

# **Biennial Review of the Alcohol and Other Drug Prevention Program of Wesleyan University**

For the period of September 1, 2002 to August 31, 2004 As required by the Drug-Free Schools and Campuses Act

Compiled by WesWell, the Office of Health Education Wesleyan University Middletown, CT 06459 860.685.2466

# Introduction

On August 16, 1990, the Department of Education published final regulations that implemented the Amendments to the Drug-Free Schools and Campuses Act of 1989. This Act requires all higher education institutions that receive federal funds to certify to the Department of Education that they have adopted and implemented a program to prevent the illicit use of drugs and the abuse of alcohol by students and employees. At a minimum, such a program must include the annual distribution of the following to each student and employee of an institution:

- 1. Standards of conduct that clearly prohibit, at a minimum, the unlawful possession, use, or distribution of drugs and alcohol by students and employees on your institution's property or as any part of your institution's activities.
- 2. A description of the applicable legal sanctions under local, State, and Federal law for unlawful possession, use or distribution of illicit drugs and alcohol.
- 3. A description of the health risks associated with the use of illicit drugs and the abuse of alcohol.
- 4. A description of any drug and alcohol counseling, treatment, or rehabilitation programs that is available to students and employees.
- 5. A clear statement that your institution will impose sanctions on students and employees (consistent with local, State, and Federal law) and a description of these sanctions up to and including expulsion or termination of employment and referral for prosecution for violations of the standards of conduct.

This Act also requires that an institution of higher education conduct a biennial review of its program to provide:

- 1. descriptions of the alcohol and other drug (AOD) prevention program contents
- 2. a statement of the AOD program goals and a discussion of goal achievement
- 3. summaries of the AOD program strengths and weaknesses
- 4. procedures for distributing AOD policy to students and employees
- 5. copies of the policies distributed to students and employees and
- 6. recommendations for revising the AOD program.

This report is Wesleyan University's seventh documentation of its compliance with the Drug-Free Schools and Campuses Act. This report covers the period from September 1, 2002 to August 31, 2004. Information for this biennial review was collected by the Office of Health Education with assistance from various Student Services offices. It will be on file there and available to anyone interested. Additional procedures for facilitating and improving the eighth biennial review in 2006 are discussed at the conclusion of this report.

# **Review of the Alcohol and other Drug Prevention Program**

This report will cover the six areas, listed above, which are required elements of the Biennial Review.

# Section 1: Description of AOD program elements

What follows are descriptions of the various components of the Alcohol and other Drugs prevention program at Wesleyan University. These components have been grouped into six categories: environmental strategies, educational strategies, policy and enforcement strategies, early intervention strategies, assessment and campus-community coalitions.

# A. Environmental Strategies

The environmental strategies profiled in this section include Residential living options and extracurricular/recreational options.

# **Residential living options**

# • WellBeing House and Substance Free Floor

Residential options at Wesleyan include a WellBeing program house and a Substance Free Floor, located in the Hewitt residential hall. Any upper class student may apply to reside in the WellBeing house; the Substance Free Floor is open to all students. Beginning in fall 04, the substance free floors will be moved from Hewitt to the Butterfields where we can have more flexibility with the floor's occupancy, depending on the number of students interested from year to year.

These residential options provide a substance-free living space for all students who choose to live in a substance-free area. The programming of these areas focuses on wellness, and also provides a viable housing option for students in recovery from alcohol or other drug addictions.

# **Extracurricular/recreational options**

# • Student-driven programming and social options

One of the strengths of Wesleyan's student body is the interest and ability to create a wide variety of social programming in spite of insufficient space and monetary resources. Students collaborate with various offices to produce many events, including alcohol free events. In addition, events are strengthened through collaboration with AOD prevention and educational programs, the Good Clean Fund, Host Training, and the availability of trained student event staff to work student sponsored social events.

In order to ensure that students have greater funding resources, the office of the Dean of the College sought out additional funding for student-planned social alternatives during the 2001 budget cycle. These funds were made available starting with the 2002 - 2003 academic year and continued during the 2003-2004 academic year.

# • Good Clean Fund

The Good Clean Fund provides students with "mini-grants" of up to \$100 to defray the costs associated with providing alcohol-free social events to the campus. Much of this funding comes

directly from the Health Education budget; a small portion is derived from fines levied on students found in violation of the University's alcohol and drug policies.

2002 - 2003	\$1,907.63	21 events	attendance not recorded
2003 - 2004	\$2,381.01	27 events	2,895 students attended

While providing these funds is a sound prevention activity, the Health Education office is considering whether is the fund is in keeping with the office's educational mission to support social events. Other more significant sources of funding are available to students, which could fill the gap if this particular fund were to be discontinued in the next academic year.

# • Extended Hours in Campus Facilities

Beginning in early 1999, the Davenport Campus Center remained open until 2:00am, Sunday through Thursday. These extended hours were established in response to student demand for additional late night studying and social space on campus. The new schedule also met the demands for students who wanted a late night dining option available on campus. This schedule ran until January 2004 and the start of the Spring 2004 Semester. At that time the Campus Center began to close at midnight seven days a week. This was the effect of new late night dining options and entertainment moving over to the newly remodeled Summerfields dining area that remained open until 2:00am.

