

Summary Report
Drug Awareness and Perception Survey: 2016

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September 6, 2017

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Executive Summary

Collin College administered its eleventh biennial Drug Awareness and Perception Survey in the fall of 2016 to certify compliance with the US Department of Education Drug-Free Schools and Communities Act (Amendment 1989) that requires institutions of higher education to determine the effectiveness of their drug prevention policies. The overall objective of the survey was to assess respondents' awareness of Collin's policies on alcohol and drug use, to study their perceptions about various aspects of alcohol and drugs, their actual use, reasons for use, and their awareness of resources/activities that address drug use and abuse at Collin; and to review and revise (if needed) Collin's existing programs in the light of findings from the survey.

An electronic survey was administered to a representative random sample of 5,560 credit students enrolled in fall 2016. Four hundred and forty-seven valid responses were received, yielding a response rate of 8%. Sixty-one percent of the respondents were females, 59% were 18 to 22 year-old, and 57 percent were full-time students. The key findings of the survey are presented below:

- Overall, 66 percent of the respondents indicated reading Collin's policies on the use and possession of alcohol and drugs. There was a statistically significant difference in the readership of policies by gender (71 percent females versus 60 percent males) indicating a departure from prior administrations that had minimal to no gender differences in readership. This could be a result of separate dissemination of drug policies in 2016 as opposed to previous administrations where policies accompanied other mandatory material. The separate dissemination could have garnered lesser attention from males leading to a decline in their readership.
- Respondents were asked to indicate the extent to which they considered a list of 15 substances as dangerous on a five-point scale, where "1" equaled "not dangerous" and "5" equaled "extremely dangerous." The 15 substances were alcohol (beer, wine, & liquor), cocaine, crack, ecstasy, heroin, LSD, marijuana (such as weed, pot, hashish), speed, tobacco (smoked), tobacco (chewed, snuffed), hookah (tobacco from water pipe), un-prescribed prescription drugs (such as pain medicines, Ritalin, antidepressants etc.), un-prescribed over-the-counter drugs (such as cough and cold medicine), steroids or human growth hormones for body building and K2 (herbs coated with synthetic chemicals that mimic marijuana high when smoked) (henceforth referred to as 15 items/substances). A high percentage of respondents rated all substances as "extremely dangerous" except for alcohol, marijuana, hookah and tobacco (smoked, chewed and snuffed). The lowest mean response on the 5-point scale was for marijuana (3.0) and the highest was for heroin (4.9). A lower value on the scale indicates that an item is perceived less dangerous while a higher value indicates vice versa.

- Compared to males, more females perceived the 15 substances as “Extremely Dangerous.”
- Analysis by age highlights that the older respondents (41+) perceived the listed substances as more dangerous compared to the younger age groups; the mean scores were highest for 41+ age group for 13 out of 15 substances.
- The survey asked the respondents to indicate what percentage of Collin students they thought consumed the 15 substances. Fifty-seven percent of the respondents believed that more than half of Collin’s student body consumed alcohol, 28 percent thought more than half consumed marijuana. Eighteen, 13, and 12 percent of the respondents respectively believed that more than half of the student body consumed tobacco (smoked), hookah and tobacco (chewed or snuffed).
- Sixty-six percent of the respondents linked alcohol and drug abuse to traffic accidents, 60% to sexual assault, 51% to suicide, 50% to poor academic performance, and 48% to personal injuries.
- In order to understand the drug environment of Collin, questions were asked about the extent to which respondents’ thought Collin’s environment was conducive to drinking, doing drugs, and smoking. Forty-five percent of the respondents perceived Collin’s environment was “to no extent” conducive to the use of alcohol, followed by 44 percent for drugs and sexual assault. Twenty-eight percent believed drugs were “to no extent” available on Collin’s premises. A high percentage of respondents said they “Don’t Know” about the extent the environment was conducive for alcohol, drugs and sexual assault.
- Forty-one, 40, 25, and 24 percent of the respondents were of the opinion that Collin’s students did not do more drugs or drink more or smoke more marijuana or use more tobacco products than peers at other colleges. As a matter of fact, 40, 37, 27, and 22 percent perceived that Collin students used tobacco products, smoked marijuana, drank alcohol and used drugs “About the same” as their peers at other colleges.
- In terms of ever-use of the 15 listed items, 96 percent of respondents indicated to have “never” used steroids or human growth hormones, 95 percent heroin and crack, 90 percent speed and K2, 89 percent cocaine and ecstasy, 88 percent LSD and tobacco (chewed or snuffed), 82 percent un-prescribed use of over-the-counter drugs, and 78 percent un-prescribed use of prescription drugs. Fifty-six percent of the respondents stated that they had “never” used tobacco (smoked) and marijuana.
- With regard to the use of 15 substances within last year¹, that is prior to 2016 survey, an overwhelming majority of the respondents indicated to have “never” used crack,

¹ Last year refers to the year prior to the 2016 Drug Awareness Survey.

heroin, and steroids or human growth hormones (97 percent), K2 (96 percent), Speed (95 percent), ecstasy, LSD and tobacco (chewed, snuffed) (94 percent), cocaine (93 percent), un-prescribed over-the-counter drugs (89 percent), un-prescribed prescription drugs (87 percent) and hookah (82 percent).

