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INTRODUCTION

EMPLOYING EVIDENCE-BASED PRACTICES: A GUIDE FOR PREVENTION PRACTITIONERS IN HIGHER EDUCATION

A Preface

In the spring of 2002, the Illinois Higher Education Center for Alcohol, Other Drug and Violence Prevention (IHEC) staff concluded that a major thrust of the Center's work for the foreseeable future should focus on the diffusion of "evidence-based" strategies. This guide is an attempt to synthesize some very important and useful information about these strategies in a way that is easy to use and will serve as a guide to supportive resources.

For too many years, campus preventionists have labored under a great deal of frustration in efforts to find strategies and approaches that really make a difference in students' lives and to campus environments. A particular activity or approach would spark imaginations and promise would be found in accounts of how much students appeared to enjoy an activity or how impressive a speaker was. Soon, focus would shift to another exciting sounding project. There was no intention to provide ineffective programs. Nothing has ever been more important to preventionists than to make a positive impact. However, it is no longer prudent to ignore the emerging research that has provided new evidence of what programs and strategies are effective. We have now entered an era where it is necessary to take a step back, reevaluate our practices and become more accountable to funders and our institutions. There is now a sound and growing body of research pointing toward alcohol, other drug and violence (AODV) prevention strategies that have efficacy. This research has also revealed a much clearer picture of prevention approaches showing little or no evidence of efficacy. So, the compelling question to pose to IHEC staff and to each campus affiliated with IHEC is: "Given this new research and the current level of knowledge, are good intentions good enough?"

It is both encouraging and exciting to be working in the prevention field in a time when science is finally catching up with intention. Prevention work will be as hard as ever; but there are now tools for working smarter and with a more certain integrity.

The fact that IHEC's funding and local campus dollars now come with tighter strings attached is being recognized. Professionals are being held to closer scrutiny about prevention programming being linked to sound theory and practice, with empirical support. Efforts are relying on outcome-based planning with measurable results, needs assessments and program evaluation. The old ways of explaining how programs were effective will no longer work. IHEC wants to be a primary source of support for campus prevention programs in making this shift toward implementing evidence-based strategies.

This guide is one of the strategies employed in an attempt to deliver guidance, information and resources to the AODV campus prevention field in Illinois. In this year's strategic plan, IHEC established as one of its long-term outcomes: "To increase the use of evidence-based practices for AODV prevention by Illinois Institutions of Higher Education." The following intermediate outcomes will lead to this ultimate outcome:

- **Increasing awareness of evidence-based practices in Illinois IHEs.**
- **Increasing knowledge of evidence-based practices in Illinois IHEs.**

- **Increasing evidence-based prevention services and resources to Illinois institutions of higher education.**
- **Increasing the capacity of Illinois campuses to implement evidence-based practices.**

To achieve these outcomes, this year's trainings have focused on evidence-based topics; written resources about evidence-based practices have been provided to you; and grant dollars, through funding from the Illinois Department of Human Services, have been given to five campuses this year at a level of \$5,000 each to implement and evaluate evidence-based approaches. Lastly, this guide is presented as the final step in this year's efforts to continue the process of diffusing evidence-based strategies to Illinois IHEs.

It is hoped that this guide will serve as a primer for planning new projects and activities. Herein is provided the theoretical and research framework for evidence-based strategies. Additionally, the guide contains practical information showing which practices target specific risks factors. It provides examples of actual programs being used that are evidence-based. The guide also focuses on several "infrastructure elements" each campus must have in place to support evidence-based practices. Finally, relevant readings are suggested within the body of the guide, if you wish to expand your knowledge base.

This guide is not intended to be the end-all and be-all of evidence-based practices information. Each year new and even more compelling research will need to be examined and disseminated to you. It is important to IHEC staff to continue to do everything possible to provide the best possible resources and access to the most up-to-date information. This is not the end of such efforts; it is only the beginning. It is hoped that this guide will be a useful tool as the AODV campus prevention field continues to strive toward providing the most successful programming possible.

CHAPTER ONE:

DEVELOPING INFRASTRUCTURE SUPPORTING EVIDENCE-BASED AODV PREVENTION STRATEGIES

The Illinois Higher Education Center for Alcohol, Other Drug and Violence Prevention (IHEC) recognizes that collegiate environments rarely have unlimited resources and staff to allocate toward Alcohol, Other Drug and Violence (AODV) prevention programs. One of the ways that IHEC staff encourages good stewardship of staff time, energy and resources is to recommend the use of evidence-based strategies. It is hoped that this will increase the likelihood of positive results from programming efforts. However, it has also become apparent to IHEC that even the most wisely chosen evidence-based prevention services will likely fail if crucial infrastructure elements are missing.

For instance, having a highly supportive administration is essential to the vitality of every prevention program. Creating a sound AODV policy and being in compliance with The Safe and Drug-Free Schools and Campuses Regulations plays another key role in efforts to curb problematic drinking behavior. It is also important to programming success that strategic program planning begins with collected data identifying the specific individual and environmental risk factors to be targeted. Lastly, it has been widely recognized that prevention work has a greater impact when the attitudes and messages across the campus are consistent with those of the surrounding community. Thus, institutions should have a campus-community task force or coalition addressing AODV issues. Three of these infrastructure elements are addressed in this chapter.

SECTION A

Building and Maintaining Campus - Community Coalitions

One of the most notable prevention approaches to emerge over the last decade is "Environmental Management." This framework comes from the Higher Education Center for Alcohol and Other Drug Prevention and has guided much of the higher education prevention work now implemented by campus prevention programs across the country. This approach is based on the theory that decisions people make about the role alcohol and other drugs will play in their lives are not made in a vacuum. Rather, they are made within a physical, social, economic, and legal environment.

This framework shifted thinking about prevention approaches from largely educational and individually targeted, to viewing problems within the context of the entire campus community. This approach looks at the impact of the campus culture and the influence of all its institutional segments. But, it doesn't stop there. It also points to an examination of how the larger community impacts the drinking and drugging behavior of college students. Environmental Management demands the campus and community be looked at as a whole rather than as separate entities. Then it provides multiple prevention strategies that can help "manage" that relationship, creating a healthier environment. It is posited that this healthier environment will encourage and support students to make healthy and safe choices about drinking. For an in-depth look at Environmental Management, please investigate the wealth of information found at:

<http://www.edc.org/hec/framework/>

Why Campus-Community Coalitions?

When focused correctly, coalition work fits easily into the Higher Education Center's environmental

management framework. It is obvious to anyone residing on a campus or in the community surrounding a campus that the relationship between the two can be complicated. Community factors, such as access to alcohol, can have a powerful effect on students' drinking. Likewise, students' drinking patterns and related behavior can certainly impact the community. It is, therefore, not difficult to understand why even the most comprehensive campus prevention program will need to also engage community stakeholders.

When diverse community constituents are brought together to address any problem, they bring with them certain "gifts" and challenges. "Gifts" will be addressed first. Coalition members bring a wide variety of resources in the form of diverse knowledge and experience, access to dollars, space, volunteers and a wide range of valuable networks. Coalitions can develop a much stronger base of social and political support for a common agenda than separate entities working in isolation. There is a creative synergy that emerges when a group comprised of diverse backgrounds, ideas, and perspectives comes together around a common issue and a shared mission.

Working within a coalition structure can also be a challenge. Turf issues can interfere with common goals. Reaching a common goal is often a difficult and laborious process. If coalitions become so large that decision-making and planning processes bog down, interest and creativity may wane.

Infighting and political maneuverings can sabotage the genuine, productive work of the group. There are times when campus and community coalitions are just not purposeful and can, in fact, be a drain on time and resources.

However, when coalitions work well, they are an important infrastructure element that can bolster prevention work and contribute to the success of that work. In general, it is believed that strong coalitions expose students to consistent AOD prevention messages and contribute to the building of a safer and healthier campus environment. In a real sense, the issue-related struggles that go on between campus and community level representatives is part of a process of mutual education that can create important understanding and partnerships. It is from these partnerships that new cultural norms emerge within the campus and across the community.

Develop a Purpose Statement

Before contacting people to be involved in a campus-community coalition, it is essential that a general, but clear, purpose statement be written. It will be very difficult to attract people to give of their time and resources if they do not understand what the group will do. Once the group is cohesive, the mission statement can be revised. It is also important that people have a general idea about what kind of commitment, in terms of time and resources, they will be asked to give to coalition work. You do not have to have all the answers at the time of recruitment. Decisions such as frequency of meetings, subcommittee structure, etc. will probably be defined by the group at the first couple of meetings. Recruits will be okay with some ambiguity, but do need as much information as possible with the first contact.

Recruitment

After deciding to form a campus-community coalition and determining its mission, the next step is recruitment. This can be a more important step than it might seem on the surface. It is good to have a broad base of support from both the campus and community. Think strategically about those people who, 1) have a stake in campus-community issues and 2) have something of importance to contribute to a comprehensive prevention effort. There is a cautionary note here, however. Be careful not to expand too broadly. If a coalition is composed of people with interests and perspectives that are too diverse, time, energy and focus can be drained away from the primary goals of the group.

This is why it is essential to develop a purpose statement before beginning the recruitment process. Another crucial consideration as the recruitment list is developed is to be able to articulate how an individual or group's involvement will be of benefit to them. For instance, if beer can littering is a problem for property owners surrounding the campus or nearby bars, it would be advantageous for a neighborhood association to join the coalition.

The National Highway Traffic Safety Administration has developed a guide to coalition development, which can be accessed at:

http://www.nhtsa.dot.gov/people/injury/alcohol/Community%20Guides%20HTML/Guides_index.html

This guide offers these suggestions for recruiting coalition members:

- **Target key community leaders.**
 - **Involve people whose jobs relate to the work of the coalition such as police officers, EMS personnel, educators, and substance abuse prevention and treatment specialists.**
 - **Reach out to non-traditional partners in the community such as hospitals, doctors, service clubs, the media, the military and the faith community.**
 - **Identify people who may have a personal interest in underage drinking as well as people who have a professional interest.**
 - **Keep the size of the coalition and number of participants to a manageable level. A good gauge is between 15 to 25 members, depending upon the individual community.**
 - **Develop a coalition structure that will help your coalition function efficiently and effectively.**
- The Higher Education Center for Alcohol and Other Drug Prevention has developed a helpful list of potential recruits for campus-community coalitions. (Remember that any prevention strategy has to be contextual, so your list may look different.)**

<http://www.edc.org/hec/pubs/enviro-mgmt.html#community>

Campus Systems

- residence life
- health services
- AOD prevention staff
- legal affairs
- president or chancellor
- campus security/police
- student government
- athletics department
- faculty
- fraternities and sororities
- campus media
- admissions department
- alumni
- commuter center

Community Groups

- neighborhood associations
- local police
- business associations
- state alcoholic beverage control authority
- media
- alcohol retailers
- religious groups
- elected officials
- city council
- secondary feeder-school administrators

Recruiting upper level administrators to be a part of the coalition can be a very helpful strategic move. These are the people who have either direct access, or can get to the people who have access, to funding for coalition work. They will also bring credibility and a degree of clout as the group moves its agenda along.