# • "10:10 Series"

In an effort to offer more late-night alternatives to the traditional party scene, the Campus Center Coordinator worked with the Director of Student Activities to offer the "10:10 Series" in the Campus Center's Multi-Purpose Room. This series began in the '00 – '01 academic year and continued to be a success into '03 – '04. Events were usually held on a Thursday night and featured live entertainment by students from a capella groups, comedy troupes, and bands. In '02 – '03, 15 such performances took place, while in '03 – '04, 20 acts appeared in the Multi-Purpose Room.

# • Late Night Performance Series

In an effort to offer more late-night alternatives to the traditional party scene, the Director of Student Activities and Leadership Development coordinated the Late Night Performance Series which occurred on Friday and Saturday nights between the hours of 10 pm and 2 am. Performances consisted of a cappella groups and acoustic performers. Seventy-four performances occurred during the 2003-2004 academic year.

# • Stress Free Zone

In collaboration with several Deans and Directors in Student Services, the Health Education office hosted a late night "Stress Free Zone" program each semester, one during each final exam period. Students were invited to the Campus Center during late night hours to participate in crafts, play board games, watch movies, receive a chair massage, and enjoy refreshments served by members of the Student Services staff. This brief "stress relief" break helped students manage their stress levels during exam week and avoid alcohol consumption as a stress reliever.

# • Oasis, an alcohol-free bar service

Oasis, an alcohol-free cocktail bar service which was very strong in the late 1990's, was revived briefly in 2002 at the request of students. Financial support was given to the students by the Health Education office. Additional funds were received from an alumna who was seeking ways to support alcohol prevention efforts. However, due to a lack of continuing interest from the students in 2002, Oasis was not continued. Another student wished to revive the group in 2003, but it was once again not successful.

# **B. Educational Strategies**

The educational strategies profiled in this section include awareness and information training, social norming, peer education, and student leader training.

# Awareness and information training

# • New Student Orientation

New student orientation for incoming first-year and new transfer, exchange and visiting students includes alcohol and drug education as part of its programming. Mike Green, a professional speaker, presented his "Four Stages of Drinking" program to new students during Orientation in 2002 and 2003. His program was so popular with new students that his presentation in 2002, held on a Friday evening, was attended by more than 600 students. Alcohol and drug issues were also presented to new students through a public safety presentation during orientation and a residential-based educational program called "First Year Matters," held during the first six weeks of each fall semester.

# • Host Training

Host training was developed during the 1997-1998 academic year to provide students with a stronger understanding of their responsibilities and requirements as the host of social events on campus. Students are now required to attend a 60-minute training session if they plan to host a registered social event on campus. Topics covered in training include campus AOD policy, liability concerns, available support resources, and the event registration process.

# • Residence Life Staff training

During the initial student staff training each August, alcohol and other drugs are discussed in several sessions. These include presentations about policy and enforcement practices by Public Safety and the Dean of Student Services office; the health risks associated with severe intoxication; and social norming opportunities presented by the health education staff. The student staff is also provided emergency procedures to follow in the event of an alcohol overdose.

# • Residentially based programs

Residence Life utilizes a comprehensive programming model which includes components that reflect the Department's mission to promote "responsible, inclusive learning communities." In assessing each community's needs, the staff includes programming on health topics, including alcohol and other drug programs.

Residential Life policy dictates that all programs sponsored by Residential Life, are alcohol free. This has encouraged the development of substance-free social alternatives by staff and residents which contribute to a healthier culture on campus.

### **Social Norming**

# • Governor's Prevention Partnership Grant

In Fall 2001, the Director of Health Education applied for and received a \$25,225 grant to address high risk drinking on campus. Wesleyan was one of four campuses in the state to receive a grant from the Governor's Prevention Partnership; their funding source for the grant was the Department of Education. The grant, awarded in October 2001, was designated to implement a social norms marketing campaign.

Due to unexpected and unavoidable delays in data collection and analysis during 2001 - 2002, the campaign was not implemented until Fall 2002. Due to these delays, the grant term was extended an additional year through the 2003 - 2004 academic year.

The social norming campaign consisted of normative messages disseminated through various forms of campus media, including newspaper ads, posters and banners, websites and other electronic media, and imprinted promotional items. Student reaction was mixed, though final data analysis has not yet been completed to determine the impact of the campaign, if any.

Grant funds also supported the hire of several student peer health advocates, to assist with the Governor's Prevention Partnership grant activities. The activities and responsibilities of these students are discussed below in the Peer Education section of this report.

#### **Peer education**

# • Peer Health Advocates

As noted in the discussion of the Governor's Prevention Partnership grant above, seven students were initially hired to serve as Peer Health Advocates for the Health Education office; currently five students remain in their positions. These students assisted in the development of the social norming efforts the grant was designed to support. They also disseminated information on a variety of health topics, including alcohol abuse, through newsletters, awareness events and other passive methods and staffed the health education office throughout the year. These students will continue to work for the Health Education office even after the grant term concludes.

