the label.
- Any product containing a dietary supplement ingredient is taken at your own risk.

It is your responsibility to check with the appropriate athletics staff before using any substance.
NCAA Position on Supplements

- Athletes ingest a sufficient amount or protein without supplements
- Vitamins and minerals needs can be met via eating a variety of foods
- Concerned about lack of regulation
  - Poor labeling
  - Impurities

What you don't know can hurt your eligibility

- Nutritional/Dietary Supplements
  - Not strictly regulated
  - May contain banned substances
  - May not list all contents on the label
  - May be legal but still contain NCAA banned substances

Consult with your institution's sports medicine staff before taking any nutritional/dietary supplement.

Ignorance is no excuse!

www.ncaa.org/health-safety
The Message . . . .

Good Nutrition
Promotes Health
Enhances Performance!
Your Action Plan
What are the unique aspects of athletics that create challenges to your work on AOD issues?

- Work hard, play hard ethic
- Schedules
- Physical location
- Team/coaches rules paramount
- Group think
- Cultural expectations – myths and traditions
- Competition mentality
What challenges do we hear from those working with athletic on campus prevention efforts?

• Student-athletes’ time

• Coaches’ support

• Buy-in from athletics departments

• Defining, measuring and evaluating objectives

• Staffing

• Athletics Identity — sometimes overlooked as prevention partners.
Top Ten Reasons to Partner with Athletics

1. Fun
2. Excitement
3. Crowds
4. Community Interest
5. Tailgating
6. Media
7. Student Involvement
8. Faculty/Administrator Involvement
9. Scoreboards/Programs
10. Gym/Field have lots of space for events
Build Campus Partnerships

The POWER of “WITH”

• Define common ground
  – Positive relationships
  – Academic success
  – Bright future

• Overcome barriers
  – join campus task force
  – collaborate when opportunities arise
  – make opportunities
Who’s Who in Athletics

- Director of Athletics
- Senior Woman Associate
- Compliance Coordinator
- Sports Psychologists
- Sports Dietitians
- Life Skills Coordinators; Academic Advisors
- Faculty Athletics Representatives
- Coaches and Strength Coaches
- SAAC/SAM Peer Educators
- Athletic Trainers
- Others...
How to Engage with Athletics

• Build a relationship with a counterpart – sports medicine, education, compliance, peer ed (SAM/SAAC).
• Find out what the other needs to do their jobs better.
• Get to know them – get to know you – go to games.
• Invitations to task force.
• Finds ways to work within the others schedules.
• Ask what they need from you.
• Provide info related specifically to impact on athletic and academic performance.
• Take a team to APPLE.
Re-Emerging Concerns

• Increase in overall social drug use – alcohol, tobacco and marijuana.

• 49% of student-athlete population report they drink 5 or more drinks in one sitting.
  – 22% of male student-athletes report they drink 10 or more drinks in one sitting.
NCAA Recommendations

• Alcohol
  – Address Performance Issues – to engage coaches and athletes interest
  – Include athletes and athletics in campus prevention efforts

• Marijuana
  – Address Eligibility Concerns

• Tobacco Use
  – Focus on high-risk sports, especially for spit tobacco
  – Assist athletics with cessation programs and reinforce zero tolerance on the field

• Anabolic Steroids
  – Support strong policy and testing – decreases in reported anabolic steroid use follow increases in drug testing programs as part of comprehensive approach.
NCAA Drug Education Resources

Substance Abuse Prevention Programming
www.ncaa.org/drugtesting

- APPLE Conferences
- CHOICES Grants
- Student-Athlete Affairs Grants
- Drug Education Video
- Resource Exchange Center (REC)
- Step Up! Bystander Intervention Website
- Coaches Assist
- myPlaybook*
**NCAA Sponsored APPLE Conferences**

- Strategic planning conference dedicated to substance abuse prevention and health promotion for student-athletes;

- “Prevention teams” consist of 4-6 members from an institution, including at least 2 student-athletes, and coaches, administrators and health educators;

- Empowers teams of student athletes and administrators to create an institution-specific action plan;

- APPLE staff follows institutional progress at 3 months and 9 months.

[www.virginia.edu/gordiecenter/apple](http://www.virginia.edu/gordiecenter/apple)
NCAA CHOICES Alcohol Education Grants

• Purpose is to integrate student-athletes and athletics into the campus-wide prevention effort:
  – student-athlete as an integral part of the student body

• Campus project coordinators are collaborators, bringing together athletics and student-affairs (and sometimes academic affairs!)
  – application can be made by any campus professional

• 3-year projects receive up to $30,000

• How to write a CHOICES Grant Proposal, Best of CHOICES and IMPACT Evaluation Resource. . . . . www.ncaa.org/CHOICES
NCAA Student-Athlete Affairs Grants

- up to $2,000 to NCAA member institutions and conference offices to fund student-athlete development and health and safety related programming.

- Online application.

- List of speakers who have submitted credentials for health and safety topics
  - ATOD
  - Sexual Health
  - Stress Management
  - Nutrition
  - Hazing

www.ncaa.org/studentathleteaffairs
Drug-Ed/Testing Video

- Orientation
- Team meetings
- Road trips
- Pre-championship meetings...
Resource Exchange Center

• Staffed by Drug Free Sport
• Provides authoritative info on supplements, medication and banned drugs
• 877-202-0769
• [www.drugfreesport.com/rec](http://www.drugfreesport.com/rec)

Password ncaa1, ncaa2, ncaa3
Step Up!
Bystander Intervention Training

A Facilitated Leadership Training
• Raise awareness of helping behaviors
• Increase motivation to help
• Develop skills and confidence when responding
• Ensure the safety and well-being of others

www.stepupprogram.org
WE ARE ALWAYS IN UNIFORM

As UA student-athletes, we know what it means to STEP UP. We are proud to STEP UP on and off the “field”.

Wildcats Using “S.E.E.” - Safe, Early and Effective Intervention

RESPONSIBILITY IS A CHOICE THAT WE MAKE

Brought to you by The University of Arizona Athletics Department and S.T.A.R.R. - Student-athletes Taking Active Responsible Roles
**NCAA COACHES ASSIST**

to deter alcohol and drug abuse.

**Coaches Believe**
- Every student-athlete matters
- Most student-athletes will respond to clear expectations about alcohol and drug use
- We must step up and intervene when needed
- My behavior matters

Click button if you have a question about:

- How To Recognize a S-A needs help
- How to Voice Your Concerns
- How To Access Campus Resources
- How to Access Community Resources
- How to Provide Effective Education

**NCAA Resources and Support**
myPlaybook

- Online, evidence-based program designed to prevent alcohol and other drug related harm for student-athletes.
- Development funded by NIDA
- Developed by Prevention Strategies (CollegeAlc)
- 2008 pilot test with 60 Division II
- 2009 pilot with Southern Conference
- 2009 mini-grants to 40 institutions
Play True!

To promote the Health and Safety of the more than 400,000 NCAA Student-Athletes!

• Eat Real Food
• Stay Hydrated
• Condition
• Rest and Recover
• Manage Stress
• Avoid Substance Abuse
• Stay Well!