Gathering Data

Before any kind of activity or program can be planned by a coalition, the problem to be addressed must be defined. Each member of the coalition may have a different impression of the problem, based on his or her position on the campus or in the community. Being able to provide a picture of the campus and community environment is the first and most crucial step to be taken prior to strategic planning.

Section Two of this manual, *Conducting a Needs Assessment and Strategic Planning*, is devoted to assessing needs and gathering relevant data, including some sources of such data. When gathering data to be used in planning for coalition work, information gathered from environmental assessments, such as the CARA, are particularly important. The CARA instruments can be found at:

<http://www.edc.org/hec/pubs/cara/>

Targeting Coalition Work

In a study funded by the Robert Wood Johnson Foundation on the effectiveness of community-based AOD coalitions, researchers urged such groups to be very targeted when setting goals. This document, published by the Center for the Advancement of Health and released in October of 2002, concludes, "To be effective, communities need to focus on well-defined goals; continually evaluate progress toward these goals; and consider environmental strategies (such as stricter sanctions for alcohol and tobacco sales to youth), instead of relying on individual or public awareness solutions." For the full article, go to:

<http://www.hbns.org/news/antidrug10-21-02.cfm>

The process of planning for targeted programs must be approached in a way that first assesses the needs of the campus and community and then chooses strategies based on risk factors and evidence of effectiveness to address those needs. Every campus-community coalition should conduct some sort of strategic planning process that reflects the group's decisions about:

- 1. Its analysis of the collective campus and community environment;**
- 2. What problems need to be addressed as indicated by collected data;**
- 3. A structured process of what steps should be taken to address the selected problems; and**
- 4. What outcomes would indicate that the coalition's work has been successful.**

Using logic modeling for this process is a highly recommended approach. The Illinois Higher Education Center is available to provide technical assistance for conducting logic model sessions. The Center for Disease Control also has an excellent list of resources for learning about logic models and guides for completing them. This material can be found online at:

<http://www.edc.org/hec/pubs/prev-updates/campus-comm-coal.html>

Briefly, your completed logic model should have the following elements:

- **Program Outcomes (long term, intermediate, short)**
- **Inputs**
- **Program Activities**
- **Program Outputs**
- **Linkages between your stated inputs, activities, outputs and outcomes**

Planning for Action

A coalition should first develop a mission statement that defines its purpose. Next, a needs assessment should be conducted to identify problems, assess current activities, and locate available resources. At this point, a plan of action, such as a logic model, should be developed that will specify a list of goals, the steps necessary to achieve those goals, and defined outcome objectives that can

be used in evaluating the strategy. Although evaluation may seem daunting, it is an important step in monitoring program effectiveness and identifying areas that require further effort. By building evaluation into the plan from the beginning, more useful data can be obtained.

From this point, the group will want to set forth a work-plan to determine responsibilities, timelines, resources needed, etc.

There are five issues found in most campus and community environments that are frequently targeted for change. These may not be the only factors your coalition will choose to address, but may serve as a jumping-off point for coalitions to begin their assessment and strategy-building processes. These issues are:

- 1. Many college and university students have a great deal of unstructured time, few responsibilities, and limited alcohol-free options.**
- 2. Alcohol is abundantly available and inexpensive.**
- 3. There are pervasive messages that high-risk drinking and other drug use are a normal part of the college experience.**
- 4. Local bars and liquor outlets often use aggressive tactics to reach college and university students.**
- 5. Laws and policies regarding alcohol and other drugs are not consistently enforced on most campuses or in many communities.**

When planning programs to address these contributing environmental factors, a coalition might create targeted programming that curtails youth access to alcohol on and off campus and eliminates irresponsible alcohol advertising and promotions. Other effective approaches would be to increase law enforcement efforts in the community and seek zoning reform to reduce the concentration of alcohol outlets near campus. Some coalitions have conducted responsible beverage service training in bars and restaurants. Whatever the programming approach, it is important that students hear consistent messages on and off campus. This should be a primary aim when managing the environmental issues surrounding alcohol and drug related problems.

Sustaining a Coalition

Maintaining member interest is always challenging. Keys to sustaining a coalition include:

- 1. Staying focused on the mission;**

2. Recruiting new members to continually expand and strengthen the stakeholder base;
3. Keeping demands on members simple and realistic;
4. Actively seeking new sources of funding;
5. Using subcommittees that are formed and disbanded on an as-needed basis;
6. Keeping meetings on task, informing everyone of the agenda ahead of time, and keeping time commitments to a minimum; and
7. Taking time to celebrate group successes, even small ones.

The most successful coalitions have found a way to institutionalize their programs. This will provide a place and a structure in which the group can continue its work, even if the key players change.

<http://www.edc.org/hec/pubs/enviro-mgmt.html#community>

The national Higher Education Center provides the following concrete steps for institutionalizing and sustaining effective programs.

- Solicit support from top school administrators and other key stakeholders who will advocate for the program.
 - Link the program's objectives to goals that are important to the institution such as providing a safe and healthy environment conducive to academic achievement.
 - Develop a long-range plan that includes a blueprint for utilizing initial funding to institutionalize and sustain alcohol and other drug prevention programs.
 - Establish relationships with local, regional, and statewide officials to help build support for the coalition's prevention efforts.
 - Market your program-let people know that addressing AOD issues is a priority and how prevention programs can benefit the campus and community.
 - Disseminate evaluation data from the coalition's work to show positive outcomes; successful programming can generate future funding.

A good source of information about coalitions is available from the National Clearinghouse for Alcohol and Drug Information, phone (800) 729-6686. Following are just some of the materials that may be ordered.

Effective Community Mobilization: Lessons from Experience, Implementation Guide, 1997. Washington, D.C.: Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Prevention.

Collaboration by Design: An Annotated Bibliography on Community Partnership/ Coalition as a Strategy for Alcohol and Other Drug Abuse Prevention, 1993a. Washington, D.C.: Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Prevention.

A list of campus-community coalition reference materials is available from the national Higher Education Center at:

<http://www.edc.org/hec/pubs/anno-bib-sup.html#t5-1>

SECTION B

Developing and Implementing Effective Alcohol and Other Drug Policies

Most of the information in this section was taken from *Setting and Improving Policies for Reducing Alcohol and Other Drug Problems on Campus: A Guide for School Administrators*, available from

the national Higher Education Center for Alcohol and Other Drug Prevention at:

<http://www.edc.org/hec/pubs/policy.htm#5-16>

Why do we need policy?

Compliance with the Federal Drug Free Schools and Campuses Act [codified as Part 86 of EDGAR (34 CFR Part 86)].

Part 86 of EDGAR requires every institution of higher education to enact policies for preventing the unlawful possession, use, or distribution of alcohol and illicit drugs by students and employees. If an institution fails to meet the Part 86 of EDGAR requirements, federal funding can be placed in jeopardy.

The Drug-Free Schools and Campuses Act is the "stick" that insures each college and university institutes an alcohol and other drug and violence (AODV) policy. However, there are a variety of reasons falling under the "carrot" category that are equally important. AODV policies *communicate community and institutional standards* so that students, staff and faculty operate under that same set of campus rules and regulations. A comprehensive policy, articulated clearly, communicated broadly, and enforced consistently should leave little doubt about what is expected from students and what consequences will occur when campus standards and state and federal law are violated.

Clearly communicated institutional policy will logically lead to a *safer environment for the entire campus community*. It is assumed that students living in a safe and healthy environment will thrive and that such a climate will *promote academic performance and student potential*. (It is important to note that the promotion of academic and personal potential is almost always a part of institutional mission statements, in one form or another.)

To create an environment where students thrive, institutions of higher education should infuse policies with standards aimed at preventing the *five Ds: Disruption, Damage, Disability, Disorder, and Death*. The reduction in incidents of these five Ds will help the institution reduce *legal liability and risk*.

Crucial Policy Components

All AODV policies should have the following components:

- **A statement of purpose for the policy**
- **Designation of jurisdiction**
- **A statement of principles**
- **A "use, possession, sale and distribution" section**
- **An explanation of how policy violations will be enforced**
- **Campus standards about advertising and promotion**
- **All other DFSCA compliance information**

10 Steps To Effective Policy Review

When reviewing and revising a policy, one should insure that all seven components listed above are present. In addition, careful thought should go into setting up a process for reviewing and revising policy. This forethought will help insure that policy improvement and integrity will be an ongoing process. Following are the policy review and revision steps recommended by the Higher Education

Center.

1. Promote visible and consistent leadership—Campus policies are always more effective when an IHE's president and top administrative representatives are involved. One place to start garnering support is for the president to appoint a standing policy committee or advisory board.

2. Establish an advisory board or policy-setting committee—If you are given responsibility for policy review, it is very important that you not take on this task alone. A standing campus committee responsible for policy development should be formed whenever possible. This committee will provide visible and consistent leadership in policy issues and can lend a range of insight, support, and credibility that one person or office alone cannot. Here is a list of campus offices that should be represented on an AODV policy-setting committee. This is a suggested list and is not all-inclusive.

- **Board of trustees**
- **Dean of students**
 - **University attorney**
 - **Directors of admissions, human resources, housing, student health, counseling and athletics**
 - **Campus police**
 - **Faculty**
 - **Student leaders**
 - **Alumni, parents, community members**
 - **Managers of judicial affairs, prevention programs, campus pubs**

3. Assess the campus AODV culture—Looking carefully at the context in which policy is developed is a crucial first step to success. Common elements should be found in all campus AODV policies, but it is equally important to recognize policies that work on one campus may be totally ineffective on others.

4. Campus-specific problems and concerns should be addressed—There are many sources of data and information available for campuses to use as they assess where particular areas of concern exist. A careful review of data collected on your campus should help form a clearer picture of where your policy needs to be strengthened and how its standards and regulations should be focused. Some examples of data sources are:

The Core Alcohol and Drug Survey <http://www.siu.edu/~coreinst/>
The College Alcohol Risk Assessment Guide <http://www.edc.org/hec/>

The National College Health Assessment
http://www.acha.org/projects_programs/assessment.cfm

A guide to additional assessments can be found at
<http://www.edc.org/hec/pubs/selecting-right-tool.html>

5. Obtain information on current laws and the DFSCA—Below are links to the most up-to-date sources of information about policy requirements and help with policy development.