# **Student leader training**

#### • Event Staff

A trained student event staff was created to assist social event hosts with maintaining order at their events and intervening should problems arise. Paid by the Dean's Office, event staff is available at no charge to event hosts. Event staff members are trained with "TIPS for the University," which provides them with intervention skill training and the opportunity to role-play potential situations they might encounter.

# C. Policy & Enforcement Strategies

During the 2003 - 2004 academic year, a committee of administrative staff and student leaders revised some of the policies and procedures governing alcohol and other drug use. The revisions are intended to insure that campus policy reflects recent applicable changes in State laws and

local ordinances.

The City of Middletown passed a local ordinance in March, 2004 that prohibits underage possession and consumption of alcohol on private property. As such, Middletown Police are now empowered to address underage alcohol violations on Wesleyan University property.

The Office of Residential Life has also established formal AOD enforcement roles for student and professional staff. All staff are required to confront and document AOD policy violations and forward reports to professional staff members for appropriate judicial follow up.

The Student Judicial Board annually releases data and summary reports; the reports for the 2002 - 2003 and 2003 - 2004 academic years are available at <a href="http://www.wesleyan.edu/deans/sjbcases.html">http://www.wesleyan.edu/deans/sjbcases.html</a>. During this reporting period, there has been an increase in the number of cases and charges both of which can be attributed to a greater focus on increased enforcement efforts. The Office of Public Safety continues to document the majority of alcohol and drug offenses, and also publishes crime statistics on its website at <a href="http://www.wesleyan.edu/publicsafety/">www.wesleyan.edu/publicsafety/</a>.

# **D. Early Intervention Strategies**

The early intervention strategies profiled in this section include residence hall staff, student and employee assistance programs, and counseling and support groups.

# • Residence Hall Staff

Residence hall student staff members are often the initial contact person to address problems. They are appropriately trained and expected to report negative or inappropriate conduct and behavior in internal Communication Reports, which are reviewed by members of the Office of Residential Life staff. These reports may be acted upon if the situation warrants attention by the central staff or consultation with others.

#### • Student and employee assistance programs

Health Services, the Office of Behavioral Health, the Office of Health Education, and Human Resources each provide referrals for students or employees to sources of assistance on alcohol and other drug issues.

#### • Counseling and support groups

The Office of Behavioral Health offers support groups for students each semester, as demand suggests a need for such groups. The topics vary each semester and periodically include alcohol and other drug issues.

# E. Assessment

#### • Core Survey

The Core Survey was administered to a sample of the student body in November 2002 by the Office of Institutional Research, and supported by the Office of the Dean of the College. In comparing the data to past Core survey results, there has been little change in student consumption rates or perception of the campus environment. However, as this is not longitudinal

data, it is difficult to determine the impact of environmental changes that have occurred on campus.

# F. Campus-Community Coalition

# • AWARE

In 1999 – 2000, a group of concerned Middletown residents, faculty, and staff, living in areas adjacent to campus, began meeting with representatives of the University. The group came to be known as AWARE (Association of Wesleyan Area Residents) and meets regularly to discuss concerns held by both groups in relation to community standards, transient noise, neighborhood appearance, etc.

Through the efforts of this group and University staff, many of the problems experienced by community members have been reduced, including those fueled by student alcohol consumption. Just as importantly, the relationship between the University and residents of Middletown has improved as a result of these meetings.

# Section 2: Statement of AOD program goals and discussion of goal achievement

The current alcohol and other drug (AOD) program does not possess a clearly defined set of goals and objectives due to its decentralized structure. Many different offices are responsible for implementing a variety of activities that ultimately contribute to AOD prevention, but they are not part of a coordinated effort. All should be considered valuable parts of an effective prevention program but are typically created without any specific AOD-related goals or outcomes in mind. Survey data is regularly collected, but could be used more effectively to inform the campus community about alcohol and other drug issues and the success of preventative measures.

An Alcohol and Other Drugs Working Group was formed in Fall 2002 to monitor progress towards reducing high risk drinking and drug abuse as well as make recommendations to educate and provide healthy social activities for students.

# <u>Section 3: Summaries of AOD program strengths and weaknesses</u> Strengths

# • Many social and educational options exist

Wesleyan University offers numerous substance-free social and educational events for students. Many of these events are student-led and assist greatly in expanding students' educational experiences while at Wesleyan. These also assist in developing a stronger campus community and understanding of a variety of cultural and social issues. While the availability of physical programming space has been increasingly limited due to campus construction projects, many events still occur which positively impact student culture.

# • Policy is current

Due to recent revisions to the student Code of Non-Academic Conduct, the policy as it pertains to alcohol and other drugs is current. This assisted greatly in creating greater understanding of

student responsibilities and expectations for behavior.

### • Students are highly involved in decision-making

Due to the commitment of the University to involving students in all aspects of their education, students participate in most committees, program planning groups and other activities along side faculty and staff on campus. This includes committees that address alcohol and other drug issues, such as the Alcohol and other Drug Working Group and the Student Life Committee.

### Weaknesses

#### • AOD program needs greater coordination

The efforts of the various university departments and officials that are, or should be, concerned with AOD issues could be better coordinated in order to improve strategies to reduce high risk drinking and illegal drug use. The formation of the Alcohol and Other Drug Subcommittee in Fall 2002 has been helpful in monitoring progress towards reducing high risk drinking and drug abuse as well as make recommendations to educate and provide healthy social activities for students.

