

WESLEYAN
UNIVERSITY



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

For the period of January 1, 2013 to December 31, 2014
As required by the Drug-Free Schools and Campuses Act

Compiled by:

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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's strengths and weaknesses
4. procedures for distributing AOD policy to students and employees
5. copies of the policies distributed to students and employees
6. recommendations for revising the AOD program

This report is Wesleyan University's documentation of its compliance with the Drug-Free Schools and Campuses Act. This report covers the period from January 1, 2013 to December 31, 2014. Information for this biennial review was collected by the Alcohol and other Drugs Committee. It will be on file in the Dean of Students Office and WesWell, the Office of Health Education and available to anyone interested by request.

Alcohol and Other Drugs Committee

The Alcohol and Other Drugs (AOD) Committee was convened in January 2006 and continues to meet for monthly committee meetings. The committee is currently comprised of staff and students. Page 16 of this report details the committees work.

The current charge of the committee, from Vice President for Student Affairs Michael Whaley, is as follows:

The Alcohol and Other Drug (AOD) Committee is charged with the following tasks:

- Review data (quantitative and qualitative) related to the use and misuse of alcohol and other drugs at Wesleyan,
- Identify and clearly articulate any concerns about AOD use and misuse at Wesleyan,
- Develop short-term and long-term policy and enforcement recommendations for addressing AOD issues at Wesleyan
- Develop strategic action plans for AOD outreach and education with timelines for reasonable implementation
- Suggest environmental strategies that will contribute to less “high risk” AOD use and a more positive campus climate as it relates to behaviors associated with AOD use.

Students, faculty and administrative staff should all be involved in this important work. The committee should strive for consensus on the variety of issues that will undoubtedly be discussed. When consensus cannot be reached, the alternatives should be presented in a year-end report detailing all relevant positions for review by the Vice President for Student Affairs.

Review of the Alcohol and Other Drug Prevention Program

This report will cover the six areas, as listed in the introduction, 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 seven categories: environmental strategies, educational strategies, policy and enforcement strategies, early intervention strategies, assessment, campus-community coalition, and prevention initiatives.

A. Environmental Strategies

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

Residential living options

• Well Being House and Substance Free Floor

Residential options at Wesleyan include a Well Being program house and a Substance Free Floor, located in the Butterfield C residence hall. Any upper-class student may apply to reside in the Well Being house; the Substance Free Floor is open to all students. Students requesting to live in either community are required to submit an application during the spring room selection process. First year students can indicate on their housing preference form an interest in living on the Substance Free Floor. Also, Substance Free Floor residents are required to sign a substance-free agreement. These residential options provide a substance-free living space for all students who choose to live in a substance-free area, and are viable housing options for students in recovery from alcohol or other drug addictions. Programming in Well Being House focuses on all aspects of “wellness.”

• Quiet Houses

The establishment of Quiet Houses on Home Avenue, Lawn Avenue, and Brainerd Avenue has discouraged large scale parties that are typically characterized by gross alcohol consumption and other associated high risk behaviors.

• Woodframe Capacities

Prior to fall 2014 students were permitted to have up to 49 people in their houses without having to register their parties. Maximum capacities for each unit have been recalculated based on fire code regulations, and capacities for most houses now range between 15 and 26, significantly reducing the opportunity for large scale parties.

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, Host Training, and the availability of trained student event staff to work student sponsored social events.

During the 2012-2013 academic years, 172 social events were registered with SALD. All of these events were registered as alcohol free. Of these events, approximately 90 were supported by the Student Program Fund offered by SALD and provided late night social opportunities that were registered as alcohol free.

During the 2013-2014 academic years, 202 social events were registered with SALD. All of these events were registered as alcohol free. Of these events, approximately 80 were supported by the Student Program Fund offered by SALD and provided late night social opportunities that were registered as alcohol free.

During Fall 2014, as of October 31st, 87 social events were registered with SALD. 14 of these events all were woodframe events were registered with alcohol the rest were alcohol free and approximately half of the events were supported by the Student Program Fund.

All of these events are in addition to the hundreds of lectures, art shows, panels, workshops and other events which are also offered to students as educational programs. .

Increased Late-Night Programming

The Office of Student Activities, through University Center Activities Board (UCAB), will continue to plan active events on Thursday nights, while Usdan and UCAB together has begun to offer a late night music series on Friday Night.

• HealthFull Words Fund

The HealthFull Words Fund is a mini-grant program offered by WesWell, the Office of Health Education, to support student-initiated educational programs on health issues, including alcohol and other drugs. Over \$2500 in funding was disbursed during the past four semesters in support of these events.

• Extended Hours in Campus Facilities

The Usdan University Center integrates all aspects of university life by serving as the principal gathering place for the campus community, as well as the central dining area for all students; this includes a late night dining program which runs from 9:30pm – 1am. The facility is open until 2am, seven days a week allowing optimal use for programming and events. Programs can occur throughout the building; the University Center Activities Board (detailed below) features entertainment weekly on Thursdays in the café as well as novelty musical and intellectual activities monthly; in addition student musicians are featured during late night dining every Friday from 9pm-12am. Clubs and other groups/departments sponsor many alcohol free events including stress free nights during mid-terms and finals, concerts, and gaming tournaments. Many rehearsals (music and theater) occur in the facility in the lower level multi-purpose rooms and the music rehearsal space, all available until the close of the building at 2am.

• University Center Activities Board (UCAB)

The start of the Fall 2007 semester marked the first year for the University Center Activities Board. Ten student UCAB members met with the Assistant Director of SALD and the Evening Manager on a weekly basis. The group was in charge of creating, developing, publicizing, organizing, and managing late night alcohol-free events and programs in the University Center. Some examples were poetry slams, open mic nights, viewing major political events or TV premiers of popular shows, showing Halloween Scary Movies, video game tournaments, and Spa Days. The Board produced several events in the first year of the opening of Usdan University Center.

As of October 2014, the board of 10 returning members and approximately 26 events planned for the Fall semester. The board generally hosts weekly events on Thursdays in September, October, November and December and in November, in collaboration with affinity month, they attempt to collaborate and host a Latin@ themed event with the Latino student group. Attendance at these late night UCAB events ranged from 8 to 250 students depending on the nature of the event. There is also the challenge of the ever-present competition from other events occurring around campus on any given night.

• **Senior Events**

As of the Spring of 2013, the focus of the events has been centered in developing class unity through a common event. Alcohol no longer is allowed to be a part of Senior Events. The goals for the events have continued to provide a safe and enjoyable atmosphere for the Senior Class to celebrate their growth and accomplishments during their time at Wesleyan and to build class unity as they prepare to depart from one another at the end of the academic year. The changes previously implemented have created a significant decrease in the amount of concerns and the number of students who have chosen to participate. As a result, the Senior events have been smaller more manageable events with an active participation focus for example a haunted house trail was a trip the Seniors took in the Fall of 2014.

B. Educational Strategies

The educational strategies profiled in this section include awareness and information training, educational outreach programs, peer education, student leader training, and academic courses.

Awareness and information training

• **New Student Orientation**

New student orientation (NSO) for incoming first-year and new transfer, exchange, and visiting students includes alcohol and drug education as part of its programming.

Orientation 2013 & 2014 –A required presentation during NSO is We Speak We Stand – Alcohol Interventions. WE Speak WE Stand is a series of monologues written and performed by Wesleyan students addressing alcohol use. This peer theatre piece is a powerful introduction to alcohol use on campus and aims to create a campus that actively advocates for the responsible use of alcohol. The goal of the program is to empower bystanders to intervene in high risk situations involving alcohol use. Specifically, participants learn how alcohol affects behavior and how to recognize an alcohol related medical emergency. This presentation draws on evidence-based health education methodology to deliver effective intervention strategies. Orientation Leaders, Residence Life staff, and the actors in the monologues conduct small group conversations with first year students immediately following the presentation in order to process

the content. All of the students conducting the conversations had been through a comprehensive alcohol and bystander intervention training prior to New Student Orientation. Alcohol and drug issues are also addressed with new students through a Public Safety presentation during New Student Orientation.

- **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 take an on-line training course and pass an on-line exam 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. In addition to Host Training, in the summer of 2014, in collaboration with WesWell, the Office of Student Activities added a Bystander Intervention component to host training.

- **Community Standards Workshops**

Host liability is explained to students considering living in the wood frame houses during the spring community standards workshops. Community advisors also educate their residents regarding host responsibilities in the beginning of the academic year through their community newsletter.

