The UA's model-program for alcohol education, research, and prevention is changing attitudes about drinking among college students. The UA has even dropped off the *Playboy* and Princeton lists of party schools.
The experts know that although drinking is down, campus binge drinking is up at the UA and across the country, with a host of inevitable consequences including harm to academics, date rape, and other kinds of assault.

98% of UA students prefer to be with someone who drinks moderately or not at all.

Health & Wellness Survey 2001 (3,302 respondents) administered to a random sample of undergraduate classes at the UA.

Campus Health Service
www.health.arizona.edu

{we get the facts from you}
Atering alcohol use at a huge campus, with a fourth of its 37,000 students under the drinking age, may seem like trying to move the Catalina Mountains.

Freshmen always have been explorers, testing themselves and a strange world that often involves sex, alcohol, and drugs. Their roadmaps, it seems, are badly flawed, with misconceptions about how often their peers indulge in hard drinking. And the environment is full of contradictions and mixed messages.

For more than a decade, a coalition of University of Arizona experts and leaders has won top national awards for bold efforts to replace those mental roadmaps and to fix that environment, the laws, the policing approaches, and the practices in area bars.

That first goal — replacing deep-rooted student attitudes about their peers — may be the toughest assignment. But the UA team has documented a remarkable string of successes in what may be one of the university’s biggest sustained policy endeavors ever.

The new UA policy has roots in the 1980s when research began to show that students’ heads are filled with wrong perceptions about drinking: they overestimate how much other students drink and desire to hang out with a binge-drinking crowd.

The UA programs predicted that implanting correct perceptions might lower risky behavior.

Here’s a bit of history.

In 1989 the national Drug-Free School and Communities Act required that federally funded colleges provide alcohol and drug education and counseling. Research was finding alcohol to be more damaging to the developing brains of teenagers than adults.

In 1992 the UA Health Service geared up for efforts with aid from the Fund for the Improvement of Post-Secondary Education, a part of the U.S. Department of Education, hoping to reduce student substance abuse, mainly drinking.

“The results were less than spectacular,” says Peggy Glider, the coordinator for evaluation and research at Campus Health Services, who helped redesign the programs.

In 1995, the UA began using a sophisticated mar-
Marketing approach to send out pointed slogans and data about what’s normal at the UA. It used a $1.8-million grant from the Center for Substance Abuse Prevention to implement this strategy using innovations first tested at Northern Illinois University. Professional designers, photographers, and writers worked to correctly depict the UA norms in the campus paper, in posters, and on calendars.

Before long, heavy drinking dipped by 29 percent, and related troubles, like driving after drinking, run-ins with police, and fighting also decreased significantly. So did reports of missed classes and poor test results linked to drinking.

Posters appeared with slogans in very large type like: “98% of UA students prefer to be with someone who drinks moderately or not at all.”

Another shows students with an A GPA taking 3.24 drinks a week and D or F students with 8.55 drinks. It adds: “We got the facts from you.”

**The rule is no preaching, more learning.**

Today, all freshmen get a letter from UA President Robert Shelton requesting that each one complete an online alcohol assessment and education exercise called E-CHUG, short for Electronic Checkup to Go. It lets the student compare personal perceptions with campus ones, instantly. About 5,500 of the 6,200 new freshmen took it last fall. Those who declined face extra penalties if they ever break the rules.

“Half the students say they’ve learned something, and talked with someone else about what they’ve learned,” says Glider. “It creates a soft mandate for better behavior.”

Lynn Reyes, the prevention specialist at the Health Center, oversees classes and counseling. Students who break rules must take a tough six-hour class, called SHADE, for Student Health Alcohol and Drug Education, and must pay up to $100 as a class fee for the privilege. Stumble twice and they must meet with Reyes for personal sessions and fork over another $150 in fees.

“I’m the punishment,” she says with a laugh. In these sessions, she hands over an ordinary red-plastic drinking cup and asks the student to gauge the amount of liquor poured in a mixed drink the size of the cup.

“They’ll say, it’s maybe two shots,” Reyes says. “We show them it’s really six shots, enough to make them legally drunk.”

She adds, “At first, some students say it’s a big yawn, a waste of their time. Then we give anonymous evaluations, and they say, ‘I learned something, and it was pretty interesting.’ And they say they talk about it with friends.”