#### • AOD program evaluation could be improved

Although we currently collect useful data regarding drug and alcohol use, our programs would benefit from better analysis and use of this data. Violations and sanctions are tallied annually and surveys on student consumption are conducted regularly, providing quantitative data on the current state of affairs. By systematically reviewing this data, however, and identifying new sources of data, a campus-wide committee would be better equipped to recommend and implement changes to policy and practice.

#### • Biennial Review should be completed by committee

Historically, the task of compiling this report has fallen almost exclusively to the staff of the Health Education Office, with assistance from various other members of the Student Services staff. While the Health Education office is certainly highly involved in the review process, it should not be the sole body responsible for it. The review process requires input from such disparate areas of campus that it may not be possible for one or two people to collect such extensive information.

# Section 4: Procedures for distributing AOD policy to students and employees

The Student Handbook is distributed to new students during orientation and is available to all students in an electronic format on the university's website. All returning students, faculty and staff are notified when the updated Student Handbook is available online via email. Information about AOD policy is also distributed to new employees at Wesleyan through information distributed by Human Resources and resides in the administrative staff handbook for continuing employees.

This handbook, and the documents distributed to new employees, meets the Federal Act's guidelines for policy distribution as it includes:

1. The University's standards of conduct concerning drugs and alcohol.

- 2. A description of all applicable local, State, and Federal laws concerning drugs and alcohol.
- 3. A description of the health risks associated with the use of drugs and alcohol.
- 4. A description of the drug and alcohol counseling, treatment and rehabilitation programs available at Wesleyan University.
- 5. A clear statement of the University's sanctions up to and including expulsion or termination of employment for violations of the standards of conduct.

All policies that pertain to students and employees are always accessible online through the Wesleyan University website at www.wesleyan.edu. Students can find the handbook and information about codes of academic and non-academic conduct, including AOD policies, on the Dean of the College's website. The Human Resources office maintains an extensive site on policies, procedures, benefits and resources for employees, including the AOD policy.

# Section 5: Copies of the policies distributed to students and employees

See Appendices A and B for copies of AOD policies distributed to students and employees.

# Section 6: Recommendations for revising AOD programs

Wesleyan University's educational and substance-free programming continues to be a strong presence on campus, and while policies and sanctions are moving away from being simply restrictive and/or punitive toward being educational, proactive, and aimed at community responsibility. However, there is still much to accomplish regarding AOD policy and programming at Wesleyan. In order to improve such policy and programming, this report gives the following recommendations:

• Review policy distribution methods to ensure all students and employees are receiving the current policy each year. It is unclear if all students and all employees are receiving the policy, in the spirit of the federal guidelines. The AOD Working Group should open discussion with the appropriate departments to explore the use of electronic portfolios and/or campus mail to ensure proper annual distribution of the policies.

# <u>Appendices</u>

A: Student Code of Non-Academic Conduct on Illegal Drugs and Alcohol

B: Employee Alcohol and other Drugs Policy

# Appendix A Student Code of Non-Academic Conduct on Illegal Drugs and Alcohol

Wesleyan University prides itself on being a community of responsible citizens. To this end, it is expected that members of the community will abide by Wesleyan policies and local laws.

We recognize that despite these laws, expectations and standards, some people will illegally consume or possess alcohol or other drugs, and some will have medical, legal, and/or interpersonal problems as a result of their use. Moreover, even those of legal age may misuse alcohol and in so doing come into conflict with standards of community conduct.

It is therefore the purpose of this document to delineate clearly the University policy on alcohol and other drugs. This includes the University's regulations and many relevant laws, information regarding substance-free events, resources for those who have or are concerned about problems related to alcohol or drug use, and clarification about potential outcomes if found in violation of the University policy.

# STANDARDS OF CONDUCT

The University prohibits the underage and unlawful possession, use, or distribution of illicit drugs and alcohol by students or by employees on University property or while participating in any University-sponsored activity. The University will impose disciplinary sanctions on students and employees who violate the standards. Disciplinary sanctions that may be imposed on students include warning, disciplinary probation, community service hours, suspension, and dismissal. The University may also require a student who violates these standards to participate in a program of rehabilitation. Whenever the University determines that a student has violated one of the standards, it will consider as a possible sanction referral of the matter to law enforcement officials for prosecution. Although sanctions will vary according to the specific circumstances of the case, and greater or lesser sanctions imposed depending on these circumstances, it is nonetheless important for students to understand the potential consequences of violating the University's policies on drugs and alcohol. The Student Judicial Board has provided the following information related to typical sanctions for students:

# First Offense

For minor violations, the student may receive a disciplinary warning via a simplified procedure (pursuant to section III-D-3 of the Code of Non- Academic Conduct). For serious violations, the student may receive more severe sanctions.

# Second Offense

The student may receive a period of disciplinary probation and an educational assignment. As permitted by the 1998 Reauthorization of Higher Education Act, Wesleyan may notify parents when a student is placed on disciplinary probation as a result of an alcohol/drug policy violation (generally this occurs as result of a second offense or serious first offense).