Educational Outreach

- **Residentially-based programs**

Residential Life utilizes a comprehensive programming model that reflects the Department's intended learning outcomes for residential living. One of the five outcomes includes the ability to "recognize mental health and/or substance abuse concerns and access resources," and "choose behaviors and environments that promote health and reduce risk with particular attention to alcohol and other drugs." In assessing each community's needs, the staff includes programming on health-related topics, including alcohol and other drug issues.

In addition to programs, resident advisors and house managers are expected to connect one-on-one with each of their residents on a monthly basis. Conversation topics include asking about each resident's perceptions of alcohol use on campus, and promoting healthy choices.

There are 99 student staff members, each of whom is required to sponsor six programs a semester. 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.

- **Athletics**

The topic of excessive drinking and the inherent dangers are always at the forefront of topics that the athletic department is communicating to the student-athletes. The student-athlete handbook provides resource materials that identify web sites focusing on alcohol abuse prevention. Also, the handbook clearly articulates the athletic department's alcohol policy and the consequences of violations. In meetings with coaches and varsity athletes the athletic director reinforces the need for athletes to drink responsibly and the reasons why responsible drinking is in harmony with outstanding physical performance. Further, the department strictly enforces a no hazing policy

and points out to students that most hazing events are accompanied by excessive drinking. In years 2013-2014 the athletics department continued to support the step-up program with our athletes and coaches. New this year (2014-2015), the department initiated a program “The Safe and Sober Campus Initiative.” This program is an educational program designed to address the issues of binge drinking and bad decision making on college campuses. The program objectives were to share information and stimulate new and critical thinking about binge drinking on campus, its correlates and its consequences. As well as, to inspire and guide discussions of related topics among the Wesleyan University Community. The program was divided into two sessions. Session #1 was designed for members of the campus greek organizations. Session #2 was designed for all of the athletes that are not members of a greek organization.

Coaches and athletic administrators regularly spend time discussing, with small student groups, why healthy lifestyle choices lead to improved performance and are important if athletes are to achieve their goals. Wesleyan’s strength and conditioning coach sends periodic newsletters and resource guides to the coaches and athletes about healthy nutrition. He also holds twice a week fitness sessions open to all Wesleyan students that provide the students with strenuous workout programs and peer recognition that healthy lifestyles are a basis to outstanding athletic performance.

• **Online assessment tools**

Several online assessment tools are available to Wesleyan students; they address both alcohol and marijuana. These assessments are tools designed to provide individual feedback on alcohol or marijuana consumption and patterns. They are available to Wesleyan University students by the Davison Health Center and WesWell, the Office of Health Education. The information is given to help students make informed choices about their decision-making. It is available to all students, but is required for students who have a medical transport for alcohol or other drugs, as part of a Brief Motivational Intervention session as a sanction of the Student Judicial Board (SJB) and as a sanction that does not involve a medical emergency. These programs include the AlcoholEDU sanction course, Alcohol Innerview and Marijuana Electronic Check Up To Go. Additionally, AlcoholEdu from Outside the Classroom is required for all incoming first year students. Our AlcoholEDU participation rates for the Fall 2013 and 2014 academic years were both over 80% compliance. Those students who did not complete the program were given a 30 day extension and asked to take the AlcoholEDU for sanctions program.

Peer education

• **Peer Health Advocates**

A group of students are hired each year by the Health Education Office to serve as Peer Health Advocates; four paid WesWell Interns oversee the activities of about twenty-five volunteers. These students receive training each year on a variety of health issues, including alcohol and other drugs. Topics covered include data on student AOD consumption rates, comprehensive prevention strategies and theories, addressing severe intoxication situations, and bystander intervention.

These students address a variety of health issues in their health promotion efforts, including alcohol and other drug abuse, through awareness events and workshops as well as passive methods and staffing the health education office throughout the year. They have successfully

built relationships with numerous student organizations to extend the reach of the health education office.

The Peer Health Advocates and Director of the Office of Health Education lead evidence informed workshops, trainings, and public health outreach campaigns on Alcohol and Other Drugs for the campus community. AOD programming numbers during the period for which this report covers is as follows:

- Spring 2013 semester – 1 workshop with 7 participants, 3 trainings with 30 participants
- Fall 2013 semester – 10 workshops with 906 participants, 3 trainings with 145 participants
- Spring 2014 semester – 10 workshops with 274 participants, 2 trainings with 30 participants
- Fall 2014 semester (as of 11/11/14) – 6 workshops with 820 participants, 5 trainings with 146 participants

Bystander Intervention Program

In February 2012, a comprehensive Bystander Intervention campaign, We Speak We Stand (WSWS), was launched at Wesleyan. Developed by the Office of Health Education and Counseling and Psychological Services the goal of the training was to empower bystanders to intervene in high risk situations involving alcohol use. More broadly this effort was undertaken to disrupt the culture of assumed consent by increasing helping behavior, changing attitudes and perceptions, and increasing knowledge on when and how to be an active bystander in regards to alcohol use. Participants were equipped with the tools needed to intervene in situations involving alcohol and empowered to use those tools. Specifically, participants learned how alcohol affects behavior and how to recognize an alcohol related medical emergency. This workshop provides participants with the skills to move from inaction to action and intervene safely and effectively. During the period for which this report covers we have held 5 comprehensive 3 hour trainings. A sample of our evaluation results can be found in the table below. The WSWS program includes an educational awareness campaign that is conducted each semester. The awareness campaign includes posters, a web presence, and promotional items all in an effort to engage people who do not come to trainings and to reinforce skills for those who already attended trainings.

Bystander Attitudes – Alcohol (% percentage) All Agree and Strongly Agree Responses	Training Evaluation Spring '14 N=20	Pre-Test Fall '14 N=57	Post-Test Fall '14 N= 70
I feel knowledgeable about severe intoxication (also known as alcohol poisoning)	92.86	47.37	91.43
I can identify high risk situations involving alcohol.	92.86	82.46	88.57
I can identify high risk behaviors involving alcohol.	100.00	82.46	97.14
I can identify the facts from the myths about how to help a friend sober up.	81.54	75.00	87.15
I can identify the signs of severe intoxication (also known as	92.85	61.40	92.86

alcohol poisoning).			
I feel confident in my ability to respond effectively in an alcohol-related emergency.	95.83	45.61	94.28
I am willing to intervene in an alcohol-related emergency.	100.00	87.72	100.00

Student leader training

• Event Staff

A trained student event staff of approximately 30 students is available to assist social event hosts with maintaining order at their events and intervening should problems arise. Paid by the Office of Student Activities & Leadership Development, event staff members are available at no charge to event hosts. Event staff members are trained with intervention skills and have the opportunity to role-play potential situations they might encounter.

• Residence Life Staff training

During the comprehensive student staff training each August, staff are trained regarding alcohol and other drug use by the director of Health Education using the Bystander Intervention model. The student staff is also provided with emergency procedures to follow in the event of an alcohol overdose. This training is repeated each January for mid-year hires. Furthermore all student staff is required to be host trained each year through the Office of Student Activities and Leadership Development.

• Peer to Peer Brief Motivational Intervention Program

In the Spring '14 and Fall '14 semesters, upper-class students were trained to facilitate motivational intervention conversations with first year students to decrease high risk alcohol use. During these conversations, the trained peer hopes to raise the student's awareness of the problems caused, consequences, and potential risks of high-risk drinking. The goal is to activate the student's intrinsic motivation to avoid problems by changing their behavior. This approach is evidence-based and has been shown to lower high-risk drinking behavior. Subsequent to the session, Wesleyan students report that they are less likely to consume alcohol in high-risk ways. We intend to continue to expand the pilot project to engage more students in this intervention.

• Greek Organizations

In the fall of 2014, President Roth and Trustee Chair Boger, announced that all of our housed all-male fraternities that wanted to continue to be part of program housing would need to co-educate over the next three years. The trustees and administration recognize that residential fraternities have contributed greatly to Wesleyan over a long period of time, but we also believe they must change to continue to benefit their members and the larger campus community. With equity and inclusion in mind, we have decided that residential fraternities must become fully co-educational over the next three years. If the organizations are to continue to be recognized as offering housing and social spaces for Wesleyan students, women as well as men must be full members and well-represented in the body and leadership of the organization.

Additionally, all Greek organizations are being required to participate in a number of safety measures which includes improved membership tracking, restrictions from in-taking new members during their first year and moving towards participation in hazing, alcohol and bystander education and training over the coming years.

