AN EXAMINATION OF INSTITUTIONAL, INDIVIDUAL, CULTURAL AND FINANCIAL FACTORS THAT SHAPE CAMPUS ALCOHOL INTERVENTION AND PREVENTION PROGRAMS

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By

Nazanin Fathi

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Nazanin Fathi’s dissertation is approved by:

_______________________________________  ______________________________________
Louis G. Rubino, Ph.D.  Date

_______________________________________  ______________________________________
Mark A. Stevens, Ph.D.  Date

_______________________________________  ______________________________________
Nathan R. Durdella, Ph.D., Chair  Date

California State University, Northridge
Dedication

To my extraordinary Mom,

Of the many virtues you have taught me, generosity has been one of the biggest. Thank you for giving me life, love and everything in between to make me who I am today.

To my wonderful brother,

The light you have brought into my life is like nothing else in the world. Thank you for being my most esteemed coach and supporter.

To my adorable sister-in-law,

It is rare to find a sister so late in life but you have been just that to me.

And to the love of my life, Nojan—

I am so glad to have shared the last year and best year of my life with you.
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ABSTRACT

AN EXAMINATION OF INSTITUTIONAL, INDIVIDUAL, CULTURAL AND FINANCIAL FACTORS THAT SHAPE CAMPUS ALCOHOL INTERVENTION AND PREVENTION PROGRAMS

By

Nazanin Fathi

Doctor of Education in Educational Leadership

Student support services addressing alcohol issues on college campuses are among the programs that have been overlooked by campus administrators (NIAAA, 2002). As awareness of alcohol problems on college campuses has grown, the need to address what approaches and programs work is needed. This study examined factors that shape alcohol intervention and prevention programs on college campuses and the level of effectiveness of such programs from the perspective of staff. Through a grounded theory case study approach, I addressed problems that relate to the factors that influence the development and effectiveness of college alcohol programs. I chose nine participants via the criterion sampling strategy to participate in one-on-one interviews. Participants served in administrative positions either at a large urban public university or a small private liberal arts college. Through questions that were associated with grounded theory, I asked participants to address their roles, knowledge, opinions and involvement in support services related to student alcohol issues on campus. The findings suggest that even though there are programs in place to support students struggling with alcohol either on
an intervention or prevention level, programs are still not able to address all issues, and administrators are not as involved or knowledgeable about what works for programs.
CHAPTER 1
STATEMENT OF A PROBLEM

Introduction

Heavy alcohol use is a norm at many American college campuses. Studies consistently show that “roughly half of college students engage in binge drinking and that approximately a quarter of college students are frequently binge drinking” (Zakletskaia et al., 2010). Binge drinking by American college students continues to be a serious problem on many campuses (Wechsler et al., 2001). These findings suggest that the environment at most colleges facilitates an epidemic of alcohol problems among students. When students come to college to explore a new phase of life, they often bring with them a perception that partying is a rite of passage (Larimer et al., 2005). This stage of life also brings with it a feeling of invincibility and a type of impulsive behavior that—combined with new ideas, people and experiences—imbues one with a sense of unreality. The personal consequences that arise from these circumstances can be severe (Gouker & Lewis, 2007). For countless students in American universities, substance abuse has tragically become as much a part of the collegiate experience as studying and test taking (Shaw, 2011).

It is estimated that approximately five out of 10 American college students consumed five or more drinks during a single session in 2010. That same year saw 1,825 alcohol-related student deaths, 599,000 alcohol-induced unintentional injuries, and 696,000 alcohol-related assaults on students (Zakletskaia et al., 2010). The high prevalence rates of binge drinking and its negative consequences have heightened
administrators’ concerns about this particular problem and increased motives to reduce alcohol abuse on campuses.

In many cases, a key issue facing a collegiate population recovering from alcohol abuse is the lack of campus support (Texas Tech University, 2007). College students, many living away from home for the first time, must navigate this precarious environment on their own, often without help from a coterie of supportive individuals and campus services. In these contexts, many students fail to connect with alcohol intervention and prevention programs that may be effective in addressing their issues. Additionally, even when students self-disclose, they must combat the stigma associated with admitting to one's addiction and need for recovery. Due to the competing demand for helping students and the variety of issues interfering with the academic success of students, many administrators have stepped up to the challenge of resolving the issue of alcohol on their campuses.

**Research Problem**

This study addresses a problem related to the factors that influence the development of college alcohol programs. Literature showed evidence that student support services addressing alcohol issues have been overlooked (Lederman, 2013). These neglected areas include how alcohol programs emerged on campuses and the factors that contributed to their development and effectiveness. In light of the growing awareness and concern about alcohol abuse by college students, institutions of higher education have implemented programs in an attempt to curb this problem. As the momentum for such programs grows, there remains a need to examine not only the factors that shapes the formation of such programs, but also the approaches that colleges
and universities take to identify these support services as well as the attitudes, beliefs and opinions about the effectiveness of such programs.

**Research Purpose and Significance**

The purpose of this study is to investigate the factors that shaped programs for students struggling with alcohol problems. Specifically, this study intends to examine what factors shaped the formation, development and assessment of programs in order to inform institutions of higher education on how to guide and improve such programs in the future. Although concerns about these issues have grown, incidents of alcohol abuse and dependency have also sharply risen. Today more students struggle with drug and alcohol problems and delay completion of their degrees (Misch, 2009). According to the Higher Education Center, the struggle with alcohol issues is one of the key factors preventing students from accomplishing their set goals (Higher Education Center, 2001).

School officials, students’ parents, community members, government agencies and others are rightly concerned about alcohol problems by college students and its negative repercussions. As a result, myriad prevention and intervention efforts have been implemented across the universities and colleges in the nation (Misch, 2009). The thrust of this study is to examine and address alcohol intervention and prevention programs and concerns about the effectiveness of support services through a development of an explanatory model that helps us understand how college and university leaders can shape the formation of student support services for the better.

**Research Questions**

The research questions that this study evaluated were:

1. What institutional, individual, cultural and financial factors influence the development of
alcohol intervention and prevention programs at a large urban regional four-year university and a small private liberal arts college?

2. What shapes the assessment and improvement of alcohol intervention and prevention programs at a large urban regional four-year university and a small private liberal arts college?

**Theoretical Framework**

In order to understand how alcohol programs on college campuses emerged, developed and changed, I used diffusion of innovation theory as my conceptual framework to support the interpretive work in this study. Diffusion of innovation seeks to explain how and why and the rate at which new ideas and behaviors are spread through cultures. Since institutions of higher education are social systems, and the concept of dealing with alcohol issues occurs as a sequence of tasks, diffusion of innovation helps shed light on the different ways that programs formed, developed and operated effectively (Rogers, 1995).

**Overview and Methodology**

I used a grounded theory approach in this study. An application of grounded theory allowed me to ask questions about how college alcohol programs addressed and handled alcohol abuse and its negative repercussions and their level of effectiveness. The goal of these questions was to discover certain themes that addressed concerns associated with such programs and provide knowledge that institutions of higher education can use to help produce more effective programs and outcomes for students. Grounded theory allowed me to maintain and use data to inform the discovery of theory. The research sites were a large urban regional public university and a small private liberal arts college in
southwestern United States. Data sources were staff, faculty and administrators involved in the process of formulating, creating and implementing support services designed for students struggling with alcohol issues. I conducted interviews and document reviews as data sources to discover certain themes that addressed student support services and their effectiveness.

**Limitations**

The limitations central to this study are related to the methodological approach used: specifically, the small sample size, the research sites, and the use of interviews. One concern I had was regarding the small sample of the study. I worried that the results would not produce an interpretation that could be applied to a general application. However, I still believe that this study can be useful when applied to campus contexts similar to the research sites. Due to the sensitive nature of the particular issues being discussed in the study, the location of the research sites and the participants—who are key university members and have reputations at stake—I predicted that there might be complications and a level of unwillingness. Finally, I was concerned that the data collection procedures, which consisted of interviews, would not allow for measuring all variables that need to be considered.

**Summary**

As institutions of higher education recognize and approach the problem of alcohol abuse by college students, the effectiveness of student support services remain an important element. Considering past literature and conducting a study with a unique approach allows for better understanding of areas that still need to be addressed by administration and faculty in order to help reduce the incidence of drug and alcohol abuse.
in higher education contexts. Chapter 2 of this dissertation covers the literature review, which involves searching for what had been discovered and talked about in the past and areas related to students with alcohol issues that still remain unknown. Chapter 3 presents methodology in which a description of research sites, participants and procedures are discussed. Chapter 4 presents results based on the ways that data and information has been gathered. Finally, Chapter 5 covers all findings and recommendations related to the research questions.
CHAPTER 2
REVIEW OF LITERATURE

Introduction

Alcohol addiction is one of the top public health problems in the United States. A study published as a partnership between Drugfree.org and the New York State Office of Alcoholism and Substance Abuse Services (OASAS) showed how this epidemic is costing the United States nearly $100 billion a year in physical, mental, financial, emotional, legal, vocational and educational damages. There are more than 23 million Americans in need of treatment for alcohol; of that population, 30% are college students between the ages of 18 to 25 (Shaw, 2011). Alcohol abuse represents a significant problem on American college campuses; more than 30% of students meet the criteria for a diagnosis of alcohol abuse. Similarly, recent findings from a national survey of “approximately 14,000 students indicate[d] that binge drinking is reported by 22% of students while an additional 23% report[ed] periodic and frequent drinking” (Doumas & Turrisi, 2007). Because of well-documented problems associated with student alcohol use, heavy drinking has become one of the most significant concerns for college administrators and counselors.

Students who come to college to explore a new phase of life often bring with them a perception that partying is a rite of passage (Larimer et al., 2005). This perception imbues one with a feeling of invincibility and impulsive behavior that—combined with new ideas, people and experiences—leave even the most sensible person out of touch with reality. The consequences that arise from these changes can be severe (Gouker & Lewis, 2007). For countless students on American college campuses, the alcohol problem
has tragically become as much a part of the college experience as studying and test taking (Shaw, 2011).

Following increasing awareness for and concern about alcohol problems, institutions of higher education have implemented programs in an attempt to curb this severe problem. As momentum for such programs grows, there remains a need to examine the factors that shape the formation of such services on campuses, the ways that colleges and universities identify these services, and the attitudes, beliefs and opinions associated with the perceived effectiveness of such programs. A close examination of recently published literature should reveal the deficit of information about alcohol intervention and prevention programs; areas previously neglected include factors leading to the development, implementation and institutionalization of such programs.

The aim of this literature review is to examine closely scholarly works written about support services for students with alcohol issues. The review looks for visible gaps in the understanding of the contributing factors in program implementations, and, from the perspective of designers and administrators, the shortcomings of these programs. The review also searches for the incidence of alcohol, the challenges alcohol abuse pose for institutions of higher education and psychological approaches to the programs.

**Alcohol on College Campuses**

Heavy alcohol use among American college students represents a major public health concern. According to a study by the Harvard School of Public Health, the current level of drug and alcohol use by students is a serious problem that prevents them from accomplishing their educational goals (Wechsler et al., 2008). What has once been regarded as a harmless rite of passage is now an epidemic. The disastrous consequences
of binge drinking and substance abuse include death and violence (Ham & Hope 2003). This rite of passage has become a dangerous and, at times, deadly journey for young men and women on American college campuses (Crawford et al., 2006). It is also necessary to understand that the prevalence of alcohol use generally increases with age; it also progresses in a well-defined sequence (Millman & Botvin, 1992). Two major obstacles to mitigate the use of alcohol among college students are the lack of knowledge and absence of well-planned yet simple and informative support systems on American college campuses (Gonzales, 1990).

After a four-year study of alcohol and drug use on American college campuses, the National Center on Addiction and Substance Abuse at Columbia University revealed that approximately 3.8 million full-time college students, which comprise 49% of that population, binge drink and/or abuse prescription and illegal drugs each month. In 2005, approximately 1.8 million students (22.9% of all full-time college students) met the medical criteria for alcohol and substance abuse and dependency (Mundt et al., 2009).

**Individual and educational effects of alcohol use and abuse.** It is not unusual for young people to feel confused about using alcohol to the level of excess; they might feel pressured or curious. Media tends to portray drug and alcohol use as cool, fun or even glamorous without disclosing their dangerous side effects. Alcohol can negatively impact relationships, mental and physical health, productivity and overall quality of life. While the effects of alcohol might not be noticed immediately, habitual use over time can prevent one from focusing, concentrating or performing at a normal level.

The availability of alcohol has made the issue of abuse and addiction by students a universal problem. Students can articulate the reasons why they engaged in drinking
alcohol but most failed to consider the long-term consequences of their actions. Alcohol use has been classified as a major problem in students as early as the fourth grade; therefore it is no surprise that alcohol use is prolific in college where many young adults are free from adult supervision for the first time in their lives. Alcohol and other substances continue to be the leading cause of death for people between the ages of 15 and 24 (Johnston et al., 2012). Furthermore, 95% of all violent incidents on campuses involved alcohol; 28% of all college dropouts were alcoholics; and 40% of all students with academic problems abused alcohol (Johnston et al., 2012). More than 60% of all college women who contracted sexually transmitted diseases were intoxicated at the time of infection (Johnston & O’Malley, 2012).

Students also reported using alcohol for variety of reasons. Some students felt pressured to use alcohol at social gatherings because everyone else seemed to be doing it or because they thought that it was the cool thing to do. Others believed that alcohol offered a way to escape from school- or work-related stresses, financial worries or relationship problems. Some felt that alcohol provided a way to compensate for their feelings of shyness or low self-esteem. Other times alcohol acted as a substitute for satisfying relationships, educational accomplishments or feelings of self-fulfillment (Gouker & Lewis, 2007).

Concerns of institutions of higher education toward alcohol-related consequences persist. Since the mid-1980s, university administrators have tried several initiatives, including enhanced enforcement of campus alcohol policies, elimination of community celebrations that involved heavy drinking, implementation of parental notifications, deferred Greek rush weeks, training for local restaurant and bar servers, and alcohol
Throughout the 1990s, unpublished student surveys and anecdotal observations from medical professionals, student affairs staff and police demonstrated little to no change in the incidence of repeated and serious consequences related to heavy episodic student drinking (Turner et al., 2008). Campus surveys, focus groups and anecdotal student feedback revealed that several misperceptions regarding alcohol use and misuse existed on American college campuses. Students have been shown to consistently overestimate the frequency and amount of alcohol consumed by the general student body. This finding is consistent with national results (Gouker & Lewis, 2007).

The inability to perceive situations clearly affected most college students. In one study, O’Grady and Arria (2008) focused on student misperceptions of peers’ level of alcohol consumption. They suggested eliminating such misconceptions in order to change behaviors and combat certain addiction issues on campuses. Based on observing behaviors over time and considering the attribution and peer socialization theory, O’Grady and Arria noted that many students admitted to feeling like their friends drank more alcohol than they actually did. This belief sometimes led to them to consume more alcohol. O’Grady and Arria proposed that if students realized norms were relatively moderate consumption, they might reduce how much alcohol they consumed. The power of peers would then serve to restrain rather than encourage. O’Grady and Arria suggested that this awareness could be achieved via conducting surveys. Furthermore, they found that campus personnel could target groups most prone to social influences, such as first-year students, athletes or members of fraternities and sororities. A counselor could then individually address these perceptions in one-on-one meetings. Even though the
aforementioned methods are good alternatives, certain obstacles remain: the lack of staff expertise in dealing with normative perceptions; skepticism about the data; naïve reactions from administrators; acknowledgment of true norms; conflicting preventive program strategies; and lastly, counterproductive role models.

A range of personal and social factors could influence high-risk drinking behaviors. Perceived notions of what other students are doing, positive expectations of alcohol use, group pressure and the desire to appear grown-up also play a role. According to the Core Institute’s 2006 Alcohol and Drug Survey, which assessed more than 70,000 undergraduate students across the United States, 75.9% of participants believed that alcohol-enhanced social activity, 63.4% believed alcohol allowed people to have more fun and 53.7% believed alcohol facilitated sexual opportunities (Core Institute, 2006). These perceptions played an important role in the reasons why and students drank and how much they drank (Perkins, Haines, & Rice, 2005).

Alcohol use on college campuses poses a tremendous concern for higher education professionals, governmental officials and the general community. No campus is immune to substance use or its adverse consequences. An essential feature of substance abuse is maladaptive impairment or adverse consequences. One such maladaptive pattern is the lack of academic persistence (Di Pietro et al., 2012). To deal with such problems, administrators must step in and help students prosper academically, emotionally, mentally and physically.

In the most recent Center on Addiction and Substance Abuse (CASA) news release, Chairman Joseph Califano declared:

College presidents, deans and trustees who accept the particular college culture
that allows students to drink and use drugs facilitate a college culture of alcohol and drug abuse that is linked to poor student academic performance, depression, anxiety, suicide and an array of other legal and medical issues (CASA, 2011). Many educators recognize that alcohol abuse among students creates significant barriers to the achievement of educational objectives. For some students, using alcohol may not be a matter of yielding to pressures; instead their alcohol use may have instrumental value. For instance, alcohol may help them deal with anxiety, low self-esteem or discomfort in social situations. When used in these contexts, students tend to forget the reason behind going to college, which is to attain a degree (Di Pietro et al., 2012). Their priorities shift from academics to social activities and, as a result, productivity suffers. Consumed by the life they have created for themselves with alcohol, some students stop going to class and doing homework all together. This lack of ability or the desire to follow through with academic goals is destructive not only for the individual but the institution as a whole.