# Third Offense

If such an offense occurs during the probationary period, the student may be suspended for at least one semester. If the offense occurs after the probationary period, the student may receive an extended period of disciplinary probation, an educational assignment, and community service.

# LOCAL, STATE, AND FEDERAL LEGAL SANCTIONS

Numerous local, state, and federal laws govern the possession, use, and distribution of illicit drugs and alcohol. The following is a brief overview of those laws. This overview cannot be an exhaustive or definitive statement of the various laws, but rather is designed to indicate the types of conduct that are against the law and the range of applicable legal sanctions. It is important to note that, while the activities covered by state, local, and federal law and those covered by Wesleyan's rules are largely the same, the laws and the rules operate independently and do not substitute for each other. Wesleyan may pursue enforcement of its rules whether or not legal proceedings are under way or in prospect, and it may use information from third-party sources, such as law enforcement agencies and the courts, to determine whether University rules have been broken. The University will make no attempt to shield members of the Wesleyan community from the law. University Standards and Regulations

# LOCAL LAWS

# A. Alcohol

1. Use of Alcoholic Beverages Prohibited (see Middletown Code of Ordinances, 18-9)

a. The possession and/or drinking of alcoholic beverages, including, but not limited to, wine and beer, by any person on any city-owned property under the jurisdiction of the Parks and Recreation Department of the city of Middletown shall be prohibited, except that the possession and/or drinking of wine and/or beer shall be allowed in posted areas and at posted times, or by permit, at Veterans Memorial Park, Area A, and Crystal Lake.

b. No person under the age of 21 shall be in possession of alcohol on public or private property.

c. Beer kegs on any city property under the jurisdiction of the Parks and Recreation Department of the city of Middletown shall only be permitted by special permit.

d. Any person violating these provisions shall be fined in an amount not to exceed \$90 per violation per day.

2. Consumption and Possession of Alcoholic Liquor Within and Upon Public Highways, Sidewalks, and Parking Areas (see Middletown Code of Ordinances, 25-47)

a. Except as permitted by the ordinance, no person shall consume any alcoholic liquor or possess with the intent to consume any alcoholic liquor upon or within the limits of any public highway or sidewalk or parking area within the city of Middletown.

b. Consumption of alcoholic liquor or possession with intent to consume alcoholic liquor shall not be permitted in parked vehicles within or upon public highways, streets, or parking areas under any circumstances.

c. Any person violating this ordinance shall be fined not more than \$99 for each offense.

# STATE LAWS

# A. Drugs

1. Penalties for Illegal Manufacture, Distribution, Sale, Prescription, or Dispensing of Controlled Substances

a. Hallucinogenic or narcotic substances other than marijuana. First offense: Prison sentence not to exceed 15 years and/or fine not to exceed \$50,000. Second offense: Prison sentence not to exceed 30 years and/or fine not to exceed \$100,000. Each subsequent offense: Prison sentence not to exceed 30 years and/or fine not to exceed \$250,000. (See Connecticut General Statutes 21a-277.)

b. Other controlled substances excluding marijuana. First offense: prison sentence not to exceed seven (7) years and/or fine not to exceed \$25,000. Each subsequent offense: Prison sentence not to exceed 15 years and/or fine not to exceed \$100,000. (See Connecticut General Statutes 21a–277.)

c. Examples of such substances include, but are not limited to, mescaline, peyote, morphine, LSD, cocaine (including "crack"), opium, amphetamines, and heroin. For a complete definition of controlled, hallucinogenic, and narcotic substances, see Connecticut General Statutes 21a-240.

2. Penalties for Illegal Manufacture, Distribution, Sale, and Prescription or Administration by Nondrug-dependent Person

a. Minimum prison term of not less than five years and maximum term of life imprisonment for the manufacture, distribution, sale, or possession or transportation with the intent to sell of one ounce or more of heroin, methadone, or cocaine (including "crack"), or one-half gram more of cocaine in a freebase form, or five milligrams or more of LSD. (See Connecticut General Statutes 21a-278.)

b. Minimum prison term of not less than five years for first offense, and for subsequent offenses, minimum prison term of not less than 10 years, for the manufacture, distribution, sale or transportation or possession with the intent to sell any narcotic, hallucinogenic or amphetamine-type substance, or one kilogram or more of a cannabis-type substance (which includes marijuana). (See Connecticut General Statutes 21a-278.)

3. Penalties for Illegal Manufacture, Distribution, Sale, Prescription, or Administration Involving Minors (See Connecticut General Statutes 21a- 278a.)

a. Mandatory two-year prison term for the distribution, sale, dispensing, offering, or giving of any controlled substance to another person who is under 18 years of age and who is at least two years younger than the person violating the statute.

b. Mandatory three-year prison term for the manufacture, distribution, dispensing, sale, transportation or possession with intent to sell, offering or gift of any controlled substance on or within one thousand feet of the real property comprising a public or private elementary school.

4. Penalties for Possession (see Connecticut General Statutes 21a-279)

a. Any person who possesses or has under his control any quantity of any narcotic substance, including marijuana, for a first offense may be imprisoned not more than seven years and/or fined not more than \$50,000, and for a second offense, may be imprisoned not more than 15 years and/or fined not more than \$100,000.

b. A variety of sentences are available under this statute depending on the substance possessed, its quantity, and the background of the offender.