Academic Courses

A number of academic courses address alcohol and/or other drugs as part of the curriculum. Due to the challenges of collecting comprehensive data during the current Biennial Review period, a small listing of these courses that could be gathered from the electronic course catalogue (WesMaps) is included in this Biennial Review. (*See Appendix A: Academic Courses*)

Policy & Accountability Strategies

The Office of Public Safety along with staff from the Office of Residential Life help to ensure that students are in compliance with the Code of Non-Academic Conduct. A collaboration between WesWell (Wesleyan's Health Education Office, Residential Life, and joint student-administrative committees, which review current policy and recommend evidence-based changes, help to promote AOD policy along with the Office of Public Safety. (*See Appendix B: Student Code of Non- Academic Conduct*)

The Office of Residential Life has solidified the AOD enforcement roles for student and professional staff. All student staff members are trained to address and document AOD policy violations and forward reports to professional staff members for appropriate judicial follow up. The judicial points system implemented in the Fall 2012 semester has been fully integrated into the conduct process. The points system has clarified the judicial standing of students who have been found responsible for violations of the Code of Non-Academic Conduct and more clearly demonstrated the progressive focus of the disciplinary process. The Office of Residential Life has maintained increased staffing in first-year residential areas to provide more of a presence in the halls to try to curb high risk drinking behavior.

The Student Judicial Board annually releases data and summary reports; the reports for the 2012 - 2013 and 2013 - 2014 academic years are available at <http://www.wesleyan.edu/studentaffairs/judicialboard/casesummaries/index.html> . The reports can also be found in Appendix D. During this reporting period, there has been an increase in the number of cases and charges both of which can be attributed to an increased staff presence in residential areas. The Office of Public Safety continues to document the majority of alcohol and drug offenses, and also publishes crime statistics on its website at www.wesleyan.edu/publicsafety/.

The Director of Athletics reviews the Athletics department's alcohol and hazing policies with all athletes at the annual fall, winter, and spring athlete meetings.

All student-athletes receive a Student – Athlete Handbook that includes these policies as well as the list of NCAA Banned Substances. At the annual meeting of teams, it is pointed out that the use of performance enhancing drugs can lead to loss of eligibility and what precautions athletes need to take so that they do not inadvertently consume drugs that are not permitted by NCAA rules.

• Judicial violation data

The Judicial violation data is divided into two parts due to the implementation of the Maxient database which replaced the judicial databased housed in PeopleSoft in the Fall 2014 semester.

The first set of data points are from January 1, 2013 through August 1, 2014. The second set of data points, derived from Maxient cover August 1, 2014 to the December 31, 2014. This data will be updated as the report will be published before the end of the date range.

January 1, 2013- August 1, 2014 data derived from PeopleSoft:

There were 354 incidents referred to the Student Judicial Board (SJB) in which alcohol was a factor. In the same period of time, 97 incidents in which other drugs were a factor were referred to the SJB.

There were 757 individual alleged violations of the University’s alcohol policy and 202 alleged violations of the drug policy.

Of those charges filed, 378 students were found responsible for under-age possession of use of alcohol and 126 were found responsible for violating the University’s drug policy. 25 students were found responsible for distributing alcohol to minors. (*See Appendix D: Student Code of Non- Academic Conduct*)

August 1, 2014-December 31, 2014 data derived from Maxient:

• **AOD Policy changes**

There have not been any notable changes to the university’s AOD policies during this reporting period. The most significant change has been the implementation of the point-system during the Fall 2012 semester. The following grid contains the point ranges the judicial board will consider for particular AOD violations (#). If a case arises where a student or group is charged with multiple violations, the board will have the discretion to consider the greatest range indicated by all of the alleged violations (for example, if there are two violations with ranges of 2-6 and 1-3 respectively, the board will consider the range of points as 1-9). The total range of points goes from 1 to 10. If a student accumulates 10 or more points, the board will likely recommend a separation from the university for a specified period of time.

Regulation	Points
Regulation 13a (Drugs):	1-5**
Regulation 13b (Underage Possession or Use of Alcohol):	1-3
Regulation 13c (Distribution of Alcohol to minors):	1-4
Regulation 13d (Possession of False Identification):	1-2
Regulation 13e (Open Container):	1-2
Regulation 13f (Sale or Dispensing without a Permit):	1-3

Regulation 13g (Operating Under the Influence):

5-10

**Distribution/sale of drugs on or off campus will result in 4-10 points.

#The point ranges outlined above will be followed except in mitigating and aggravating circumstances where the impact of student behavior indicates a judicial response outside of the published range.

In addition to any other sanctions:

1-4 total accumulated points will result in a student receiving a “disciplinary warning”.

5-10 total accumulated points at any time will result in a student being on “disciplinary probation”.

10 or more accumulated points will result in a separation of the student from the University through either suspension or dismissal.

A student who has been found responsible for violating the Code of Non-Academic Conduct and assigned points, as a result, may decrease that number after 6 months without being found responsible for additional violations. A student with accumulated points will lose one point from their accumulated total .(A student with 6 points who is placed on probation will return to good standing after one year without any additional infractions.)

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.

• Individual Brief Motivational Intervention Sessions

The Director of Health Education holds individual Brief Motivational Intervention (BMI) sessions with students. Students can attend voluntarily, be referred by a campus partner, or be required to attend based on a judicial violation. BMI is a collaborative approach to working with people experiencing negative consequences from substance use and other challenging behaviors. BMI is a style of counseling which facilitates readiness for change by helping the person develop a schema about the positive and negative effects of their behavior. BMI is one of the proven, evidence-based practices in reducing high-risk drinking.

During the 2013-2014 academic year, 55 individual sessions were held. During the Fall 2014 semester, as of 11/11/14, 30 individual sessions have been held.

• Residence Hall Staff

Residential life student staff members are often the first responders to problems affecting students living in residence halls, apartments, and program houses. They are appropriately trained and expected to report negative or inappropriate conduct and behavior through Communication Reports, reviewed by members of the Office of Residential Life’s central staff. These reports are acted upon if the situation warrants attention by the central staff or consultation with others. All policy violations are forwarded to the Dean of Student’s office for adjudication.

- **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.

- **Therapy and support groups**

Counseling and Psychological Services (CAPS) offers support groups for students each semester, as demand suggests a need for such groups. The topics vary each semester according to student demand. CAPS has not held an alcohol use-related support group in recent years, but the office is prepared to initiate one should students request it.

- **Screening for High-Risk drinking**

In an effort to identify students who drink in high-risk ways and provide them with appropriate education or an intervention, Wesleyan screens students for high risk alcohol use in the Health Center, WesWell, and Counseling and Psychological Services. Screening is currently being conducted through the following methodologies:

Health Services – Using AUDIT questions, Providers at the Davison Health Center screen patients for high risk drinking and possible alcohol dependence. They then provide the patient with an appropriate referral based on the outcome of the conversation. This screening process began in September 2011 and is ongoing.

WesWell - Using the AUDIT, the Director screened students for high risk drinking and possible alcohol dependence during Brief Motivational Intervention sessions. The Director then used this information to help guide the session and make appropriate referrals if necessary.

Counseling and Psychological Services (CAPS) - Using the AUDIT, therapists at CAPS screened all first time clients for high risk drinking and possible alcohol dependence. The therapists then used this information to help guide the sessions they had with the clients and made an appropriate referral if necessary. This screening process began in September 2011 and concluded at the close of the 2013-2014 academic year. Beginning in fall of the 2014-2015 academic year, CAPS began using a screening measure that captures both self-reported drug and alcohol use. This self-report tool is now given to all new clients, and the results are incorporated into individual psychotherapy as appropriate.

E. Assessment

- **National College Health Assessment Survey (NCHA)**

Wesleyan administered the National College Health Assessment (NCHA) Survey developed by the American College Health Association (ACHA) during the Spring 2012 semester. The survey was administered to a representative sample by the Office of Institutional Research, and supported by Student Affairs. Results from the AOD section of the survey are currently being utilized to inform the work of WesWell and the AOD committee.

- **New England Small College Athletic Conference (NESCAC) AOD Survey**

The NESAC AOD survey quantifies and documents students use, perceptions, attitudes and opinions of alcohol and other drugs. Wesleyan will administer this survey in the Spring of 2015.

F. Prevention Initiatives

- **Statewide Healthy Campus Initiative**

Wesleyan University continued participation in 2013-2014 with the Connecticut Healthy Campus Initiative (CHCI), developed under the guidance of Mental Health and Addiction Services and Wheeler Clinic. Representatives from Wesleyan University continue to attend monthly coalition meetings for campus student affairs members. Meetings alternate monthly between business meetings and training opportunities. Wesleyan staff attended professional development sessions on student recovery supports, Brief Motivational Intervention strategies, assessing suicidal thoughts and behaviors in substance abuse treatment, CT liquor control laws, and addressing cultural competence for collegiate professionals.