- Twenty percent of the respondents admitted consuming alcohol for fun “often,” “very often” or “always” when they partied/socialized within the last year. Twenty-two percent consumed alcohol “occasionally” to alleviate stress. Twenty percent participated in drinking games. Twenty-five percent of respondents set limits on the number of drinks they would have at a party “often,” “very often” or “always”. It is noteworthy that one-third of the respondents refused to drink “often,” “very often” or “always” and a little over one-fourth “occasionally.” Sixty-five and 41 percent claimed they “Never” consumed alcohol to relieve stress or to have fun.
- Respondents were asked to indicate the frequency with which certain behavioral, physical, and emotional outcomes occurred because of their drinking and/or drug use within last year. An overwhelming majority of the respondents checked “never” to all the listed outcomes. “Occasionally,” 25 percent of the respondent reported having a hangover, 22 percent felt sick, 8 percent did something they regretted later, 7 percent passed out or missed class the next day, or became involved in unprotected sex, or became really depressed. Six percent “occasionally” got into fight with their significant other and 3 percent admitted having suicidal thoughts.”
- In order to better understand respondents’ views, the survey asked them to check a list of statements in relation to drinking, using drugs, and tobacco/tobacco products. Fifty-six, 52 and 34 percent of the respondents were of the opinion that doing drugs, smoking tobacco/using tobacco products, and drinking destroys one. Forty-nine, 38, and 20 percent think that smoking, doing drugs and drinking makes one look disgusting. In case of alcohol, 50 percent of the respondents think that drinking helps overcome social inhibitions. Thirty-two, 24 and 21 percent of the respondents believe drinking, smoking and doing drugs helps relieve stress.
- Analysis of data related to Collin’s resources that addressed drug use and abuse indicates large gaps in respondents’ awareness of each resource compared to use of each resource. Nearly 60 and 41 percent of the respondents were aware of Counseling Resources and Students Health 101, however, only 10 and 11 percent respectively used them. The lower use of some resources is understandable as not everyone needs them. However, some areas call for better usage such as “Special Presentations” to alleviate stress; stress has been identified as a major reason for drug, alcohol and tobacco use.
- Twenty-eight percent of the students acknowledged that they were not aware of any activities/resources.

- Nearly half of the respondents were aware of various events occurring on their campuses under the umbrella of “Dignity Initiative,” an effort by Collin to educate students about various aspects of violence against women.

Based on quantitative and qualitative analyses, the following recommendations are suggested to the policy makers.

- Collin needs to further strengthen its efforts to educate students about the importance of reading the drug policies.
- Reinforce its efforts to publicize the resources/activities at Collin that address drug use and abuse and explore new ways not only to improve awareness but also to promote the use of resources (if needed).
- Based on students’ comments, post flyers and posters about types of available resources at the most visited areas (hallways, entrance to the buildings, atrium, bulletin boards and also the College’s website).
- Make students more aware of healthier and safer methods of dealing with stress and promote their involvement in various activities such as clubs and programs. This will help dispel their notions that alcohol, drugs, or smoking alleviate anxiety and stress.
- Communicate with students using multiple mediums including social media, text messaging and emails to promote awareness.
- Continue to organize events like “drug-free week” to promote awareness.
- Based on students’ comments, consider involving faculty to talk in class about Collin’s resources that deal with drug and alcohol use/abuse and give extra credit for attending drug awareness courses.
- Invite student organizations, faculty and medical practitioners to participate in seminars, and awareness activities.
- Introduce programs like the Dignity initiative to educate students about the risks of alcohol and drug abuse.
- Continue efforts to improve the response rates in future online surveys:
 - Promote awareness that any email from surveys@webhost.snapsurveys.com is not spam; rather it is one of Collin’s official surveys administered through Snap Surveys by Collin’s Institutional Research Office.
 - Continue to post flyers about the Drug Awareness Survey prior to its launch and advertise the Survey during the fall activities of the College.

SUMMARY REPORT

DRUG AWARENESS AND PERCEPTION SURVEY: 2016

Survey Objectives

Collin College administered its biennial Drug Awareness and Perception Survey in the fall of 2016. The survey is administered in compliance with the U.S. Department of Education Drug-Free Schools and Campuses Act. According to this Act, all institutions of higher education must revisit and review their alcohol and drug policies every two years. The 2016 survey aimed at the following objectives:

- To comply with the requirements of the U.S. Department of Education.
- To assess awareness of Collin's policies on alcohol and drug use.
- To study respondents' perceptions about the extent they consider alcohol, drugs and tobacco use as dangerous.
- To study respondents' perceptions about the consumption of alcohol, drugs and tobacco by Collin students.
- To assess respondents' perception of the availability and use of alcohol, drugs and tobacco products at Collin.
- To study respondents' perceptions of alcohol, drugs, and tobacco use by Collin students compared to students at other colleges.
- To study respondents' actual patterns of ever-use, and last-year's use (prior to survey year) of alcohol and drugs.
- To explore the respondents' alcohol and drug use behavior when they socialized/partied and the behavioral, physical and emotional consequences/impacts of their drinking and drug use.
- To obtain students' opinions on how drinking, using drugs and tobacco products impacts one.
- To assess respondents' awareness about the availability of resources/activities that address drug use and abuse at Collin.
- To maintain a steady stream of data.
- To review and revise (if needed) Collin's existing programs in the light of findings from the survey.
- To assess awareness about the "Dignity Initiative"; a program launched at Collin to educate students and the community about violence against women.

Methodology

- (1) *Drawing a representative random sample:* In fall of 2016 the Institutional Research Office (IRO) drew a representative random sample of 5,560 from all credit students enrolled in fall 2016. Because the survey asks sensitive questions regarding the respondents' actual use of alcohol, drugs, and tobacco and the behavioral consequences after consuming them, therefore the sample excluded students who were less than 18 years of age. In 2014 the sample was drawn by Student Development and clear guidelines were provided to exclude minors, however, inadvertently, they grossly underrepresented the 18-22 year-olds; thus adding bias to the 2014 sample. In 2016, IRO ensured that the sample for the survey was representative of Collin's population on key demographic variables like gender, age and race.

- (2) *Informing the students about the upcoming survey:* In October 2016, Collin's policies on the use and possession of alcohol and drugs were sent via CougarMail to every student enrolled in one or more credit classes. An electronic letter signed by the College President was sent to all students along with a flyer containing Collin's drug policies. The students were also informed about the upcoming Drug Awareness Survey via posters on bulletin-boards and TV monitors around campuses. The posters notified the students that some of them will be randomly selected to receive the Survey and encouraged the students to respond to the Survey.