# **B.** Alcohol

1. Sale of Alcohol to Minors and Intoxicated Persons (see Connecticut General Statutes 30-86)

a. Any permittee who sells or delivers alcoholic liquor to any minor, or to any intoxicated person, or to any habitual drunkard shall be fined not more than \$1,000 and/or imprisoned not more than one (1) year.

b. Any person who delivers or gives alcoholic liquor to any minor, except on the order of a practicing physician, shall be fined not more than \$1,500 and/or imprisoned not more than 18 months.

2. Inducing Minors to Procure Liquor (see Connecticut General Statutes 30-87)

a. Any person who induces any minor to procure alcoholic liquor from any person permitted to sell the same shall be fined not more than \$1,000 and/or imprisoned not more than one year.

3. Misrepresentation of Age (see Connecticut General Statutes 30–88a)

a. Any person who misrepresents his age or uses or exhibits for the purpose of procuring alcoholic liquor an operator's license belonging to any other person shall be fined not less than \$200 nor more than \$500 and/or imprisoned for not more than 30 days.

4. Procuring Liquor by Persons Forbidden and Public Possession of Liquor by Minors (see Connecticut General Statutes 30-89)

a. Any person to whom the sale of alcoholic liquor is by law forbidden who purchases or attempts to purchase such liquor or who makes any false statement for the purpose of procuring such liquor shall be fined not less than \$200 nor more than \$500.

b. Any minor who possesses any alcoholic liquor on any street or highway or in any public place or place open to the public, including a club that is open to the public, shall be fined not less than \$200 nor more than \$500.

5. Dram Shop Act (see Connecticut General Statutes 30–102)

a. If any person, by himself or his agent, sells any alcoholic liquor to any intoxicated person, and such purchaser, in consequence of such intoxication, thereafter injures the person or property of another, such seller shall pay just damages to the person injured, up to the amount of \$20,000, or to persons injured in consequence of such intoxication up to an aggregate amount of \$50,000.

6. Operating a Motor Vehicle While Under the Influence of Liquor or Drug or While Impaired by Liquor (see Connecticut General Statutes 14-227a)

a. Any person who operates a motor vehicle while under the influence of intoxicating liquor or drug or both or who operates a motor vehicle while his ability to operate is impaired by the consumption of intoxicating liquor shall, for conviction of a first violation, be fined not less than \$500 and be imprisoned for not more than six months, and shall have his operator's license suspended for one year.

b. This statute provides for greater penalties for subsequent offenses.

# FEDERAL LAWS

A. Federal Penalties and Sanctions for Illegal Possession of a Controlled Substance

1. Penalty for Simple Possession (See 21 U.S.C. 844[A].)

First conviction: Up to one year imprisonment and fined at least \$1,000 but not more than \$100,000 or both.

After 1 prior drug conviction: At least 15 days in prison, not to exceed two years, and fined at least \$2,500 but not more than \$250,000 or both. After 2 or more prior drug convictions: At least 90 days in prison, not to exceed three years and fined at least \$5,000 but not more than \$250,000 or both.

Special sentencing provisions for possession of crack cocaine: Mandatory at least five years in prison, not to exceed 20 years and fined up to \$250,000 or both, if:

a. First conviction and the amount of crack possessed exceeds five grams;

b. Second crack conviction and the amount of crack possessed exceeds three grams;

c. Third or subsequent crack conviction and the amount of crack possessed exceeds one gram.

2. Criminal Forfeitures (See 21 U.S.C. 853[a][2] and 881[a][7].)

Forfeiture of personal and real property used to possess or to facilitate possession of a controlled substance if that offense is punishable by more than one-year imprisonment. (See special sentencing provisions regarding crack.)

3. Forfeitures (See 21 U.S.C. 881[a][4].)

Forfeiture of vehicles, boats, aircraft, or any other conveyance used to transport or conceal a controlled substance.

4. Civil Penalties for Possession of Small Amounts of Certain Controlled Substances (See 21 U.S.C. 844a.): Civil fine up to \$10,000 (pending adoption of final regulations).

5. Denial of Federal Benefits to Drug Traffickers and Possessors (See 21 U.S.C. 853a.) Denial of federal benefits, such as student loans, grants, contracts, and professional and commercial licenses up to one year for first offense, up to five years for second and subsequent offenses.

6. Firearm Forfeiture (See 18 U.S.C. 922[g].) Ineligible to receive or purchase a firearm.

7. Miscellaneous Revocation of certain federal licenses and benefits, e.g., pilot licenses, public housing tenancy, etc., are vested within the authorities of individual federal agencies.

8. Federal Trafficking Penalties

See "Federal Trafficking Penalties" Charts.

# HEALTH RISKS ASSOCIATED WITH ALCOHOL USE

While most college students either do not drink or drink moderately, some students report high risk alcohol consumption. The U.S. Surgeon General and the U.S. Department of Health and Human Services have identified high risk drinking among college students as a major public health problem, which is neither victimless nor cost-free.