High-risk drinking on American college campuses incurs costs such as increased health care, police and campus security, and property repair resulting from alcohol-related vandalism. Although no precise numbers exist for social costs associated with high-risk campus drinking, the expenses of underage high-risk drinking are estimated to cost the United States more than $62 billion annually. Most of those expenses come from college students, including the financial ramifications of alcohol-related deaths, violent crimes, traffic violations and automotive crashes, medical treatment for alcohol poisoning and injury, property damage, and lost productivity (Turner et al., 2008). The United
States also spends more than $100 billion each year on alcohol-related problems across all ages (United States Department of Justice, 2002).

**University Alcohol Programs**

The environment at most college campuses is not conducive to or supportive of recovery from addictive disorders (National Institute on Alcohol Abuse & Alcoholism, 2013). Recognizing the urgency of this problem, the Office of National Drug Control Policy has reached out to colleges and universities for support in the fight against drug and alcohol abuse (Walters & Neighbors, 2005). Former president George W. Bush’s 2002 strategy called for a 10% reduction in youth drug and alcohol use over the course of two years and a 25% decline in five years (Walters & Neighbors, 2005).

Whatever the approach, there is a need to deal with the growing concern regarding the struggles students face when it comes to alcohol. Most universities have established student support services to address the alcohol problems on their campuses. The mission of these programs often times is to set up a community in which alcohol education can enhance and facilitate student growth and development throughout the process. To accomplish this mission, students need to be engaged, and need to utilize such support services. There are a variety of initiatives, such as face-to-face and web-based motivational interventions, that have shown evidence of success. While pure educational interventions have not received positive results (NIAAA, 2002), programs to change students’ perceptions of drinking norms and brief motivational screenings and interventions have been successful in reducing student levels of binge drinking and limiting the resulting negative consequences (Larimer & Crone, 2007).

Recent studies have examined the efficacy of brief motivational interventions
with students who have violated campus alcohol policies. When integrated into the university health setting and accompanied by a web-based alcohol abuse prevention program for incoming freshman, motivational interventions have seen positive results (Amaro et al., 2009, Schaus et al., 2009; Wall, 2007). Nearly half of all American colleges and universities reported using social norms marketing campaigns (Wechslcr et al., 2004).

Individual face-to-face interventions differ from web-based outreach and widespread media campaigns. Social norms interventions—especially those that include personalized normative feedback, either face-to-face or web-based—had the greatest evidence for reducing college binge drinking (Larimer & Cronce, 2007). However, it is important to note that while a web-based intervention for freshmen is an effective solution, the efficacy of such an approach will likely be overpowered by a wet environment in which alcohol is readily available and highly accessible. In order to be successful, administrators will need to implement an integrated multi-pronged approach that incorporates both social norms and interventions.

Another way to facilitate success is identifying high-risk students, based on their pre-college history, who are at high risk of experiencing alcohol-related problems during their freshman year (Mallett, 2011). Not only should these interventions aim to reduce binge drinking and its consequences, but they should also focus on increasing protective behaviors. According to one study:

On average, male students assigned to roommates who reported drinking in the year prior to entering college had a quarter-point lower GPA than those assigned to non-drinking roommates. Peer effects are concentrated at the bottom of the
GPA distribution; assignment of a roommate who drank in high school reduces the 10th percentile of GPA by 0.43 points. (Kremer & Levy, 2005)

This observation supports the conclusion that intervention by itself is not the best possible solution for reducing alcohol use and its negative consequences. Students need to be educated about other factors that may shape their ideas about alcohol abuse.

One of the factors that may increase high-risk drinking is residence. According to the Council for the Advancement of Standards in Higher Education (CAS), students who lived off campus with their parents were the least likely to participate in high-risk drinking (29.9%) as compared to students who lived in fraternity or sorority houses and were the most likely to binge drink (76%) (Wechsler et al., 2002b). Many colleges and universities enacted alcohol policies in the campus residential environment; of these, 81% provided an alcohol-free living choice (Wechsler et al., 2004). Students who lived in residence halls with policies prohibiting alcohol use were less likely to drink than students living elsewhere (Toomey, Lenk, & Wagenaar, 2007). Not surprisingly, students who lived in substance-free residences, which allowed zero alcohol use, were less likely to drink heavily or be influenced by the drinking of others than peers who lived in unrestricted residences (Toomey et al., 2007). In fact, CAS estimates suggest that only 35.5% of students binge drank while living in these structured, substance-free environments (Wechsler et al., 2002b).

The Greek system is also an optimal environment for examining the role of alcohol use and problems on campuses. Students in fraternities and sororities consistently demonstrated higher levels of alcohol use and problems than nonmembers (Lo & Globetti, 1995; Sher, Bartholow, & Nanda, 2001). More specifically, Greek members and
leaders exhibited higher levels of use and approval of use (Cashin, Presley, & Meilman, 1998). Some fraternity and sorority houses have developed reputations based on members’ alcohol consumption (Larimer et al., 1999). Per a two-decade review of fraternity drinking research, Borsari and Carey (1999) identified five factors contributing to the heavy drinking consistently observed in fraternities: 1) a continuity of heavy alcohol use from high school to college; 2) self-selection into heavy drinking environments; 3) the central role that alcohol plays in fraternity socialization; 4) misperceptions of drinking norms; and 5) the enabling environment of fraternity houses.

Student athletics is another area that contributes to heavy alcohol use and abuse on American college campuses. According to CAS, male student athletes binge drank and experienced drinking-related consequences up to 16% more and female student athletes up to 19% more than peers who did not participate in college athletic programs. Due to the unique environment of student athletes, multiple sources of normative influence, such as teammates, coaches or students who are not athletes, impact drinking behavior (Lewis, 2008). These sources may also provide an opportunity to target drinking behavior and promote student athletics as a campus leader for moderating drinking behavior. CAS estimates found that student sports fans (53% including males and females) reported binge drinking more than peers who did not describe themselves as sports fans (41% male and 37% female) (Nelson & Wechsler, 2001).

Alcohol retailers have been responsible for directly targeting student sports fans. In August 2009, Anheuser-Busch released fan cans customized with the team colors of 27 different universities. According to CAS estimates, student sports fans reported responding to special alcohol promotions more often than peers who were not fans.
Consequently, these targeted marketing campaigns can greatly influence binge drinking and its negative consequences among this high-risk population (Nelson & Wechsler, 2001). School administrators complained about the campaign, citing that it encouraged high-risk drinking behavior in college students (Hechinger, 2009). Thus, it is essential for institutions of higher education to develop tailgating and other student sports fan environments that limit or de-emphasize alcohol use.

In an effort to educate students about the risks of alcohol abuse, the National Collegiate Athletic Association (NCAA), supported by the NCAA Foundation and the Anheuser-Busch Companies, Inc., has developed a grant program for alcohol education called CHOICES. Although there have not been independent evaluations of the program’s effectiveness, the unique relationships of coaches and their teams, the leadership potential of team captains and other prominent athletes, and the visibility of athletics on and off campus all contribute to campus efforts to define and develop good behaviors.

State and federal reports on the growing incidence of alcohol problems on campuses have spurred colleges and universities to create behavioral threat assessment teams to identify and help distressed students who are abusing alcohol, disrupting classes or harassing peers. In most cases, the efforts of colleges and universities to refine ways of identifying troubled students who pose a threat to the campus is not sufficient (Hoover, 2008). Faced with an alarmingly high incidence of drug and alcohol abuse, some institutions of higher education have implemented testing programs to identify students with drug and alcohol habits (Andre, 1986).

A testing program can be an effective way to discourage experimentation with
drugs and alcohol and stop misuse before it begins. This deterrence strategy has been frequently demonstrated in colleges and universities that enthusiastically support testing as a method of prevention (Mallet, 2011). The purpose of such programs is not to punish students who use alcohol and drugs—although consequences of some sort should be a part of any testing program. For students facing peer pressure, knowing that a testing program is in place can provide a good excuse to say no. Despite growing concerns about drugs and alcohol abuse at institutions of higher education, random testing has created a storm of controversy concerning its morality (Koppel, 2011). Even though institutions of higher education may argue that they have a moral duty to protect the health and safety of their students, such testing can subject students to humiliation and invasion of their privacy (Andre, 1986). Linn State Technical College, a two-year public college in Missouri, implemented a mandatory testing program in the beginning of 2011. However, it did not take long for the new program to attract legal challenges. Many believed that it was unconstitutional to force students to submit to testing (Koppel, 2011).

While engaging students is critical, other stakeholders such as bar owners, police officials, property owners, neighborhood residents, and local and state legislators must be included when considering the high-risk drinking issue, and what can be done to reduce the problem. Research shows that campuses with higher numbers of alcohol-selling outlets within a one- to two-mile radius correlated to more reports of students who drank frequently and students with drinking-related problems as compared to campuses with fewer alcohol outlets in proximity (Weitzman et al., 2003). Prices for a single drink or pitcher or weekend drinking specials also significantly correlated to greater rates of high-risk drinking among students (Kuo et al., 2003).
Students suffering from psychological issues may turn to alcohol because it temporarily gives one a sense of euphoria that masks symptoms of depression and anxiety. By addressing any psychological issues that students might have, programs can steer students away from non-productive measures that exacerbate the root problem. Even though many universities have counseling services, some students chose not to connect with the services offered and remain in states of denial. A study by Yorgason and colleagues (2008) showed a connection between students with mental health issues and their knowledge and use of campus services. In this quantitative study, 266 students completed a web-based questionnaire. Results revealed that students who were mentally distressed were more likely to know about and use services; however, some students reported that they did not know about services or did not use them. Because of the high rates of mental health problems, the study concluded that campus providers must continue to make strategic efforts to disseminate knowledge about mental health services to all students. In order to circulate such information, institutions of higher education have implemented many different approaches.

**Multiple Approaches to Implementing and Assessing Alcohol Programs**

In her article “Alcohol and Drug Abuse: A Problem of Choice,” Mitchell (2011) argued that programs that treat addiction as a choice do not work or have a very small success rate due to their misunderstanding of the nature of addiction. Other reasons for their ineffectiveness are the prevailing approach of ostracizing students as addicts and the way success rates are determined. Universities have attempted to develop other ways of addressing the problem. Since the 1970s, several approaches to drug and alcohol abuse education and prevention have been implemented in college settings.
Educational approaches. Educational approaches usually involve providing basic information to all students. Traditionally, alcohol abuse education comprised dissemination of information on alcohol abuse and its negative consequences regarding health, social and legal aspects (Tobler, 1997). In order to predict where to target services, a study was conducted during a summer orientation for incoming first-time freshmen students at a large public university in the southeast. In this study, students were asked to complete an instrument that assessed their use of alcohol and other drugs during the previous year. The instrument also assessed student perceptions of alcohol use by peers, their own alcohol use and their intent to join a Greek organization (Oswalt, 2008). The limitation of this study was that students did not self-disclose their abuse or correctly represent their addiction problems, which resulted in underreported statistics.

Although alcohol education may alter students’ behaviors, the traditional educational approach to prevention relies heavily on the assumption of human rationality. This fact is problematic because college students do not always demonstrate the best rationality (Mills, Pfaffenberger, & McCarty, 1981). Often alcohol education has been perceived by the students as a coercive intrusion upon their freedom, and because of that, they refrain from taking part.

One of the most difficult tasks for counselors who conduct alcohol programs is attracting students. An electronic instruction program entitled, “If You Drink: An Alcohol Education Program” (IYD), used microcomputers for alcohol education (Meier, 1987). IYD consisted of five modules: the alcohol quiz, the breath analyzer, the teen test, the party, and alcohol and drugs. Two field studies with undergraduate students analyzed the effectiveness of that program. The program produced small positive changes in
student attitudes towards alcohol, but no negative changes. Even though the study showed promise, the fact that it has not been duplicated for more than two decades questions its validity.

Current educational approaches include social resistance and competence-enhancement programs, which focus less on didactic instruction and more on interactive-skills training techniques (Tobler, 1997). The most promising contemporary educational approaches are conceptualized within a theoretical framework based on the etiology of alcohol abuse, and have been subjected to empirical testing using appropriate research methods (Donaldson, 1996). Contemporary programs are typically categorized into one of three types: 1) universal programs focusing on the general student population; 2) selective programs targeting high-risk groups, such as low achievers; and 3) indicated programs designed for youth already experimenting with alcohol or engaging in other high-risk behaviors.

Evaluation studies on educational approaches to alcohol abuse prevention have shown that, in some cases, a temporary impact on knowledge and anti-alcohol attitudes can occur (Lee, 2006). However, Nancy Tobler and Howard Stratton’s meta-analytic study consistently demonstrated that such programs failed to impact alcohol use behavior or reduce intent to use alcohol in the future. It has become increasingly clear that the etiology of alcohol abuse is complex; therefore, prevention strategies that rely primarily on information dissemination will not be effective in changing behavior.

Currently, federal and state agencies mandate that colleges and universities provide health education classes with content on drug and alcohol abuse for students (Botvin, 2000). However, educational programs such as Drug Abuse Resistance
Education (DARE) have been deeply unsuccessful in delivering results (Reaves, 2001). The Journal of Consulting and Clinical Psychology criticized the program, “DARE not only did not affect college students’ rate of experimentation with alcohol and drugs, but may also have actually lowered their self-esteem.” The article even made claims on why the program did not succeed:

The findings were grim, 20-year-olds who’d had DARE classes were no less likely to have smoked marijuana or cigarettes, drank alcohol, used ‘illicit’ drugs like cocaine and heroin, or caved in to peer pressure than kids who’d never been exposed to DARE. (Reaves, 2001)

Furthermore, according to the U.S. Department of Education, the popular DARE program has, consistently and without exception, been found to be ineffective and even counterproductive. The department strictly prohibits the use of its funds to support DARE at any school. Unfortunately, campuses are faced with the choice between DARE or no program at all.

Another important consideration for college alcohol initiatives is aligning organizations systems to support alcohol-related goals. Some examples include budget and resource allocation, information systems, and college policies and procedures. Many educational leaders acknowledge that budgeting sufficient resources for alcohol programs was critical to their success. However, it must also be recognized that university finances tend to be tight and that the process of finding resources may require long-term planning. As Anderson (1998) pointed out, “It is a resource issue any time you elevate an issue to prominence.”

The ever-present state and federal funding issues of higher education and
limitations produced by allocation-based funds determined by performance rather than need make it difficult for universities to decide on how to offset revenue declines—either by raising tuition, reducing costs or sharing services and other efficiencies (Lederman, 2013). States and universities need to make changes in how they allocate and use funds. These changes will affect student support services related to alcohol. States will be most likely to continue to alter their formulas for distributing funds by tying money to performance rather than enrollment (National Association of State Budget Officers, 2013). The report suggested the development of "differential funding strategies for different services based on the needs and availability of institutional resource." This report advised higher educational institutions to become savvier about controlling their spending and making wiser decisions on what services to provide for their students. The future of university alcohol support services rests on needs and resource availability.

Circumstances may vary among campuses. For example, in colleges with limited alcohol problems (either due to the demographics of the student body or the location of the school), resource requirements are manageable. But on campuses in which a greater resource commitment is needed, administrators must use ad hoc financing mechanisms, regular budget procedures and grants to meet needs.

One approach is charging student health fees to subsidize alcohol-related services. Another is policy. Most institutions review and update their policies when they begin proactive initiatives. Once policies are in place, systems for enforcing them are also critical. Lax enforcement of campus policies, local laws and the state minimum drinking age sends mixed messages to students and undermines effectiveness. Recognizing the importance of enforcement, some universities recommend a strict punitive program that
requires fines and community service for the first two offenses and expulsion for the third.

Enforcing policies and laws requires commitment and collaboration from stakeholders with competing agendas. Perhaps no system is more important to overcoming student alcohol-related problems than information. Collecting and reviewing data is one way to understand the nature and extent of the problems as well as assess progress, improve efforts, maximize use of resources, and become knowledgeable enough to share one’s experiences with others. In this study, the staff that I interviewed shared common approaches to acquiring necessary information such as the CORE survey (once initially then at regular intervals afterward). They systematically collect data from the campus judicial system, campus and municipal police, student health centers, local emergency rooms, detoxification centers and local jails. More broadly, some universities have also developed their own process-related attitude surveys and conducted focus group discussions to determine attitudes of key constituencies in order to develop alcohol policies and initiatives that are relevant to their needs and concerns. Another aspect of being informed is learning what is happening on other campuses with similar concerns. Some institutions have formed ongoing networks with other colleges and universities to exchange alcohol-related information or raise discussions of alcohol issues in existing roundtable groups.

Psychological approaches. There is a growing recognition that social and psychological factors are central in preventing the onset of alcohol abuse (Gouker & Lewis, 2007). While a relationship between alcohol consumption and psychopathology has yet to be established, the number of college students with alcohol problems utilizing
counseling or other student health services has increased. The severity of their mental health problems has also trended upward. Evidence shows students reporting increased symptoms of mental health problems as compared to age-matched controls (Royal College of Psychiatrists, 2003). However, more research on the relationship between increased alcohol consumption and mental health or academic performance is needed.