- (3) *Administering the survey:* CougarMail addresses of the sampled students were retrieved using Banner and Argos and the Drug Awareness and Perception Survey was administered approximately 10 days after the drug policies were sent to students. Every student in the sample was sent an invitation email that included the survey link and detailed instructions. Because the survey was anonymous and there was no way to track who had responded, the entire sample received a follow-up email, and once again they were assured of the anonymity and confidentiality of their responses. A total of 447 valid responses were received, yielding a response rate of 8%. The completed sample gave a confidence of 95% with an error band of plus and minus 5 percent. The data was downloaded and processed by IRO using SPSS and Excel.

- (4) *Assurance of anonymity:* Not only did the cover letter assure respondents anonymity of their responses, but the sensitive questions were also prefaced with the assurance that there was no way to link their responses to their identity. For sensitive questions respondents were also given the option to check "do not want to answer."

Instrument

To a large extent, the 2016 questionnaire maintains the same structure and content as the instruments used in the two previous administrations. However, five changes were made to the survey instrument; (a) “Alone on campus” was added as a response option to the question that asked students to specify their living arrangements; (b) crack was added to the list of drugs; (c) in an effort to meet the upcoming concerns about gathering data on sexual assault on college campuses, an item was added to elicit students’ opinion on the prevalence of sexual assault within Collin’s premises; (d) a “Don’t Know” option was added to the question that obtained students’ perception on availability and usage of drugs, and prevalence of sexual assault on campus, and (e) a new question was introduced to seek students’ awareness about the Dignity Initiative; a new multi-year effort by Collin to raise awareness about gender violence and oppression of women.

Report

The survey report is divided into three sections which broadly match the overall flow of the survey instrument. Section I relates to demographic and other background information about the respondents. Section II provides information on whether (1) respondents had read Collin’s alcohol and drug policies or they intended to read them; (2) their perceptions of how dangerous the 15 listed substances were; (3) their perceptions of use of the 15 substances by Collin students; (4) their perceptions of the extent alcohol and drug use were related to traffic accidents, personal injuries, poor academic performance, sexual assault and suicide; (5) their perceptions of availability of drugs within the Collin environment and how conducive Collin’s environment is to drinking, using drugs and sexual assault; (6) their perceptions of whether Collin’s students drink and use drugs more compared to students at other colleges; (7) their frequency of ever-use of the 15 substances; (8) their frequency of use of the 15 substances within the last year (9) their party/socialization behavior within last year; (10) their frequency of physical, social, and other behavioral aftermaths of drinking and drug use within the last year; (11) their views about impacts of drinking, drugs, and tobacco; (12) their awareness and participation in activities/resources offered by Collin that address drug use and abuse, (13) their awareness of the Dignity Initiative, and (14) their suggestions on how Collin could improve awareness of its resources. Section III presents qualitative analysis of open-ended comments.

SECTION I

I.1. DEMOGRAPHIC BACKGROUND

This section presents demographic information about respondents' gender, age, student status, marital status, employment status, living arrangements, overall GPA and their primary campus (Table 1).

Of the total respondents, 61 percent were females, 59 percent were 18 to 22 years of age, 57 percent of the respondents were full-time students, 79 percent were single, and 68 percent were working either part or full-time. More than half of the respondents (58 percent) lived with parents. Thirty-two percent of the respondents reported a GPA of over 3.5, 47 percent attended most classes at the Spring Creek campus followed by 30 percent at Preston Ridge campus.

Table 1. *Demographic Characteristics of the Respondents: 2016 Drug Awareness & Perception Survey*

	Frequency	Percent
Gender		
Female	274	61.3
Male	170	38.0
No response	3	0.7
Total	447	100.0
Age		
18-22	262	58.6
23-29	87	19.5
30-35	34	7.6
36-40	17	3.8
41-54	37	8.3
55+	9	2.0
No response	1	0.2
Total	447	100.0
Student Status		
Full-time	255	57.0
Part-time	191	42.7
No response	1	0.2
Total	447	100.0
Marital Status		
Single	352	78.7
Married	76	17.0
Separated	3	0.7
Divorced	15	3.4
Widowed	1	0.2
No response	0	0.0
Total	447	100.0

Table 1. *Continued*

	Frequency	Percent
Whether Working?		
Yes, full-time	117	26.2
Yes, part-time	189	42.3
No	139	31.1
No response	2	0.4
Total	447	100.0
Living Arrangements		
Alone on campus*	3	0.7
Alone off campus	59	13.2
With non-parent on campus	5	1.1
With non-parent off campus	121	27.1
With parent(s)	258	57.7
No response	1	0.2
Total	447	100.0
GPA		
>3.5	141	31.5
3.0 - 3.49	124	27.7
2.5 - 2.99	64	14.3
2.0 - 2.49	29	6.5
<2.0	12	2.7
No GPA (first-time-in-college)	76	17.0
No response	1	0.2
Total	447	100.0
Campus at Which Attend Most Classes		
Central Park Campus (CPC)	83	18.6
Spring Creek Campus (SCC)	208	46.5
Preston Ridge Campus (PRC)	135	30.2
Other	18	4.0
No response	3	0.7
Total	447	100.0

* New response choice added in 2016.

SECTION II

II.1. WHETHER RESPONDENTS HAD READ COLLIN'S ALCOHOL AND DRUG POLICIES

The respondents were asked if they had read Collin's alcohol and drug abuse policies that were sent to them electronically. Sixty-six percent of the respondents stated that they had read the policies (Figure 1). Cross-tabulating the responses by gender indicates that 71 percent of females and 60 percent of males reported reading the policies (Figure 2). The gender difference on reading policies was statistically significant and represents a departure from prior surveys which reported minimal gender differences. This difference could be a result of separate dissemination of the drug policies in 2016 unlike previous administrations when policies accompanied other mandatory material. The separate dissemination of policies may have garnered lesser attention from the males thus leading to a decline in their readership.