<http://www.ed.gov/>
<http://www.epi.umn.edu/alcohol/>
<http://www.edc.org/hec/dfsca/part86.htm>
www.collegedrinkingprevention.gov/policies

6. Request technical assistance—Staff at the Illinois Higher Education Center for Alcohol, Other Drug and Violence Prevention are available, on request, to assist Illinois campuses in the development, review and revision of AODV policy (call 217/581-2019). One of the most useful documents regarding policy, *Complying with the Drug-Free Schools and Campuses Regulations [34 CFR Part 86] A Guide for University and College Administrators*, can be ordered or downloaded from the national Higher Education Center for Alcohol and Other Drug Prevention.

<http://www.edc.org/hec/pubs/dfscr.htm>

7. Assess all current policies—Gather the most recent AODV policies available on your campus and begin to evaluate them against the best policy practices presented in this document and referenced material. The guide mentioned in the previous paragraph provides a template for development of policies that put your institution in compliance with the DFSCA and will help you get ready for the US Department of Education's biennial review cycle (even numbered years, 2002, 2004, etc.). Since you will need to put many policy pieces in place, it is prudent that your policy committee is formed and work is started the year prior to the next cycle of compliance reviews.

8. Revise old and draft new policies—Make changes based on conclusions drawn as the committee evaluates data and existing policies. Draft new policies as areas of neglect or weakness in current policies are discovered. Potential revisions, as well as new policy decisions, will become apparent as institutional data pointing toward areas of alcohol, other drug, and violence problems are examined. An effective policy will be shaped as input is received from all segments of the campus environment, as represented on the policy committee.

9. Address obstacles to enforcement—Being specific about sanctions to policy violations is an important element of every policy. It is perhaps even more crucial that the committee understand what barriers are faced when attempts are made to apply sanctions evenly and consistently across the student population. The policy committee will hopefully have members who are responsible for applying sanctions and will have input about what those obstacles are and how they might be resolved in new or amended policy. Having committee members believe that each voice has been heard in the process of policy work will be important later as policy is enforced.

10. Secure reviews and submit for approval—Send policy recommendations to appropriate administrative offices. Solicit their revisions and finalize the policy.

Sample Policies

The Higher Education Center for Alcohol and Other Drug Prevention has included several examples of notable policies in the appendices section of their document, *Setting and Improving Policies for Reducing Alcohol and Other Drug Problems on Campus: A Guide for School Administrators*. These can be viewed and downloaded at: <http://www.edc.org/hec/pubs/policy.htm#appendix-b>

For sample policies from Illinois colleges and universities, as well as the rest of the nation, visit the following website: <http://www.collegedrinkingprevention.gov/policies/>

SECTION C

Strategic Planning

The majority of the information found in this section was taken from the NIAAA report, *College Drinking: Changing Campus Culture, Reducing Alcohol Problems on Campus: A to Planning and*

Evaluation, found at:

<http://collegedrinkingprevention.gov/Reports/Handbook/default.aspx>.

Additional information was taken from The Center for Substance Abuse Prevention's publication entitled, *Decision Support System*, online at:

http://www.mapnp.org/library/evaluatn/fnl_eval.htm#anchor1575679

Overview

Most prevention programs don't plan to fail; they fail to plan. This is an overly simplistic statement, but one that has more than a grain of truth to it. A thorough strategic planning process is extraordinarily time-consuming. Most professionals are involved in programs where work associated with planning is neither funded nor highly valued. It is much easier to borrow a program or approach that has been implemented successfully elsewhere, even if it has no relevance to our audience. Too many prevention programs have never taken an objective look at campus and community risk factors that are contributing to alcohol, other drug and associated problems. Sometimes, it is just too difficult to convince others that formally assessing needs and assets, developing outcomes and conducting an evaluation are, in fact, the most important steps in attaining success. Ask yourself this question, "What percentage of my work time is actually devoted to these formal tasks?" (This would exclude regular staff meetings, which do not tend to involve "formal" planning.) Most prevention staff would admit that assessment and planning are given a back seat to "real" work. Few have the experience or expertise to conduct the kind of data gathering and strategic planning discussed here. The information about strategic planning, found in these pages, is not intended to be a "how-to" guide. But, it can be a place to begin to understand the basic steps and find where to look for additional resources.

Start with the End in Mind

It is an unfortunate fact that most administrators view evaluation as a report of the final results of a program's work. In fact, it is far too common that prevention programmers ignore evaluation until the end of a program. One of the most important tenets of evaluation planning is that it begins when strategic planning begins. The benefits of thinking about evaluation as part of the planning process are numerous. It helps to focus our thinking about the program: its mission, its goals, its objectives, and the activities designed to meet those objectives. When it is used as an iterative process, evaluation planning can be a valuable program management tool. The NIAAA Report suggests that the process for developing and evaluating prevention programs and policies can be divided into five basic steps:

- Creating and executing a data collection plan**
- Reviewing the evaluation research**
- Outlining how the intervention will work**
- Identifying specific goals and objectives**
- Communicating the results**

Following is a more detailed examination of these steps.

Creating and Executing a Data Collection Plan

In the beginning, some assumptions have to be made about the problem to be addressed by a given program plan so you will know where to begin your search for data. This data gathering is often called a *needs assessment*. This will help pinpoint where or for whom prevention and/or reduction efforts are most productive. This type of assessment identifies the underlying risk factors that contribute to the vulnerability of the individual, group, or place of focus. Another type of assessment that is useful in program planning is *assets assessment*. This can be accomplished with much less work than a needs assessment. It focuses on protective influences and community resources that build resistance to substance abuse. The picture that results after analyzing these assessments is essential for comprehensive community and program planning. It provides the context for our program needs and plans. The needs and assets assessment process discloses and measures the substance abuse problem in the community or group, or on the campus. These are the baseline measures; the initial information collected prior to an intervention. Baseline measures help form a measurable goal statement. They also help determine measurable changes you hope to see at the end of an intervention. The Center for Substance Abuse Prevention suggests that assessing needs and assets is important in a strategic planning process because it:

**Defines the nature and extent of substance abuse problems;
Identifies populations and/or neighborhoods statistically associated with the problem;
Identifies the underlying risk and protective factors of the defined group; and
Leads to plausible theories that, paired with the appropriate program, should reduce or prevent substance abuse.**

There are several additional benefits that come from assessing needs and assets of the target population or environment.

**A needs assessment makes the project defensible, fundable and measurable.
A needs and assets assessment targets resources.
A needs assessment can reenergize existing efforts.
A needs assessment can help garner media attention.**

One of the most confusing steps in beginning an assessment is selecting the right assessment tool. For the purpose of needs assessment, self-report surveys, such as the Core Alcohol and Drug Survey, are a primary data source for campus AODV program planning and evaluation purposes. This is particularly true if the goal is to reduce consumption or alcohol-related problem behaviors (second-hand effects). Often, in an environment where resources are limited, programmers will put together their own survey, which may not be valid or reliable, and the results will not provide useful data. Fortunately, there are many tested, reliable and valid survey instruments available that can be used as sources of information and data. The Higher Education Center has provided a list of such instruments, how they might be used and where they can be located in *Selecting the Right Tool* at: <http://www.edc.org/hec/pubs/selecting-right-tool.html>. Categories of instruments included are:

**Alcohol and Drug Use Assessments
Environmental Assessments
Fraternity and Sorority Assessments
Other instruments**

In addition to collecting data with these tools, there are other ways to find useful information. Incident reporting forms used by the campus police should require officers to indicate whether a student being investigated, cited, or detained has been using alcohol. Additional examples of potentially useful records are listed below. Which types of records are monitored will depend on the specific goals and objectives being pursued. They could include:

**Campus police records
Student health services**

Student counseling services
Residence facilities
Athletic department
Greek student office
University discipline

After these kinds of data are collected, it is time to add another layer to the needs and assets assessment process by calling on key stakeholders (including students) to engage in a process of teasing out the nature and scope of the problem and the work ahead. It is also a useful tool in understanding the "flavor" of the environment in which the program will operate; it provides a forum for interaction with educators of stakeholders; and it could create a link between your program and valuable resources.

Reviewing the Evaluation Research and Choosing an Evidence-Based Strategy

Once adequate data are collected, it is time to begin actual program planning. First, a problem is identified. Let's assume it is student drinking. The next logical step is to decide which goals and objectives would be relevant to this problem. So, it is appropriate to ask questions like: "Is the goal to completely eliminate college student drinking or limit excessive consumption of alcohol? Is the intention to reduce the harm to others which drinking can impose? Is it prudent to consider off as well as on-campus drinking?" There are many answers to these questions and the answer will most likely depend on the context of the campus in terms of philosophy, mission, culture and politics. However, asking such questions is an essential step in choosing goals, objectives and outcomes.

It is extremely important that goals and objectives are as specific as possible. Evaluators will want program planners to develop precise and measurable objectives, meaning that the achievement of those objectives can be measured and readily observed.

The next step is to search out program strategies that have been researched and show efficacy. These program strategies should logically fit the goals and objectives created from the needs assessment. IHEC has provided two documents in this that synthesize the latest research on evidence-based approaches. A summary of the NIAAA Task Force Report on College Drinking, *A Call to Action: Changing the Culture of Drinking at U.S. Colleges* is included later in . One of the most important elements of the task force work is outlined in the "3-in-1 Framework." The report establishes a paradigm delineating three primary constituencies which should be targeted for change in the drinking culture on campuses: (1) individuals, including at-risk or alcohol-dependent drinkers, (2) the student population as a whole, and (3) the college and its surrounding community.

The second document, *A Blueprint for Implementing Evidence-Based Alcohol Prevention Policy and Programs in the Collegiate Environment*, was developed for IHEC. This blueprint for implementing evidence-based strategies in the higher education arena is organized to allow practitioners to:

- Build familiarity with environment and individual risk factors specific to the higher education environment;**
- Build familiarity with principles of evidence-based practice for alcohol and other drug prevention in higher education;**
- Build familiarity with programs that have been assessed to show effectiveness in the college context;**
- Connect possible policy adoption to risk factors; and**

Articulate a process for adopting evidence-based strategies for alcohol prevention in higher education.

Both documents provide a view of *evidence-based strategies* and how they relate to the assessed needs of a chosen audience. Becoming familiar with the information provided in these two documents, when beginning the program-planning phase, will save work in the long run because they establish a template for gauging potential plans.

Outlining How the Evidence-Based Intervention Will Work

It is suggested that the program-planning phase begin with a review of available research on evidence-based strategies, as well as trainings and technical assistance with IHEC. This will provide adequate information from which to select the appropriate strategies for your target audience(s). Next, outline the *logical* threads of events and activities that will connect the implementation of these events to the fulfillment of measurable objectives. This is called a "logic model." Once understood and created, a logic model will describe this chain of events and enable the user to readily see where there is any breakdown or discrepancy between the events or activities and the desired outcomes. The logic of a program plan is drawn on a flow chart, which is a visual and practical way of presenting the information to staff, administrators and funders.