The growing awareness of social and psychological factors that prevent the onset of alcohol abuse confirms that alcohol education and prevention approaches need to be closely tied to psychological theories of human behavior. In a study that assessed ideological maturity and drinking behaviors of college students, researchers found that confusion with ideological issues and identity sophistication played a role in alcohol use (Gouker & Lewis, 2007). The connection between identity status and behavior implied that enabling students to deal with these psychological factors might help them recognize behavioral and psychological blocks that promote tendencies toward alcohol use. But the self-reported results by students who are unable to identify correctly their own statuses and the lack of information from staff involved in the process reveal the limitations of this study.

Another psychological approach is the social resistance approach, which is based on the conceptualization that alcohol abuse results from pro-alcohol peer influences, persuasive advertising appeals, media portrayals encouraging alcohol use and exposure to role models who use alcohol (Bachman, 1997). Therefore social resistance programs focus extensively on working with students and helping them to recognize and deal with social influences that promote certain behaviors. These programs train students to resist negative social influences that cause them to engage in alcohol use. A comprehensive
review of the resistance skills studies, covering a period from 1980 to 1990, reported that social resistance programs did have a positive effect on alcohol abuse behavior. These behavioral effects could sometimes last for up to three years. It was crucial for me to ask my participants how they felt about resistance skill prevention programs, and whether or not they found them effective in addressing student alcohol issues.

**Types of Collegiate Alcohol Programs**

**Prevention programs.** Alcohol prevention strategies have often aimed to change student misperceptions and subsequent behavior. While educational approaches addressed all students, prevention programs catered toward at-risk populations on the university level. Increasing evidence shows that social norm interventions may be an effective strategy in preventing alcohol use (Zhao et al., 2006). Social norms marketing campaigns are popular interventions aimed at reducing binge drinking on American college campuses. They seemed to be effective in influencing students’ beliefs and behavior (Vicary & Karshin, 2002). For example, Haines and Spear (1996) found that after a social norms marketing campaign, fewer students perceived binge drinking as a norm, and a reduction in self-reported binge drinking was observed. It would be helpful to document staff perception after such campaigns. Additionally, a recent multi-site randomized trial revealed that the relative risk of student alcohol consumption at colleges that implemented this type of intervention was lower (DeJong et al., 2006). While these interventions have shown promising results, there are still questions about their effectiveness in changing drinking behavior.

Social norm interventions aim to reduce student misperceptions about alcohol and drugs by providing information about norms (Perkins et al., 1999). Evidence for the
effectiveness of this type of intervention is increasing (DeJong et al., 2006). However, some studies have found that although this type of intervention impacts student perceptions about drinking norms, it does not always translate into behavior change (Granfield, 2005).

Researchers continue to examine the effectiveness of successful alcohol intervention and prevention programs in terms of impacting students’ intentions, attitudes and perceptions about substance abuse. Some factors contributing to successful programs include: perceptions of peer resistance skills, positive attitudes toward non-alcohol use and perceptions of peer normative substance use (Bacon, 2001). The findings also suggest that a successful program can be equally effective for students regardless of gender, race or economic status. These findings are all from the students’ standpoint and not from that of staff involved in developing and executing such programs.

Another effective strategy for the prevention of alcohol misuse by students is through a risk-focused approach (Hawkins, 2012). This method targets at-risk students and helps them before they develop alcohol issues. This approach requires the identification of risk factors for alcohol abuse, methods in which risk factors have been effectively addressed, and the application of these methods to appropriate high-risk and general population samples.

An older trend of campus alcohol intervention and prevention programs focuses on social conditions (Gonzales, 1990). Intervention strategies are often designed to correct what is seen as a deviant behavior and encourage students to avoid practices that might be self-destructive. The premise of such programs is that certain groups, such as fraternities and sororities, foster and sustain unhealthy and irresponsible environments. In
order to deal with such problems, these environments need to be altered. However logical these intervention and prevention paradigms may be, students will resent them. Thus, two main problems associated with programs are: making students feel like deviants, and attacking students’ social solidarity.

On the same note, the Higher Education Center for Alcohol and Other Drug Prevention published a report on community college students and programs geared toward helping them. Students at community colleges differed from those at four-year institutions in terms of social demographics and alcohol problems. Community college students are generally older than their counterparts at four-year institutions. They are usually married and have dependents. They also tend to be part-time students working at full-time jobs. While community college students drink alcohol less often than students at four-year institutions, they reported using more tobacco, marijuana, cocaine, amphetamines and hallucinogens. Thus, prevention efforts at community colleges may need to place greater emphasis on illicit drug use. Unfortunately, the lack of resources is a common problem across the board. Research suggests that the most promising approach to prevention is employing multiple strategies that target the campus environment as a whole. A comprehensive approach would allow campus officials and students to play significant roles in prevention, and should include transparent policies, policy enforcement, education, intervention and treatment referrals, and program evaluations (National Drug Control Strategy, 2012).

**Collegiate recovery programs.** For nearly three centuries, individuals recovering from severe alcohol problems have created sanctuaries for sharing their experiences and spreading strength and hope. History suggests that when a vacuum of
need reaches a critical mass, recovering individuals and their families and visionary professionals coalesce into movements that birth new structures of support (Finch, 2005). The collegiate recovery movement began with the development of campus-based student support services at Brown University (1977) and evolved into more fully developed communities at Texas Tech University (Texas Tech University, 2007). The scope of practice at a collegiate recovery program is different than a traditional alcohol treatment program. The aim of most collegiate programs is to provide services such as psychological counseling, evaluation and support systems that would enable the students to live healthy lives and succeed while attending a university.

In the first decade, collegiate recovery programs tinkered with policies and populations, addressing substance problems from initial intervention to the recovery maintenance phase. Most programs started with only a handful of students and one or two teachers. The first college program at Brown University offered confidential services to faculty and students, but it was not a fully developed recovery community. One reason for such a spectrum of programming is the lack of foundational research and good established practices for recovery campuses. National quantitative data is sparse. An early evaluation of the recovery community at Texas Tech University found that its recovering students had a low relapse rate of below 5% and a high grade point average of 3.37. In comparison, the median undergraduate grade point average was 2.68 (White, 2001). This is a great reflection of the effectiveness of the support services.

Projections in 2009 showed that one million college students in this country have a substance abuse/use diagnoses (Chronicle of Higher Education, 2009). One wonders, can there be any other setting that is less hospitable for recovery from alcohol abuse than
a college campus? Campuses are inundated with opportunities for drinking—student parties in residence halls and fraternity and sorority houses and local bars and taverns advertising drink specials designed to attract students. The recovering student finds him or herself in a hostile terrain that appears determined to undermine his or her sobriety or moderate intake. One might feel virtually alone, confronting this environment awash in alcohol. The sense of alienation from the general community can be heightened by a conflict of recovery and academic priorities. Few classmates can relate to a recovering student’s distress (Misch, 2009). As demonstrated, it is not enough to congratulate students on their attempts to combat severe alcohol abuse or alcoholism; instead it is critical to put appropriate infrastructure in place to support students committed to recovery. In order to be successful, recovering students need a recovery community. Therefore it is essential that these recovery resources be located primarily on campus (Misch, 2009). When provided with necessary support, many recovering students can continue their studies and successfully navigate life on campus. Fortunately, there is a growing movement toward on-campus recovery programs. More universities are taking it upon themselves to create safe environments, and modeling themselves after Texas Tech University and other successful institutional attempts at curbing alcohol as a problem on campuses.

As with any new policy, funding, advocacy and evaluation are needed for such programs to continue expanding. In coming years, ongoing research and evaluation is needed to describe existing models and establish best practices. A way to address this is by gathering information from the front-line staff who are involved with these students and who can observe the effectiveness of such programs.
Assessment Methods and Effectiveness of Support Programs

While colleges embrace a variety of methods and approaches to reduce the impact of alcohol use and abuse among their students, there remains a gap in knowledge about the level of effectiveness of these approaches. Although universities have policies and programs designed to prevent student alcohol abuse, and have published reports pointing to the successful implementation of such programs, other factors should be taken under consideration. For example, many campuses have alcohol education orientations for incoming freshman. However, rather than curbing habits by the end of these orientations, students are acquainted with knowledge on how to avoid disciplinary consequences. As a result, statistics published by these campuses may be slightly inaccurate.

Under the Drug-Free Schools and Communities Act (DFSCA), institutions of higher education are required to review the effectiveness of their alcohol prevention programs biannually (White, 2001). This guide offers a method for gathering and interpreting student survey data on alcohol-related problems based on the methodology of the College Alcohol Survey developed by the Harvard School of Public Health. This survey allows administrators to compare their college drinking rates with those reported by other institutions from the perspective of students.

Even though mandated programs such as the DFSCA can assess the level of effectiveness of alcohol support services offered on university campuses, there still remains a larger need for other assessment tools to measure the effectiveness of programs. One way to examine the usefulness of alcohol support services is by in-class and online diversion programs for students to take on their own. The in-class component includes six hours of class time, including three sessions over the course of three weeks,
with an average class size of 15. It is followed by a standard lesson plan with the potential for variation as determined by discussions and the instructor. The online component consists of 3rd Millennium classrooms, the Under the Influence program and e-CHUG, an online alcohol assessment tool. e-CHUG shows if the programs are effective; if there are significant reductions in the usual number of drinks, perceptions of peer drinking and negative consequences; and if there are increases in protective behaviors (Lane & Schmidth, 2007). Assessing the effectiveness of alcohol support services is costly and time-consuming, not to mention difficult because there is not always access to students who have utilized such services and their feedback. e-CHUG is the most efficient of all the assessment tools. Because of its low cost, ease of dissemination and growing empirical evidence from web-based personalized feedback, this type of programming is ideal for colleges and universities with limited resources that need to target large numbers of students or want to provide unlimited access to program assessment. (Doumas & Anderson, 2008)

Federal, State and University Drug and Alcohol Policies

Intervention and prevention programs are often guided by university policies that in turn are affected by the chancellor’s office policies, which are regulated by state and federal mandates. Having students abide by certain set of standards allows them to get to know their standards of living and the penalties levied in cases of infractions. For this reason, it is important for university, state and federal laws to be aligned system-wide in order to deal with alcohol issues in institutions of higher education.

Federal, state and local laws help define college administrators’ responsibilities for taking action when students misuse alcohol. DFSCA and its 1989 amendments
require any institution receiving federal funds to implement an alcohol and drug education program; define a policy that prohibits unlawful possession, use and distribution of alcohol and other drugs; share information about alcohol and drug treatment programs for students and employees; adopt disciplinary sanctions for students and employees who violate campus alcohol and drug policies; and ensure that disciplinary sanctions are consistently enforced (DeJong et al., 2006). The amendments to the Family Educational Rights and Privacy Act (2011) now permit colleges and universities to disclose to parents any violations of local, state and federal laws and institutional policies and rules related to alcohol. In addition to complying with the law, each college has an obligation to define and adopt an institutional policy on alcohol that is consistent with its culture, values, mission and population. Because institutions are so diverse, no single policy on alcohol is appropriate for more than 3,000 American institutions of higher education (Gulland, 1994). An institution’s history, demographics, philosophy and mission should guide the policy development process.

Since one of the most widespread health problems on college campuses in the United States is high-risk alcohol and drug use, the U.S. Department of Education's Higher Education Center for Alcohol and Other Drug Abuse and Violence Prevention has recommended the following key environmental strategies: 1) offer and promote social, recreational, extracurricular and public service options that do not include alcohol and other drugs; 2) create a social, academic and residential environment that supports health-promoting norms; 3) limit alcohol availability both on and off campus; 4) restrict marketing and promotion of alcoholic beverages both on and off campus; and 5) develop campus policies and enforce them along with local, state and federal laws.
A central feature of the center’s efforts is the promotion of multiple alcohol prevention strategies that affect campus and surrounding community environments as a whole and can thereby have a large-scale effect on the entire campus community. Implementing effective environmental strategies will be more likely if the following is present: a strong presidential leadership; a campus task force that includes a broad spectrum of faculty and staff members and students; engagement with the community through a campus coalition; and the active participation of college officials in public policy debates especially at the state level. The center offers an integrated array of services to help colleges implement these prevention strategies.

This paper describes research that shows how environmental prevention strategies can influence drinking among college students. It cites PartySafe@Cal, a health services program at the University of California, Berkeley, that promotes environmental prevention efforts and educates students about alcohol risk management and DFSCA amendments and other special considerations that apply to college alcohol abuse. The paper evaluates recent cases to highlight court standards that determine whether a duty of care exists and facts that support the determinations of liability. And finally the paper discusses points that colleges and universities may wish to consider in determining whether their existing policies warrant review and revision—specifically, the considerations that need to be addressed in order to meet the DFSCA's minimum requirements; going beyond these requirements; and the problems that might arise from enforcing policies such as infringement of student rights and privacy and due process issues.

Gaps in Knowledge and Practice
Drugs and alcohol remain one of the main concerns among faculty and staff on American college campuses. If not adequately addressed, this epidemic can harm the most precious commodity of the American colleges and universities—its students. Institutions of higher education have attempted to address students struggle with drugs and alcohol with an array of strategies, programs and prevention methods. Among these are services that have been created at different levels to assist students. But what seems to be lacking is an understanding of how these services need to be formulated based on institutional needs, how they need to be implemented by the stakeholders who will be coordinating such programs, and, most importantly, how they will be advertised so that students will be encouraged to use them. Another important factor that is missing is how these programs will measure their effectiveness. In order to create more effective programs, staff and administrators need to address these areas.

**Conceptual Framework**

In order to understand how drug and alcohol programs on college campuses emerge, develop and change, a conceptual framework is necessary. I used diffusion of innovation theory to support the interpretive work on this study. Diffusion of innovation seeks to explain how, why and the rate at which new ideas and behaviors are spread through cultures. Diffusion is the process by which members of a social system communicate an innovation through certain channels over time. Since institutions of higher education are social systems and the concept of dealing with drugs and alcohol occurs as a sequence of tasks, diffusion of innovation helps shine light on the different ways that programs are formed, developed and operated effectively (Rogers, 1995).

With a diffusion of innovation framework, there are four main elements that
influence the spread of a new idea or way: innovation, communication channels, time and social systems. This process relies heavily on the competencies, knowledge, and social and personal attributes of those involved; and these elements work in conjunction with one another. Central to this theory is process (Roger, 1962). Individuals experience five stages of accepting a new innovation: knowledge, persuasion, decision, implantation and confirmation. The application of innovation theory to drug and alcohol support services must begin with acknowledgment of the existing problem through all five stages and must grow when each area is addressed and resolved.

Summary

Drugs and alcohol pose a challenge for students in higher education. To address such a problem, more universities and colleges across the nation have been forced to create and implement support services in order to help students deal with this obstacle. Over the last several decades, institutions have created programs, interventions and ways for students to seek help in order to succeed in their personal and academic lives. Nevertheless, it is evident that the lack of information and experience to address such a problem has created an atmosphere that is in some cases not conducive to help students. After examining different areas of literature, I discovered that there are particular areas that still need more focus in order to generate more effective programs. Some of the areas that called for special attention include lack of information about the atmosphere and type of encouragement that bring about student support programs; the different needs that must be addressed by these programs; the effectiveness of these programs; and ultimately, how students are identified and encouraged to seek help from these programs.
CHAPTER 3

METHODOLOGY

Introduction

The purpose of this study is to examine factors that shape the development of alcohol intervention and prevention programs at a large urban regional public university and a small private liberal arts college. Ultimately, the goal of this study is to develop an explanatory model that will help the development of effective programs for college students dealing with alcohol abuse and dependency. The following research questions guided this study: What factors shape the development of alcohol prevention and recovery programs at a regional public university and private liberal arts college? How do universities identify support services designed to help students struggling with alcohol issues?

This chapter provides a detailed description of the methodology used in this study. In it, I discuss the research tradition that fit the parameters of the study, my research settings and where I conducted my study. I introduce how I chose eligible participants. I dedicate sections to instruments that I utilized to recruit prospective participants, and data collection in which I address how I collected information of interest. I discuss how I analyzed data. Lastly, I discuss my role as a researcher and what I considered for that role.

Research Design and Tradition

The research tradition that I used in this study was grounded theory. One of the main reasons that grounded theory best fit my study was that it allowed me to ask questions about what alcohol intervention and prevention programs offer, how programs
handled alcohol issues and their level of effectiveness. The goal of my questions was to
discover certain themes that can be used to address concerns about the effectiveness of
these services and produce better programs and outcomes in the future. This study used a
grounded theory approach to develop an explanatory model based on the data gathered.

I utilized grounded theory to address questions and findings resulting from this
study. According to other researchers, grounded theory is a unique method of qualitative
analysis for theoretical development (Kriflik & Zanko, 2005). Most conventional forms
of qualitative analysis require the researcher to preselect a path of investigation; therefore
investigation and theoretical aggregation are a product of discovery, and data is informed
by this discovery. But grounded theory works in a contrary manner by being inductive.
Using grounded theory, a researcher is afforded the luxury of maintaining an open mind
and allowing the data to inform the discovery of theory. Consequently, emergent findings
are highly representative of the natural phenomena, and evolving theories are not forced
to fit into preconceived molds explicated from literature. Through a theoretical and
practical application of grounded theory, my research sought to explain the formation
process as well as the effectiveness of student support services.