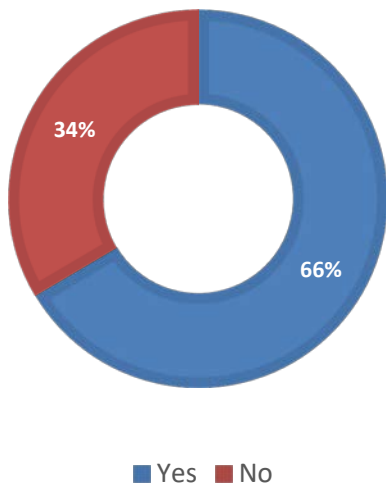


Figure 1. Whether Read Alcohol and Drug Policies (N= 447)

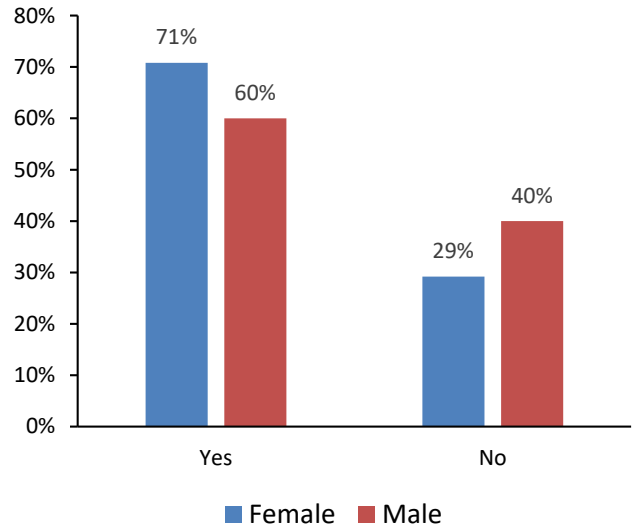


Figure 2. Whether Read Alcohol and Drug Policies by Respondents' Gender (Chi-Square = 5.51, df = 1, p < 0.02)

Figure 3 presents readership of drug policies by age. Because of the small frequency for the 55 and over age group, it was collapsed with 41-54 year-olds to form a 41+ age group to allow a meaningful age-based comparison. With the exception of the 36-40 year olds, by and large, the data suggests an increase in the readership of policies by age. Highest readership was for the oldest age group.

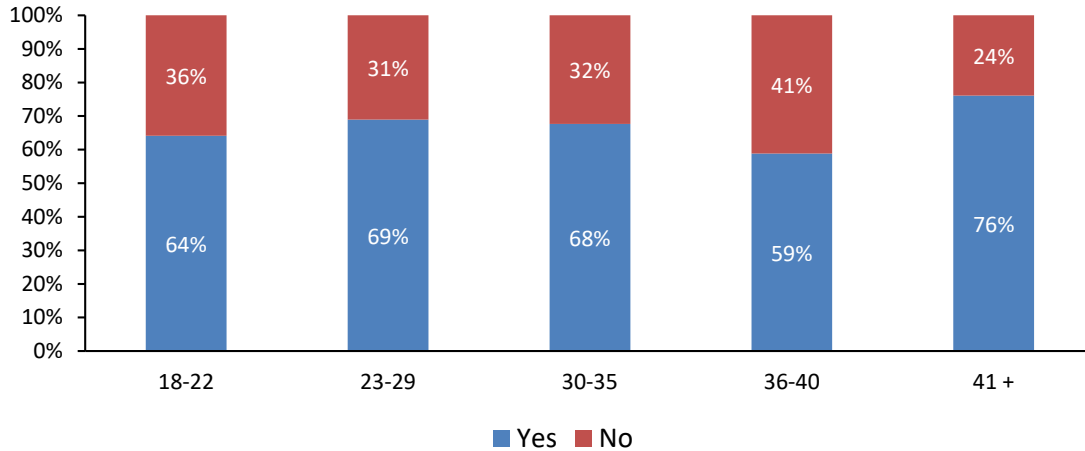


Figure 3. Whether Read Alcohol and Drug Policies by Respondents' Age

Note: The 55 and over age group was collapsed with 41-54 year-olds to form 41+ age group.

A follow-up question about intention to read the policies was asked to only those respondents who had not read them. Of the 150 respondents who had not read the policies, 71 percent indicated no intention of reading them (Figure 4). Interestingly, unlike significant gender differences in the readership of policies (Figure 2), cross-tabulating the intention to read the policies by gender reveals no gender differences (71 percent females vs. 72 percent males) (Figure 5).

Analysis by age indicates that 76 percent of the youngest age group (18-22) and 70 percent of the oldest age group (41+) had no intention to read the policies Figure 6).

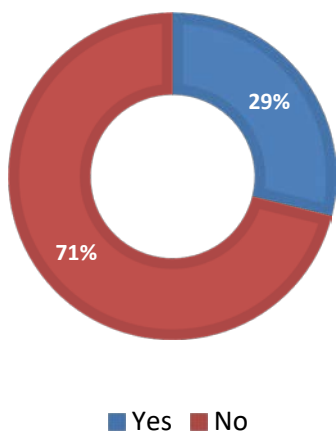


Figure 4. Intend to Read Alcohol and Drug Policies (N=150)