- **Recovery@**

To enhance relapse prevention services by supporting students in recovery from AOD and thus preventing them from returning to high-risk drinking, the Office of Health Education launched the Recovery@ program in January 2012. Recovery@ is a network of students and administrators who gather for mutual support as they navigate the particular challenges of recovery at Wesleyan University. The only requirement for membership is that you be a student, faculty or staff member of the University in recovery from alcohol and/or drugs. Recovery@ is not formal therapy of any kind. The primary purpose of the group is to stay clean and sober, help other members of the University do the same, and support one another in making recovery at Wesleyan enjoyable. The Recovery@ group comes together once a month during the academic year for fellowship and discussion. They support each other the rest of the month by texts, emails, social engagements and AA and NA meetings in the Middletown community. Potential members are made aware of the existence of the program through postcards and blog posts which are regularly distributed and posted. This program is ongoing.

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

The current charge of the committee, from Vice President for Student Affairs Michael Whaley is referenced under the description of the AOD committee on page 4. The foremost goal of the AOD Committee is to reduce high-risk alcohol consumption and other drugs and the resulting negative consequences that may impair academic success. Detailed below are many of the actions recommended by or taken by the committee during the period of this review.

- Review bystander intervention program
- Review judicial health education tracking
- Review screening in Davison Health Center and CAPS
- Review late night programming options
- Discuss Recovery@
- Discuss parent letter options
- Review AlcoholEDU
- Review of incident reports involving AOD
- Data Collection: NCHA-ACHA, NESAC Alcohol Survey

- Review peer to peer BMI project
- Exploration of deferential and more comprehensive sanctioning based on a clear definition of high-risk alcohol use
- Create ongoing communication with student body about concerns around alcohol
- Review tracking of higher-risk groups through judicial software
- Discuss research on beliefs manifesting behavior with AOD use
- Review social event registration policy
- Discuss increased presence & community building in Res Halls

Section 3: Summaries of AOD program strengths and weaknesses

Strengths

• Policy is current

Due to ongoing revisions to the Student Code of Non-Academic Conduct, the policy as it pertains to Alcohol and Other Drugs is current. This assists greatly in creating greater understanding of student responsibilities and expectations for behavior.

• Greater coordination of judicial efforts

During this reporting period, we have improved AOD enforcement and documentation procedures as well as better-integrated judicial follow up for violations of the University's AOD policies. Residential Life has further clarified expectations for student staff (resident advisors, house managers, etc.) in terms of confronting and reporting violations. Adjudication processes have also been changed such that violations are handled more expeditiously by both Residential Life staff and by the Student Judicial Board. The implementation of a central judicial database has improved access to prior judicial information, timelines of notification, and improved ability to review and interpret judicial data in comparison with previous reporting periods. The judicial database also allows better coordination and monitoring of adjudication times for cases resolved outside of the hearing process. Judicial sanctions recommended by the SJB and the Area Coordinators in past years were out of sync. Both the SJB and the Area Coordinators utilize evidence-informed educational tools in sanctioning. A more standardized, baseline sanction for AOD violations has been developed.

• Many social and educational options exist outside the classroom

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 and co-curricular experiences while at Wesleyan. These also assist in developing a stronger campus community and understanding of a variety of cultural and social issues.

• 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 alongside faculty and staff on campus. This includes committees that address Alcohol and Other Drug issues, such as the Student Health Advisory Committee and the Student Life Committee, and the AOD committee.

Weaknesses

• Little involvement in prevention efforts outside of the Office of Student Affairs

There is a significant lack of involvement in prevention efforts by departments and offices outside of Student Affairs, excepting Athletics. Involving all departments and divisions across the campus, particularly Academic Affairs, is necessary in order to affect comprehensive and lasting environmental change.

• AOD issues could be infused into the curriculum

Only a small handful of academic courses address alcohol or drug issues in whole or in part, currently. Faculty members could incorporate Alcohol and Other Drug issues within their area of expertise and incorporate their findings into the curriculum. This will assist greatly in promoting a multi-dimensional understanding of AOD issues by the student body.

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.

This handbook, 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 Student Affairs website. The Human Resources office maintains an extensive site on policies, procedures, benefits, and resources for employees, including the AOD policy. New employees are referred to this web site.

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

See Appendices C and D for copies of AOD policies distributed to students and employees.

Section 6: Recommendations for revising AOD programs

Effectively addressing Alcohol and Other Drug issues on a college campus is a complex and ongoing task, which requires investment from all corners of the university in order to create lasting cultural change. These efforts must be planned for strategically, based on current data and science-based methodologies, and implemented with strong support from the highest levels of the university structure. This will help ensure success in creating a campus environment which supports responsible decision making and low-risk behavior around Alcohol and Other Drugs (AOD).

In order to effect change in the culture, the university's AOD prevention efforts must go far beyond encouraging students to evaluate their personal risk for judicial violations or harm to their health. All members of the campus community must be asked to critically examine and improve their current prevention and intervention efforts, if any, in addressing Alcohol and Other Drug use within their area of responsibility or expertise.

Due to the difficulty of creating such a cultural shift, it should be understood that Alcohol and Other Drug consumption rates are not just a function of the campus culture but of the experience and environment outside of Wesleyan and as such are well-entrenched. There are, however, many indicators like judicial violations and medical transports, which we will continue to monitor to determine where and how we can improve our prevention and enforcement efforts.

WesWell the Office of Health Education, tasked with completing the federally-required Biennial Review of Wesleyan's AOD Prevention program, provides the following recommendations on prevention and intervention strategies. These recommendations provide the University with a foundation on which to build an action plan for our AOD prevention efforts. This is not intended to be a definitive list; rather it should be viewed as an opportunity to review our current efforts and impetus for continuing this challenging work.

Recommendations for Prevention & Intervention Strategies

The following recommendations are arranged into categories which reflect the current research, assessment and goals of Wesleyan's AOD Committee. They include suggestions from various departments and bodies at the University who provide input to the AOD Committee's efforts on an ongoing basis.

Education and Environment

- All students found in violation of the alcohol policy will be required to complete an educational intervention appropriate to the circumstances of the documented violation as part of their assigned sanctions.
- Continue to screen students for high-risk drinking and provide education and referrals as part of comprehensive physical and mental health care at the Davison Health Center.
- Continue Bystander Intervention training and education in an effort to disrupt the culture of assumed consent of high-risk drinking and its associated behaviors.
- In an effort to prevent relapse, support students in recovery from AOD through the Recovery@ program.
- Continue to improve and support the availability of substance-free social options for students, particularly in the Usdan University Center.
- Determine where mixed messages on alcohol consumption and expectations exist and how they impact student behavior and the campus environment.
- Reconsider campus events where alcohol is present and determine if change is needed, including large scale events, such as Spring Fling and small events such as holiday parties, departmental receptions, and dinners. Explore positive promotion rather than negative images around these events.
- Ensure students who do not drink/use drugs (or who consume at low risk levels) feel supported, as they may be a marginalized community on a campus with high rates of use and abuse.

- Promote involvement by faculty and staff (outside the Student Affairs division) in student life activities such as residentially-based programming, student-initiated performances and events, and Public Safety ride-alongs.
- Continue to explore and implement evidence-based methodologies for sending pro-health messages to students through campus media and other avenues.
- Continue to offer smoking cessation support for students, faculty, and staff through one on one consultation and Freedom From Smoking® Classes.
- Continue to review judicial information regarding recommended sanctions for AOD policy violations and recommend potential changes to decrease any identified recidivism rates and improve student learning through the disciplinary process.
- Utilize the central judicial database to improve tracking of judicial information with regard to AOD violations longitudinally to inform potential policy recommendations.
- Examine methods and frequency of data collection on student AOD consumption, perceptions, attitudes, and opinions to ensure we are collecting the data needed to direct AOD prevention efforts effectively.
 - NESAC AOD Survey
 - The National College Health Assessment
- On an ongoing basis, assess the effectiveness of documented cases of treatment referrals and disciplinary sanctions imposed on students and employees.
- Conduct benchmarking of peer institutions that have been successful in the area of AOD (what successes have they seen, how has it been measured, what aided their success, etc.).
- Look to correlate consumption patterns w/ GPA, class year, and varying demographics and identity groups.