While developing a logic model can take time and the process challenges people to engage in an unfamiliar model, there are several reasons this step is important. A logic model will enable areas of uncertainty, confusion, or disagreement among members of the planning team to rise to the surface and be dealt with "logically." Quite often, people on the planning team will have opposing theories, views or investments in particular interventions. Looking at these differences within this logical framework will help sharpen the plan by exposing any false assumptions. Most importantly, a logic model will help guarantee that all program activities and policies can be logically linked to the achievement of specific objectives. Items that cannot be linked will be discarded from the plan. A logic model reveals what work will be done, how it will be done and why it will be done. It also helps track changes to the interventions and what has been accomplished that relates directly to the goals and objectives. A final justification for doing a logic model is that it informs the evaluation of the project or program, making the evaluation component logical and easier to accomplish.

A more thorough explanation of the logic model process and examples of model elements can be found at:

http://collegedrinkingprevention.gov/Reports/Handbook/Sect2_EffectiveSteps.aspx#outline

The Purpose of Evaluation

Communicating the success of a program is most often accomplished through an evaluation report. Program evaluation can be defined as the careful collection of information about a program or some aspect of a program in order to make necessary decisions about the program. Program evaluation can include any of a variety of at least 35 different types of evaluation, such as needs assessments, accreditation, cost/benefit analysis, effectiveness, efficiency, formative, summative, goal-based, process, outcomes, etc. The type of evaluation undertaken to improve a program depends on what one wants to learn about the program and what is required of the funder. Don't worry first about what type of evaluation is needed - worry about what information is needed to make sound program decisions; then decide how this information will be collected in a usable fashion.

Evaluation is often seen as a tool to measure the success or failure of a program. This assumption reinforces the widely held belief that success is the only destination and that it is reached by traveling on a straight and continuous path. This misperception keeps programmers from thinking about evaluation as a continuous feedback process with adjustments made along the way in response to intermittent feedback. A good evaluation plan gives this continuing feedback at pre-determined intervals. So, while it is important to view the evaluation as an indicator of the success of the program's ultimate outcome, it is also important that the evaluation determine if each of the intermediate effects was achieved. What would happen if the evaluation measured only ultimate outcomes and the intervention didn't work? How would one know where the intervention fell short? Was it because the theoretical approach behind the intervention was not well matched to the intervention or needs of the audience? Was implementation flawed? At what step in the logic model did one piece of the intervention plan not work? All of these questions are crucial distinctions and finding the answers with a good evaluation can help a programmer make needed corrections in approaches and improve program integrity. What is learned from this process will help in planning with greater success for future endeavors.

Feedback

The emphasis here has been on the value of evaluation for program planning and management. The full value of any evaluation is not likely to be realized if the information revealed by it is not used to inform campus/community interventions.

All communities are deeply interested in whether the intervention is effective, but often there are more specific questions, too, regarding the effectiveness of each component, how the target audience is being affected and in what way, and how much effort is expended to achieve the impact. Support for an intervention often hinges on gathering and reporting this information. More broadly, feedback tends to engender support, even when results are mixed or disappointing at first, because providing the information builds trust between programmers and funders.

The U.S. Department of Education's Higher Education Center has compiled an excellent list of resources on how to develop, implement and evaluate programs and policies to address alcohol and other drug problems on campus. Both the Higher Education Center and IHEC can also provide assistance and information to help prevention program planners in assessing campus needs, developing a strategic plan and measuring results.

Resources available at the Center's Web site (<http://www.edc.org/hec/eval>) include the following:

Reducing Alcohol Problems on Campus: A to Planning and Evaluation

Evaluation Links and Resources: This section provides a comprehensive list of evaluation resources on a wide range of evaluation topics. It includes Center publications on evaluation, online evaluations, comprehensive evaluation Web sites, needs assessment, evaluation planning and design, and data collection.

Resources for Selecting and Working with a Program Evaluator: Listed here are resources to assist prevention professionals in choosing and working with an outside evaluator.

Higher Education Center's Evaluator Database: The referral database allows users to search for an evaluator or register themselves as an evaluator.

Environmental Measurement in Alcohol and Other Drug (AOD) Prevention: This section provides

presentations and other resources on methods for measuring environmental change efforts.

The following publications can be ordered or downloaded free of charge from the Higher Education Center's Web site (<http://www.edc.org/hec/pubs>):

Understanding Evaluation: The Way to Better Prevention Programs (HEC 905). (Note: Only print copies are available; they can be ordered through the publications section of the Higher Education Center's Web site.) This handbook describes the "how and why" of program evaluation and outlines the steps involved, working from the premise that many useful evaluations can be conducted by program staff who may not have formal training in evaluation.

A College Case Study: A Supplement to Understanding Evaluation (HEC 904). In telling the story of a fictitious college, this case study helps prevention specialists, administrators, and others concerned with preventing AOD use on college campuses get a feel for what is involved in setting up an evaluation of a college AOD prevention program and what can be gained from the process.

College Alcohol Risk Assessment : Environmental Approaches to Prevention (HEC 109). This is designed to help college administrators identify factors within the campus environment that contribute to alcohol-related problems. These factors are examined within the context of the public health approach, which emphasizes how the environment shapes behavior. Methods for identifying problems include scanning, analysis, response, and assessment. The publication also contains scanning and analysis exercises and selected resources.

Methods for Assessing Student Use of Alcohol and Other Drugs (HEC 104). This offers a straightforward method for gathering and interpreting student survey data on alcohol-related problems based on the methodology used in a national college alcohol study conducted in 1993 by the Harvard School of Public Health. It can easily be adapted for all college and university campuses.

Selecting the Right Tool: A Compendium of Alcohol and Other Drug Assessment and Evaluation Instruments for Use in Higher Education (HEC 114). This compendium covers the important issues to consider when selecting data collection instruments and describes the leading instruments used in the postsecondary AOD prevention field. (Sample instruments are included in the printed document, but are not available on the Web site.)

How to Select a Program Evaluator (HEC 716). This 3-page flyer describes the role of evaluation in program planning and implementation; skills, expertise, qualifications, and experience to look for when seeking an evaluator; incentives for the evaluator; questions to ask when considering an evaluator; and how to network to find the right evaluator.

Online Evaluations

These s provide information, advice, and step-by-step instructions for conducting program evaluations. All can be accessed on the Web.

Basic to Program Evaluation

(http://www.mapnp.org/library/evaluatn/fnl_eval.htm)

This document provides guidance for planning and implementing an evaluation process. Specific topics include getting information to make decisions about programs; basic ingredients of planning program evaluation; evaluating program processes, goals, and outcomes; selecting methods; analyzing and interpreting information; reporting evaluation results; and pitfalls to avoid.

Community How-To on Evaluation

[<http://nhtsa.dot.gov/people/injury/alcohol/Community>]

This easy-to-use , created by the U.S. Department of Transportation, includes information on different types of evaluation, methods, planning an evaluation, and hiring an evaluator.

Demonstrating Your Program's Worth: A Primer on Evaluation

[<http://www.cdc.gov/ncipc/pubres/demonstr.htm>]

This guide, created at the National Center for Injury Prevention Control at the Centers for Disease Control and Prevention, describes how to conduct a simple evaluation, how to hire an outside evaluator, and how to incorporate evaluation activities into a prevention program.

Taking Stock: A Practical to Evaluating Your Own Programs

[<http://www.horizon-research.com>]

This guide was created by Horizon Research to help community-based organizations design and conduct program evaluation. Topics include formative and summative evaluation, quantitative and qualitative data, and tips for interpreting and reporting data.

Comprehensive Evaluation Web Sites with Multiple Resource Links

The Web sites listed below contain multiple Web links and tools for program evaluation. Additional evaluation Web sites can be found at the Higher Education Center's Web site <http://www.edc.org/hec/eval/links.html>.

American Evaluation Association

[<http://www.eval.org>]

The American Evaluation Association is an international professional association of evaluators devoted to the application and exploration of program evaluation, personnel evaluation, technology evaluation, and many other forms of evaluation. Web site resources include publications, Web links, reports, surveys, topical interest groups, and lists of electronic mailing lists related to evaluation, meetings, events, and training. This may also be a source for identifying and recruiting evaluation specialists.

Center for Substance Abuse Prevention (CSAP) Decision Support System/Prevention DSS

[<http://www.preventiondss.org>]

Prevention DSS is an online training and technical assistance resource designed to substance abuse prevention practitioners through a 7-step planning and evaluation process.

While the focus is youth substance abuse in a community context, the site contains extensive tools and resources that are transferable to higher education settings. Modules include assessing needs, developing strategic plans, building a logic model, choosing promising practices, and conducting evaluations.

Community Toolbox

[<http://ctb.lsi.ukans.edu>]

Developed at the University of Kansas, this Web site features "how-to tools" that explain the steps necessary to create and evaluate prevention programs. The site also includes sections on strategic planning, community assessment, advocacy, grant writing, and evaluation. Each section includes a description of the task, advantages of doing it, step-by-step lines, examples, checklists of points to review, and training materials.

The Evaluation Center

[<http://www.wmich.edu/evalctr>]

The Evaluation Center, located at Western Michigan University, is a research and development unit that provides national and international leadership for advancing the theory and practice of evaluation. The site includes evaluation support services in the form of publications, resource links, project descriptions, a searchable directory of evaluators, evaluation checklists, and a glossary of evaluation terminology.

Research Methods Knowledge Base

[<http://trochim.cornell.edu/kb/index.htm>]

This is a comprehensive Web-based textbook that addresses all of the topics in a typical introductory undergraduate or graduate course in social research methods. It covers the entire research process including: formulating research questions, sampling, measurement, research design, data analysis, and report writing.

CHAPTER TWO:

A BLUEPRINT FOR IMPLEMENTING EVIDENCE-BASED ALCOHOL PREVENTION POLICY AND PROGRAMS IN THE COLLEGIATE ENVIRONMENT

This blueprint for implementing evidence-based policy and programs in the higher education arena is organized to allow practitioners to:

Center for Prevention Research and Development
Institute of Government and Public Affairs
University of Illinois

In conjunction with the
**Illinois Higher Education Center for Alcohol,
Other Drug and Violence Prevention**
with funding from
*the Illinois Department of Human Services,
Bureau of Substance Abuse Prevention*

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- Build familiarity with environmental and individual risk factors specific to the higher education environment.
- Build familiarity with principles of evidence-based practice for alcohol and other drug prevention in higher education.
- Build familiarity with programs that have been assessed to show effectiveness in the college context.
- Connect possible policy adoption to risk factors.
- Articulate a process for adopting evidence-based strategies for alcohol prevention in higher education.

High-risk drinking in the collegiate environment is a pressing public health and legal concern for institutions of higher education. For professionals who are involved daily with preventing high-risk consumption, finding effective tools to deal with student alcohol use is a great challenge. Working with limited resources only makes the challenge of meeting student and campus needs a greater challenge. This blueprint strives to describe a means to reduce high-risk drinking on college campuses through a multifaceted approach that targets known risk factors, evidence-based programs, and prudent policy implementation.