Such data guides all the evolving programs.

“Before 1994 the UA kept doing whatever it had been doing,” Glider says. “A few tables at the Student Union, a few brochures. Nationally, nobody knew what worked or didn’t work. There wasn’t any science to guide decisions.”

These days, says David Salafsky, the interim director of health promotion and preventive services, the UA’s research is strong.

“Everything we propose is evaluated,” he says. “We’ve had two model program grants, 16 other state and federal grants, and we had one perfect score. You don’t get that easily. We have a great team.”

In a decade, the team’s efforts have lifted the UA to a level that feels roughly like reaching the policymakers version of the Rose Bowl. The UA’s alcohol programs are considered to rank in the top five or 10 U.S. campuses, according to UA leaders and national monitors.

Without a doubt, students’ kegs and ice coolers won’t disappear and students won’t stop flocking to places like Dirtbags, Gentle Ben’s, and their Fourth Avenue rivals, but, in a word, the UA has learned how to party smarter.

**Consider the evidence.**

The UA has dropped off the *Playboy* and Princeton lists of party schools.

Remember when free beer on the Mall was part of Homecoming? That’s all history. It will be sold and
distributed by professionals from the Student Union, in partnership with the UA Alumni Association, from here on.

Red tags are posted on rowdy apartments. They are, for some, a painful fact of the drinking life in UA student neighborhoods. The red tags, placed on a site of loud partying and drinking, can prove costly for tenants and property owners.

And there’s more change in the wind.

“These are huge steps,” says Glider, the evaluation chief. “We are shaking up the whole environment.”

Not everybody’s happy. Altering modes of alumni drinking last year was not popular with everyone in power. And the student government passed a resolution opposing the red tagging of unruly houses as too harsh. But the reforms stuck, in part because of backing from officials like Melissa Vito, the UA vice president for student affairs, for even stronger programs. “This generation of students is not the same as those of 10 or 20 years ago,” she says. “We need to be continually looking for creative and effective ways to address these issues.”

The UA Campus Health team, which works with perhaps 100 or more experts and leaders across the campus and the state, has won two national model-program awards from the Department of Education and a long string of other grants since 1994. They don’t speak much of the worst risks (Colorado, for example, recorded two deaths of underage college students in a few weeks, one from chugging whiskey and wine, the other from 30 beers and shots. A Minnesota student died after a drinking game, at 20, of alcohol poisoning, a day after her last term exam.)

But the experts know the UA’s numbers. The crucial one is its total of recent campus deaths from alcohol: zero.

“There have been no on-campus alcohol poisoning deaths in recent years,” said Reyes, the prevention specialist. “But we’ve had a few close calls.”

The top national Web site for college alcohol programs now offers a detailed description of the UA’s program, with a footnote saying that the share of UA freshmen doing hard drinking — five or more drinks per occasion at least once in the last two weeks — has been documented as dropping from 43 percent to 31 percent. And the UA’s alcohol abuse program is listed in the U.S. Department of Health and Human Services registry of Effective Substance Abuse Programs (http://modelprograms.samhsa.gov).

By any account, though, no one is relaxing.

National tallies show four American college students die in incidents involving alcohol on an average day. And on any Thursday at the UA, hundreds of students will head to Club Congress, Plush, Gentle Ben’s, O’Malley’s and Maloney’s, the Cactus Moon, and the rest, and by Monday morning, the phone might ring alerting the Dean of Students about a fatality.

The experts know that although drinking is down, campus binge drinking is up, at the UA and across the country, with a host of inevitable consequences including harm to academics, date rape, and other kinds of assault (see the sidebar article on page 35).

At Dirtbags, owner Gary Welch has a basket of 200 or so fake I.D.s, confiscated from underage students who he says may have paid up to $150 to get one. “They get no sympathy here,” he says.

At Belushie’s Bar and Grill, owner Josue Limon is just as tough on underage crashers. “Putting a drink in their hands is like giving them a loaded gun,” Limon says. His bar was among the first to sign up its staff for free liquor-serving classes, with lessons on law, psychology, and chemistry, under a state grant to the UA team this fall.

On a typical weekend, a few UA students may wind up in a Tucson hospital with .40 alcohol content in their blood. And in a typical year, about 1 percent of the students in residence halls will be asked to move out for serious offenses that include alcohol and drugs.