Research Settings

For the purposes of this research, I used two sites: a large urban regional public
university and a small private liberal arts college in southwestern United States. The large
public university is a diverse community with nearly 36,000 students and more than
4,000 faculty members and staff. The university has been in operation since the 1950s.
This university has been recognized by the region and the nation for its outstanding
contributions in academics, arts and community service and boosts a dedicated faculty
and staff. In 2013, the university admitted its highest numbers of freshman and transfer applicants. For protective purposes, I addressed this university as University of Golden Coast (UGC).

UGC’s academic mission included language about empowering students to find purpose, discover true passions and continue on a path of excellence through an array of support services such as a counseling department in which students can find resources and information for coping with a variety of obstacles to academic progress and a better quality of life.

Due to UGC’s diverse population and proximity to a large urban city, access to drugs and alcohol was easy. To deal with alcohol issues, the university offered services through counseling, student housing, the health center and, in some cases, Greek organizations. Student affairs was the branch of the university that dealt with alcohol-related misconduct. UGC is located in the center of many traditional and non-traditional drug and alcohol treatment centers in the city.

The small private college is a diverse scholarly community dedicated to excellence in the liberal arts and professional studies. Rooted in Christian faith, the university encouraged critical inquiry into matters of both faith and reason. Its mission is to prepare leaders for a global society and imbue them with strong character and moral judgment. The university has nearly 4,282, 2888 undergraduate students, 1,394 graduate students, 168 full-time faculty members and 242 part-time or adjunct faculty members. The university offers 35 undergraduate majors and 34 minors, accelerated bachelor's degrees for working professionals, and graduate and certification programs through its College of Arts and Sciences, School of Management and Graduate School of Education.
Like UGC, it provides counseling for students struggling with mental and psychological issues such as alcohol abuse. I refer to this second university as Ozel University (OU).

**Site Selection**

I used the criterion strategy in selecting UGC and OU as my sites for researching the formation and effectiveness of alcohol programs for college students. By utilizing this strategy, I was able to set boundaries for my sites by “connecting [them] directly to [my] research questions” (Miles & Huberman, 1994). The criteria that I used for implementing the selection of my research settings were: 1) a four-year public university, 2) an institution that has attempted to assist students who are struggling with drug and alcohol issues by providing services specifically geared to help this particular population, and 3) a private university that also helps in addressing alcohol issues for students. My affiliations with the staff and administrators who work for student support services on these two campuses helped with the process of site selection. Due to my good rapport with these groups, I anticipated minimal problems accessing the sites.

**Research Sample and Data Sources**

My data sources consisted of staff and administrators involved with student support services at UGC and OU. The study population worked directly on the formulation, creation and implementation of support programs that served students facing alcohol problems of some sort.

I also utilized select documents such as newspapers and statistics provided to me by participants to help me review the history and incidents related to student alcohol abuse and dependency on the two campuses.
Sampling strategy for staff and faculty. I utilized a combination of criterion and network sampling strategies to select appropriate participants for my study. Criterion sampling involves selecting cases that meet some predetermined criterion of importance (Patton, 1990). In this case, I looked for staff and faculty members who were in one way or another involved with students who struggled with alcohol abuse, addiction or dependency. I was interested in staff and faculty who were directly involved with or responsible for forming student support services in capacities such as creating and implementing such programs. I was also interested in staff members who were directly in contact with students with alcohol problems who have been utilizing support services. The eligibility criteria for inclusion in the study was as follows: 1) must be at least 18 years of age, and 2) must currently hold an administrative or staff position in one of the following service areas on the two campuses: student affairs, counseling, health services, residential life, Greek life, student government or activities, or student conduct or discipline. Another important criterion for participants was that they must have been involved in their current administrative or staff role for at least a year. By setting this particular boundary, I ensured that I was gaining access to participants who have had enough experience and time in their respective roles to have knowledge about resource allocation as well as examine thoroughly the effectiveness of their programs and give constructive feedback about how things work.

Additionally, I used the network sampling strategy in which existing participants recruited future subjects from among their acquaintances to participate in my study. After engaging in my study, participants talked about it with their friends and coworkers and through this process others became interested in volunteering for my study. If I lacked
participants, I then asked my gatekeepers and informants to recommend possible candidates for my study. Once I finished gathering participants and conducting interviews, I was referred to others interested in participating in my research through a chain method by already committed research participants.

Initially I planned on interviewing eight to 10 staff and administrators involved in alcohol programs. Prior to their selection, I conducted an open search, looking for a particular group who might be interested in taking part in my research. By meeting particular informants and participants I was soon able to find nine candidates. Once identified by institution and position, I emailed candidates with a research announcement (see Appendix A). The research announcement and email invitation described the purpose of and reasons for my study and welcomed candidates to respond back via email stating their agreement to participate in the study. At the time, my efforts attracted a sufficient amount of participants and I was able to move forward with the interviews.

**Sampling strategy for documents.** Through the network sampling strategy and suggestions from research participants, I looked for institutional and program documents related to my research and interview questions. At the time, I looked to my participants to introduce me to alcohol program materials, newspaper articles or policy and procedural handbooks that could be helpful and relevant to the experiences and perspectives they shared with me.

**Ethical Issues**

Given the ethical considerations of my participants, I addressed potential concerns regarding confidentiality. It was crucial to provide my participants with a level of anonymity so that they would not suffer from any negative repercussions as a result of
their responses. Another ethical concern that had to be addressed in a study of this kind was my researcher’s ability to transcribe the story that my participants wanted to tell. For instance, I identified several biases might interfere with my ability to appropriately represent my participants’ perspectives. In order to address these concerns, I needed to be diligently self-reflexive over the course of this study. I observed and checked the way that I dressed and spoke when I introduced myself to my participants. During the interviews I kept a journal and tracked my biases, thoughts and emotions. Journaling allowed me to write about my thoughts as an observer as well as a clinician with prior experience working with college-age students struggling with alcohol issues. This process helped mitigate my biases and allowed me to approach each interview and participant with a clear mind and vision. Finally, I asked my fellow researchers to analyze excerpts from the data that I collected in order to ensure that they were finding similar themes and codes. I did this at the end of my research. I asked two of my colleagues from the same doctoral program to look over my data excerpts and themes and see if they agreed with my findings.

**Data Collection Instruments and Procedures**

Given that this case study attempted to systematically generate a model of campus-based alcohol prevention and intervention program development, I used interviews with staff involved in developing and implementing such programs. The bulk of interview questions sought to elicit information about attitudes, opinions, perspectives and meanings. Interviews were effective ways to gain the much needed information because they gathered data from staff about how programs were created and implemented as well as anecdotes of success rates and their experiences with students (Hannan, 2007).
Staff and Faculty Interview Protocol

My first instrument was a protocol conducted through semi-structured interviews with the staff in charge of generating and executing alcohol support programs for students. Through these extensive interviews, much information was uncovered by my questions that aimed at identifying the agents involved in these processes and investigating how these programs were created, funded and implemented. Based on participant answers, I further explored any questions that needed clarification or piqued my interest regarding the effectiveness of support programs offered to students with drug and alcohol issues.

Staff and Faculty Interviews

I used interviews as the primary data collection procedure for this study. I conducted interviews with participants, staff and administrators involved in alcohol programs at UGC and OU campuses. Participants were identified through a combination of criterion and network sampling strategies. As I identified each participant, an email was sent out to him or her together with the research announcement (see Appendix A). The research announcement and email invitation described the purpose of and reasons for the study and welcomed candidates to respond back via email stating their agreement to participate in my study. During interviews, I continued to use the network sampling strategy and invited participants to identify colleagues who may be interested in participating in my study. The logic behind this was so I could ensure a substantial sample size of participants in case anyone, for multitude of reasons, dropped out later on in the study. After candidates initially contacted me via email or phone, I set up interview times. I emailed questions in advance along with an informed consent form. The logic
behind sending the questions in advance was to account for the fact that the participants were busy individuals, and I didn’t want anyone to be blindsided by the topics or the questions that I wanted to ask during the interview. The interview location changed depending on the candidate. I met each candidate in his or her own office for comfort and privacy purposes.

**Document Review**

I looked for references to college drinking, its impact on students and college life, student health concerns, peer pressure and consent, alcohol programs and effectiveness of such programs in documents. I looked at counseling and student affair programs and procedures. I looked for news articles or community newsletters in the surrounding area that addressed the incidence of alcohol issues at the two research sites. When participants referred to events, incidents or procedures during the course of the interviews, I identified the corresponding documents and made a file.

**Data Analysis**

The final phase of my methodology was to inspect, clean, transform and code the collected data with the goal of reporting, making suggestions and forming conclusions based on that information. Interviews were recorded by type recorders and in order to transcribe them I had to listen to each interview and utilize the play and pause buttons to control the recordings while I transcribed the sentences and paragraphs as they were spoken. I typed up each interview into its own Microsoft Word document. After finishing each report, I replayed the interview to make sure the recording matched the transcribed document. During this process I was able to learn a lot more about themes that were brought up during interviews and pay better attention to information that I had missed
while taking notes, for example, the pauses or little sounds that I might have overlooked while I was busy typing. From the transcribed conversations and direct quotes of participants, patterns of experiences emerged. The next step in a thematic analysis was combining and cataloging related patterns into categories. I pieced together themes that emerged from the participants’ stories to form a comprehensive picture of their collective experiences. I first performed some hand coding from the transcripts. This aided me in examining the basic word themes and patterns. Using the coding from the transcription, I sought an analysis of the emerging themes and key concepts. This process was aided by the utilization of ATLAS.ti. ATLAS.ti is a Microsoft Windows software application that integrates a set of tools to support large amounts of data analysis across textual, audio and video files. I ran the transcribed file through ATLAS.ti. It developed codes that allowed me to expand, eliminate and organize my handwritten codes into networks to produce a thematic analysis of the interviews. I handled each interview through this process, yielding a thematic analysis of all emerging themes.

Each coding category related to the experiences attached to creating, implementing and executing alcohol intervention and prevention programs and their level of effectiveness from the perspective of my participants.

**Coding**

Once I prepared the data, I implemented the first transcription phase using ATLAS.ti. Upon the first full reading, my task was to expand and eliminate initial codes and develop new codes. Codes were created based on questions and categories that I had initially created by hand. I read through each interview transcription and choose themes as well as subthemes that were aligned with the literature review as well as the purpose of
each question asked. I also looked over the codes a second time to further clarify, collapse or expand on discovered codes. Then using the codes from the first interview, I went over each interview and applied codes to the second and subsequent interviews. I also identified additional codes in the transcriptions and reread interviews to look for codes found in subsequent interviews.

I read each document the first time through, identifying initial codes as well as the codes I derived from my interviews. In a second reading of the documents, I expanded, clarified and collapsed these codes, paying careful attention to codes that were anomalous to this data set. Using a similar process of networking and thematizing, I paid special attention to codes and code families found across documents and interviews in order to analyze the data more efficiently.

**Networking and Thematizing**

Once I identified, collapsed and clarified my codes, I connected codes to develop categories that had similar themes. I looked for codes across data sources, identifying recurring codes and code families so that I could create networks among them clearly. Identifying themes allowed for categories of information to flow together and establish areas of focus in the research.

**Researcher Roles**

In qualitative research, the researcher is an instrument. Interaction and collaboration with participants take place in order to gather data. Sometimes this vast arena can be overwhelming. I anticipated having multiple roles to fulfill while conducting this study. Firstly, I served as a clinician, because having previously worked with students with drug and alcohol issues, I had already developed a sense of desire and
urgency for this kind of research. Secondly, I served as a doctoral student who chose and performed the research needed to complete my dissertation task. On the same note, I acted as a researcher seeking to improve programs and making a contribution to the educational world as a scholar. Interacting with my clients in the past and with my participants during this research allowed me to advocate on their behalf and vocalize their needs and opinions about what kind of programs work and do not work. One of my main roles as a reformer was identifying what works now and what can be done to make more effective programs in the future. All of these perspectives allowed me to perform multiples roles and interact with my participants and topics in many different ways.

**Researcher Biases**

Throughout the study, I made assumptions about programs and my target population that could potentially affect my work. As a clinician, I have worked with clients struggling with alcohol issues and witnessed their lack of access to adequate campus resources before. As a student advocate, I knew that some available programs were not conducive to helping such students. As a researcher, I recognized that there is a vast gap in what we know about these services and their effectiveness. Another one of my biases was the knowledge that some institutions of higher education do not allocate the necessary funds for alcohol programs. Such biases affected how I entered this research and the amount of care that I would need to give while conducting my study.

I suspected that my biases would affect how I saw the case, its focus and my participants’ reactions during this study. I was concerned that my participants would recognize me not just as an objective researcher but as a student advocate and potential educational reformer. I worried that I would act too much like an advocate. And I feared
my role as a clinician would get in the way of my role as a researcher, which required me to sit back and observe. If participants saw me as a clinician, I worried that they would be reluctant to share their thoughts and that would jeopardize the study. Therefore I utilized several strategies to counter this potential effect. Firstly, I made a conscious effort to offset my reactions to the responses of my participants by keeping my feelings in check and recognizing that what I felt might not be what my subjects feel. I made certain that I was not leading the responses with my own emotions. Secondly, I framed my questions carefully and had my peers examine them to ensure that they do not lead students to give a particular answer. Prior to my interviews, I solicited feedback about the questions from my peers and my dissertation advisor.

**Case Effects**

I did anticipate being affected by the participants in this research. My respondents’ answers may have affected the way in which I interpreted my data. Since I was walking into this study with a fixed set of values that have great personal significance, it was quite possible—even likely—that I picked up on themes that affirmed my current belief system. By the same token, I was more likely to miss themes that were not congruent with my values and assumptions. In order to counter this, I utilized several strategies. First, I triangulated my data. I analyzed student, faculty and staff interviews; survey results; and documents. Another strategy that I used was asking my colleagues to analyze excerpts from my data so that I could obtain a second opinion regarding the data. When my peers gleaned the same themes from that data, I felt more confident that it was student perception, and not my bias, that was being expressed in this study.
CHAPTER 4

RESULTS

Results

The purpose of this grounded theory case study was to examine the factors that shaped the development of alcohol intervention and prevention programs at a large urban regional public university and a small private liberal arts college. In order to understand factors that influenced the development of college alcohol programs, I explored the following questions: 1) what institutional, individual, cultural and financial factors influence the development of alcohol intervention and prevention programs at a large urban regional four-year university and a small private liberal arts college, and 2) what shapes the assessment and improvement of alcohol intervention and prevention programs at a large urban regional four-year university and a small private liberal arts college. These questions helped me understand the steps and procedures that universities go through to create, implement and put to work programs that address the needs of students who struggle with alcohol issues. I collected data through interviews and participant observations.

I used UGC’s and OU’s publically accessible websites to identify potential participants who met the eligibility criteria. Once identified by institution and position, I emailed potential participants with a research announcement. Nine participants responded to the email invitation and I interviewed all nine participants during January and February 2014. The goal was to capture the college administrators’ and staff’s levels of knowledge and involvement with programs geared at serving students struggling with alcohol issues. The research questions led me to exploring new avenues, involving particular staff and
administration from the two research sites.

After I completed the interviews, I transcribed all nine interviews and prepared the data to start my analysis. The analytical process consisted of the development of codes based on empirical literature followed by the creation of cultural themes. I uploaded the interview transcriptions to ATLAS.ti. I created codes from the transcriptions and observations then entered them into a Microsoft Excel spreadsheet. After reviewing quotes, I merged similar codes. The first theme to emerge were similar issues of college drinking followed by themes related to the formation, creation and implementation of student support services. After I identified the themes, I looked for subthemes. In this chapter, I organize the themes in the order they arose during the data analysis process. I describe who the participants of the study were, using pseudonyms instead of the real names of individuals and institutions to maintain confidentiality. I introduce participants by describing their positions and levels of involvement at their respective universities. Then, I discuss the results derived from the data collection by creating themes. After developing themes, I address each one and the respective conversations that I had with the participants. Lastly, I provide a chapter summary.

**Field Entry and Exit**

I interviewed eight individuals and observed one individual in action. I contacted each individual via email to introduce my research topic and request his or her participation. After receiving an agreement to participate I forwarded each individual a consent form formalizing his or her agreement to participate. I then directly emailed each individual to schedule a specific date and time to conduct the interview. At the end of
January 2014, I emailed my first participant, stating my interest in his participation in my study. Soon after, I scheduled my first interview during the first week of February.

**Brad: UGC director of psychological services.** I was introduced to Brad by a colleague who mentioned that Brad might be interested in participating my study since it addressed students and their wellbeing. Brad was the UGC director of psychological services with more than 30 years of experience in student services at public and private institutions based in large metropolitan areas. Upon reading his biography on UGC’s website and discovering his many years of his practice with students as an educator and psychologist, I knew that he would be an asset to my study. After exchanging an initial set of emails and marking my calendar for our sit-down interview, I asked Brad to refer me to other individuals, such as colleagues that he felt would be interested in participating in my research. In an email response, he copied the next participant, Shawn, and introduced my research to him.