Reducing high-risk drinking on college campuses involves implementing a multifaceted approach that targets known risk factors through evidence-based programs and prudent policy implementation.

This blueprint is based on the premise that resources must be allocated with the reality that prevention professionals have limited time, energy and fiscal allocation. Allocation of resources should be made based upon an evidence-based framework. The process suggested here asks prevention professionals to first identify what specific risk factors they have in their campus environment. By understanding specific campus risks, prevention strategies can be adopted that directly target individuals engaged in risky behaviors.

Effectively addressing of campus needs is contingent upon the 3-in-1 framework recently proposed by the National Institute on Alcohol Abuse and Alcoholism in *A Call to Action: Changing the Culture of Drinking at U.S. Colleges*. The 3-in-1 framework is a multi-faceted approach that involves employing evidence-based strategies for at-risk individuals, the student population as a whole, and for the community in which a college or university is situated. Employing this framework means being aware of the evidence of good practice outlined in the following pages.

RISK FACTORS FOR INCREASED ALCOHOL CONSUMPTION

OF COLLEGE STUDENTS

The following table provides a list of factors that have been shown to increase the risk of college student alcohol use. A prevention approach would suggest either trying to change the risk factor

or trying to focus services to minimize the impact of risk factors in the college environment.

INDIVIDUAL PROGRAMS WITH

<i>Campus/Environment</i>	
Group affiliations	<ul style="list-style-type: none"> • Greek membership • Participation in intercollegiate athletics
Leadership positions	<ul style="list-style-type: none"> • Holding two or more leadership positions at the same time
Housing	<ul style="list-style-type: none"> • On-campus residential housing • Greek housing
Access to alcohol	<ul style="list-style-type: none"> • Increased availability of alcohol • Lower price of alcohol • Large parties • Peer usage
Students in transition	<ul style="list-style-type: none"> • First-year status • New students to specific campus environment
Media exposure	<ul style="list-style-type: none"> • Increased exposure to alcohol advertising
<i>Individual</i>	
Gender	<ul style="list-style-type: none"> • Men have traditionally been at greater risk (the gap is narrowing)
Self regulation skills	<ul style="list-style-type: none"> • Lower self refusal and control skills
Stress	<ul style="list-style-type: none"> • Lower ability to cope with stress
Personality traits	<ul style="list-style-type: none"> • Higher sensation-seeking behavior
Attitudes toward alcohol consumption	<ul style="list-style-type: none"> • Higher positive expectancy of alcohol consumption
Beliefs towards alcohol consumption	<ul style="list-style-type: none"> • Inaccurately high perception of peer consumption
Age	<ul style="list-style-type: none"> • General decline in problem behavior with age of student
History of problem behavior	<ul style="list-style-type: none"> • Past alcohol consumption • Past involvement in delinquent behavior

PROTECTIVE FACTORS THAT HELP TO LIMIT INCREASED ALCOHOL CONSUMPTION AMONG COLLEGE STUDENTS

The following table displays factors that help to limit alcohol consumption among college students. These factors do not change behavior, but function to prevent the initiation or increase of consumption of alcohol in the college environment. A prevention approach would suggest enhancing these factors in the college environment.

<i>Campus/Environment</i>	
Group affiliations	<ul style="list-style-type: none">• Religious groups
Campus Involvement	<ul style="list-style-type: none">• Increased volunteer service• High academic engagement
Housing	<ul style="list-style-type: none">• Substance-free housing

PRINCIPLES OF EVIDENCE-BASED EDUCATIONAL PROGRAMS

- Identify campus risk factors through archived data, environmental scanning, and personal knowledge.
- Select specific risks to address through educational programs.
- Select educational programs that address the risk factor you are working to diminish. An awareness of programs that have shown efficacy in the college environment is at the core of selecting an appropriate program.
- Develop a multi-faceted approach (3-in-1) as an essential part of implementing effective prevention of high risk consumption.
- Pay specific attention to the dosage and reach of your educational efforts. Dosage refers to the contact time a program will have with participants. Reach indicates how much of the target population will actually receive the desired dosage.
- Choose educational efforts that are developmentally appropriate for college students (including both content and sophistication with which they are delivered).
- Limit time spent on single events, fear appeals, car crashes, speaker testimonials, panel discussions, and awareness/knowledge-based programming.
- Multiple points of contact are preferable to single occurrence events; this refers specifically to dosage of the program.
- Focus on reducing risk factors and enhancing protective factors in the environment. Articulating how your planned program will function (program theory), as well as your intended outcomes, is an essential part of implementing effective programs.
- On-going evaluation of both alcohol consumption and your programmatic efforts to prevent alcohol abuse are required to assess progress in alcohol abuse prevention.

SIGNIFICANT EVIDENCE OF SUCCESS

The following four programs have been evaluated in multiple settings and repeatedly shown to have positive impact on changing attitudes, beliefs, and behaviors as they relate to college student alcohol consumption. These programs have significant evidence that replication will likely result in similar positive impact on students in the college environment.

Program #1: *Screening and Motivational Interviewing*

Screening and motivational interviewing was tested in the college setting at the University of Washington. This program involves screening students for their behavior as it relates to alcohol use and abuse. Those students who are heavy drinkers as defined by the scored screening instrument are then involved in a one-on-one meeting with a university representative. The meeting with high-risk drinkers involves a non-confrontational approach. Motivational interviews, the term applied to follow-up meetings with students, discuss life planning and how alcohol fits into life plans.

Assessment of screening and motivational interviewing conducted over a four year period at the University of Washington found that individuals who engaged in motivational interviewing after screening drank less than similar students who did not engage in motivational interviewing.

Program #2: *Cognitive Behavior Intervention*

Cognitive behavioral intervention is a group-based approach to training students to think differently about alcohol consumption (cognitive) and to acquire new skills (behavior) to reduce risk for high-risk consumption. Rethinking alcohol use means trying to shift attitudes and beliefs related to the use of alcohol, such as perceptions of benefits of alcohol consumption (positive expectancy), perceptions of peer use of alcohol, and attitudes toward peer dynamics associated with alcohol use. Once beliefs and attitudes have been challenged and the student expresses some willingness to change behavior, then appropriate skills can be acquired to help further reduce risk and consequences of alcohol use. Skills for development include social skills associated with drink refusal, peer intervention with friends, and pacing.

Cognitive behavior group-based interventions have been widely tested with adolescents in relationship to substance abuse and violence prevention. Adaptations of cognitive behavior interventions in the college environment have also shown evidence of effectiveness, but are limited by the structure of delivery. Traditionally, cognitive behavior programs with adolescents have been multiple-session programs delivered through a classroom-based format. This format is not seamlessly available in the college environment, so venues for delivery of multiple-session programs must be creatively developed.

Program #3: *Social Norms*

Social norm programs involve shifting behavior by making changes in attitudes and beliefs associated with the alcohol use of college students. Research generally indicates that college students have misperceptions as to the volume of alcohol consumption and its impact on behavior. The social norm program is intended to align student attitudes and beliefs with a more accurate view of student alcohol consumption. Social norm program efforts can occur in the context of a cognitive behavior program or in a social marketing format. Social norm messages delivered as part of a group-based

process have shown particular efficacy.

Social marketing of positive social norm messages involves utilizing student consumption information in advertising campaigns in an effort to shift common beliefs about alcohol use among students. Typically a social norms message would report how most students are responsible users of alcohol. Social marketing of social norm messages to a broad audience of students in the college environment is an approach that has particular appeal for its ability to reach a large population. However, this form of social norm programming has a more limited level of evidence in actually changing student behavior.

Program #4: *Interactive Computer Software (Alcohol 101)*

Alcohol 101 is CD-ROM software that contains prevention messages related to college students. The software is a delivery mechanism that includes cognitive behavior and social norming strategies as part of the content message. Alcohol 101 is filled with over 2 hours of context material including a virtual drinking bar, three interactive video scenes, and lots of alcohol-related information.

Evaluated uses of this software is in changing student attitudes and beliefs, but it has not shown repeated measures of behavior change among college students. Alcohol 101 has nonetheless proven valuable in demonstrating the use of technology as a delivery mechanism for prevention messages in the college environment.

CONNECTING RISK FACTORS AND EVIDENCE-BASED PROGRAMS: PROGRAMS WITH SIGNIFICANT EVIDENCE OF SUCCESS

The four programs described can each be utilized to mitigate certain risk factors for alcohol use in the college context. The following table makes a visual connection between programs and potential individuals to target, based upon the risk factors confronting students.

	Screening and Motivational Interviewing	Cognitive Behavior Intervention	Social Norms	Interactive Computer
<i>Campus/Environment</i>				
Group affiliations	4		4	4
Leadership positions	4	4	4	4
Housing	4	4	4	4
Access to alcohol		4		4
Students in transition	4	4	4	4
Media exposure		4	4	
<i>Individual</i>				
	4		4	4
Gender		4	4	4
Self regulation skills		4	4	
Stress	4	4		
Personality traits	4	4	4	4
Attitudes toward alcohol consumption	4	4	4	4
Beliefs towards alcohol consumption		4		
Age	4			

PROGRAMS WITH SOME EVIDENCE OF SUCCESS

Part of the process of finding out what works in the college environment is testing new ideas. The following programs have been evaluated in the college context and shown some effectiveness. However, these programs have had limited implementation and evaluation, so it is difficult to predict their effectiveness in new environments. These programs represent promising ideas for program development, but also programs in need of refinement and further study to make a stronger statement of effectiveness.

Program #5: *Screening and Motivational Feedback via Mail*

Normative feedback by mail compares students' self reported drinking behavior (during the previous 60 days) with the U.S. gender-specific population norms. The feedback also includes computer-generated blood alcohol concentration levels, and estimated risk of alcohol-related problems.

Program #6: *Expectancy Challenge*

Students tend to hold positive expectancies about alcohol consumption, so the Expectancy Challenge provides an opportunity to counter their beliefs. In this type of program, participants are given either alcohol or placebo beverages in a controlled setting, followed by efforts to identify who had consumed alcohol, based on their behavior in social context.

Program #7: *Peer Oriented: "Pluralistic Ignorance"*

Peer discussion of perception that other students' comfort level with alcohol use is higher than their own comfort level with student drinking, followed by social factors responsible for this "pluralistic ignorance" phenomenon.

Program #8: *Second-Hand Effects*

Changing attitudes and beliefs about acceptability of alcohol consumption on those surrounding heavy consumers in the university environment.

Program #9: *Motivational Approach*

Multimode approach using self-regulation messages through media, policy, education, and referral services.