# CONSUMING ALCOHOL AT HIGH RISK LEVELS IS MORE LIKELY TO RESULT IN PERSONAL CONSEQUENCES SUCH AS:

- hangovers, vomiting or nausea
- memory loss ("blacking out") or loss of consciousness ("passing out")
- being criticized for their drinking behaviors
- regretting actions taken while under the influence of alcohol
- damage to relationships with friends and family
- unplanned or unsafe sexual activity
- missing classes
- poor performance on an exam or project
- lower grade point averages
- driving while intoxicated
- hospitalization due to injury or severe intoxication
- University Standards and Regulations
- citation by university judicial system or arrest by local police
- alcohol dependency or addiction
- death due to injury, accident or alcohol overdose

Those who do not drink or do not abuse alcohol may experience secondhand consequences from others' excessive alcohol use. In addition to physical and sexual assault and damaged property, these consequences may include unwanted sexual advances and disrupted sleep and study.

Many students carry an expectation that there are a subset of drinking behaviors relegated to the college years. While it is often the case that we "grow out" of potentially perilous drinking

behaviors, there may be patterns set which have lasting impacts. While only a small minority of students will develop clinical alcoholism, many more will suffer avoidable negative impact on relationships and studies. (Information adapted from the Task Force of the National Advisory Council on Alcohol Abuse and Alcoholism. "A Call to Action: Changing the Culture of Drinking at U.S. Colleges", April 2002. Available at www.collegedrinkingprevention.gov.)

# HEALTH RISKS ASSOCIATED WITH ILLICIT DRUG USE

Similar to alcohol, someone who uses illicit drugs on a regular basis is at increased risk for experiencing negative consequences (see "Health Risks Associated with Alcohol Use", above). These consequences can vary greatly depending on the substance, the quantity consumed, if it is combined with alcohol or other substances, and the frequency of consumption. Some consequences may include the following: Mental and physical health problems, including lowered resistance to disease/illness, Increased risk of ulcers, heart disease, and cancers of the liver, mouth, throat and stomach, memory loss, anxiety disorders, phobias, and depression. Increased risk of serious injury to self or others, due to fighting, sexual assault, driving under the influence, homicide and suicide. Increased likelihood of engaging in unprotected/unsafe sex, due to impaired judgment which may result in unplanned pregnancy and/or infection with a sexually transmitted disease. Increased engagement in other illegal activities, including vandalism, physical assault, sexual assault, driving under the influence, etc. Increased likelihood of developing an addiction, particularly those with a family history of alcohol or other drug addiction. They are at least four times more likely to develop an addiction. Increased likelihood of death. Drug use increases the odds of death from accidental or intentional drug overdoses as well as participation in other unsafe behaviors (e.g., driving under the influence).

**Multiple drug use**: Drugs, by definition, impact the body's physiologic processes by chemical means. These interactions may be unpredictable, especially when the constituents of drugs are partially unknown (as with street or club drugs), or of unexpected intensity as when prescription drugs are misused. Such effects are especially problematic when drugs are mixed or combined with alcohol or with other prescription or herbal medications a student may be taking. At best, such an outcome is frightening or uncomfortable; at worst it could lead to unintended effects as detailed above. In addition to these risks, there is the possibility of addiction to behavior patterns or physical addiction, both of which can yield devastating impact on family, finances, health, etc.

The charts "Controlled Substances--Uses and Effects" (see Appendix) provide additional information on the uses and effects of controlled substances. (Information adapted from McDowell, U. and Futris, T., "Adolescents at Risk: Illicit Drug Use". Department of Human Development and Family Science, The Ohio State University, 2002; and C. Kuhn, S. Swartzwelder and W. Wilson, "Buzzed: The straight facts about the most used and abused drugs from alcohol to ecstasy", 1998.)

# ALCOHOL AND OTHER DRUG PREVENTION AND EDUCATION FOR STUDENTS

WesWELL, the Office of Health Education Davison Health Center, 327 High Street x2466, www.wesleyan.edu/weswell/ WesWELL, the Office of Health Education, coordinates alcohol and other drug prevention education activities.

These efforts consist of educational outreach activities with the goal of informing and educating the Wesleyan community about the use and abuse of alcohol and other drugs. The program is aimed at creating an environment on campus in which responsible choices about alcohol and drug use are supported. Some strategies include:

1. The health education staff offers informative and interactive programs during New Student Orientation and workshops throughout the year.

2. The office hires a team of student Peer Health Advocates who help staff the WesWELL Office. They design and disseminate a variety of alcohol and drug education materials and assist the Director in planning prevention activities. This includes the creation of an ongoing social marketing campaign geared toward resetting perceived norms surrounding high risk use of alcohol.

3. The Director of Health Education serves as a resource and an advisor to the Well-Being community, which includes students who opt to live in alcohol-and drug-free housing.

4. The office provides financial assistance for student organizations through the Good Clean Fund to support substance-free social events and the HealthFull Words Fund for educational events on health issues, including alcohol and other drugs.

5. The Director of Health Education conducts resident advisor training and in-services, assists with party host and event staff training, provides resident hall programs and campus-wide speakers, sponsors awareness events, and maintains a resource library that includes pamphlets, books, journals, videos, and access to appropriate Internet-based resources via the WesWELL Web Site: www.wesleyan.edu/weswell/.