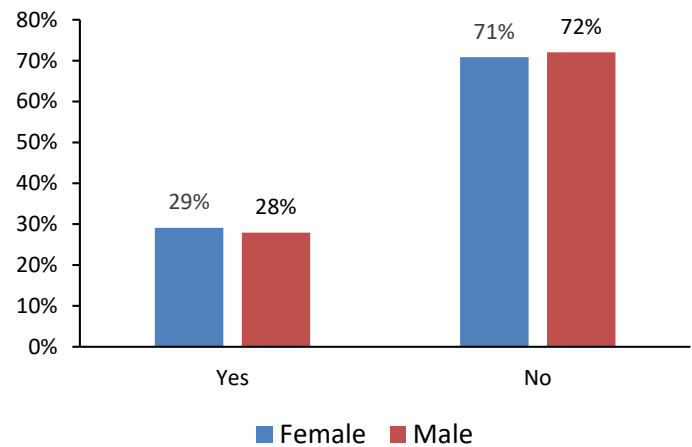


Figure 5. Intend to Read Alcohol and Drug Policies by Respondents' Gender

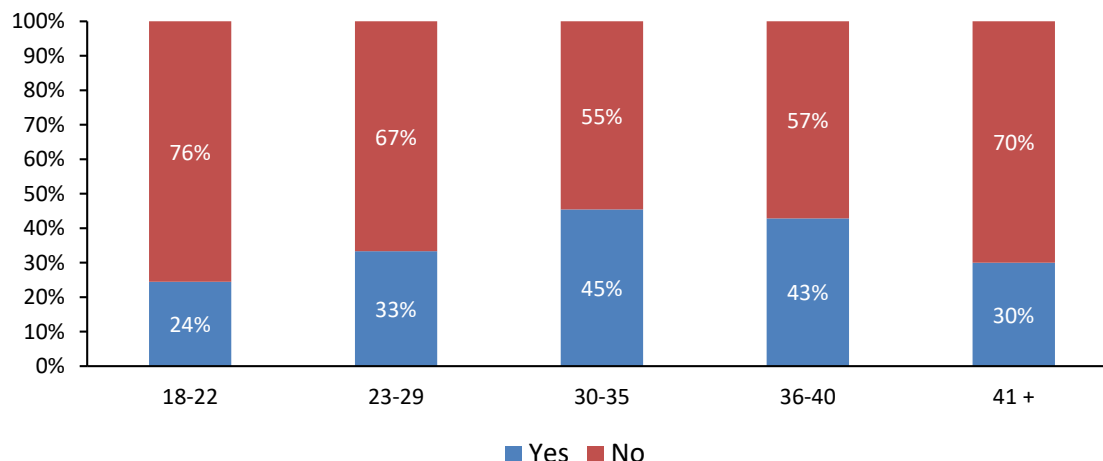


Figure 6. Intend to Read Alcohol and Drug Policies by Respondents' Age

II.2. EXTENT TO WHICH RESPONDENTS' PERCEIVED ALCOHOL AND DRUGS AS DANGEROUS

The respondents were asked to indicate the extent to which they perceived a list of 15 substances as dangerous on a five-point scale where "1" represented "Not Dangerous" and "5" represented "Extremely Dangerous." The scale included "Don't know" as a valid option. The list included alcohol (beer, wine, & liquor), cocaine, crack, ecstasy, heroin, LSD, marijuana (pot, weed, hashish), speed, tobacco (smoked), tobacco (chewed, snuffed), hookah (tobacco from water pipe), un-prescribed use of prescription drugs, un-prescribed use of over-the-counter drugs, steroids or human growth hormones and K2.

Heroin was rated "Extremely Dangerous" by over 90 percent of respondents followed by crack (84 percent), cocaine (77 percent) and LSD (63 percent). In contrast, only 21 percent of respondents rated alcohol as "Extremely Dangerous." Twenty-six percent of respondents regarded marijuana as "Extremely Dangerous," interestingly, nearly the same percentage of respondents (27 percent) also rated it as "Not Dangerous" (Figure 7). Figure 8 presents mean² responses about the perceptions of the 15 substances as dangerous. The means were computed on a five-point scale where higher mean score indicates higher perceived danger regarding a substance. Heroin received the highest mean rating of 4.9 and Marijuana the lowest (3.0).

² Mean excludes the "Don't know" response choice.