**Shawn: UGC student conduct officer.** Shawn had been working for many years as a student conduct officer for UGC, handling all matters related to rules governing student conduct and repercussions faced by a student when he or she breaches the university’s code of conduct. Upon receiving Brad’s email, I introduced myself to Shawn and asked if he would be willing to participate in my study. He responded by sending me an email and expressing his excitement about the topic since he considered alcohol problems on campus an important issue. He told me that he would be happy to take part in such a study. We agreed on a time and a place for the interview.

**Tom: UGC general manager of the associated student body.** In fall 2013, I attended UGC’s presidential convocation during which the president addressed all faculty
and staff on campus and shared university priorities for the year. I attended because I wanted to know what would be important to the university in the upcoming year. As I was speaking to a colleague about my research topic and my progress, he offered to introduce me to a friend of his named Tom who happened to be the UGC general manager of the associated student body. My colleague walked me over to Tom. During our first interaction, Tom was vocal about the importance of my study topic and expressed his desire to participate. Tom had been in his current position for more than 15 years and offered many answers to questions about student programming and involvement. In the past, he has held the role of the associate dean of students and general manager of the programs at other universities. His rich experience made him a great candidate to sit down with and discuss student service programs. Upon meeting one another, we exchanged business cards. I followed up with him shortly thereafter and invited him to be one of my research participants. He agreed, and we proceeded by setting up an appointment for our interview.

During Tom’s interview, he suggested that I should speak to Robert, the UGC vice president of student affairs. Tom offered to put me in contact with him. I expressed my level of gratitude for his suggestion and agreed on an introduction. Tom sent an email to Robert and told him about my research topic and my desire to get in touch with him. After Robert agreed to speak with me, Tom passed his information along to me, and followed up with an email that introduced me to Robert and requested his participation in my study.

Robert: UGC vice president of student affairs. After receiving Tom’s introduction, I followed up with Robert via email and thanked him in advance for
showing interest in my research. He put me in contact with his secretary to make arrangements for an interview. Unfortunately due to a campus emergency that Robert had to attend to, our first meeting was canceled. Finally on the fourth try we were able to sit down and discuss my research questions.

While I was interviewing and conversing with administrators at UGC, I kept looking for a way into the OU circle. Finally, after much deliberation, I scheduled a meeting via phone and called Brad from UGC and asked if he knew his counterpart at OU. Brad responded positively and informed me that he was a close friend of OU’s director of student psychological services.

**Justin: OU director of student psychological services.** In late January 2014, Brad put me in contact with Justin, the founder and director of the student psychological services at OU. Justin had been working there for the past eight years. Upon receiving my email, Justin responded and expressed his willingness and excitement to participate in my study. We set a time for our interview. During the interview, he offered to put me in contact with other key members of OU staff such as Cameron from the student involvement and wellness program.

**Cameron: OU coordinator of student involvement and wellness.** Justin first gave me Cameron’s email. I contacted her immediately, introduced myself and asked if she would be interested in participating in my study. She responded enthusiastically. However, she mentioned that she was a bit hesitant since she had joined the OU team no more than a year ago upon completing graduate school. She felt that her lack of experience would prevent her from contributing anything significant to my study. I
relieved her of her worry and expressed my desire to speak with her anyway. We set up a time for the interview.

**Scarlet: OU senior coordinator of residence and student conduct.** The second person that Justin put me in contact with was Scarlet, who was the senior coordinator of residence and student conduct at OU. Justin sent an email, first asking Scarlet if she would be willing to take part in my study and then forwarded my information. Scarlet emailed me a few days later and announced her willingness to participate in my study. Scarlet had been recruited to OU several years ago. She was quickly able to move up the ranks. By the time we met, she was already in a senior position with the OU office of conduct. Because of the nature of her position and her level of involvement with students struggling with alcohol issues, she expressed her excitement for her participation in my research.

**Bradley: OU dean of students.** My last OU contact was Bradley. He was another one of Justin’s contacts. Justin personally called Bradley to ask for permission to put me in contact with him. Bradley had been the OU dean of students for 15 years. He has held several high administrative positions such as the dean of student affairs, the dean of academic affairs and the vice president of various public and private institutions across the nation. By the time we sat down for our interview, he was preparing to retire by the end of that fiscal year. He was responsive and welcoming when I sent him an email. His response was engaging and encouraging as he declared my topic to be one of importance in the higher education sphere. We set up time for an interview and proceeded.

Bradley was the last participant that I recruited for my study. I had nine interviewees in total. I met with each participant one-on-one for a scheduled interview
during which I asked my preselected questions. At the conclusion of each interview, I reminded each participant about the confidentiality that would be applied to the interview and reassured each individual of his or her anonymity. I also promised participants that I would reach out to them if I needed to confirm information taken from their interviews. After the conclusion of each interview I emailed a thank-you letter stating my appreciation for the time that each participant spent with me. My interview with Bradley concludes this portion of my paper and I move on to analyze the information that I collected.

**Themes**

Throughout the analytical process, I found recurring themes connecting various aspects of support services for students struggling with alcohol issues. The themes that emerged in this analytical process reflected the knowledge and experiences of each participant and their roles in the support services. As each participant reflected upon their experiences and the culture of their institutions, he or she created a broad picture of the kinds of support services offered at the institutional level to students struggling with alcohol issues and the levels of effectiveness of these programs.

Participants’ conversations continuously brought up university culture, policies and procedures as well as the weakness, strengths, and effectiveness of these programs. During the data analysis, three overarching themes emerged. Firstly, each administrator had his or her own opinions and perspectives on alcohol as a major problem on his or her college campus. Participants attributed many factors to the existence of the alcohol problem on their campuses and spoke in great detail about each of these factors. Secondly, participants identified the university culture and environment as an important
factor influencing the necessity of intervention and prevention programs. In the
participants’ opinions, alcohol support services have to be tailored to the needs of each
campus. Lastly, participants spoke about the different student support services offered at
multiple levels to students struggling with alcohol issues. They also spoke about the lack
of assessments in place to measure the effectiveness of such programs. This results in
lack of knowledge about the types of programs that benefit students most and which are
more effective in addressing alcohol issues on campus from the administrator
perspective.

**Administrator perspectives on the campus alcohol problem.** The first theme to
emerge from the data analysis was the administrators’ point of view on alcohol as an
issue for students on their campuses. The theme of alcohol as an issue continuously came
up in the interviews and during coding. I had participants discuss their thoughts and
feelings about alcohol as an issue in general. Then each participant independently
identified alcohol as one of the primary problems faced by college-age students. After
establishing alcohol as one of the primary concerns on college campuses, some
subthemes emerged as well—such as the problems that arose as a result of excessive
alcohol use by college students. Certain subthemes appeared such as: 1) alcohol as a
personal, social and academic obstacle in college student lives, 2) issues related to
alcohol on college campuses, and 3) reasons why students use and abuse alcohol.

**Alcohol as a personal, social and academic obstacle.** Alcohol is seen as an
obstacle in higher education for many different reasons. Participants spoke about alcohol
hindering the personal, social or academic lives of students and bringing many negative
consequences with it. Administrators addressed how alcohol affected the personal lives of
students by creating health, wellness, financial and relationship burdens. They also addressed how it created an array of issues for the individual or the individual’s family, friends or community. Lastly, they believed alcohol weakened the academic performances of the students involved. Therefore, the outcomes associated with alcohol abuse—for instance, fewer students completing their degrees and graduating—were often seen as affecting the academic community as a whole.

During their years in academia, participants confirmed that they have encountered alcohol as an issue on many different levels. As Brad, the UGC director of psychological services, pointed out, “Universities are in a particularly precarious position, warehousing students who are seen as normative to be drinking…using alcohol as a way of socializing and having fun can be hazardous mix.” While this lethal mix can in many ways disturb and bring many problems and challenges for students; administrators are left in a quandary. Brad explained why: “I don’t want to take a normal stick approach and say alcohol is bad and abstinence is good. I think it’s a lot more nuanced than that. But at times what has been seen as plain old fun has ended up being dangerous.”

The danger that Brad referred to is a specific kind of alcohol use that, in many cases, bring a host of new problems and/or aggravated existing ones. Alcohol is one of the most commonly used drugs among college-age students. According to Bradley, the OU dean of students, “Alcohol is the dominant drug of choice for college-age students and nothing else has ever been able to arise to the same level of dominance.” For most college students, alcohol seemed to be the most familiar substance; as Bradley explained, “In our society, alcohol is tied…to everything; we celebrate and mourn with
alcohol…younger adults…practice in [a] large spectrum of events and feelings with alcohol.”

The fact that alcohol remains to be such an important part of the lives of young adults also influences students to view alcohol as a rite of passage. Shawn, the UGC student conduct officer, said:

[Alcohol is] an ongoing challenge for higher education to address because of the age group that we service. Every year we have a new…crop of freshmen…and transfer students that come to us with a wide variety of aptitudes and skills in managing their consumption of controlled substances. Alcohol poses a specific challenge because it can be deadly…[and] addictive…an additional challenge [is] that there are many misconceptions surrounding alcohol.

As Brad mentioned, alcohol carries with it an array of challenges for administrators and remains a problem among college students. The availability of alcohol along with the fact that students see no harm in using it poses a challenge for higher education institutions and educators dealing with this problem on a daily basis.

Among these misconceptions, one that seems to stand out is that students see college and drinking as things that go hand-in-hand and drinking as a rite of passage. This misconception brings with it many concerns for administration and educators. Addressing these misconceptions was a common subtheme in the interviews. According to Brad, “Students view alcohol as an agent that helps their socialization and allows to bond better with others.” This misconception causes students view alcohol abuse as not their problem. Shawn mentioned, “Students feel that only other people outside of their circle could have issues with alcohol and no matter what the issue of alcohol abuse never
affects them.” Students who drink heavily tend to view alcohol use as integral to their student roles, and feel entitled to drink irresponsibly. Robert, the UGC vice president of student affairs, said:

I think, in a global sense, we recognize alcohol as one of those factors that does impact… student success. It plays out in different ways, depending upon the nature of the institution and its location and a host of variables that really contribute to the culture of drinking on a particular campus. I don't think that there's anyone in my profession who would assert that there is no relationship between the two. There clearly is. Also, the other relationship is what students see as their right and the rite of passage that they need to partake in.

Since most students see alcohol as part of their college experiences, they feel that it is within their rights to use and abuse alcohol in any way that they desired. When it comes to alcohol, there are both many advocates and critics on college campuses. The campus is where the desires of students to enjoy the rights and freedoms of adults collide with the concerns of parents, university officials and neighboring communities.

**Issues related to alcohol on college campuses.** Alcohol consumption on college campuses can cause many issues. When speaking about college drinking, there is always a line that is being drawn. This line is often an unclear one formed between two camps: on one side, drinking is managed on a reasonable level; on the opposite side, drinking causes problems.

Managing alcohol on a college campus involves addressing the blurry line drawn by college students. Brad said, “That line may be different for each person, but there is a line, sometimes, that our students cross where [alcohol] use becomes detrimental to their
physical health or mental health and, perhaps, their academic performance.” He recounted events he had witnessed during his tenure, “Things like alcohol poisoning that can be life-threatening. We have seen students…so reliant on alcohol that it becomes part of their daily routine, and [they] have a hard time keeping their commitments.” On the same note, Tom stated, “We have seen students become violent with alcohol use. We have seen students that have been targets of sexual assault because of alcohol abuse. We've seen students who have been perpetrators of sexual assault because of alcohol abuse. When I say because of alcohol it means alcohol plays a significant role. We have seen students who have tragically lost friends because of drinking and driving.” Each participant mentioned issues such as drunken driving, sexual assault, property damage, physical altercations and academic problems. Shawn further pointed out that alcohol can lead to:

An enhancement or a kind of a magnification of negative behaviors or positive behaviors. Now [when] negative behavior [occurs that is when the student] gets to me. Positive behavior is never reported to me. So if somebody becomes [more] funny, more outgoing or more jovial [when he or she is drunk]—well, that doesn't rise to a violation. So [the] population that I [see] is obviously skewed…I'm dealing with people [for whom alcohol has become] a problem.

The line that Brad refers to is a blurry one, and one that most people, certainly students, have no clue that they are crossing when they are intoxicated.

According to Shawn, lost inhibitions and an inability to understand whether or not one is crossing boundaries are essential elements of using and abusing alcohol. Robert too said, “One known fact about alcohol is it leads to impaired judgment. As a result of
this impairment, individuals participate in unreasonable and problematic behaviors.” He added, “Sometimes because of drinking excessively, students don’t eat or tend to their most basic health needs such as hygiene.” This self-destructive pattern, once started, sometimes becomes difficult to stop. There are certain safety issues, such as when students consume alcohol to a point in which they become potentially self-injurious or a risk to others around them.

Participants brought up safety issues, from drunk driving to reckless behavior, as forms of harm that may occur to self or others as a result of drinking. Robert raised another concern: “[Another consequence of alcohol] would certainly be its impact on academic capacity and the ability to think clearly and in an effective and productive way to accomplish academic work.” In addition to obstructing the work of students, Robert said drinking can contribute to a “general malaise or a lack of diligence.” In the same vein, Brad added that since college students are generally of a younger age, “Physically, students can tolerate [more alcohol] abuse and so they can drink an awful lot without some of the physical consequences [of their adult counterparts]. But there are [still] quite a few mental health consequences.” Participants named some of these consequences, such as missing class, avoiding school work and not thinking about the future. As participants pointed out, the self-destructive patterns of drinking among college-age students can bring with them an array of issues, ranging from personal, communal as well as academic.

**Reasons for alcohol use and abuse.** There were many reasons why students drink. As Bradley mentioned, “At the beginning of every school year, students arrive to college campuses with many hopes and dreams of future accomplishments and also, in
many cases, a sense of newfound freedom that, at times, would prove to be destructive to their wellbeing.” Bradley further reinforced this with another observation, “Alcohol is a very normal part of our culture and development. [With] students who come to college, there is almost as expectation that alcohol will be a part of their…experience.” Students know where and how to get the alcohol, and how to sneak alcohol. To them, alcohol is a game. Brad painted a stark reality:

A lot of people don't know that alcohol is used to treat depression—to self-medicate. Alcohol is actually a depressant so [people] can use alcohol temporarily to feel better. And they might [feel better] but it never solves problems…they might see [self-medication]…as something that helps with their depression, their social anxiety, [or] their shyness [but it] is all a sort of temporary…solution to something that ought to be dealt with differently.

Furthermore, Brad said, “Alcohol acts as a temporary solution to a permanent problem and often college-age students self-medicated by using alcohol in hopes of unburdening themselves of their problems.” But what they often end up experiencing is only momentary relief for a problem that needs a real solution. The fact that students used alcohol to mask certain levels of anxiety and discomfort was a prevalent issue continuously raised by participants.

Another element to consider in regards to alcohol is the experimental aspect that it brings to college-age adults. As participants mentioned this is not surprising considering this stage of life is characterized by risk taking and testing of limits. Another problematic fact that participants frequently spoke about was the unregulated environment in which
college students lived, surrounded by peers and no adult supervision. As participants mentioned, this meant students experiment with behaviors that they often associate with adulthood. Thus, the transition to college is a critical time for students to self-discover and put forth the foundation for the future selves they would like to become. Tom, the UGC general manager of the associated student body, cited his own experience, “When I joined a fraternity in college, one of the outcomes of that was I would learn to drink like a gentleman…learn how to drink like a grown-up.” Many college-age students dream of being treated like adults; students view college as promising that. Acting and drinking like adults, in many cases, is a practice that students believe they get to have on their path to adulthood.

College represents a period during which students play-act the part of adults without adopting the roles and responsibilities while working on normative developmental tasks. Many times students drink to “take themselves out of whatever it is they’re feeling right then to kind of anesthetize, to numb a little bit,” said Tom; for instance, “If something unpleasant is going on, some sort of emotion such as anger or fear, or if there is a level of worry about a relationship, family or finance, students will use alcohol to…take the edge off.” Bradley also stated that, “For some students, they don’t like the reality very much so they want to change that reality, to dull the pain of something else that’s going on in their lives and that is why they drink.” In many cases society promotes alcohol as an agent for drowning your sorrows in, something that would makes you feel better rather than forces you to deal with present emotions. For these kinds of people, dealing with reality seems like a difficult task. For that purpose, students
drink to dull the pain. Whether this reality actually went away with alcohol or not is something that students oftentimes are not willing to learn or talk about.

Aside from the purpose of self-medication, in many cases, alcohol is an agent that college students don’t have much experience with. Bradley commented that, for some students, alcohol “has been forbidden fruit for a long time. You couldn’t have it then all of a sudden you can and…like in a lot of other aspects of life; sometimes a student doesn’t make very good choices.” When students come from sheltered lives in which parents, guardians and community members in general have forbidden them from experiencing the outside world, they tend to be overly excited and anxious to break boundaries and experience what is been kept away from them. It was also apparent through conversations with participants that this applied more to students at the private college OU than those at the large urban university UGC.