CONNECTING RISK FACTORS AND EVIDENCE-BASED PROGRAMS: PROGRAMS WITH SOME EVIDENCE OF SUCCESS

Programs #5-9 can each be utilized to mitigate certain risk factors for alcohol use in the college context. The following table makes a visual connection between programs and potential individuals to target based upon the risk factors confronting students.

	Motivational Feedback via mail	Expectancy Challenge	Peer Oriented "Pluralistic Ignorance"	Second-Hand Effects	Motivational
<i>Campus/Environment</i>					
Group affiliations		4	4	4	4
Leadership positions	4	4	4	4	4
Housing	4	4	4	4	4
Access to alcohol					4
Students in transition	4	4	4	4	4
Media exposure					4
<i>Individual</i>					
Gender	4				
Self regulation skills	4	4	4	4	4
Stress	4	4	4		
Personality traits		4	4	4	4
Attitudes toward alcohol consumption	4	4	4	4	4
Beliefs towards alcohol consumption		4			
Age	4				4

ADOPTING POLICIES THAT WORK

Implementation of programs that impact individual use of alcohol consumption is an extremely important part of a holistic approach to prevention of alcohol abuse in the college environment. A second step in a holistic approach is to examine campus-related policies that can prevent alcohol abuse. This brief overview of policies that have been evaluated in the college context is designed to show policy makers the evidence of effectiveness of policy approaches to limiting college student alcohol use.

It is important to note that policy adoption and effectiveness is tightly linked to the method of policy adoption and enforcement in a particular college context. This overview cannot fully articulate the pitfalls associated with the process of substance abuse policy adoption in the college context. For example, one element of adoption that plays a key role is student support for policy change. Institutions implementing policy change without broad-based student support have met with significant student resistance in recent years.

Policy Approaches to Alcohol Abuse Prevention

Policy Approach 1: *Dry Campus*

In a national analysis, designation of campus property as a "dry" or alcohol-free zone is related to less alcohol consumption among students. However, attempts to transform "wet" campuses into alcohol-free zones have achieved mixed results, at best. Campuses that have been dry for years (or decades) may indeed be linked to lower alcohol consumption, but these campuses have generated a surrounding culture that is unique and very different from a wet campus implementing an alcohol-free zone. The dynamics are different, and very challenging to wet campuses considering a dry campus policy.

Policy Approach 2: *Specific Restrictions on Access to Alcohol*

Restriction of access to alcohol in the collegiate context has been proven to impact alcohol abuse. Examples of specific restrictions to access of alcohol include: banning alcohol at athletic events and pre-events, eliminating large quantities of alcohol at parties (kegs, etc.), limiting the number of liquor licenses surrounding a campus environment, and limiting the volume sale of alcohol from establishments. Recent findings associated with campus or city alcohol policy adoption has shown a very positive relationship between restricting access to alcohol and preventing alcohol consumption.

Policy Approach 3: *Parental Notification*

Parental notification is a policy in which, under certain conditions, the college or university contacts parents to report their child's alcohol consumption. Conditions for parental notification include campus incidents that compromise the health or safety of the student or other students, violate campus policy, or violate local or state laws or statutes. The limited evaluation of this policy has been positive, but it is very difficult to make any general statements about the impact of parental notification until more is known about how institutions have chosen to implement it and evaluate its effectiveness.

Policy Approach 4: *Mandatory Treatment*

This policy approach involves mandatory screening, counseling, and referral services when students are involved in an alcohol-related incident on campus. This policy step has met with mixed results. Treatment for individuals associated with alcohol-related incidents has been positive, but student willingness to report their peers' alcohol use is called into question with mandatory treatment programs. Evidence is not clear on what the outcome of mandatory referral policies will be.

Policy Approach 5: *Limiting Alcohol Advertisement*

Increased exposure to alcohol advertising is a risk factor for increased consumption. Adoption of policies that limit alcohol advertising on the college campus is a specific strategy to reduce messages that encourage the use of alcohol. Limiting alcohol industry sponsorship of events, limiting campus posting associated with alcohol utilization/advertising, and limiting student newspaper advertising of alcohol sales, establishments, or drink specials are specific examples of policies limiting alcohol advertising.

Policy Approach 6: *Increase Alcohol Price*

Increased alcohol price is related to decreased use among adolescents and young adults. College student use of alcohol appears to be sensitive to pricing. Limiting special drink pricing or raising the price of alcohol through tax levies appears to be a means to increase price and reduce use.

Policy Approach 7: *Universal Prevention Education*





The implementation of universal prevention education is included as a policy initiative because of the significant organization and resources associated with broad-based delivery of education to all students. While broad-based alcohol education has not been specifically evaluated as a policy direction, the principle of prevention education holds strong potential for behavior change when programs are based upon sound theory and evidence of past effectiveness.

RISK FACTORS AND POLICY: WHAT SHOULD POLICY CHANGE TARGET?

The following table makes a visual connection between policies and risk factors they can potentially address.

	Dry Campus	Specific Restrictions on Access to Alcohol	Parental Notification	Mandatory Treatment	Limiting Alcohol Advertisement	Increased Alcohol Price	Universal Prevention Education
<i>Campus/Environment</i>							
Group affiliations		4					4
Leadership positions							4
Housing		4	4	4	4		4
Access to alcohol	4	4				4	
Students in transition			4		4		4
Media exposure					4		
<i>Individual</i>							
Gender		4					4
Self regulation skills							4
Stress							
Personality traits							4
Attitudes toward alcohol consumption							4
Beliefs towards alcohol consumption							
Age				4			


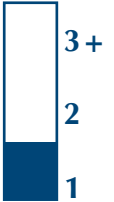
APPENDIX A: DESCRIPTION OF MODEL AND PROMISING PROGRAMS

	Target Population	Evaluation Methods	Results					Number of Replications
			Pre	Post	1 year	2 year	4 year	
Screening and Motivational Interviewing								
Student screening for heavy use with follow-up interviews for high consumers of alcohol. Follow-up interview is non-threatening and positively oriented.	Assessed high-risk consumers Indicated Risk	Quasi-experimental						 3+ 2 1
Cognitive Behavior Intervention								
Group-based approach to train students to think differently about alcohol consumption, and then acquire social skills in drink refusal, peer intervention, and pacing.	Universal	Varied						 3+ 2 1
Social Norms								
Using education messages via presentation or media to correct perceptions of typical student alcohol consumption on campus (i.e., create more accurate perceptions of student use).	Universal	Varied						 3+ 2 1
Interactive Computer Software								
Computer software with user feedback on virtual consumption, social skills training, social norm messages and alcohol awareness information.	Universal	Quasi-experimental						 3+ 2 1

APPENDIX A: DESCRIPTION OF MODEL AND PROMISING PROGRAMS

	Target Population	Evaluation Methods	Results					Number of Replications
			Pre	Post	1 year	2 year	4 year	
<i>Screening and Motivational Feedback via Mail</i>								
Normative feedback by mail, comparing students' self-reported drinking behavior with U.S. gender-specific norms, along with computer-generated blood alcohol concentration levels, and estimated risk of alcohol related problems.	Indicated Risk	Quasi-experimental						 3+ 2 1
<i>Expectancy Challenge</i>								
Participants are given either alcohol or placebo beverages in a controlled setting, followed by efforts to identify those who had consumed alcohol, based on their behavior in social context.	Universal	Quasi-experimental						 3+ 2 1
<i>Peer Oriented: "Pluralistic Ignorance"</i>								
Peer discussion of perception that other students' comfort level with alcohol use is higher than their own comfort level with student drinking, followed by discussion of social factors responsible for this "pluralistic ignorance."	Universal	Quasi-experimental						 3+ 2 1
<i>Second-Hand Effects</i>								
Changing the attitudes and beliefs about the acceptability of alcohol consumption with regard to those who surround heavy consumers in the university environment.	Universal	Quasi-experimental						 3+ 2 1

APPENDIX A: DESCRIPTION OF MODEL AND PROMISING PROGRAMS

	Target Population	Evaluation Methods	Results					Number of Replications
			Pre	Post	1 year	2 year	4 year	
<i>Screening and Motivational Feedback via Mail</i>								
Multimode approach using self regulation messages through media, policy, education, and referral services.	Universal	Case Study						

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CHAPTER THREE:

THE NIAAA TASK FORCE REPORT ON COLLEGE DRINKING, A CALL TO ACTION: CHANGING THE CULTURE OF DRINKING AT US COLLEGES.

In April of 2002, The National Institute on Alcohol Abuse and Alcoholism published *A Call to Action: Changing the Culture of Drinking at U.S. Colleges*. Following a three-year study, the task force made recommendations for colleges and universities, researchers, and NIAAA. This report was welcomed by the AODV prevention community because it was the first national level attempt to take a comprehensive look at scientific research related to the efficacy of prevention and intervention strategies. The "call to action" of the task force focuses on the *consequences* of excessive drinking to college students and the campus environment, rather than actual drinking behavior.

The task force had three goals for its work:

- 1. To provide research-based information about the nature and extent of dangerous drinking to high school and college administrators, students, parents, community leaders, policymakers, researchers, and members of the retail beverage industry;**
- 2. To offer recommendations to college and university presidents on the potential effectiveness of current strategies to reverse the culture of drinking on campus; and**
- 3. To offer recommendations to the research community, including NIAAA, for future research on preventing hazardous college student drinking.**

One of the most important elements of the task force work is outlined in the "3-in-1 Framework." The report establishes a paradigm delineating three primary constituencies which must be engaged to change the drinking culture on campuses: (1) individuals, including at-risk or alcohol-dependent drinkers, (2) the student population as a whole, and (3) the college and its surrounding community.

To be effective, prevention programs must target all three constituencies.

Recommended Strategies

The task force considered several factors when selecting the prevention strategies highlighted in its report. Those factors were: feasibility, theoretical rationale, outcomes in non-college settings and demonstration of effectiveness on college campuses. As this group looked at what had been called "promising strategies," it often found inadequate evaluation. This lack of evidence of efficacy led them to another recommendation—that additional research is needed to determine the value of these promising strategies. So this report is very clear about NOT recommending practices, no matter how promising they may appear, if research data have not been collected confirming efficacy. The report DOES come with a strong recommendation that colleges and universities begin to collaborate with researchers to explore the real value of "promising practices" now being used on many campuses. Reading the literature on the efficacy of substance abuse prevention can be confusing because the experts often disagree about what programs are effective. The task force report provides a useful tool in the form of a list that breaks down various prevention strategies into levels or "tiers" of effectiveness. It also takes into account those strategies that appear promising but cannot be labeled "effective" because of lack of research. In addition, the report reveals strategies that show no evidence of effectiveness.

On the following page is a grid showing the 4 *Tiers of Effectiveness* and examples of strategies that fit into those tiers. This is taken directly from the NIAAA report. It is highly recommended that you refer to the full report for more thorough explanations of each strategy and for research references.