Percentage Distribution of Responses

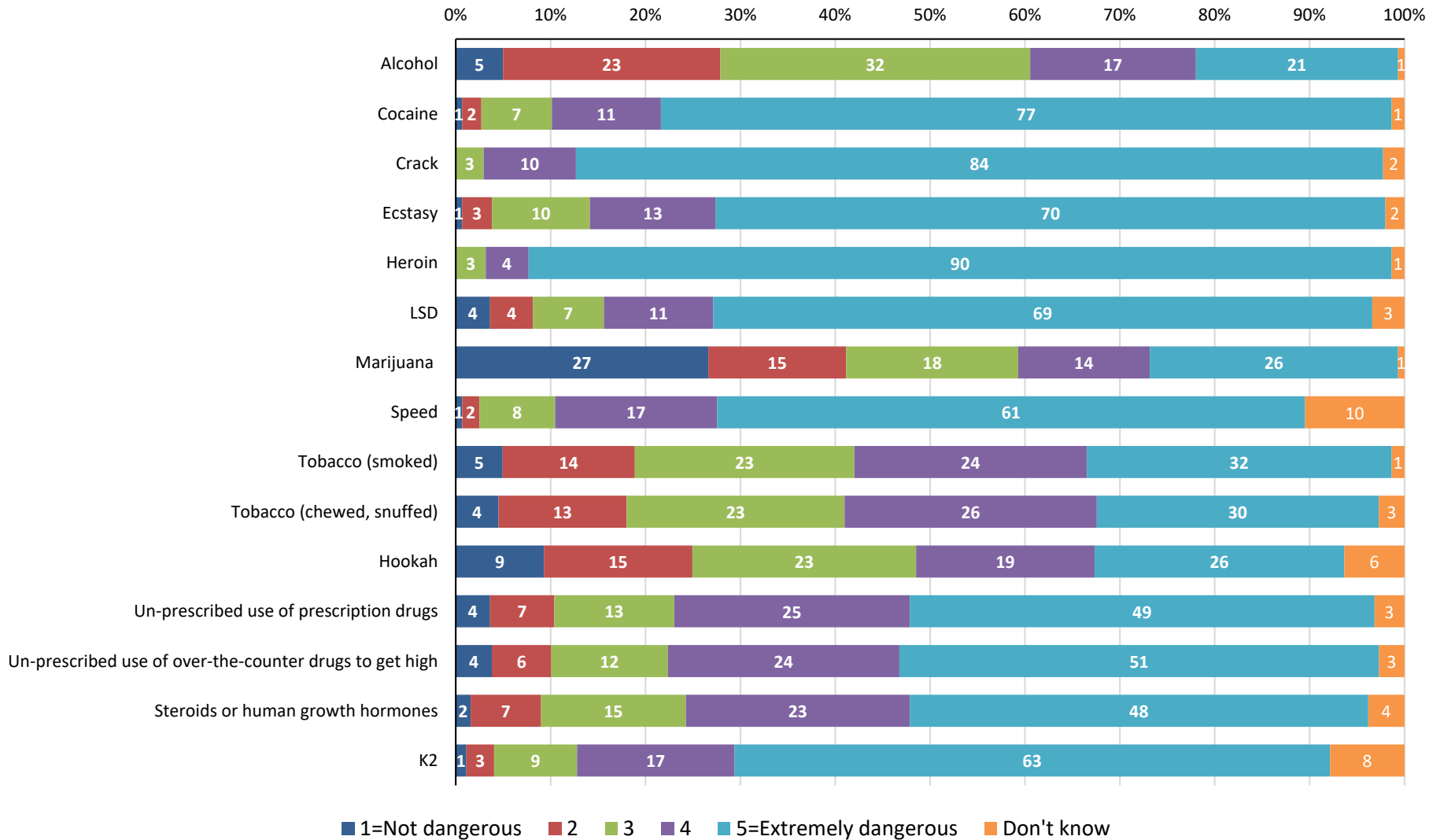


Figure 7. Respondents' Perception of Dangerousness of the 15 Listed Substances

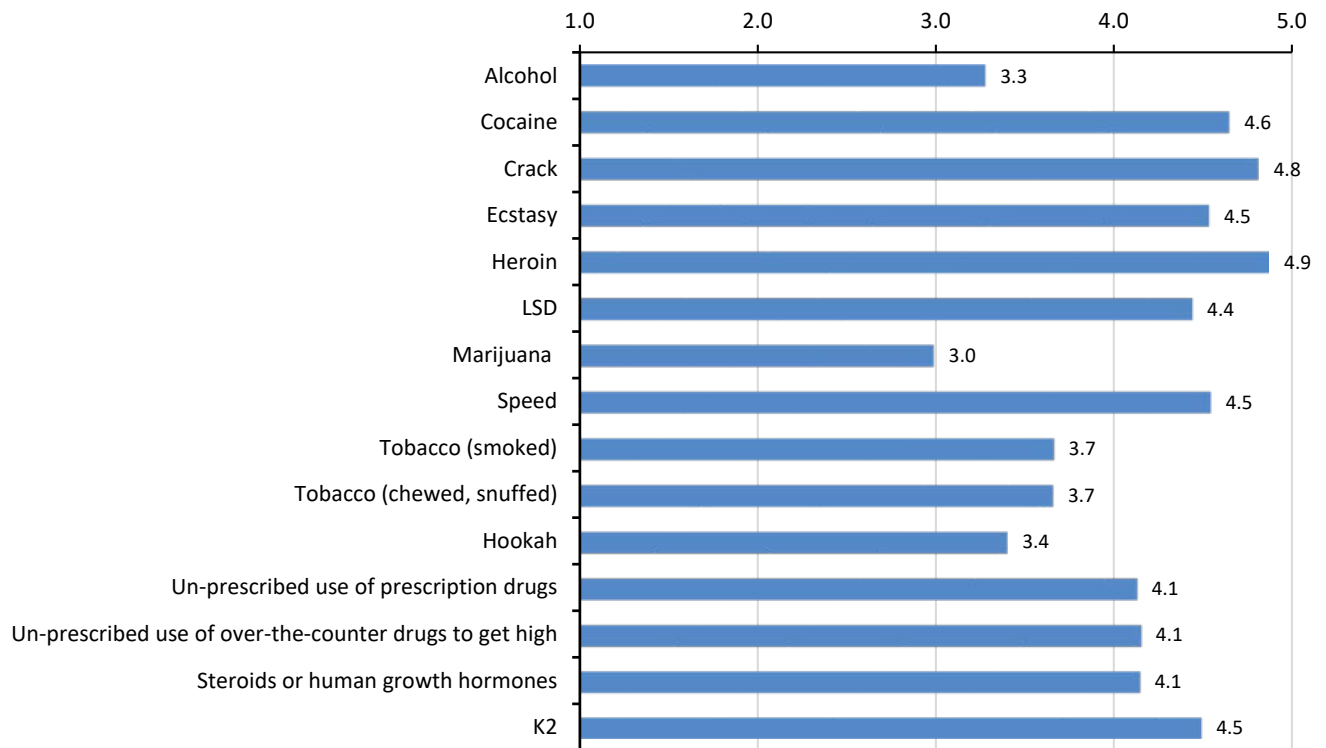


Figure 8. Mean Responses of Respondents' Perception of Dangerousness of the 15 Listed Substances

Note: Mean excludes the "Don't Know" response choice.

II.2.1. Extent to Which Alcohol and Drugs Are Perceived as Dangerous – Perceptions by Respondents' Gender

Figure 9 presents the gender comparison of the extent to which the 15 items were perceived as dangerous. Similar to the pattern in previous years, females perceived each of the listed substances as more dangerous than their male counterparts. The biggest difference between male and female mean responses was for marijuana (3.2 for females vs.2.6 for males); followed by steroids or human growth hormones (4.3 for females vs. 3.8 for males). The substances with the least gender-based differences in perceived dangerousness were heroin and crack; heroin had a mean rating of 4.9 for females and 4.8 for males, and crack had a mean rating of 4.8 for females and 4.7 from for males.