Participants also shared the other reasons that caused students to drink. Peer pressure—direct or indirect encouragement from one’s own age group—to engage in activities that they may or may not want to engage in is a major factor in the development of risk-taking behaviors such as drinking excessively. According to Shawn, “Peer pressure and fitting in are very important reasons behind why students use and abuse alcohol.” Alcohol seems like a way to relax and relieve tension, and even provides an excuse for being a little out of control or letting out a different side of your personality. As Robert shared, “Sometimes students believe that if they drink excessively and keep up with their friends they are more likely to fit in more.”

Peers act as influential models by introducing, providing or pressuring risky activities such as alcohol to others. Oftentimes college students participating in behaviors
influenced by their friends viewed alcohol use as a positive and socially acceptable experience and something of a social lubricant. In reality, especially within a peer group context, they fail to consider the negative consequences related to alcohol use. In light of this matter it is imperative to understand and examine the reasons why students drink.

**University Culture**

As the conversations continued with the participants it became evident that although many individuals can resist environmental influences, some collegiate environments too enticing. As participants clearly pointed out, in many cases students' decisions to use alcohol were strongly affected by environmental and peer influences, which combine to create a culture of drinking. In the opinion of most participants, this culture actively promotes drinking and passively promotes it through tolerance or even tacit approval. The use of alcohol on college campuses creates a culture of beliefs and customs, entrenching it in every aspect of the environment. These beliefs and customs, combined with the expectations they engender, exert a powerful influence over student attitude and behavior toward alcohol use. Each participant brought up university culture as a recurring theme and a reason why students drink; the university culture factored in how large of a problem alcohol posed and the level of alcohol use and abuse among students. For instance, Robert said, “Historically in big Ivy League schools drinking was a norm and the more students drank the more they were accepted.” An important fact to remember remains that each university harbors a culture within its own system. According to some of the participants, student athletics and Greek life were determining factors within that culture.

UGC participants spoke about the communal culture that affected their campus
and student body. Shawn observed, “The fact is that this university is a community university, and…is housed in a way [in which] there are [fewer] residential students and more commuter students, helps with [the] culture of the university and [contributes to] the fact that it is not as much a drinker school—compared to universities that are residential…where students stay on campus, drink and create problems of all sorts. Really this is a big plus.”

When a university housed a bigger group of residential students and hosted more activities for social groups such as Greek life on campus, their students were more likely to participate in drinking activities than those students who had to commute back and forth between school and their places of residence. As Shawn mentioned, UGC seemed to be less of a residential university and more of a commuter campus. Therefore, fewer students gathered after class or for parties during weekends, subsequently presenting less opportunities to drink. With that said, there is still a problem at the UGC campus, and that problem had to do with the existence of a pub on campus. Brad said:

When you think about it, why should there be a pub on campus? We don't really have a large…student population that is of drinking age that lives on campus. If people were able to walk back and forth to their dorms or to an apartment a graduate apartment, they wouldn't have to get in a car, and that keeps the drinking on campus, I can understand that. [However] I think it perhaps [gives] a false message that drinking to an extent is a normal and a good thing.

The existence of a pub on campus produces a message that drinking is allowed and accepted at the university and this continues to be an issue that administration and university officials will struggle with for years. If drinking is something that is prohibited
on campus and we advise students not to drink and put themselves in dangerous positions, then why is there a pub on campus, promoting a drinking culture that is not be conducive to the wellbeing of the students?

The culture of the university plays an important part in the availability and accessibility of alcohol on campus. When there are places on campus that offer alcohol, the student body receives a message indicating that drinking is permitted and allowed. Tom stated:

Even though we have a pub on campus, I have yet to see someone stumble out of the pub singing raunchy songs like I might [see]…in other places. I can probably count on two hands the number of times I have seen a student who is intoxicated in my 13 years of being on this campus.

Robert too spoke about the pub: “There was a point in time when I was pretty nervous about having a pub on campus. It was a different kind of environment where beer was actually flowing, and the alcohol consumption by not only students but also faculty and staff, quite frankly, was quite excessive. That is not what you find today, and you'll never find that while I'm VP here.” Even though some of the participants from UGC suggested that the presence of a pub on campus allowed students to find a balance with life and alcohol, other participants agreed that a mere presence of a pub raised confusion and might lead to unforeseen problems down the road.

According to participants, another integral part of the college drinking culture is exposure to advertised images of keg parties, drunken sporting event scenes, and weekend get-togethers at bars in or near campuses. Participants believed that students were more prone to participate in aforementioned activities when they were visible and
easily accessible. The opposite was true of a campus that did not promote such a culture. For instance, Tom pointed out, “At UGC, students are more likely to come to a campus of this sort because of their educational goals and not so much because of out-of-class involvement.” He added:

Again there is less evidence of…alcohol use here than…compared to, let’s say,…a large urban private university that it is much more residential, [and hosts] lots of activities—lots of social activities—on or immediately adjacent to the campus [and has] a lot more evidence of alcohol and alcohol abuse and, probably, alcoholism.

As Tom mentioned, a university culture characterized by partying affected student drinking especially when students were involved in Greek life or college athletics. These kinds of cultures promoted and affected the level of alcohol use by students. In such an environment, students are encouraged to participate in the drinking activities that take place around such events.

**Social activities involving alcohol.** “An important factor to consider when discussing college drinking and university culture is the presence of social activities and the student body involved in such activities,” Brad explained. According to participants, an essential part of college and the experience that it provides is the activities and opportunities offered to students in order to enhance that experience. As Tom explained, “These social activities range from sports to Greek life parties and volunteer work. They aim to help students broaden their horizons and learn more about themselves and the world around them.” Participants addressed alcohol as playing a big role during such activities. Tom pointed out, “College is also about having fun and letting go. There are
many activities that students become a part of. Oftentimes, alcohol ends up being a part of [those] activities in one way or another.” Shawn too made a connection between the types of social activities that campuses offer to the incidence of alcohol problems among students. He said:

I think at UGC, particularly on this campus, I'm not seeing…alcohol [contributing] to a majority of our [student conduct] cases…We enjoy a unique culture here, and part of that is… because of where we are, the location of our campus and the culture that we have adopted. And an attributing factor to why we don’t have such a [big drinking] culture is that we don’t have a Division I sports team. [Athletics is] often a contributing factor to an alcohol culture on a campus.

In most cases, the absence of a Division I sports team and the lack of prominent social activities such as Greek life, hazing and initiations contributed to fewer alcohol problems on college campuses. Athletics always seemed to produce heavy drinking. Robert said, “Problems of alcohol consumption and abuse are not as dramatic today as it might been back in a point in time when we were playing Division I football and had a lot of …somewhat risky behaviors happening in and around [events for] college athletics.”

All participants showed concern for campus activities that promoted drinking and socializing based around alcohol. This concern has forced campus officials to consider changing the culture in order to benefit students and solve the ever-present alcohol problem on their campuses. Bradley emphasized the necessity of this change: “When I first came to OU—I have been the vice president for student affairs for 17 years—we had…and it's always been a really wonderful student culture. But around drinking issues,
it was really kind of a Wild West.” One solution was maintaining a healthy residential and student housing life. Bradley described a measure at his school:

When I first came [to OU], I had to do some top-to-bottom changes. I had to work [on] changing the broad culture of alcohol abuse that we had big time on the campus. It was having a negative impact, even on the budget, because resident halls were only 80% full rather than 95% full.

For Bradley, maintaining a healthy residential and student housing life and providing students with guidelines such as a zero alcohol policy helped create an environment where the priority was student wellbeing and academics.

The severity of the alcohol problem on campus can be enough for administrators and decision makers to work toward changing college culture. In Bradley’s situation, campus officials came together and made a decision to make OU a dry campus, one that would be free of alcohol. Students appeared to have benefited from this decision as Bradley noted: “This status change…increased residence in residential halls up to 90%.”

Robert also cited a case:

Once upon a time we had higher incidences of alcohol-related problems in our residential community because it was a less controlled environment. It's a more controlled environment today. We don't really talk about students not consuming alcohol here. Our objective is to make sure that they are not able to abuse it and that they have the tools and techniques to…self-maintain around those particular kinds of options.

Clearly, campus culture is an important contributing factor to student drinking patterns. To deal with alcohol issues, university officials have put policies and procedures in place.
Policies and procedures affecting alcohol use and abuse. Almost all participants viewed excessive drinking as one of the most serious problems on their campuses. Most admitted that student alcohol abuse harmed those who drank to excess and negatively affected those who did not drink at all or drank responsibly. Therefore, the actions of some students may cause damage to the entire campus. According to my participants, federal, state, and local laws helped to define college administrators’ responsibilities for taking action when students abused alcohol. Robert stated: “In addition to complying with the law, each university is obligated to define and adopt an institutional policy on alcohol that is consistent with its own culture, values, mission and population.” Because institutions are so diverse, no one policy is appropriate for the thousands of students that each university serves. To reduce such a problem, participants mentioned adapting several policies and procedures benefiting students and, in a larger sense, the institutions and their goals. At UGC, Brad said, “There are really clear policies about not drinking on campus except in designated areas. There is one pub on campus and…restaurants on campus that also might serve alcohol.” The presence of clear policies allow students to know what their limits are and what they might face in the case that they violated those limits.

OU’s successful policies and guidelines addressed what was acceptable and what consequences students could expect if they used alcohol. Bradley explained how his campus managed to take a strong stance, “We've decided that within the undergraduate student population of the university in our residence halls, which [houses] about 1,350 traditional undergrads…alcohol is not a part of this community.” He pointed out that the process was not easy and steps had to be taken to deal with mishaps. “We are usually not
saying goodbye to students,” Bradley said. “It's not…zero tolerance. We do have tolerance, and we try to move and navigate through problems that arise.” He spoke discouragingly about past procedures: “We had a lot of policies and things in place at a point in time, which, let's just say, weren't conducive. There were policies like five strikes and you're out. That means that you're always here.” Since the old policies at OU did not address the bigger problem at hand, university officials had to adopt new policies and procedures. Robert outlined some of these:

Now it's kind of a three strikes and you're out sort of a thing. We have alcohol education at the first strike and all these things you talked to other members of my team about. It's developmental. [On] the second strike—FERPA allows [an individual] under the age of 21 who is a dependent, not on the first offense, but on the second or third offense—the parents are informed. If somebody [is] on his or her second offense, he or she gets on probation, and they may be asked to leave the campus if that happens again. It made a big change.

By changing policies and responses to alcohol use, universities were able to help navigate their students away from alcohol troubles. As Bradley stated, “Changing some of the attention to details surrounding alcohol use on our campus and not just letting anything go, all of a sudden, more and more students wanted to live on campus. Our residence halls got full, they've become conducive places to live and learn and do things other than just be dominated by a party scene.”

Scarlet, the OU senior coordinator of residence and student conduct, said, “Once an institution defines its parameters around alcohol use, policy reinforcement and execution become an integral part of the process in order for the program to be
successful.” Justin, the OU director of student psychological services, stated, “There's one office that deals with conduct violations and there are quasi-judicial hearings. The behavior code is enforced and sometimes students are forced to watch a video.” Even though policy enforcement and execution differ from institution to institution, one can find similarities among them. Scarlet described a procedure at her campus:

If a student is documented for an alleged policy violation, he or she is asked to come in. There would already be a report from the residential advisor based off of factual aspects related to the situation. I basically investigate. I talk to each person individually. I read the report. I try to find all of the facts. I might try to get to know all of the involved parties personally as well and then I make a decision. Do I think it’s more likely than not that you violated the university’s policy on alcohol? If I think no, then you’re found not responsible, and there’s nothing else you need to do. If I think yes, you were involved, more likely than not you did violate the policy on alcohol, I’m going to find you responsible and then issue some sanctions.

To carry out necessary repercussions for students who violate alcohol policies, staff and university officials need to have guidelines and procedures that provide an environment conducive to the wellbeing of students. Scarlet enumerated some of the guidelines at OU:

For first-time violators, it’s a review of our policy as well as the online alcohol course I was telling you [about]. For a second-time violation, it’s a residence hall probation as well as another review of our policy and a meeting with the director of student wellbeing who collaborates in terms of second-level intervention [in which] she’s having a one-on-one conversation about alcohol use and coming
from that education perspective. The third time is residence hall suspension, university probation as well as any other reflective pieces we want to throw in there.

It is worth noting that such procedures and guidelines might seem harsh and unfair to some students. A few might perceive them as their freedoms being taken away and the removal of their idealized college experience. As Bradley pointed out:

The [OU] student government said, ‘Oh no, if we're 21, we ought to be able to drink on campus. Let's open this up, all this sort of thing.’ So I said, ‘Oh great, why don't you guys go down and take a look at the schools where that's the policy and see if that's the kind of student culture you want to have happen here. So, we'll said, ‘Okay, go down to Redlands. They have a policy that's different. If you're 21 and you live on the campus, you can have booze. If you're under 21, you're not supposed to but who knows how old somebody that looks like they're 19, 20, 21, 22—so booze just flows down there.’ They came back and they said, ‘We don't want that.’

This healthy dialogue between students—who see alcohol as part of their college experience—and university officials—who are mandated to ensure student safety—are precious and rare. Conversations such as this lead to change in certain codes of conduct to ensure student wellbeing. Bradley cited an example:

Another element that we changed was with the residential advisors, who are peer residence life staff. [Because] they're usually upper-class juniors and seniors that live on campus, they used to have a lot of discretion about whether or not to report something that they've seen. That was another thing that we had to change.
Now they don't have any latitude. If they see alcohol, they have to report it. We get in the conversation with everybody and even if there's booze in the room and it's pretty clear that maybe only one person had the booze in the room, we write up everybody. This is what the students wanted. This is what they brought to our attention and we put it to work.

Student involvement in the formation of policies and procedures and the execution of guidelines help carry the message more clearly. It is also this level of student involvement that will ultimately bring about programs conducive to reducing the issue of alcohol on campus.

**Alcohol intervention and prevention programs.** In order to deal with the problem of alcohol among university students, participants mentioned adopting an array of programs ranging from intervention to prevention, from workshops to individual counseling sessions and from classroom instructions to campus-wide events to help students balance, navigate and deal with the issues that arise due to the presence of alcohol and excess usage of it. While speaking about some of the more visible programs at UGC, Brad mentioned, “I know that we have an alcohol and drug specialist in the student health center that has a fairly big picture view of substance abuse and is quite knowledgeable and able to relate well to students.” Robert added to this, “I think that through our alcohol and drug specialist [who is also a] behavioral coach we have someone who's highly regarded and able to intervene in matters of alcohol.”

As Robert mentioned, often the presence of someone who is familiar with the student culture and community as well as alcohol problems can be a very helpful tool for students struggling with alcohol issues. Programs such as “Aware and Awake,” “e-
CHUG,” “Campus Save Act” and “Save Spring Break Act” were programs mentioned by participants. Such programs were utilized by participants as part of prevention and intervention efforts to help students deal with issues related to alcohol use and abuse. To understand how these programs work one must understand how they are formulated and created.

**Support Services for Students Struggling with Alcohol**

According to all participants of this research, alcohol abuse is an important problem affecting college students that needs to be addressed at the institutional level. Participants recognized that alcohol posed a problem to their students as a barrier to their educational objectives. Furthermore, they mentioned that federal and state agencies and local communities frequently mandated university programs, either as interventions or preventive care, to help students struggling with alcohol issues. But in order for these programs to be implemented, certain processes have to take place.

**Support services: creation, implementation and effectiveness.** In order to understand how universities as a whole deal with alcohol, one must understand how support services are created. At UGC and OU, several approaches to alcohol abuse education and prevention were implemented. Participants addressed how such programs were first created. Robert said:

Funding is not a problem for the program that we want to support. Creating a program that would follow with me and a particular faculty or staff person who has come to this campus with set of experiences, commitments and dedication in this particular area and has an idea for something that we ought to be doing that we're not presently doing at UGC. We, as an institution, do try to inspire a kind of
entrepreneurialism around ideas, programs, event and activities. Not everything has to be anointed by university administration. Some things, we think, get more traction when...they are organically rooted in the experience of individuals who are going to be talking about a particular program or activity.

The impetus for the creation of a program at UGC usually came from the faculty, administrator or a staff member who recognized the need and had the capacity to create an opportunity for this need to be met. Sometimes this need came from other members of the university life. Sometimes recognition of the need was rallied by the struggling students themselves. Tom said:

Our students have asked for and our organization has responded to their asking for programs, especially in student affairs, [that includes] the health center, counseling center, student housing, fraternity and sorority life and the student organization life. I think those areas have always done a pretty good job in education prevention, regulation, whatever the particular intervention. What I see at UGC system is like two years ago – I think it was a student at Saint Louis died from acute alcohol poisoning. The campus president’s and the chancellor’s offices said, ‘We must do something about alcohol education,’ and so policies and programs and best practices were rolled out.

As Tom mentioned, programs were often created based on need, which was determined by the administration, university officials or students.

Aside from the need, available funding is also another reason why some programs are created. Participants addressed funding as one of the important factors influencing formation and creation of support service programs. As Brad explained, “I don't know
how much money is being spent on alcohol education. Where you spend your money is really difficult. It's a difficult decision to make. The campuses that have really robust drug and alcohol programs that I have seen have a few people on campus who are really gung-ho about it.”