CHAPTER FOUR:

3-in-1 Framework

		Level Of Operation		
		Individuals, including At-Risk and Dependent Drinkers	Student Population as Whole	Community
Tier	Strategy			
1: Effective among college students	Combining cognitive-behavioral skills with norms clarification & motivational enhancement intervention.	Yes	No	No
	Offering brief motivational enhancement interventions in student health centers and emergency rooms.	Yes	No	No
	Challenging alcohol expectancies	Yes	No	No
2: Effective with general populations	Increased enforcement of minimum drinking age laws	No	Yes	Yes
	Implementation, increased publicity, and enforcement of other laws to reduce alcohol-impaired driving	No	Yes	Yes
	Restrictions on alcohol retail density	No	No	Yes
	Increased price and excise taxes on alcoholic beverages	No	No	Yes
	Responsible beverage service policies & commercial settings	No	Yes	Yes
	The formation of a campus/community coalition	No	Yes	Yes
3: Promising	Adopting campus-based policies to reduce high-risk use (e.g., reinstating Friday classes, eliminating keg parties, establishing alcohol-free activities & dorms)	No	Yes	No
	Increasing enforcement at campus-based events that promote excessive drinking	No	Yes	No
	Increasing publicity about enforcement of underage drinking laws/eliminating "mixed" messages	No	Yes	Yes
	Consistently enforcing campus disciplinary actions associated with policy violations	No	Yes	No
	Conducting marketing campaigns to correct student misperceptions about alcohol use on campus	No	Yes	No
	Provision of "safe rides" programs	No	Yes	Yes
	Regulation of happy hours and sales	No	Yes	Yes
	Enhancing awareness of personal liability	Yes	Yes	Yes
	Informing new students and parents about alcohol policies and penalties	Yes	Yes	No
4: Ineffective	Informational, knowledge-based or values clarification interventions when used alone	N/A	N/A	N/A

A copy of the full NIAAA report can be found on the NIAAA website at www.collegedrinkingprevention.gov. In its contents there are recommendations about evidence-based approaches in various formats. IHEC recommends these and other relevant NIAAA reports which can be ordered or downloaded at <http://collegedrinkingprevention.gov/Reports/>. Included are the following reports:

- An alcohol prevention program handbook-*Reducing Alcohol Problems on Campus: A Guide to Planning and Evaluation*;
- Brochures for college and university presidents, student peer educators, and parents (future brochures will include community leaders, high school guidance counselors, and students); and
- The final reports of the two panels of the task force-*High-Risk Drinking in College: What We Know and What We Need to Learn and How to Reduce High-Risk College Drinking: Use Proven Strategies, Fill Research Gaps*-that describe each panel's findings in detail.

EXAMPLES OF PROGRAMS BASED ON EVIDENCE-BASED STRATEGIES

This chapter offers a brief overview of what you need to consider when choosing an evidence-based program and a snapshot of how such a program comes together. The programs cited here have been developed by the five campuses chosen this year to receive funding through a competitive process sponsored by IHEC, with funding from the Illinois Department of Human Services, Bureau of Substance Abuse Prevention. While they serve as examples, they are not intended to fit every campus. Every evidence-based program should be developed based on the assessed needs of a college, university and/or community. The structure and implementation of programming will vary in many ways from campus to campus.

The format of this section is as follows: the name of the institution; which strategy was chosen; what category the strategy falls under in the Blueprint; what tier it fits into in the NIAAA report; and what risk factors are being addressed by the approach. Next is a description of the strategy as drawn from the literature about each approach and a description of how this strategy was applied at the particular campus. Finally, the steps each campus took to develop the program are listed, from contemplation to evaluation. For the purposes of this guide, they are suggested and not prescriptive.

Since the campuses have not yet completed their first six months of the grant, no evaluative information is available. That information will be available in July 2004.

Institution:	University of Illinois at Springfield
Strategy:	<i>Alcohol 101 + CD</i>
Blueprint Category:	Significant Evidence
NIAAA Tier:	N/A
Risk Factors Addressed:	Group affiliations Leadership positions Housing Students in transition

Description of Strategy:

Alcohol 101 + is CD-ROM software that contains prevention messages related to college students. The software is a delivery mechanism that includes cognitive behavioral and social norming strategies as part of the content message. *Alcohol 101 +* is filled with over two hours of context material including a virtual drinking bar, interactive video scenes, and extensive alcohol-related information. Evaluated applications of this software are in changing student attitudes and beliefs, but it has not shown repeated measures of behavior change among college students. *Alcohol 101 +* has nonetheless proven valuable in demonstrating the use of technology as a delivery mechanism for prevention messages in the college environment.

Applied Project Description:

This project is designed to assess the effectiveness of the *Alcohol 101 +* computer software program in reducing underage and high risk drinking among campus housing residents at the University of Illinois at Springfield. In addition, the project will assess students' experiences using the new version of *Alcohol 101* and its impact on their attitudes, beliefs, and knowledge about alcohol. The goals of this project are to:

- 1) **Dramatically increase the accessibility of *Alcohol 101 +* to UIS students.**
- 2) **Use technology to further expand the AOD prevention efforts of UIS.**
- 3) **Reduce the incidence of underage drinking among UIS housing residents.**

- 4) Reduce the incidence of high risk drinking among UIS housing residents.
- 5) Assess the effectiveness of the *Alcohol 101+* program in reducing underage and high risk drinking among UIS housing residents.
- 6) Assess the students' experiences using the *Alcohol 101+* CD and its impact on their attitudes, beliefs, and knowledge about alcohol.

Steps to Implementation:

- Research and review *Alcohol 101+* program.
- Develop an implementation and evaluation plan.
- Meet with the UIS Substance Abuse Task Force (SATF) to discuss program implementation, evaluation, research designs and incentives for student participation.
- Review newly released CD and develop evaluation instrument.
- Develop questionnaire to accompany CD to verify participation.
- Have assessment instruments in place.
- Develop cover letter, complete and submit *UIS Protocol for Research Involving Human Subjects* to obtain clearance from Human Subjects Review Officer to conduct study. Make required revisions.
 - Obtain University Housing residents' names and addresses. Randomly assign residents to treatment and control groups, ensuring equal distribution of 1st and 2nd year Capital Scholars, family housing residents, and apartment/townhouse residents to each group.
 - Post student worker position with Financial Aid Office. Hire and train student worker.
 - Administer pretest and distribute CDs and verification questionnaire to first-year Capital Scholars during Orientation. Collect CDs and completed pretests and verification questionnaires before the end of Orientation.
 - Distribute pretest, CDs, and verification questionnaire to campus apartments and townhouses.
 - Complete follow-up phone calls to students to encourage return of pretest, CDs, and verification questionnaire. Mail follow-up letter to non-respondents.
 - Enter pretest response data.
 - Distribute posttest. Collect completed posttests.
 - Complete follow-up phone calls to encourage return of posttest.
 - Enter posttest response data.
 - Purchase participation incentive prizes.
 - Conduct drawing for participation incentive prizes.
 - Analyze data.
- Summarize findings.

Institution:	Loyola University Chicago
Strategy:	<i>Social Norming</i>
Blueprint Category:	Significant Evidence
NIAAA Tier:	Level III-Promising

Leadership positions
Housing
Students in transition

Description of Strategy:

Social norm programs involve shifting behavior by making changes in attitudes and beliefs associated with the alcohol use of college students. Research generally indicates that college students have misperceptions as to the volume of alcohol consumption and its impact on behavior. The social norm program is intended to align student attitudes and beliefs with a more accurate view of student alcohol consumption. Social norm program efforts can occur in the context of a cognitive behavioral

program or in a social marketing format. Social norm messages delivered as part of a group-based process have shown particular efficacy.

Social marketing of positive social norm messages involves utilizing student consumption information in advertising campaigns in an effort to shift common beliefs about alcohol use among students. Typically a social norms message would report how most students are responsible users of alcohol. Social marketing of social norm messages to a broad audience of students in the college environment is an approach that has particular appeal for its ability to reach a large population. However, this form of social norm programming has a more limited level of evidence in actually changing student behavior.

Applied Project Description:

Loyola chose a social norm marketing campaign. The goal was to positively affect the drinking behaviors of freshmen living on campus. It was also intended to increase the accuracy of perceptions about their peers' responsible and safe use of alcohol. After a pre-test of Loyola students, posters targeting misperceptions were created by senior-level graphic arts students. Posters were created in the fine arts department as a senior project, under the direction of a fine arts professor. A professor from the marketing department was asked to oversee student focus groups to provide structured feedback for the posters. They were then distributed in residence halls. Eight different posters and two give-away items were used. A post-test was given to measure changes in drinking behaviors by freshmen residents.

Steps to Implementation:

- Research social norming and develop theory-based approach.
- Develop implementation and evaluation plan.
- Collect campus and/or community data.
- Meet with fine arts professor of the senior level students who will develop posters. Provide information to him on social norming theory.
- Recruit marketing professor to oversee the student focus groups.
- Confirm focus groups.
- Complete posters.
 - Review of posters by committee for first cut.
 - Send posters back to art students for revisions.
 - Send posters to student focus groups for final cut.
- Tour residential halls to plan poster placement.
- Finalize posters.
- Meet with residential directors for poster and give-away distribution plan.
- Print posters and order give-aways.
- Meet with RAs to introduce and reinforce project.
- Pre-test freshmen.
- Enter data for pre-test.
- Place posters and distribute give-aways (for 8 rounds).
- Give post-test at end of the year hall meetings.
- Analyze data.
- Write final program and evaluation report.

Institution:	Southwestern Illinois College
Strategy:	<i>Alcohol Skills Training Program/Cognitive-Behavioral Skills</i>
Blueprint Category:	Significant Evidence of Effectiveness
NIAAA Tier:	Level I-Evidence of Effectiveness
Risk Factors Addressed:	Group Affiliations Athletes

Housing
Gender
Attitudes toward alcohol consumption

Description of Strategy:

Developers of the *Alcohol Skills Training Program (ASTP)* were guided by the belief that college students can learn to moderate their drinking behavior. This intervention is designed for young people who have experienced negative consequences of alcohol use. The curriculum incorporates basic information and exercises in the areas of addiction, individual drinking cues, skills for resisting alcohol offers, and strategies for relaxation and stress management. Participants are asked to monitor and record their consumption of alcohol for the duration of the program.

ASTP was written and had multiple field studies done through the University of Washington at Seattle. Thus, it is a research-based program, with its effectiveness scientifically tested in theory, model, target age group, design, curriculum quality, data collection, retention, and replication of studies. The goals are two-fold from a cognitive-behavioral education concept. It provides skills-based training programs along with an on-going information-based alcohol education program. Some of the areas of behavioral change in alcohol use can include: abstinence, reduced intensity, refusal of offer to use, purchase or obtain, and reduced negative consequences.