Appendix A: Academic Courses

Accessed Via Wesmaps, November, 2014

Afam217: I Strike the Empire Back: Black Youth Culture in the Neoliberal Age

Using hip hop as a lens to explore the development of diasporic Black youth culture in the neoliberal age, this course considers the African American experience during the close of the 20th century and dawning of the 21st. Our investigation will be concerned with at least two things that we will examine in parallel throughout the semester. On one hand, we will dig deeply into the origins and evolution of hip hop artistry--including visual art, dance, music, lyrics, and performance--and the impact of commercial forces on those forms. On the other hand, we will pay serious attention to the ascendance of neoliberal political ideology in the United States to understand the impact of those global economic and political realignments on the generation of Black people who gave birth to or, later, inherited hip hop.

Of central importance will be the Nixon administration's adoption of a policy of "benign neglect" toward Black communities living in the nation's crumbling cities; the replacement of the War on Poverty with the War on Drugs; the enactment of "free trade" policies that accelerated the deindustrialization of the American economy and deepened the structural unemployment of Black people in the United States; the militarization of municipal police forces; and the explosive growth of the carceral state.

Chem321: Biomedical Chemistry

This course is designed to explore the molecular basis of disease and treatment options. Topics will reflect the importance of chemistry and biochemistry in the advancement of medicine today and will include treatment of metabolic disorders, rational drug design, and mode of drug action. A large portion of the course will be dedicated to learning computer programs used in computational drug design as part of a final drug design project.

Engl237: On The Border: Chicana/o, American, and Mexican Literatures and Cinemas

The U.S.-Mexico border as militarized zone. The border as desert wasteland. As ground for incarceration complexes for the illegal and unassimilable. As burial ground. The U.S. national media frequently flashes these images today in its representations of the ongoing war on drug cartels. These images form part of a chain that tightens around the lived experience of different peoples of the U.S. southwest and northern Mexico, one that is linked to a dominant desire to erase the historical nuances of transitivity, movement, and exchange in the region. This course will consider some of the literary and cinematic representations of the border and of the way they respond to the ideology and history of citizenship, exclusion, and oppression.

Hist393: Materia Medica: Drugs and Medicines in America

This course investigates the identification, preparation, and application of drugs and medicines in the United States, emphasizing the period before the 20th-century institutionalization of corporate research and development. Topics include early modern European prospecting for

medicinal plants, the development of an international drug trade, and the formation of national pharmaceutical markets in the U.S. in the 19th century. Participants will explore the production, circulation, and restriction of medical knowledge through local practice, public and private institutions, trade and commerce, and regulation. In addition to knowledge of the social history of drugs and medicines in the U.S., students are expected to develop competencies in historical research using primary and secondary sources. The final weeks of the course are devoted to applying historical knowledge to contemporary debates in global public health, including international pharmaceutical research, drug development, and epidemic disease.

MB&B119: Biology and Chemistry in the Modern World: A Survey of Drugs and Disease

This course will cover a wide range of topics of current interest that are at the intersection of biology and chemistry. In particular, the molecular basis of issues related to drugs and disease will form a focus of the course. Topics to be discussed will include psychoactive and performance-enhancing drugs, mad cow, cancer, viral and bacterial diseases, and the chemistry of foods.

NS&B227: Motivation and Reward

This course will focus on motivation and reward, providing students with a background and understanding of the various theories and approaches to studying the topic of motivation, including an introduction to some of the history and the current advances in the field. It will do so by covering different forms of reward, including food, sex, drugs, and aggression, and examine cases of disordered motivation such as addiction.

Psyc399: Lab in Gambling, Drugs, and Junk-Food

This intensive laboratory course provides in-depth training on the experimental methods of behavioral neuroscience of motivation and reward using rodent research techniques. We will review contemporary studies with a particular focus on gambling, diet-induced obesity and drug addiction. Some of the models examined in more detail will focus on the role of reward uncertainty and the concept of loss in gambling, the individual differences in the attraction to reward cues in subjects prone to obesity versus those that are resistant (with a particular emphasis on prenatal and developmental exposure to high-fat diets), and finally the individual differences in the resistance to adverse consequences in models of intense desire and addiction (such as the conflict-based model and Pavlovian autoshaping). Students will learn how to handle and inject rats in a behavioral neuroscience research setting, and how to measure reward and motivation using operant (skinner) boxes to carry out tasks such as progressive ratio, Pavlovian conditioned approach, conditioned reinforcement, and loco-motor sensitization. They will be exposed and become familiar with several different forms of these research techniques including the hardware and software necessary for this type of research, and will be encouraged to adapt existing behavioral paradigms to answer new questions.

SISP123: The Magic Bullet: Drugs in Modern America

Pharmaceuticals are a powerful presence in our daily lives. Turn on the TV for 15 minutes and you are likely to encounter numerous drug ads; scan the news headlines and you are sure to see

reports on drug cost debates, latest miracle cures, or jarring tales of terrifying side effects. We look to drugs for everything from curing minor aches and pains to enhancing our personality. Are we hooked on the quick fix? What comes first--the drug or the condition that it is intended to treat? To begin to answer these questions, one first needs to understand something about the dynamic processes through which drugs are developed, manufactured, and marketed. These are the kinds of issues that will come up in the course, as exemplary of the questions that scholars in the social studies of medicine bring to their inquiries.

Soc231: Sociology of Crime and Punishment

This course provides an introduction to the sociological study of crime and punishment. Crime is rarely far from news headlines or the public imagination. Every day, reports of drug dealing, muggings, and homicide fuel anxiety and debate about the problems of law and order. Here we consider such debates in the context of both a vision for a just society and the everyday workings of the criminal justice system. The course is divided into three sections. We begin with an introduction to the historical meanings and measures of crime in society. We then situate the modern United States within this history. In part two, we become familiar with the major ways that social scientists think about criminality and crime prevention. In part three, we turn to considerations of punishment. We ask how punishment is conceptualized in the United States and other nations, whether the American system of mass imprisonment is effective, and how we might envision improvements and alternatives.

Appendix B: Student Code of Non-Academic Conduct on Illegal Drugs and Alcohol
Available at:

<http://www.wesleyan.edu/studentaffairs/studenthandbook/standardsregulations/code-of-non-academic2.html>

ILLEGAL DRUGS AND ALCOHOL

Alcohol and Other Drugs

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.

FINANCIAL AID ELIGIBILITY: A student who has been convicted of any offense under Federal or State law involving the possession or sale of a controlled substance will not be eligible to receive certain grants, loans or work assistance from the time of conviction through a period of ineligibility. The Office of the Dean of Students will monitor and report any known conviction to the Office of Financial Aid.

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 by letter when a student is placed on disciplinary probation as a result of an alcohol/drug policy violation (generally this occurs as a 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.

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 21–277.)

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 21–277.)

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, 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 fifteen hundred 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. Any person who possesses or has under his control any quantity of a hallucinogenic substance other than marijuana or four ounces or more of a cannabis-type substance for a first offense, may be imprisoned not more than five years or be fined not more than two thousand dollars or be both fined and imprisoned, and for a subsequent offense may be imprisoned not more than ten years or be fined not more than five thousand dollars or be both fined and imprisoned.

c. Any person who possesses or has under his control any quantity of any controlled substance other than a narcotic substance, or a hallucinogenic substance other than marijuana or who possesses or has under his control one-half ounce or more but less than four ounces of a cannabis-type substance, for a first offense, may be fined not more than one thousand dollars or be imprisoned not more than one year, or be both fined and imprisoned; and for a subsequent

offense, may be fined not more than three thousand dollars or be imprisoned not more than five years, or be both fined and imprisoned.

d. 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 (Appendix C, page 46).

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
- 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 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 B, page 44) 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 | 860-685-2466, 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 director of health education hires a team of student Peer Health Advocates who create peer-led outreach activities on a range of health issues, including alcohol and other drugs. They design and disseminate a variety of activities and materials, assist the director in planning prevention activities, and help staff the WesWELL Office.
2. The health education staff offers informative and interactive programs during New Student Orientation, residentially-based workshops throughout the year, and sponsors awareness events and speakers, often in collaboration with other departments or student organizations.
3. The health education staff supports students referred for educational follow-up as a result of alcohol and other drug policy violations. This may be a one-on-one meeting with the director,

participation in a web-based AlcoholEdu[®] for Sanctions program, or completion of university service hours.

4. The director of health education conducts Residence Life student staff training and in-services, assists with event staff training, and supports the training needs of other departments and groups on alcohol and other drug issues as requested.
5. WesWELL coordinates the Healthfull Words Fund, which provides funding for student organizations for educational events on health issues, including alcohol and other drugs.
6. The office maintains an in-house resource library that includes pamphlets, books, and journals. The resource library can be accessed at wesleyan.edu/weswell/services/weswellresourceroom.html.
7. The director of health education serves as a resource and an advisor to students who opt to live in alcohol- and drug-free housing and students in recovery from alcohol and other drugs.
8. The office 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 Affairs and Deans' 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 Counseling and Psychological Services 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 Counseling and Psychological Services 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 Counseling Center for an evaluation/assessment or ongoing therapy.