Aside from funding, there are other factors that contribute to how alcohol intervention and prevention programs on college campuses are formed. According to Bradley, “We look to creating things based on what are the best practices in education so we benchmark a lot of our decisions about what we want to do and why.” In private institutions where funding was not as big of an issue, best practices lead the way for program creation. Bradley spoke about how his team came up with their best practices:

We try to be heavily and professionally engaged. We send folks out to conferences. Staff from the student wellness center will go to a conference to find an answer to a question. We got this issue coming on; how are we going to respond to that? The response [to your question about] how we create these services is in some ways just by being professionals and knowing and having a network of others who are also at similar schools, responding to the same kind of issues so we’re not in a vacuum here. Just knowing that it keeps evolving. We try and respond and get people that can address the common issues that our students deal with.

For Bradley, best practices often were the leading cause for the creation of support services geared to help students.

Another important element in regards to support service is the availability of funds to create programs. UGC and OU programs are created based on need and resource
availability by willing university officials. Bradley stated, “In terms of policy, I think interventions are formulated by the judicial hearing board. The decisions around policies on campus and programming is…very heavily influenced by financial decisions about what to resource and how to resource it.” Another component in the decision-making process included the students themselves. Cameron, the OU coordinator of student involvement and wellness, explained, “When students want something, they are going to engage; they are going to reach out to their student government representatives and others and ask for what they need.” When those conversations happened, programs are formulated and created as a result.

Some programs were implemented only after they were formulated. According to Brad, “Some kind of advisory board that the campus has comes together and makes recommendations…[on] what kind of services might be provided [based] specifically [on] some kind of needs assessment and we do collect data through the NCHA survey about alcohol use. Then people go to conferences and find out what other universities are doing and they bring back best practices.” Implementing programs often relied on initiative and collaboration by individuals. As Cameron pointed out, two important factors for carrying out programs are “flexibility in being able to implement things as well as creativity of how to implement programs.” Bradley described his dream team:

Staff four levels deep and student affairs where young, vibrant, caring individuals find ideas and come together. [When] they get some money [and] have some latitude and they use their latitude and then I get to go tell the board of the great things my people are doing. I am usually in conversation with the [university] president about how we are implementing programs and…funding them. At some
level you need to get involved with changing macro-cultures…doing it in a significant way and deploying big new resources. A lot of times it can just happen [in a] very much grassroots way—we [tried] this and it didn’t work out, we’ll try something different next year or next semester, whatever, and give people the ability to try something, let it fail, and try something else.

Implementing programs often requires much dedication and time from staff and faulty who have the passion and vision for such programs. Having support services for students struggling with alcohol sends a message that the college is dedicated to resolving issues that affect the lives of students.

After each participant addressed the ways in which support services were formed and implemented, I move on to discussing the effectiveness of such programs. Robert stated:

I think that we have a very good alcohol education program. I have no reason to conclude that they are ineffective. Effectiveness has to do with the intent. So a great amount of what it is that we do has to do, again, with awareness, where we're going out and we're giving presentations in classrooms, whether that be [for a] University 100 [class] or [for] a faculty member who wants to bring someone in to do that kind of thing. My sense is that kind of information delivery happens. When information is disseminated, students are able to utilize the programs. And when that happens, services are perceived as effective because they have met their objectives.

Tom stated, “I think, on average, programs are…differently effective and it’s not about, do you know about this? It is [about] are you going to do [something] or can you help someone do something about this that is different.”
Many times it is difficult to measure effectiveness. Brad said, “I don't know if they have kind of a system—like how would you calculate if they are effective? I think it's a very difficult question to answer, [Are] our alcohol programs effective? How would you measure that? Do you measure it by people not getting caught drinking? Do you measure it by numbers of referrals going down? I'm not sure how you would measure the effectiveness of it.” Measuring effectiveness can mean many different things and can be done very differently from program to program. Tom stated, “I think there is [a way to measure program effectiveness]. It depends on how you define effective I guess. Does it prevent any [or] all alcohol abuse? I think there is a lot more awareness in schools. I think there’s certainly a lot more awareness in the media and so I think when students come to college today they already know much, much more about a whole host of things than…we did.” On the same note, Bradley said, “Effectiveness can always be seen as limited. But I’ll tell you if we saved one kid’s life, it was worth it to do something big and special. One person made a better choice at a time and usually you don’t know. It’s the absence of the negative rather than having great positive feedback. They started taking better care of one another, started looking out for each other and being empowered to confront their friends a little more too.”

As seen in the earlier paragraph, effectiveness can be measured and talked about in different ways. Some of the ways in which the effectiveness of programs can be measured is through data gathering and comparing data. Bradley mentioned that, “During the CHOICES grant process we did some comparative data and we know that some of the students who went through those programs did have some change in behaviors and stuff, not as many negative things they were reporting. I mean calling [it a] success would be a
stretch. We had some impact and that is what we can aim for.” Some participants encouraged data gathering. Scarlet stated, “I would have to look at research and stuff I would want to pull our numbers and see [if] when we have these alcohol interventions do our numbers go down? I think we can always be doing more no matter where we are. Is it ever enough? I don’t know. People still drink. It still happens, but I think we do a very good job of educating the community and I really would like to know the level in which we affect students with these programs.”

In general most participants assessed how effective their student support services by having learning outcomes for the programs and keeping goals in mind. But there is always the possibility that the staff and faculty who carried out these programs had little or no knowledge about the effectiveness of programs. As Justin stated, “I am not involved in choosing the program…examining the effectiveness of the implementation or the appropriateness of the choices made to carry [out] such programs.” This brings me to the next topic which is the level of staff and faculty involvement in assessing these support services.

**Level of involvement from administrators and staff.** Participants spoke about their level of engagement in a variety of support programs, to help initiatives move forward and foster a supportive culture for students in need. Scarlet mentioned, “Many of the administrators on campus involved in programs feel that they are not invited to participate in alcohol formation programs, I hear about this often.” Robert addressed his involvement as episodic due to the fact that alcohol did not seem to be a looming problem on his campus. He stated:
We talk with administrators and faculty and staff in and around problems that emerge. If, in fact, there is, for example, an incidence of, let's say, hazing or some misconduct in the Greek environment having to do with alcohol consumption, then I'm certainly talking to our Greek life coordinator and that administrative structure in student involvement and development about what it is we are doing, and maybe talking to the advisors in that community of folks. If we saw a pattern that suggested that there was a broader and deeper and richer and wider conversation that needed to occur with others, we would do that.

Issues often came up based on the need that was seen for administration to be involved. Robert said, “It depends on whether or not they need me to get it going. People are often bringing things to me because they need my support and they need my funding.” In case of other participants and the roles that they played, things worked differently. Brad said:

I haven't personally been a big part of that. I think partly it's because the alcohol specialists [are] over in the health center. There are some directors at other universities who play a really big role. They might be part of the advisory committee, but I haven't been part of that. If I am asked to get involved, I definitely would. But our center hasn't been [really] involved. I mean, we see students that we help. We provide them with help. We might make a referral or work…to treat them as well, but I think it has been an issue because…the health center are the ones that are doing this kind of work.

Although student mental services were often seen as the one place that students can get the most amount of support for their alcohol issues, some participants had something different thing to say. According to Justin, its role was minimal on his campus:
The counseling center is often not involved, because there's plenty of research supporting the idea that mandatory therapy isn't effective, but what we do sometimes is a mandatory consultation. Sometimes the residence life office has mandated that someone come over here for 10 sessions or so. We are not directly involved in dealing with alcohol abuses on campus. We have a students of concern team, on some campuses it's called a behavioral intervention team. On our campus, it's called a care team. Their only function is to talk about students who are struggling and bring together resources to help students. The discussion takes place in the conduct board hearings or there's a weekly meeting that discusses conduct violations, and the counseling center is not represented in that meeting. Student psychological services are not as involved in implementing and creating such programs because of the confidentiality and willingness of the students to do it. We could be, we would be, if asked, but we're not.

As Brad and Justin both observed, student psychological services seems removed from support services.

Participants also addressed their levels of involvement in other areas. For example, Cameron said, “I get to speak with my supervisor who is the associate director of students. They are very much informed about what we're doing in regards to providing information and resources about consuming alcohol.” In regards to conversations with other entities on campus, she said, “I have been able to have some conversation with housing or residence life, some conversations about what sort of wellness resources and information do we want in the residence house, making sure we are all on the same page.” Scarlett also described her level of involvement:
I’m really fortunate that at my level I have direct access to our vice president of student affairs who I meet with every week. I run a conduct meeting basically for him as well as for our dean of students and I update them on all the issues. On this campus it’s amazing. If I was at a larger school, probably, I would be several levels more removed, but because we’re a private institution and we’re able to write our own policies and because we’re a small school so there’s less staff, I’m fortunate that I have direct access. I have recommended changing different policies and [they have] been approved and I’ve been able to write [a] policy and implement it and that’s been great. If I had a recommendation about program that we should be doing, absolutely they would be supportive.

It was easier for small institutions to involve all staff and administration in programs and services. Bradley stated, “I am involved all the time. One of the things, unlike a really big university, is there is just five or six of us and we sit down and we go through every incident that occurs on campus in the previous week and just take a look at and see what’s going on.” This level of involvement allows for conversation and collaboration, both of which help services prosper.

**Assessment and improvement of future programs.** In order to examine the effectiveness of student support services, participants stressed the need to assess what is working and what is not. Often assessments were put in place to measure the effectiveness and design future steps to solidify the programs. Participants spoke about the strengths of the programs on their campuses. Brad said, “We have some good policies and procedures and we are not seen as a party school.” Not being perceived as a party school could be a huge positive factor in regards to students and alcohol issues. Bradley
identified other points of pride in the OU programs, “The strengths are that we come at it with credibility because of our personal relationships with [students]—because we’re going to go ahead and have fun with these folks too. You get some credibility to get in a relationship with [students] and we have promised to grow with them.” Students tend to do better and succeed when they can count on university relationships to carry them through personal difficulties. Scarlet stated some of the strengths in her programs, “The students realize maybe they’re not alone in this, that there is help, that people care, that they’re offered resources at the university as well as other local resources that might not be campus-related. I think probably for me the biggest one would be that somebody cares enough to be talking to me about this.”

In order to be able to be more productive, one must also address weakness associated to support services for students struggling with alcohol problems. Brad complained about the lack of exposure, “What is missing for me is I don't see much of a public health campaign around alcohol abuse. I wish we had an AA meeting on campus. I wish there was more visibility about where students can go to with their struggle with alcohol. I also don't know if we have utilized our faculty and staff well enough.”

Utilizing appropriate staff and departments was a big issue for administrators who oversaw such support services. Justin said:

The people who choose these programs are not trained in and don't have advanced training in mental health. In terms of risk management, if you don't have a mental health professional assisting with the implementation and the design, you're in a more vulnerable position if something goes wrong. If you have a student going through the system that isn't helped and the system isn't designed in such a way to
track how well the student is doing, I think it affects the liability profile if
something does go wrong. The other issue, aside from risk management, is just, in
terms of effectiveness, helping someone with a substance abuse problem is really
pretty difficult. There are models certainly for peer support in that regard, the AA
model is pretty widely accepted, but to exclude mental health professionals is not
as good a decision as including them would be. The problem that we might face
with larger campuses is that the ratio of counselor to student may be equal or
worse than on a small campus, but if it's a small campus, the problem is
sometimes heightened because if you don't have a threshold number of bodies in
the counseling center, you just can't do as much.

Hence, a current obstacle seemed to be the lack of a student psychological service
component to these programs. This lack presented an opportunity for improvement.

Another weakness was the lack of visibility of these programs. As Tom pointed
out, “These programs are not advertised as much. I think we tend to [use a] kind of
market niche approach, which might not bring broader institution-wide awareness about
alcohol.” The dissemination of information can be another weak link. Cameron expressed
her concerns, “Are we giving [students] the information that they need? Are they looking
in the right places for information?” The inability to deliver information in the right
format and context could prevent students from finding appropriate help. Shawn stated,
“Efforts are many times developmental and they're broadcast to large groups, and it's
hard to know whether the message—the important message—is getting to everyone in a
salient way that actually prevents bad things from happening with alcohol.” Lastly,
programs needed to make students to feel comfortable about addressing alcohol issues.

Bradley said:

We need to not stigmatize them. Well, the weaknesses are inherent and small in size. It means I have to have somebody like Cameron who could make a more focused and dramatic impact in, say this one area around alcohol. I’ve got to have her doing ten things and I can’t have her just focus on one because I don’t have enough manpower. I’m sorry but I don’t have the tax dollars at work so just a private staff and most everything we do comes off the back of somebody’s tuition not from state funding. I think that’s a real weakness that we have.

Participants made recommendations that they felt would address the weaknesses they saw with in their student support services. Brad said, “I don’t see the stuff on the websites so I think probably we could do a better job with a social marketing campaign about alcohol.” Social media visibility has become one of the most powerful ways universities can send important messages to their student body. Participants also stressed the importance of informing students about their environments and those who might be affected by alcohol. Tom explained, “We need to teach friends, roommates, coworkers and family what to do when you think someone who matters to you has got a problem with alcohol. Put some intriguing signs on campus with either Quick Response codes or with some safe-looking Universal Resource Locators and I’d put it all online.” Having signs and banners visible to students all over the campus meant that they would have access when they chose to seek help.

Participants recommended future resource allocation and professional staff. According to Bradley, “I always have resource issues. Constraints. I would have the
depth of some professional expertise exist in that world, and have some higher priced folks around me. I would add in some bench strength and that bench strength would be some embedding into our staff and some of the impression. I would probably have some, I mean, on higher level credential.”

Having professional staff and the ability to maximize their set of skills and experiences also allowed for smoother operations and better programs. Justin suggested: Rely on the counseling services department to play a role in designing the programs. I think having a multidisciplinary team is helpful; having people from health, mental health, is important, but definitely looking at the data and really understanding what works and what doesn't work. Plenty of quantitative evidence suggests that social norming approaches do not work, because the individual with the substance abuse problem rightly doesn't believe the data. It is a question of having enough people around the table to make an informed decision about it.

Another important recommendation is keeping students engaged and interested. Cameron stated: “We need to find ways to, I don't want to say mandate, but really encourage students to reach out to their resources as well as always try to be one step ahead of the other students.” Of course in order to have students utilize services it also means that institutions need to measure the effectiveness of the programs. As Scarlett pointed out, “I can’t really speak for campus programs because I’m not involved with that. For conduct, maybe additional follow-ups with the student could make it more effective.”

To improve student support services and enhance their level of effectiveness other elements were also suggested. For instance, Shawn said:
It’d be valuable to find out...what are the numbers that social norming can brag about, and have they been able to impact the culture of alcohol? The other piece would be advertising; have advertisers been able to capture larger markets in recent years? Because advertising regulations have loosened. It used to be you couldn't see someone drink alcohol during an alcohol commercial, right? Alcohol wasn't really used, didn't used to be so embedded into movies and television, and it is now, and so I think it would be interesting just add that.

Participants seemed encouraged by their recommendations and empowered to address weaknesses in their programs.

Students arrive to college with many hopes and dreams but from the onset of this transition, they inherently face many challenges. As participants mentioned, one ever-present challenge is the availability and misuse of alcohol and the negative effects that it can have on many aspects of student life. Through interviews and time spent with my research participants, I was able to address some of the issues and the ways in which universities deal with students and the problem of alcohol on their campuses. Many themes emerged and although there are programs currently in place to deal with such issues and there is still much that remains to be done.
CHAPTER 5
DISCUSSION AND RECOMMENDATIONS

Introduction

Alcohol abuse has long been a serious concern on college campuses. Four out of five college students drink at least occasionally during their college career, according to a 2009 survey by the National Institutes of Health. Acknowledging the importance of improving support services to help students struggling with alcohol problems is a major step in the right direction. The literature addressing gaps in support services had one distinct gap — it did not address how these programs were created and implemented despite growing awareness associated with such programs recently. Additionally, scant literature made little mention of how effective such support services were to students utilizing them. For this reason, I explored the factors that shaped the development of student support services for alcohol problems at a large urban regional public university and a small private liberal arts college.

This grounded theory case study explored two research questions: 1) what factors shaped the development of alcohol prevention and recovery programs at a regional public university and a private liberal arts college, and 2) what shaped the assessment and improvement of alcohol intervention and prevention programs at a large urban regional four-year university and a small private liberal arts college. These questions allowed me to explore student support services from the perspective of administrators involved in these programs.

I collected data through nine interviews across two different campuses. After collecting data, I transcribed, segmented, coded and clustered the gathered information
into thematic results to align with the conceptual and empirical lens of the study and understand participants’ perspectives on alcohol support services. Three themes emerged in this study: 1) administrators’ perspectives on alcohol as a problem on college campuses; 2) university culture and its effect on alcohol intervention and prevention programs; and 3) the different kind of services offered as support services for students struggling with alcohol issues. Lastly, I used the diffusion of innovation theory to interpret the results of this study.