The ASTP program is suitable for university settings as well as social services or community-based organizations. This program was originally presented in eight 90-minute sessions. However, the schedule is flexible and can be adjusted to suit a particular site.

Applied Project Description:

Southwestern Illinois College, in cooperation with the CHOICE Team campus and community coalition, implemented a Cognitive Behavioral Intervention. It was implemented through the *Alcohol Skills Training Program*, a research-based program that has been scientifically tested for effectiveness. The program was used with athletes and included an on-going, didactic alcohol education program, multiple pre- and post-assessments and follow-up evaluation. The athletic group was involved in a series of self-report measures over a 12-month timeframe. Programmers targeted high-risk athletes, who live together in an off-campus housing situation. The Athletic Director and coaches were closely involved and fully in support of the program.

Steps to Implementation:

- Research ASTP program.
- Develop an implementation and evaluation plan.
- Meet with Athletic Director to seek collaboration.
- Order program.
- Select presenter.
- Meet with Athletic Director and presenter to set up schedule and discuss potential problems.
- Administer pretest.
- Implement program (16 hours).
- Administer post-test.
- (Repeat last 3 steps two more times.)
- Analyze survey data.
- Write final progress and evaluation report.

Institution: Western Illinois University
Strategy: *Motivational Interviewing, Norms and Values Clarification and Cognitive/Behavioral Counseling*

Blueprint Tier: Significant Evidence
NIAAA Tier: Level I–Evidence of Effectiveness

Risk Factors Addressed:
Group affiliations Gender
Leadership positions Self-regulation
Housing Stress

Students in transition
Access to alcohol

Media exposure

Age

Personality traits
Attitudes toward alcohol
consumption
Beliefs toward alcohol
consumption
History of problem behavior

***Description of Strategies:
(Program #1: Screening and Motivational Interviewing)***

Screening and motivational interviewing was tested in the college setting at the University of Washington. This program involves screening students for their behavior as it relates to alcohol use and abuse. Those students who are heavy drinkers as defined by the scored screening instrument are then involved in a one-on-one meeting with a university representative. The meeting with high-risk drinkers involves a non-confrontational approach. Motivational interviews, the term applied to follow-up meetings with students, discusses life planning and how alcohol fits into life plans.

Assessment of screening and motivational interviewing conducted over a four-year period at the University of Washington found that individuals who engaged in motivational interviewing after screening drank less than similar students who did not engage in motivational interviewing.

(Program #2: Cognitive Behavioral Intervention)

Cognitive behavioral intervention is a group-based approach to train students to think differently about alcohol consumption (cognitive) and to acquire new skills (behavior) to reduce high risk consumption. Rethinking alcohol use means trying to shift attitudes and beliefs related to the use of alcohol, such as perceptions of benefits of alcohol consumption (positive expectancy), perceptions of peer use of alcohol, and attitudes toward peer dynamics associated with alcohol use. Once beliefs and attitudes have been challenged and the student expresses some willingness to change behavior, then appropriate skills can be acquired to help further reduce risk and consequences of alcohol use. Skills for development include social skills associated with drink refusal, peer intervention with friends, and pacing.

Cognitive behavioral group-based interventions have been widely tested with adolescents in relationship to substance abuse and violence prevention. Adaptations of cognitive behavioral interventions in the college environment have also shown evidence of effectiveness, but are limited by the structure of delivery. Traditionally, cognitive behavioral programs with adolescents have been multiple-session programs delivered through a classroom-based format. This format is not seamlessly available in the college environment, so venues for delivery of multiple-session programs must be creatively developed.

(Program #3: Norms or Values Clarification)

This approach examines students' perceptions about the acceptability of abusive drinking behavior on campus and uses data to refute beliefs about the tolerance for this behavior, as well as beliefs about the number of students who drink excessively and the amount of alcohol they consume. Thoughts and motives of which individuals are unaware or barely aware often influence behavioral choices. Research in cognitive psychology and neuroscience has vastly improved capacity to assess implicit decision-making. Recently, this understanding has been applied to the problem of college drinking. As a result, program planners are developing prevention programs that do *not* assume that

every choice college students make has been carefully considered before they act on it.

Applied Project Description:

Western Illinois University's approach to address alcohol-related issues on campus is modeled after the NIAAA report Tier 1 strategies. They are combining Motivational Interviewing and Norms and Values Clarification with Cognitive/Behavioral Counseling among a targeted population - students who are referred into their program as a sanction after violating the Student Code of Conduct's alcohol policy.

Certain expectations are set about the meeting. A primary goal is to establish a therapeutic relationship using the core conditions of this confidential counseling session. Although the approach is flexible according to the needs of the student, there are four basic components to the meeting.

- 1) **Gathering an understanding of the student's relationship with alcohol, perceptions, norms and values** **including**
- 2) **A formal assessment using the Multidimensional Addictions and Personality Profile (MAPP).** **Personality**
- 3) **Personal feedback and education in regard to how their use compares with their peers and identified areas of concern.**
- 4) **Using Motivational Interviewing to acquire a commitment from the student to reduce high-risk behaviors.**

While taking a student's history, the counselor screens for symptoms of abuse/dependency, tolerance, family history, depression, anxiety, ADD and other drug use. They also ask about healthy practices that the student might engage in while drinking. Information is elicited about the student's perception of his/her own drinking, his/her values as they relate to drinking, and behaviors engaged in while under the influence of mood altering drugs. Any healthy practices that are engaged in while drinking are praised.

Following the history, the student is asked to take the MAPP. The MAPP measures four Alcohol subscales: Psychological Dependence, Secretive/Abusive/Irresponsible Use, Interference with Life, and Symptoms of Withdrawal. There are three Personal Adjustment subscales: Frustration Tolerance, Interpersonal Problems, and Self Image Problems. The MAPP provides the students with percentiles in order to compare their drinking/behavior patterns with their peers. Important characteristics of the MAPP include identification of specific behaviors or triggers that are associated with abuse.

The education the student receives is tailored to the student's identified concerns and behaviors. For example, those students who report becoming very intoxicated would be instructed about the Biphasic Response to alcohol and how to maintain a BAL of .05 or less. The counselor may employ Cognitive-Behavioral skills to address coping skills and stress loads as they occur in the semester. For students who may have a genetic predisposition for alcoholism, the counselor might discuss and educate about what that "genetic predisposition" means to the student, including values clarification and how to avoid any problems down the line, e.g. waiting until they are 21 before they drink. As a means to bring closure to the meeting, student input regarding their perception of the problem, what they learned, and what if anything they would like to change as a result of the meeting is combined with a plan formulation. Although the counselor may make recommendations, it is the student's right to decide upon which recommendations they choose to integrate into their lifestyles. Students who have indicated a need for follow up intervention are invited back, allowing the counselor to follow the student's progress and refocus the student toward change.

Steps to Implementation:

- Research approaches and obtain needed training for staff.
- Develop implementation and evaluation plan.
- Meet with grad assistant to revise questions on the Brief Screening instrument.
- Decide sample size.
- Create a system for how to handle second and third contacts with referred students.
- Establish the focus-group protocol, create the questions and decide who will conduct them.
- Develop the Second Step for repeat offenders
- Develop an evaluation design.
- Create the pre- and post-tests for review and revision.
- Finalize pre- and post-tests.
- Obtain approval from internal review committee.
- Administer first round of intervention with targeted students, including pre-tests, interventions, post-tests, data analysis, and report writing.
- (Administer two more rounds including all steps above.)
- Analyze all data.
- Write final evaluation report.

Institution: Bradley University
Strategy: Social Norming
Blueprint Tier: Significant Evidence
NIAAA Tier: Level III–Promising
Risk Factors

Alcohol Use	Gender	Personality	Attitudes	Beliefs	History of Problem
consumption					
behavior					Leadership positions
consumption		Housing Personality traits		Gender Attitudes toward alcohol con-	

Description of Strategy:

Social norm programs involve shifting behavior by making changes in attitudes and beliefs associated with the alcohol use of college students. Research generally indicates that college students have misperceptions as to the volume of alcohol consumption and its impact on behavior. The social norm program is intended to align student attitudes and beliefs with a more accurate view of student alcohol consumption. Social norm program efforts can occur in the context of a cognitive behavioral program or in a social marketing format. Social norm messages delivered as part of a group-based process have shown particular efficacy.

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Applied Project Description:

This social norming project targets the only all-freshmen residence hall on campus. Pre- and post-surveys were developed by the program staff. Baseline data regarding drinking behavior will be taken in August and four times thereafter at different intervals throughout the academic year 2003-2004. During that same time span, residents will be inundated with social norm flyers, table tents, emails,

and giveaway items displaying their own reported and actual data collected from unannounced Portable Breathalyzer Tests conducted on weekend nights as residents enter the dorm. These tests will be conducted by Peer Educators. A follow up survey will be conducted in May in order to assess the program.

Staff will produce a subject orientation video to train those administering the intervention. A verbal outline will also be developed for Peer Educators to use during subject orientation. Meetings will be held with the Director of Residential Life to review project and hall staff participation in the project.

Four additional rounds will be conducted involving the PBT tests, administering the survey, evaluating the data and disseminating the results in social norming materials.

A complete data set from all rounds will be analyzed to evaluate the impact of the entire program.

Steps to Implementation:

- Research interventions.
- Develop an implementation and evaluation plan.
 - Speak with residential life staff to obtain cooperation.
 - Continue to work on rough draft of survey instrument.
 - Meet with Health Services Center personnel.
 - Complete PBT procedure and pre-survey.
 - Develop draft of pre- and post-surveys.
 - Finalize and format surveys.
 - Create databases for data entry.
 - Draft script for subject orientation video.
 - Produce subject orientation video.
 - Draft verbal outline for Peer Educators to use during subject orientation.
 - Meet with Director of Residential Life to review project and hall staff participation in the project.
 - Finalize outline for Peer Educators.
 - Meet with hall staff.
 - Conduct subject orientation.
 - Administer pre-surveys (First Round).
 - Enter data and write results brief.
 - Disseminate results in social norm flyers, table tents, emails and giveaway items.
 - Conduct PBT and administer 2nd survey (Second Round).
 - Enter data and write results brief.
 - Disseminate results in social norm flyers, table tents, emails and giveaway items.
 - Conduct PBT and administer 3rd survey (Third Round).
 - Enter data and results brief.
 - Disseminate results in social norm flyers, table tents, emails and giveaway items.
 - Develop rough draft of post-test.
 - Prepare survey materials for 2nd semester.
 - Conduct PBT and administer 4th survey (Fourth Round).
 - Enter data.
 - Disseminate results in social norm flyers, table tents, emails and giveaway items.
 - Conduct PBT and administer 5th survey (Fifth and Final Round).
 - Enter data and write results brief.
 - Disseminate results in social norm flyers, table tents, emails and giveaway items.
 - Administer post-tests.
 - Enter data.
 - Analyze all data.
 - Write final report.