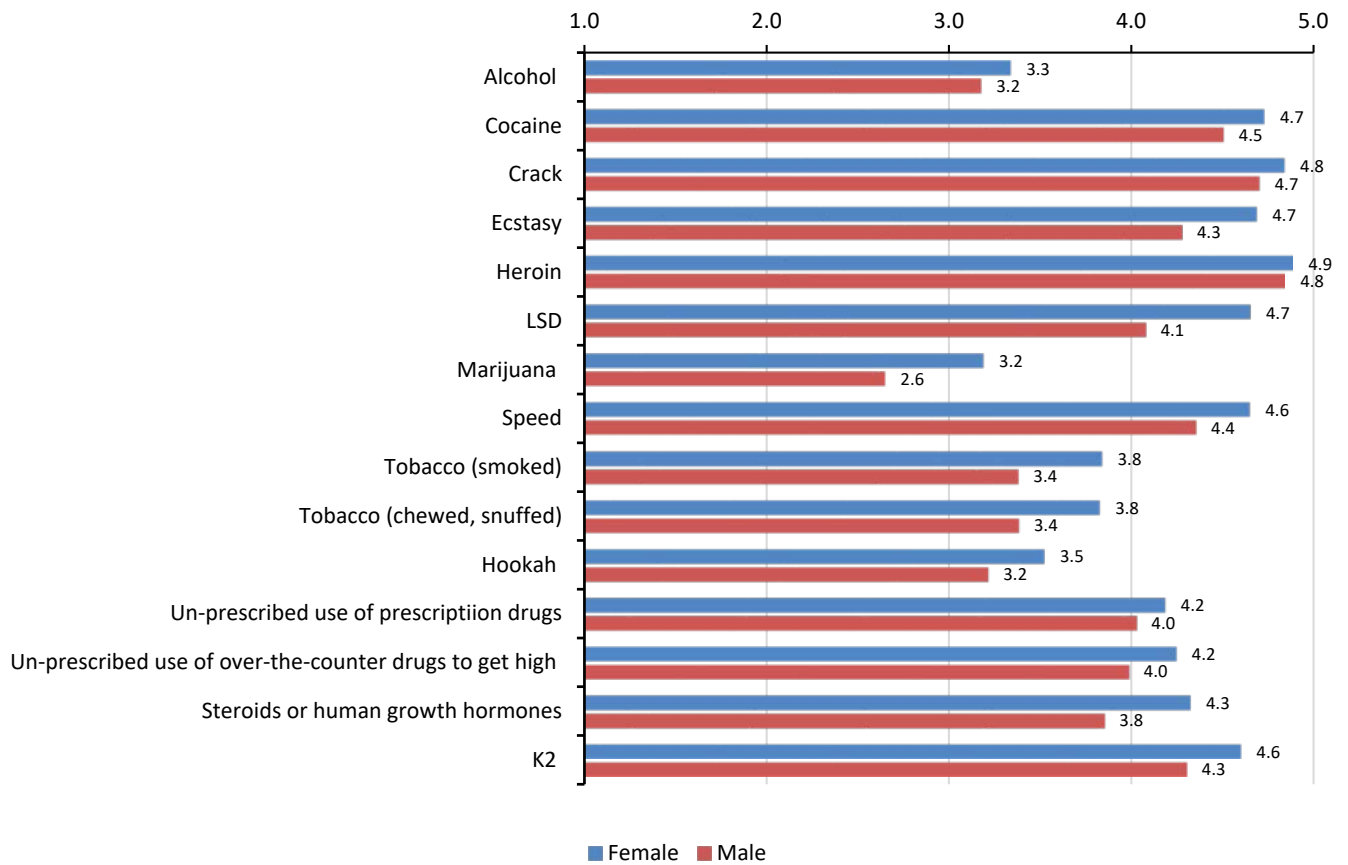


Figure 9. Mean Perception of Dangerousness of Alcohol and Other Drugs – Perceptions by Respondents' Gender

Note: Mean excludes the "Don't Know" response choice.

II.2.2. Extent to Which Alcohol and Drugs Are Perceived as Dangerous – Perceptions by Respondents' Age

Table 2 provides an analysis of the extent each age group considered the 15 substances as dangerous. A lower mean indicates lower perceived dangerousness and a higher mean represents a higher perceived dangerousness for a substance. Analysis by age indicates that the perceived dangerousness was highest for most of the listed substances for the oldest age group (41+) with the exception of speed and steroids for which 30-35 olds had the highest mean scores (4.9 and 4.7 respectively). The mean scores were highest for 41+ age group for 13 out of 15 items.

Table 2. Mean Perception of Dangerousness of Alcohol and Other Drugs – Perceptions by Respondents’ Age

	Age Categories					Sparklines *
	18-22	23-29	30-35	36-40	41 +	
Alcohol	3.2	3.2	3.5	3.5	3.7	
Cocaine	4.6	4.6	4.8	4.8	5.0	
Crack	4.8	4.9	4.8	4.7	5.0	
Ecstasy	4.5	4.4	4.9	4.5	4.9	
Heroin	4.8	5.0	4.9	4.8	5.0	
LSD	4.3	4.3	4.9	4.5	5.0	
Marijuana	2.8	2.6	3.8	3.1	4.1	
Speed	4.4	4.6	4.9	4.3	4.8	
Tobacco (smoked)	3.6	3.7	3.7	3.7	4.2	
Tobacco (chewed, snuffed)	3.6	3.5	3.9	3.4	4.0	
Hookah	3.3	3.3	3.8	3.4	3.8	
Un-prescribed use of prescription drugs	4.0	4.1	4.5	4.2	4.6	
Un-prescribed use of over-the-counter drugs to get high	4.0	4.2	4.6	3.6	4.6	
Steroids or human growth hormones	4.0	4.0	4.7	4.2	4.6	
K2	4.4	4.4	4.8	4.6	4.9	

Note. Mean excludes “Don’t Know” response choice.

* Sparklines present graphical representation of means observed for each of the age groups in the order that they are listed in the columns on the left. Red bars indicate highest means for each of the substances. For example, for alcohol the highest mean of 3.7 was observed for the 41+ age group, and therefore the right-most bar is shaded red.

II.3. PERCEPTIONS ABOUT CONSUMPTION OF ALCOHOL AND DRUGS BY COLLIN STUDENTS

In order to seek information about the prevalence of alcohol and drugs in Collin’s environment, the survey asked the respondents, “What percentage of Collin’s students do you think consume the following substances?” The list of the 15 substances was followed with five response choices: “<5%,” “5-25%,” “26-50%,” “>50%,” and “Don’t Know.”