B. ONGOING SUPPORT FOR STUDENTS IN RECOVERY

Professionals are available in the Office of Counseling and Psychological Services for ongoing counseling and support. Twelve-step support meetings are available within walking distance of campus. Visit ct-aa.org or ctna.org for the most up to date meeting schedule. Students in

recovery seeking a support network of other students in recovery can e-mail recovery@wesleyan.edu to be introduced to the recovery community at Wesleyan. 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 | 860-685-2470, 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. Educating and advising students on the use of alcohol and other drugs will occur 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 necessary, students are referred to the Office of Counseling and Psychological Services.

Office of Counseling and Psychological Services | 860-685-2910, wesleyan.edu/caps

The Office of Counseling and Psychological Services (CAPS) is located in the Davison Health Center. CAPS sees students who self-refer for alcohol and/or substance issues, as well as students who are referred by other offices and members of the university community. CAPS also assists students who are returning to campus following intensive treatment for alcohol or drug abuse or dependence. CAPS provides consultation and referral, voluntary psychotherapy, and support for returning students.

A. CONSULTATION AND REFERRAL

A student with questions about his or her substance or alcohol use can schedule an appointment with a CAPS therapist to discuss these concerns in detail. At the end of the session, the therapist will make a recommendation for treatment, which could range from individual psychotherapy at CAPS to outpatient treatment at a specialized program to inpatient rehabilitation.

B. VOLUNTARY PSYCHOTHERAPY

If appropriate, a student may see a CAPS therapist for individual psychotherapy to address concerns regarding alcohol and/or substance use. Alternatively, a student may benefit from seeing a therapist in the community who specializes in this area. CAPS can assist students with these referrals. Finally, a student's use pattern may be significant enough to warrant intensive outpatient treatment, such as that provided by Rushford Treatment Center in Middletown. CAPS can facilitate this referral as well.

C. SUPPORT FOR RETURNING STUDENTS

At times, students determine they need time off from Wesleyan in order to fully address their alcohol and/or substance issues. As they prepare to return to the campus community following completion of their treatment, CAPS will meet with students to discuss potential challenges and to develop a plan for a successful transition back to the life of a full-time student.

POLICY REVIEW

The University will review the Illegal Drugs and Alcohol Policy 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 C: Employee Alcohol and other Drugs Policy

Available at: <http://www.wesleyan.edu/hr/handbook/index.html>

Accessed November 25, 2014.

ALCOHOL AND ILLEGAL DRUGS POLICY

ALCOHOL AND ILLEGAL DRUGS

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 employee is required to notify the Director of Human Resources within five days of any criminal drug conviction for a violation in the work place or during work hours.

Violation of this prohibition will result in discipline up to and including termination. In some limited instances, and in addition to other available measures, the University may require employees who violate this section 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 the Wesleyan University Employee Assistance Provider (EAP). For more information, please refer to <http://www.wesleyan.edu/hr/forms/eap.pdf>

Appendix D: Judicial Reports Summarizing Violation and Sanction Data

Executive Summary of 2012-2014 Judicial Report

During the documented academic years (2012-2013 and 2013-2014), the Student Judicial Board (SJB) processed 929 documented reports warranting judicial follow-up; those cases involved over 2000 students. Recidivism remains a particular focus across the student conduct process. Students and staff involved in the adjudication of policy violations have used a variety of sanction methodologies to reduce the recidivism rate. During the reporting period there was a 5% reduction, 30% in 2012-2013 and 25% in 2013-2014. Sanctioning and a reduction in recidivism will continue to be a focus for the Student Judicial Board and staff involved in resolving conduct issues.

After reviewing the incident reports, the student co-chairs of the SJB referred 404 cases to judicial conferences with a residential life professional staff member or to the dean of student's office, 213 cases to simplified hearings, 54 cases to full hearings. There are also a significant number of cases resolved through means outside of the student judicial process. Those cases are resolved without formal judicial follow-up as is the case with students transported to the hospital due to severe intoxication, resolved by administrative panels for cases involving alleged violations of the sexual assault and sexual misconduct policy and other Title IX complaints or through interim administrative boards when the board could not convene or if a case presented personal conflicts for the majority of the SJB members.

The cases referred to judicial conferences with professional staff in residential life were generally first time offenses or minor infractions of residential standards. Judicial conferences have been typically resolved in less than two weeks after the incident was documented. There have been cases which were not resolved as quickly; however, during the fall 2014 semester the University purchased a new judicial management software platform that will aid in the expeditious resolution of minor violations and improve the ability to intervene in cases which are stagnant more quickly.

Cases referred to the SJB and scheduled as simplified hearings are adjudicated by three student members of the Board. These cases can involve any violation of the Code of Non-Academic Conduct (CNAC) with the exception of the most serious violations. Simplified hearings are generally convened for students who have two or fewer prior violations, who are not currently on disciplinary probation or for students who have not appeared before the SJB for a significant period of time and are in good judicial standing. Simplified hearings were adjudicated less than 16 days from the date of the incident report; this includes weekend days when the SJB did not meet. The timeliness of hearings continues to be a strength of the SJB and is a testament to the dedication the students show during those times of the year, generally the early fall and the late spring, when case volume peaks. The students serving on the SJB are always careful and contemplative when considering possible sanctions; however, there are still a number of students who receive multiple warnings for similar violations, in particular when secondary cases appear to be minor violations. This has, however, continued to present difficulties when some students perceive that the repeated warnings have little consequence to them.

Those cases that the co-chairs determined to be more serious or more complex than what could be resolved through a simplified hearing were referred to the SJB and scheduled as full hearings. Full hearings require five student members of the SJB and two advisors, usually one faculty advisor and one administrative advisor. Charges considered in a full hearing can cover

the full spectrum of the CNAC as full hearings can be convened to address repetitive behavior regardless of the perceived severity of the incident. Full hearings also allow the SJB to consider the full range of sanctions as a means to address those students found responsible for violating the CNAC; the most common charges brought to a full hearing are those which involve student safety.

Alcohol use and abuse continues to be a major issue in cases which warrant judicial follow-up through the SJB. Alcohol or other drug use was determined to be a contributing factor in over half of the cases resolved through the student conduct process. This includes those cases where students were charged with violating the alcohol policy or the drug policy; it also includes cases in which the alcohol policy may not have been violated but the presence or consumption of alcohol was determined to be a contributing factor.

The students who serve the University as members of the SJB do so voluntarily and diligently. During the academic year, the co-chairs of the Board meet once a week to review all judicial reports and determine charges to be filed and the most appropriate method of adjudication. The full Board meets once per week to review cases to be scheduled to insure there are no conflicts of interest. Hearings are typically scheduled once or twice a week (depending on the time of year) and additionally as needed. Given the time dedicated to reviewing incident reports and scheduling cases, as well as the expedience at which those cases have been adjudicated, those students, staff and faculty involved in the judicial process should be proud of the role they have played in upholding Wesleyan's community standards.

The following summarizes information pertaining to cases adjudicated by the Student Judicial Board (SJB) and The Residential Life Area Coordinator Staff during the 2012-2013 academic year.

Judicial Volume

During this reporting period, there were 522 cases or incidents referred to the Student Judicial Board. These cases involved 1233 students and 2036 alleged violations of the Code of Non-Academic Conduct (CNAC). When compared with the same period last year, the data indicates a 3% decrease in the number of cases the SJB processed. With this slight decrease, there was still a 4% increase in the number of alleged violations and an 8% increase in the number of students charged.

While there was a decrease in overall cases as compared to the last reporting period, there was an increase in the adjudication method. Judicial conferences increased by 8%, simplified hearings increased by 16%, and full hearings increased by 41%. It is important to note that the Tour de Franzia did not occur during this academic year. This event led to the adjudication of close to 100 students last year through expedited hearings.

When examining judicial volume by semester, the fall semester showed the greatest variation in comparison to the previous fall. There was a 32% increase in the number of cases needing to be adjudicated. There was a 56% increase in the number of reported violations when compared to the same period last year and an 84% increase over the same period in 2010. The number of

students involved in judicial cases increased 26% over the previous reporting period and a 79% increase when compared to the 2010 reporting period. This data indicates the highest level of judicial activity in the past three years.