6. The office also regularly assists in conducting research on students' attitudes and behavior regarding alcohol and other drug use.

# ALCOHOL AND OTHER DRUG INTERVENTION AND SUPPORT

# A. IDENTIFICATION, INTERVENTION, AND REFERRAL OF STUDENTS WITH SUBSTANCE ABUSE PROBLEMS

Health Services and other Student Services and Dean's Office staff are trained to identify students who may have substance-abuse problems and can intervene, if appropriate, to refer these individuals to the Office of Behavioral Health for Students or to a local treatment center for assessment and treatment, if necessary. The Residential Life student staff and the Peer Health Advocates may also refer students to Health Services and Behavioral Health for problems with alcohol and other drugs.

Additionally, students who violate the University's Alcohol and Other Drug Policy may be referred by the Student Judicial Board (SJB) to meet with staff in Health Services and/or Behavioral Health for an evaluation/assessment or ongoing therapy.

# **B. ONGOING SUPPORT FOR STUDENTS IN RECOVERY**

Professionals are available in the Office of Behavioral Health for Students for ongoing counseling and support. Twelve-step support programs are available locally; for more information contact the Office of Health Education. Students in recovery have the option to live in substance-free housing available through the Office of Residential Life.

# ALCOHOL AND DRUG COUNSELING AND TREATMENT FOR STUDENTS

Davison Health Center, 327 High Street x2470, www.wesleyan.edu/healthservices/

The Davison Health Center serves as an important point of first contact for many students. The Health Center staff are well-attuned to the direct and indirect effects of alcohol and other drugs on students' lives and factor this in virtually every clinical encounter. Counseling students on the use of alcohol and other drugs occurs directly when medical history or exam suggest that their use may be having an impact on physical, academic or social functioning and indirectly as when students are advised to avoid alcohol use to promote recovery from a viral illness. When appropriate, students are referred to the Office of Behavioral Health or other counseling resources.

Office of Behavioral Health for Students Davison Health Center, 327 High Street x2910, www.wesleyan.edu/obhs/

The drug/alcohol treatment program of the Office of Behavioral Health for Students is designed to meet the varied needs of students with substance abuse problems, and the program is designed to deal with different groups of students: those who are self-referred, those who are referred by other offices and members of the University community, and those who are returning to campus following treatment for substance abuse.

The Office of Behavioral Health for Students' drug/alcohol treatment program consists of four components: consultation and assessment, voluntary treatment, drug awareness education, and an individualized reentry program.

# A. CONSULTATION AND ASSESSMENT

The assessment consists of one to two sessions with a therapist who assesses the nature of the drug/alcohol use and makes explicit recommendations regarding treatment if that is indicated. The consultation portion of the program is designed to be used by students who have concerns about their drug/alcohol use but who might be reluctant to seek treatment. Any member of the University community can also refer students directly to the program.

# **B. VOLUNTARY TREATMENT**

Treatment begins with an assessment of the nature and extent of drug/alcohol use and the formulation of a treatment plan, which may include individual therapy, AA/NA meetings, and group therapy. When outpatient therapy is insufficient to meet the needs of the student, a referral to an inpatient facility is made. In those instances, careful consideration is given to the student's support networks, to family finances, to the type of program, and to post rehabilitation requirements before any recommendation is made.

# C. ALCOHOL/DRUG AWARENESS EDUCATION

This program is for those students who have been strongly recommended to treatment by other offices of the University because of their drug/alcohol use. When a student is referred to this program, the student will be required to attend six consecutive sessions. The purpose of the session is to educate students about drug/alcohol abuse and to help the students become aware of negative consequences of their drug/alcohol use. The program uses different methods to accomplish this. Just one example: Students are required to keep a daily log of their drug/alcohol use. These logs will be used to confront consumption rates.

# D. INDIVIDUALIZED REENTRY PROGRAM

This program is for those students who are returning to the University following treatment (usually inpatient) for drug/alcohol abuse. When the student returns to campus, he/she will meet with a therapist to develop an individualized plan for his/her successful return to the University. This plan will be coordinated with the treatment facilities with which the student was involved.

#### **POLICY REVIEW**

The University will review the policy on illegal drugs and alcohol at least every two years to assess its effectiveness and ensure that disciplinary sanctions are consistently enforced. Changes in the policy will be implemented as needed following each review.

# Appendix B Employee Alcohol and other Drugs Policy

# Wesleyan University prohibits:

- Working while under the influence of alcohol or illegal drugs; and
- Unlawful possession, use, or distribution of illegal drugs on university property or while participating in any university-sponsored activity.

# NOTE:

• Any administrative staff member is required to notify the director of Human Resources within five days of any criminal drug statute conviction for a violation in the work place. Administrative staff members who violate or fail to comply with this policy will be subject to disciplinary action that may include: oral warning, written warning, suspension (with or without pay), and termination of employment. In some instances, the University may also require administrative staff members who violate the section of this policy referring to alcohol or drug use to participate in rehabilitation programs outside the University as a condition of continuing employment.

For help with problems of drug and alcohol abuse, please contact Human Resources for assistance with identifying professional services and resources