This chapter provides an interpretive understanding of the alcohol support services offered to students struggling with alcohol issues. I proceed by answering the two main research questions of the study and addressing gaps in literature. I connect the findings of this research through its theoretical frameworks and interpret themes and patterns of analysis that emerged. I talk about the contributions that this study will make to the student support service arena and address the limitations and generalizability of the findings.

Findings

Factors shaping the development of alcohol prevention and recovery programs at a regional public university and a private liberal arts college. The first research question led me to explore of factors that influenced the development of alcohol intervention and prevention support services. Participants mentioned factors such as resource allocation, administrator involvement, campus environment and culture of drinking, and state and federally mandated laws that helped shape alcohol intervention and prevention programs on campuses. Of all the factors that participants shared,
resource allocation was a central factor. In most of the conversations with participants, resource allocation was defined as funding as well as staff involvement.

When participants spoke about alcohol support services, they also addressed the availability of funding for student services, which ultimately affected the ability to create and implement alcohol intervention and prevention programs on their campuses.

According to participants, another important factor affecting these services was the passion and the willingness of staff and administrators to be involved in such programs. Each participant was able to clearly articulate that a deciding factor in development of alcohol intervention and prevention programs was personal interest — when an administrator or a faculty took on the program as an initiative or a personal cause. Furthermore, participants spoke about state and federal laws that mandated universities to formulate and create alcohol support programs to help students struggling with alcohol issues.

Participants also addressed the extent of alcohol as a problem on their campuses as another catalyst for creating and implementing support services for students. According to each participant, factors related to specific college environments drove decisions for the kind of services offered by the university. Students attending schools with strong Greek life systems and prominent athletic programs tended to drink more than their counterparts at other types of schools. In terms of living arrangements, alcohol consumption was highest among students living in fraternities and sororities and lowest among commuting students who lived with their families. These facts were of essence when deciding alcohol support services.

Factors shaping the assessment and improvement of alcohol intervention and
prevention programs. The second research question led me to explore factors shaping the assessment and improvement of alcohol intervention and prevention programs. Participants spoke about individual treatment plans, comprehensive programs, community partnerships, social norming approaches and strong leaderships as characteristics of effective alcohol intervention and prevention support services.

Participants described successful efforts as typically involving a mixture of prevention, intervention, and treatment strategies that targeted individual students, the whole student body and the broader college community. Participants addressed strategies such as individual counseling that targeted individual students, including those at risk for alcohol problems, particularly alcohol screening and brief intervention programs conducted in campus health centers. These programs evaluated student alcohol use and provided feedback about the risks of drinking, the negative impact of drinking on academic performance and other problems that tended to be compounded by alcohol abuse.

Administrators also spoke about focusing on individual intervention and treatment, such as one-on-one sessions, as one of the significant ways that they reduced the effects of alcohol on their college campuses. Strategies that targeted individual students, including those at risk for alcohol problems, were proven effective. These programs evaluated students’ alcohol use and provided feedback in a multitude of ways.

Some of the participants also spoke about strategies that focused on the college environment as the key component of the comprehensive program. These prevention efforts targeted the whole student body as well as the broader college community and included strategies that provide alcohol education, usage, availability and policy
enforcement. Until recently, most colleges and universities approached risky drinking from a one-size-fits-all perspective. Most participants agreed that these efforts were often ineffective and unhelpful.

Participants felt that community partnerships that engaged campus administrators, local law enforcement, merchants, residents and local leaders in the application and consistent enforcement of community policies addressing college drinking were important. Some examples included publicizing and enforcing underage drinking and zero tolerance laws, and establishing partnerships between the college and the local residential and business communities to reduce access to alcohol.

The social norms approach also seemed to be at the key method for correcting student misperceptions about peer drinking habits. The approach was implemented to help students recognize and understand these misperceptions. However, some participants believed that these approaches worked best in individual and online applications in which students received personalized feedback and were much less effective as part of campus-wide campaigns.

In the opinion of most of the participants, strong leadership from a concerned college president in combination with an involved campus community and a comprehensive program of evidence-based strategies helped address and proved to be effective in combating harmful student drinking.

**Understanding alcohol intervention and prevention program development and effectiveness through the lens of diffusion of innovation theory.** The findings in this study pointed to the diffusion of innovation theory as imperative to alcohol intervention and prevention program development and effectiveness. Rogers explained
the diffusion of innovation theory as how, why and the rate at which new ideas spread through cultures (Rogers, 1995). He argued that diffusion is the process by which an innovation is communicated through certain channels over time among participants in a social system. Rogers spoke about diffusion of innovation happening in five stages: knowledge, persuasion, decision, implementation and confirmation.

What I found seems to lead to the conclusion that universities act as social systems of their own, operating under their own rules and context (Friedkin, 1978). When participants spoke about this phenomenon, I realized that the first step in establishing any alcohol intervention and prevention program was recognition of the need for such a service and the knowledge that an alcohol intervention and prevention program could really help students. **Knowledge of student needs is an essential element among factors influencing the formation of student alcohol support services.** According to participants, this knowledge can only be present if administrators and faculty take the pulse of their student body and access the number of incidences on their campuses. Recognizing the issues that alcohol presented and not dismissing them as normal is an important part of acquiring this knowledge. Another important element that participants mentioned was recognition of the needs, desires and implications students faced on the account of their actions in colleges and situations with alcohol, and knowing how to address them.

The next phase of the diffusion of innovation theory is persuasion. In the context of this study, in addition to the knowledge that there was a need for alcohol support services, **there needs to be a level of persuasion necessary to create and implement support services.** The persuasion process was often handled by those closest to the
cause—faculty, staff, administrators, stakeholders or even community members — who either have a passion for taking on alcohol programs as an initiative or experience in building such programs. Bringing attention to the cause and persuading others to join in allows alcohol support services to become formulated, created, and ultimately, implemented. Participants had much to say in this regard. It was evident from their opinions that the power of persuasion played an important role in the creation of alcohol support services. Sometimes this process took longer than expected due to objections from opponents. Whenever participants raised the question of where to put resources — an important one that administrators and faculty struggled to answer time and again— they did so at the cost to student needs and the needs of the community at large. But collaborations from all parties mean that the needs of students were placed first and foremost. At the center of all these conversations, was always the recognition that students must be well mentally, physically and emotionally in order to accomplish their educational goals.

The next phase—the decision phase—occurs when an individual or, in this case, an entity, engages in activities that lead to a choice ultimately adopting or rejecting an innovation (Rogers, 1995). In the process of creating alcohol support services, different entities have to become involved and actions could only result from conversations. And programs can only be created when the funds became available. Thus, participants pointed out the necessity of individuals from different departments and experiences coming together to create such programs. Interestingly enough, the one decision maker that I assumed would be involved since it is so often interconnected to student body—student psychological services—was hardly ever part of the decision-
making process in such programs. This fact possibly disadvantages students since students struggling with alcohol issues often seek help first from the student psychological services on their campuses.

As the conversation continues and the programs are drawn out and created, the next phase would be implementation. **Implementation of alcohol intervention and prevention support services is an integral part of these services.** Who, where and the rate at which the students receive these services is important not only for students but for the staff involved. It is clear that these services should be implemented in different stages, places and programs around the campus to maximize exposure to students. Despite such efforts, participants spoke about the lack of marketing tools available for such services and how many students didn't realize such services were available to them and had no idea where to turn to upon needing them.

**The confirmation stage is the last stage of innovation in which individuals involved seek the reinforcement of the innovation, in this case, the student support services measures for the effectiveness of such programs.** Goals and objectives are assessed during this stage and, in this case, the assessment of the rate of effectiveness. There was much disagreement among the participants regarding this subject. Some spoke about the effectiveness of the programs offered while others claimed there was no way of knowing how effective these programs were because there was no way of measuring them post-usage. Diffusion of innovation provided a great forum when looking at factors affecting the formation and effectiveness of alcohol intervention and prevention programs.

**Recommendations**
Practices. This study addressed factors influencing the development of alcohol intervention and prevention programs at the university level from the perspective of administrators involved. After presenting and interpreting the results and findings of the study, I provide recommendations for future practices and research. Many participants expressed that there was a lack of student psychological service involvement in alcohol intervention and prevention programs. Participants felt that student psychological service involvement in alcohol intervention and prevention services was necessary since it was the first place that students struggling with alcohol issues go to for help. The lack of student psychological service directors in the decision-making process calls for more conversation between student psychological services and the entities involved in formulating, suggesting, implementing and ultimately assessing alcohol intervention and prevention programs. Increased communication among psychological service staff and administrators responsible for alcohol intervention and prevention programs means more effective programs and better results for students. In addition, participants addressed the need for the presence of individuals who are passionate and interested in substance abuse problems on college campuses. Individuals with prior academic and scholarly experience in this arena can bring that experience of past programs to new university settings. Recruiting individuals with experience in student support services, especially substance abuse, is a step toward a right direction.

Participants repeatedly brought up the lack of budget dedicated to alcohol services on college campuses as a significant issue. Participants spoke about having to share a student service budget that oftentimes would be utilized for other important causes on campus. A dedicated budget for alcohol intervention and prevention programs on campus
is another recommendation. If possible, this will provide the ability to create more programs and offer students greater chance of exposure to support services that will help them deal with the negative effects of alcohol. Participants also felt there were not enough assessments conducted on programs. An ongoing assessment of the staff involved in formulating, creating, executing and assessing alcohol intervention and prevention support services can be a tool in addressing what is effective and working and what needs transformation. Lastly, community involvement would be an essential element in making sure that the alcohol intervention and prevention programs offered on campus are being utilized correctly.

**Future Research**

Future studies are an important and an integral part of alcohol intervention and prevention programs for college students. Here, I recommend conducting a study about measuring the effectiveness of alcohol support services from the perspective of students who have utilized such services. Examining such services from the perspective of students, including Greek and residential life will provide the maximize amount of information that might be otherwise undermined. Another recommendation for future studies is to conduct a longitudinal study assessing the formation, implementation and effectiveness of alcohol intervention and prevention programs from the minute of conception to over the course of a period of time to gauge their long-term effectiveness. I also recommend future studies on the administrators and staff members who create such programs and on their biases and objectives for the programs. Other studies to consider are ones on the different demographics and regions of students with alcohol issues, which can help shine more light on this problem.
References


Escolme, R., James, K., & Aylward, N. (2002). *Healthy colleges, a study and report into how further education colleges can promote health and well-being*. Leicester, England: NIACE.


why and for whom? Addictive Behaviors, 30, 1168-1182.


Appendix A

RESEARCH INVITATION
AN EXAMINATION OF FACTORS THAT SHAPE CAMPUS ALCOHOL INTERVENTION AND PREVENTION PROGRAMS

Email from researcher to potential participants who meet the criteria for inclusion in the study

Dear faculty and staff,

I am writing to inform you about a dissertation study that I am conducting at UGC related to an examination of factors shaping alcohol intervention and prevention programs on campus. I, Nazanin Fathi, a doctoral candidate, am conducting the study as part of my Ed.D. degree requirements.

Your participation in this study would consist of participation in a 75-minute, one-on-one interview. Any personally identifiable characteristics, such as your name or campus, will not appear in the study. Participating in this study is completely voluntary and you may withdraw at any time. Your time investment in this study is greatly appreciated.

If you would like to participate, please contact Nazanin Fathi at Nazanin23@aol.com. Thank you in advance for considering participation in this study.

Best,

Nazanin Fathi
CONSENT TO ACT AS A HUMAN RESEARCH PARTICIPANT

An examination of factors that shape campus alcohol intervention and prevention programs

You are being asked to participate in a research study entitled An examination of factors that shape campus alcohol intervention and prevention programs by Nazanin Fathi as part of the requirements for the Ed.D. degree in Educational Leadership and Policy Studies. Participation in this study is completely voluntary. Before deciding if you want to participate, please read the information below and ask questions about anything that you do not understand. A researcher listed below will be available to answer your questions.

RESEARCH TEAM
Researcher
Nazanin Fathi
Department of Educational Leadership and Policy Studies
18111 Nordhoff Street
Northridge, CA 91330-8212
(818) 677-2403
nazanin23@aol.com

Faculty Advisor
Nathan Durdella, Ph.D.
Dissertation chair
Department of Educational Leadership and Policy Studies
18111 Nordhoff St.
Northridge, CA 91330
Campus mail code: 8256
(818) 677-3316
nathan.durdella@csun.edu

PURPOSE OF STUDY
The purpose of this research study is to examine factors that shape campus alcohol intervention and prevention programs.

SUBJECTS
Inclusion Requirements
You are eligible to participate in this study if 1) you are at least 18 years of age, and 2) currently hold an administrative or staff position in one of the following service areas on your campus: student affairs, counseling services, health services, residential life, Greek life, student government and/or activities, or student conduct or discipline.
**Time Commitment**
This study will involve an interview that will take up approximately 75 minutes of your time.

**PROCEDURES**
The following procedures will occur: You will participate in a one-on-one interview in which you will answer questions about alcohol intervention and prevention programs offered to students struggling with such issues as use/abuse and dependency on your campus.

**RISKS AND DISCOMFORTS**
This study involves zero to minimal risk. There are no known harms or discomforts associated with this study beyond those encountered in normal daily life. Possible risks include embarrassment or discomfort. You may discontinue your participation in this study at any time. If you need to access counseling or support services, you may contact the following centers:

[California State University, Northridge University Counseling Services],

[California Lutheran University Counseling Services]

**BENEFITS**

*Subject Benefits*
You may not directly benefit from participation in this study. However, possible benefits that you may experience from participation in this study may include an increase in level of your understanding of the developmental effectiveness of programs that help student struggling with alcohol issues.

*Benefit to Others*
The benefit that this study could have for society is the potential increase in the success rate of alcohol intervention and prevention programs on college campuses.

**ALTERNATIVES TO PARTICIPATION**
The only alternative to participation in this study is not to participate.

**COMPENSATION, COSTS AND REIMBURSEMENT**

*Compensation for Participation*
You will not be compensated for your participation in this study.

*Costs*
There is no cost to you for participation in this study.

**CONFIDENTIALITY**

*Subject Identifiable Data*
All identifiable information that will be collected about you will be removed at the end of data collection. Transcribed interview data files will be stripped of direct identifiers (your name), redacted of personally identifying information, and will contain indirect subject identifiers only (random three-digit number). No identifiable data will be used in a published report. All identifiable data will be destroyed upon de-identification.

Data Storage
All research data will be stored electronically on a password-protected laptop at the residence of the researcher named on the first page.

Data Access
Only the researcher named on the first page of this form will have access to identifiable data. The faculty advisor named on the first page will have access to de-identified data only. No information derived from this research project will personally identify you. Publications and/or presentations that result from this study will not include identifiable information about you.

Data Retention
The researcher intends to keep de-identified data for a period of three years after the publication and/or the presentation of this study.

IF YOU HAVE QUESTIONS
If you have any comments, concerns, or questions regarding the conduct of this research please contact the research team listed on the first page of this form.

If you have concerns or complaints about the research study and team, or questions about your rights as a research participant, please contact Research and Sponsored Projects, California State University, Northridge, 18111 Nordhoff Street, Northridge, CA 91330-8232, or phone 818-677-2901.

VOLUNTARY PARTICIPATION STATEMENT
You should not sign this form unless you have read it and been given a copy of it to keep. Participation in this study is voluntary. You may refuse to answer any question or discontinue your involvement at any time without penalty or loss of benefits to which you might otherwise be entitled. Your decision will not affect your relationship with California State University, Northridge. Your signature below indicates that you have read the information in this consent form and have had a chance to ask any questions that you have about the study.
I agree to participate in the study.

(Please check one below)

___ I agree to be audio recorded

___ I do not wish to be audio recorded

___________________________________________________

Participant signature               Date

___________________________________________________

Printed name of participant

___________________________________________________

Researcher signature               Date

___________________________________________________

Printed name of researcher
Appendix C

AN EXAMINATION OF FACTORS THAT SHAPE CAMPUS ALCOHOL INTERVENTION AND PREVENTION PROGRAMS

INTERVIEW PROTOCOL

Welcome and Introduction

Good morning/afternoon/evening. Thank you for taking the time to talk with me today. Before we begin the interview session, I’d like to give you the opportunity to read and sign the Consent to Participate in Research. Today’s interview will last approximately 75 minutes. Are there any questions before I get started?

Main Questions

1. What are your thoughts and feelings about alcohol being an issue in higher education and affecting many college students?

2. What are some of the issues that students have had due to alcohol that you have been witness to in your career?

3. What are the issues that this particular campus and the associated student body experiences in regards to alcohol?

4. What are the reasons behind the issues that you have just mentioned?

5. How does the university as a whole deal with these issues?

6. In what capacity do you as an administrator get to talk about these issues with stakeholders/decision makers on this campus?

7. In your opinion, how are support services for students dealing with alcohol issues formed on this campus?

8. How do these support services get implemented?

9. What is your involvement when it comes to support services of this kind on this campus?

10. What are your thoughts about these programs?

11. Do you feel that these programs are effective?

12. From your perspective, what are the strengths and weakness of such programs?

13. What can be done to enhance the effectiveness of these programs?

Closing Question:
Do you have anything else to add at this time? Have you said everything that you wanted to say? Finally, do you know a colleague on campus who you feel may be interested in talking with me about the issues that we have discussed?