Reporting

There continues to be significant collaboration between the Residential Life student staff and the Office of Public Safety; that collaboration also extends to Physical Plant staff members who work with Residential Life to maintain compliance with Fire Safety regulations in residential areas. There were 255 Communication Reports submitted that resulted in some form of judicial follow-up; 96 of the 255 Communication Reports submitted by a Residential Life student staff member supplemented a Public Safety incident report or a report from Fire Safety. The total number of Communication Reports submitted which resulted in judicial action increased 116% when compared to the same period last year. While the SJB has appreciated supplemental reports from Residential Life student staff, some reports have not provided enough information to help determine a student's responsibility of violating a policy. The Office of Residential Life continues to work with the student staff to ensure detailed reports. The increase in the total number of Communication Reports may stem from the increase in RA's and also an increased presence of staff during the weekends. Communication Reports continue to be forwarded from Residential Life to the Dean's Office to be reviewed with all other documentation by the co-chairs of the SJB in consultation with Dean's Office staff to determine appropriate charges and adjudication methods.

Table 1: Student Judicial Board Cases
2012-2013 Academic Year

	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013
Cases	438	435	330	539	522
Alleged Violations	1446	1515	1223	1952	2036
Students Charged	972	973	695	1141	1231

Recidivism

During the current reporting period, 867 individuals, or 31% of the student population, were processed through the judicial system as a result of alleged policy violations. Of those students processed during the current reporting period, 246 appeared before the SJB at least twice. The number of students who were processed through the judicial system is a representation of those people who were charged with various offences in multiple cases; 163 of those students were processed twice, 58 were processed three times, 16 were processed four times, 5 were processed five times, 2 student was processed six times, and 2 student was processed 7 times. It is important to note that there are a few students who come before the Board on numerous

occasions representing their student organization and are not charged as an individual. Overall 867 students were processed through the judicial system.

Table 2: Recidivism
2012-2013 Academic Year

	2009-2010	2010-2011	2011-2012	2012-2013
Individuals charged	722	551	798	867
Repeat Documentation	25%	21%	29.6%	29.7%

Typical Violations

Alcohol and drug violations continued to be the most prevalent violations addressed through the judicial process. Underage possession or use of alcohol charges accounted for nearly 30% (611) of the charges filed with the SJB. Combined, alcohol and drug violations accounted for 51% of all charges. Charges related to excessive noise or other forms of disorderly conduct (privacy and tranquility) accounted for 13% (254) of the total number of charges. Similar to the last reporting period, there was a 22% (295) increase in the number of departmental regulation charges, as well as a 52% (246) increase in failure to comply charges. While there is no clear explanation for the significant increase in failure to comply charges, it may be a result of more student staff documenting situations and residents not being respectful of the staff during the documentation. Many students are also uncooperative while being documented because they are under the impression that being documented is accepting responsibility for violating a policy.

Alcohol use was identified as a factor in 56% (291) of all cases processed by the SJB and drug use was a factor in 21% (110).

Table 3: Most Common Violations
2012-2013 Academic Year

Violation Type	2009-2010	2010-2011	2011-2012	2012-2013	% Change
Privacy & Tranquility	308	251	334	254	(24)
Alcohol/Drug/Distribution	657	576	891	1028	15
Departmental Regulations	173	145	243	295	21
Property	167	83	156	101	(35)
Failure to Comply	95	89	162	246	52
Harassment and Abuse	29	32	24	26	8
Reckless Endangerment	30	12	34	24	(29)
Total	1515	1223	1952	2036	4

Hearing Adjudication

During the fall semester, the SJB saw a significant increase in the number of cases needing to be adjudicated when compared to previous years. The Board did an excellent job at scheduling cases in a timely manner and they were actually able to improve their adjudication time from the previous fall semester. The Area Coordinators were also able to keep their adjudication times low through a few slight changes in how they were notified of pending cases. These changes allowed the Area Coordinators to generate notification to students without having to wait for the case file to become available. The chart below compares typical resolution methods year to year:

Table 4: Adjudication Methods
2012-2013 Academic Year

Adjudication Method	2009-2010	2010-2011	2011-2012	2012-2013	% Change
Judicial Conference	204	160	254	273	8
Simplified Hearing	111	97	121	140	16
Full Hearing	24	13	17	24	41
Total	435	330	539	522	(3)
Individual “Responsible” findings	928	639	1092	1004	
Cases with “Responsible” decision	364	283	456	427	
Median Adjudication Time (days)	12	12	15	14	

Judicial Sanction Data

In response to the violations outlined above, the SJB has continued to employ a range of sanctions. The new point system was implemented in the fall and there has been an adjustment period in ensuring fair and consistent sanctioning. The implementation of the point system has been challenging for the board due to the progressive nature of the system. The SJB sometimes feels that there is no leniency in sanctioning as in previous years, but there are continued conversations about the reasoning for a progressive sanctioning model and how there needs to be more accountability and ownership on the part of the students coming before the board.

The University’s participation in NCHIP has continued into this year and several intervention strategies have been implemented in the hopes of decreasing students’ high-risk drinking behavior. In the fall, all hearing officers were trained in brief motivational interviewing techniques and a “readiness to change” sanction model was revised and introduced. Through asking a series of questions during a student’s hearing, the board gains a better understanding of a student’s readiness to change and implements an appropriate sanction. This new model provides more intentional sanctioning for students who were found responsible for violating the alcohol policies. The Director of WesWell met with the Board periodically throughout the year to ensure the sanction model was working and to help answer any questions or concerns regarding implementation.

In lieu of formal judicial follow-up, 68 students who were transported to the hospital for the first time for alcohol/drug use were asked to complete an educational program and meet with a health professional. Three students were transported for a second time and were processed through the judicial system and received a formal sanction focused on education and health. In addition to the underage students transported to the hospital, two students who were 21 years or older needed hospitalization due to severe intoxication.

Table 5: Judicial Sanction Data
2012-2013 Academic Year

Sanction Type	2008-2009	2009-2010	2010-2011	2011-2012	12-13
Disciplinary Warning	409	519	385	586	582
Disciplinary Probation	64	90	40	135	76
Community Service/University Service	76	115	53	77	41*
Referral To HC	96	99	97	232	285
Restitution/Fines	6	27	9	17	16
Suspension/Expulsion	4	7	8	8	9
Total	655	672	698	1458	1202

**Student Organizations have been assigned service hours and are represented solely as an organization. These organizations sometimes have been sanctioned for each member to complete a designated number of hours each and these individual students’ hours are not reflective in this number.*

During the current reporting period the SJB found the students or groups charged had some level of culpability in 427 (82%) of the cases adjudicated compared with 456 cases (85%) during the previous reporting period. While the SJB has done well at finding some level of culpability in

their cases heard as noted above, they have struggled overall in holding individuals accountable for their behavior. During this reporting period, 51% of students were found responsible for their alleged violation, with 49% being found not responsible. This is a slight change from the previous reporting period when 58% of students were being found responsible and 42% found not responsible.

The following summarizes information pertaining to cases adjudicated by the Student Judicial Board (SJB) and The Residential Life Area Coordinator Staff during the 2013-2014 academic year.

Judicial Volume

During this reporting period, there were 407 cases or incidents referred to the Student Judicial Board. These cases involved 793 students and 1260 alleged violations of the Code of Non-Academic Conduct (CNAC). When compared with the same period last year, the data indicates a 22% decrease in the number of cases the SJB processed. With this slight decrease, there was still a 39% decrease in the number of alleged violations and a 36% increase in the number of students charged.

There was a significant decrease in the number of cases resolved through the student judicial process, the number of students documented for alleged policy violations and the number of alleged infractions. While there is no definitive reason pinpointing the cause of the significant reduction in conduct issues, there is some anecdotal evidence that Public Safety officers tried to address behavioral concerns through conversation rather than documentation in an effort to rebuild their some of the trust with students which has eroded over the last two academic years. While the officers generally wrote reports following their conversational interactions with students, the reports did not articulate clear policy violations being documented and thus the co-chairs of the Student Judicial Board chose not to pursue the reports.

When examining judicial volume over the previous five reporting periods, there is a consistent 22-24% variance in the number of cases resolved through the student judicial process, with the exception of the 2009/10 reporting period, (6%). This data is indicative of the year to year variation of staff documenting alleged policy violations and the turnover in the Student Judicial Board leadership in their role of determining how to address reported incidents. There is a statistically significant decrease in the number of alleged violations between the 2011/12, (35%), and 2012/13, (39%), reporting periods; however, the comparison between the current reporting period and the 2009/10, (17%) and 2010/11, 3%, reporting periods shows more similar reporting rates, the data comparing the numbers of students charged with policy violations shows a similar pattern, indicating the importance of comparing data over multiple reporting periods.