All this illustrates the hard road ahead.

Despite the massive ad campaign, old misconceptions persist. For example, Seanna Ingrim, ’08, says she thinks all students believe binge drinking is the normal college experience. “If you don’t go out and do those things, people will think you are weird,” she says.

Dead wrong, the UA experts say. Now they just have to convince the rest of the UA’s 37,000 students.
supposing John wants the money that’s in Heather’s backpack. What does he have to do to get it?

Answer: He has to get Heather’s consent. If he doesn’t, it’s theft, and it’s against the law.

What would you call the same behavior if John were drunk? And what would you call it if Heather were incapacitated after drinking alcohol? The answer is the same: John’s action is still theft. Alcohol may make it easier psychologically or physically for John to steal from Heather, but his behavior is still a crime punishable by law.

The same principles apply to sexual assault. If John has sex with Heather without her consent, it’s against the law, even if he’s intoxicated. If Heather is incapacitated because she’s been drinking, and John has sex with her, he’s breaking the law.

It is estimated that one in four college women will be subjected to a sexual assault — whether attempted or completed — during their college years. Alcohol is a contributing factor in a large number of these cases. According to recent research, alcohol is involved in as many as 50-72 percent of all sexual assaults among college students, meaning that either the perpetrator or the victim — or both — has consumed alcohol.

To be very clear, alcohol is not the cause of sexual assault, nor does it excuse it. A victim is not at fault because he or she has consumed alcohol — the victim never asks to be assaulted. Nor does alcohol intoxication let the perpetrator off the hook. After all, most people who become intoxicated don’t commit violent crimes.

According to recent research, alcohol is involved in as many as 50-72 percent of all sexual assaults among college students.

According to Arizona law (A.R.S. 13-1406), sexual assault occurs when an individual intentionally or knowingly engages in sexual intercourse or has oral sexual contact with any person without his or her consent. The law also stipulates that a person who is incapacitated by alcohol or other drugs cannot give consent. We can assume that if an individual has been vomiting after drinking alcohol, is slurring speech, has trouble walking, or is actually passed out, that individual is incapacitated by alcohol.

Researchers have come together to learn how to decrease the prevalence of these violent crimes and increase the safety of our students. To end sexual assault, it’s important to dispel myths that confuse the issue, such as the idea that sexual assault is committed by the proverbial strange man in a dark alley. Sometimes the culprit is a stranger, but about 80 percent of sexual assaults among students are perpetrated by acquaintances. This means that the vast majority of campus sexual assaults are committed by someone the victim knows: an ex-boyfriend, a friend, a current dating partner, a classmate, a study partner.

To dispel another myth, it’s worth repeating that alcohol does not cause sexual assault, nor is it an excuse for sexual assault. Alcohol may create a circumstance in which it is easier for someone to assault another person; however, the majority of those who choose to drink do not choose to assault.

Moreover, we cannot assume that if a victim has been drinking alcohol that he or she should be blamed for being victimized, or that he or she is a willing sex partner. We don’t excuse the perpetrator’s behavior and blame the victim in other crimes, and it’s equally inap-propriate with victims of sexual assault. Perpetrators have a choice: they either can take advantage of someone’s lack of sobriety or they can act respectfully and with honor. Responsibility must always fall on the perpetrator if consent is not given. Alcohol must not be used as a scapegoat for their crime.

We need to correct our misconceptions about alcohol, consent, and appropriate behaviors, as well as hold the perpetrators accountable. By dispelling the myths about these crimes, we can reduce the numbers of assaults and help survivors heal.

UA students are supported by the 10-year old Campus Health Service Oasis Program for Sexual Assault and Relationship Violence. Both male and female survivors have found their voices and have healed from the wounds of sexual assault. However, these supportive services are not enough. Oasis also has another mission: to reduce the incidence of sexual assault on our campus.

For more information about the Oasis Program’s services or for more information about how to decrease violence in our communities, please visit oasis.web.arizona.edu.

Michelle Dorsey is a staff psychologist and coordinator of clinical services for the Campus Health Oasis Program. At Campus Health, Dorsey specializes in working with individuals impacted by sexual assault and interpersonal violence.