Reporting

There continues to be significant collaboration between the Residential Life student staff and the Office of Public Safety; that collaboration also extends to Physical Plant staff members who work with Residential Life to maintain compliance with Fire Safety regulations in residential areas. There were 148 Communication Reports submitted that resulted in some form of judicial follow-up; 65 of the 148 Communication Reports submitted by a Residential Life student staff member supplemented a Public Safety incident report or a report from Fire Safety. The total number of Communication Reports submitted which resulted in judicial action decreased 42% when compared to the same period last year. Though the total number reports decreased, the involvement of residential life student staff documenting incidents in collaboration with another office increased by 6%. While the SJB has appreciated supplemental reports from Residential Life student staff, some reports have not provided enough information to help determine a student's responsibility of violating a policy. The Office of Residential Life continues to work with the student staff to ensure detailed reports. The increase in the total number of Communication Reports may stem from the increase in RA's and also an increased presence of staff during the weekends. Communication Reports continue to be forwarded from Residential Life to the Dean's Office to be reviewed with all other documentation by the co-chairs of the SJB in consultation with Dean's Office staff to determine appropriate charges and adjudication methods.

Table 1: Student Judicial Board Cases
2013-2014 Academic Year

	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014
Cases	435	330	539	522	407
Alleged Violations	1515	1223	1952	2064	1260
Students Charged	973	695	1141	1244	793

Recidivism

During the current reporting period, 595 individuals, or 21% of the student population, were processed through the judicial system as a result of alleged policy violations. Of those students processed during the current reporting period, 156 appeared before the SJB at least twice. The number of students who were processed through the judicial system is a representation of those people who were charged with various offences in multiple cases; 121 of those students were processed twice, 28 were processed three times, 7 were processed four times. It is important to note that there are a few students who come before the Board on numerous occasions representing their student organization and are not charged as an individual.

Table 2: Recidivism
2013-2014 Academic Year

	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014
Individuals charged	722	551	798	867	595
Repeat Documentation	25%	21%	29.6%	29.7%	25%

Typical Violations

Alcohol and drug violations continued to be the most prevalent violations addressed through the judicial process, accounting for 45% of the total charges filed. Underage possession or use of alcohol charges accounted for nearly 28% (352) of the charges filed with the SJB. This is consistent with the previous reporting period (30%). Charges related to excessive noise or other forms of disorderly conduct (disturbance of the peace) accounted for 21% (261) of the total number of charges. Overall the number of charges, similar to other measures of judicial volume showed significant decrease compared to the previous reporting period. While there is no clear explanation for the anomalous increase in disturbance of the peace charges, it may be a result of more student staff documenting situations and residents not being respectful of the staff during the documentation. This was demonstrated by students not allowing staff access to their rooms during documentation and thus leading the SJB to pursue a judicial charge rather than the incident being one resolved through compliance with the RA at the time of the incident being addressed.

Alcohol use was identified as a factor in 58% (236) of all cases processed by the SJB and drug use was a factor in 15% (62). Alcohol use as a factor in documented policy violations was consistent when compared to the previous reporting period and will need to continue to be a focus for the SJB in recommending sanctions regardless of the age of the student appearing before a Board.

Table 3: Most Common Violations
2013-2014 Academic Year

Violation Type	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	% Change
Disturbance of the Peace	308	251	334	254	261	3
Alcohol/Drug/Distribution	657	576	891	1028	567	(44)
Departmental Regulations	173	145	243	295	152	(48)
Property	167	83	156	101	73	(27)
Failure to Comply	95	89	162	246	132	(46)
Harassment and Abuse	29	32	24	26	28	7
Reckless Endangerment	30	12	34	24	13	(46)
Total	1515	1223	1952	2036	1260	(38)

Hearing Adjudication

During the current reporting period there was an increase in the time needed to resolve all judicial cases. The Area Coordinators and the SJB agreed to have cases involving five or more students resolved by through a hearing to expedite the resolution of such cases. This will need to be reviewed to determine efficacy before the fall semester begins. More diligent attention will need to be applied to cases referred back to the SJB from a judicial conference to insure timely resolution. The dean’s office will work more closely with residential life to monitor the cases being referred to the Area Coordinators through regular meetings to track adjudication times over shorter periods. The chart below compares typical resolution methods year to year:

Table 4: Adjudication Methods
2013-2014 Academic Year

Adjudication Method	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	% Change
Judicial Conference	204	160	254	273	131	(52)
Simplified Hearing	111	97	121	140	73	(47)
Full Hearing	24	13	17	33	21	(36)
Total	435	330	539	522	407	(22)
Individual “Responsible” findings	928 61%	639 52%	1092 56%	1048 51%	631 50%	
Cases with “Responsible” decision	364 84%	283 86%	456 85%	444 85%	329 81%	
Median Adjudication Time (days)	12	12	15	14	16	

During the current reporting period the SJB found the students or groups charged had some level of culpability in 427 (82%) of the cases adjudicated compared with 456 cases (85%) during the previous reporting period. While the SJB has done well at finding some level of culpability in their cases heard as noted above, they have struggled overall in holding individuals accountable for their behavior. During this reporting period, 51% of students were found responsible for their alleged violation, with 49% being found not responsible. This is a slight change from the previous reporting period when 58% of students were being found responsible and 42% found not responsible.

Judicial Sanction Data

In response to the violations outlined above, the SJB has continued to employ a range of sanctions. The point system continues to be deployed as a way for students to better understand their judicial standing. The Board continues to refine how the number of points for an individual student is determined; in an effort to clarify the process used, the SJB (in conjunction with the Area Coordinators and administrative staff will produce an FAQ to be distributed at the start of the fall semester. The implementation of the point system has been challenging for the board due to the progressive nature of the system. The SJB sometimes feels that there is no leniency in sanctioning as in previous years, but there are continued conversations about the reasoning for a progressive sanctioning model and how there needs to be more accountability and ownership on the part of the students coming before the board.

The University's participation in NCHIP has concluded but the use of similar intervention strategies for students documented for alcohol or drug violations continues. The Board will be focused on the use of formalized educational or intervention-based strategies to address concerns where high-risk behavior is present. During the current reporting period, the Board used fewer formalized intervention sanctions than in previous reporting periods. The significant decline in judicial volume makes it difficult to thoroughly assess the impact of the less comprehensive sanctioning of recidivism.

The effort to collect feedback on the judicial process and the impact of the sanction was limited by very low participation. While some meaningful feedback was received and integrated into the process (including the more expeditious resolution and timely notification of hearing outcome), the students, administrators, and faculty involved in the judicial process will be developing a new vehicle to collect information from students designed to assess efficacy rather than assessing satisfaction with the process.

In lieu of formal judicial follow-up, 64 students who were transported to the hospital for the first time for alcohol/drug use were asked to complete an educational program and meet with a health professional. Three students were transported for a second time, in addition to one student who was transported for the third time, and were processed through the judicial system receiving a formal sanction focused on education and health. In addition to the underage students transported to the hospital, five students who were 21 years or older needed hospitalization due to severe intoxication. These students were asked to meet with the Associate Dean of Students and were referred to an appropriate office for follow-up.

Table 5: Judicial Sanction Data
2013-2014 Academic Year

Sanction Type	2009-	2010-	2011-	2012-	2013-
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	2010	2011	2012	2013	2014
Disciplinary Warning	519	385	586	594	367
Disciplinary Probation	90	40	135	78	39
Community Service/University Service	115	53	77	43*	14*
Referral To HC	99	97	232	294	139
Restitution/Fines	27	9	17	17	8
Suspension/Expulsion	7	8	8	12	10
Total	672	698	1458	1236	690

**Student Organizations have been assigned service hours and are represented solely as an organization. These organizations sometimes have been sanctioned for each member to complete a designated number of hours each and these individual students' hours are not reflective in this number.*

The current reporting period was not one marked with a high volume of cases but there were certainly challenges which exposed areas for improvement in the process and the clarification of policies and procedures. The student members of the Board and those administrators and faculty who support the judicial process will be looking at the areas of improvement to insure consistency, equity and effectiveness in the resolution of all allegations of policy violations.

The Board will need to work to collect useful data to assess the effectiveness of sanctioning and be willing to deploy the types of sanctions which will demonstrate adherence to the mission of the Board to adjudicate hearings with an eye toward personal growth AND accountability. The progressive nature of the sanctioning model is an area of improvement; however, the Board will need to focus not only sanctioning but also messaging during the hearing process to help decrease recidivism.