Figure 10 indicates that 57 percent of the respondents think that more than half of the students at Collin consume alcohol; 28 percent marijuana, 18 percent tobacco (smoked), 13 percent hookah and 12 percent tobacco (chewed or snuffed). Another 32 and 26 percent of the respondents respectively perceive that tobacco (smoked), and marijuana is used by “26-50%” of Collin students. A large number of respondents stated “Don’t Know” as an answer to this question. Highest percentage of respondents did not know about Speed and K2 (35 and 34 percent respectively).

Percentage Distribution of Responses

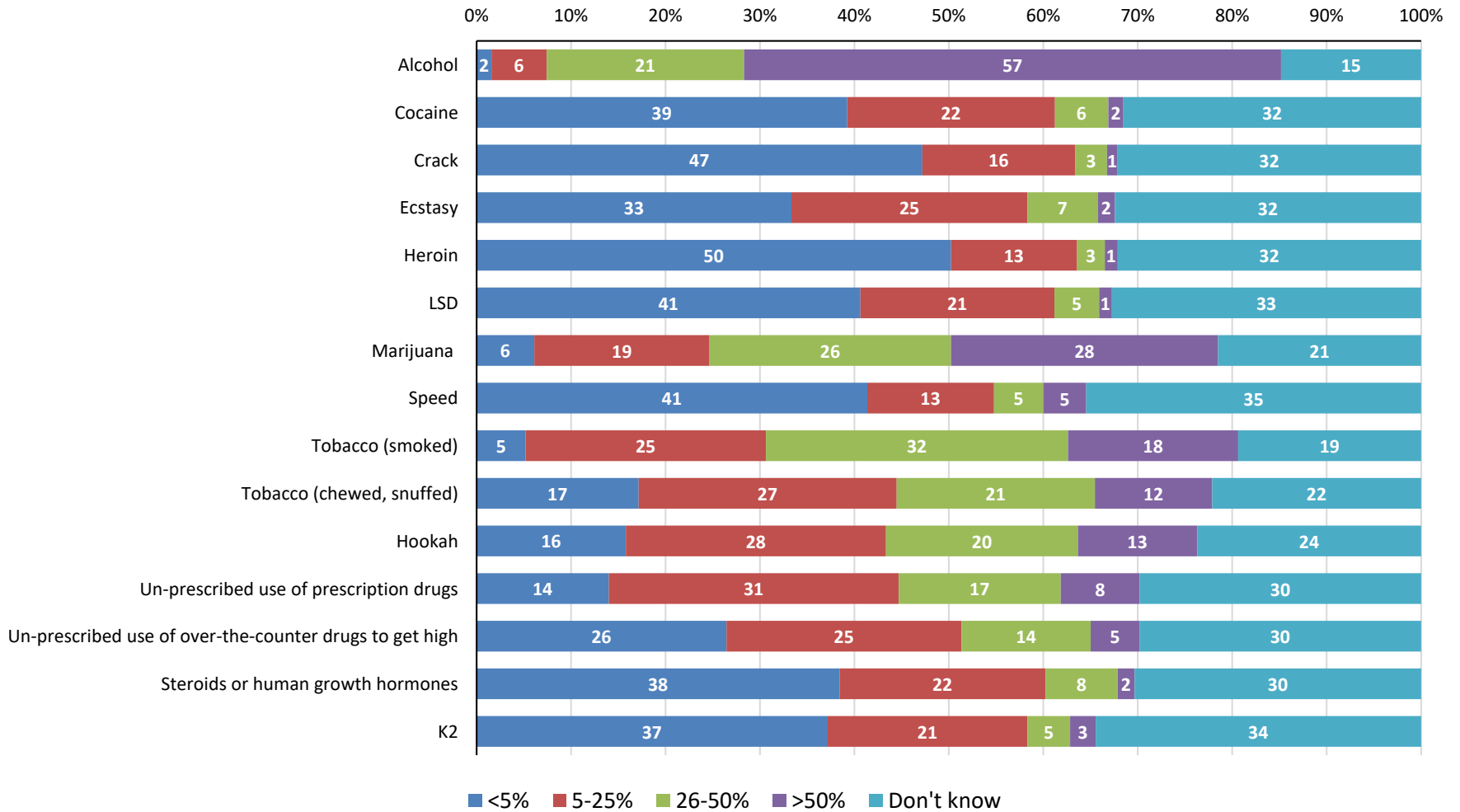


Figure 10. Respondents' Perceptions of Extent of Consumption of the 15 Substances by Collin Students

II.3.1. Percentage of Collin Students Who Consume Alcohol, Drugs, and Tobacco – Perceptions by Respondents' Gender

Analysis based on gender indicates that slightly more females as opposed to males (58 versus 55 percent) perceive that more than half of the student body at Collin consumed alcohol. Almost same percent of both genders (29 percent of females and 28 percent males) believed that the consumption of marijuana was prevalent in over 50% of the student body. In the case of tobacco (smoked), around 19 percent of females and 17 percent of males believed that more than half of the students at Collin consumed it (Table. 3). Overall, females have a higher perception of the use of drugs, alcohol and tobacco by the Collin students.

II.3.2. Percentage of Collin Students Who Consume Alcohol, Drugs, and Tobacco – Perceptions by Respondents' Age

Table 4 presents an analysis of perceived consumption of alcohol and drugs by Collin students based on respondents' age. Fifty-eight percent of 18-22 year-olds, 63 percent of 23-29 year-olds, half of 30-35 year-olds, 35 percent of 36-40 year-olds and 49 percent of those aged 41 and above believed that the consumption of alcohol was prevalent in over 50% of the student body. In the case of marijuana, around one-third of 18-22 and 23-29 year-olds, 15 percent of 30-35 year-olds, 18 percent of 36-40 year-olds and 11 percent of those over 41 years of age, perceived that more than half of the students at Collin consumed it.

As for the “<5%” category, the data suggests that the younger respondents had a lower perceived incidence of the use of heroin, cocaine, crack and ecstasy by Collin's students. Highest percentage of 18-22 year olds (58 percent) think that less than five percent of the Collin students use heroin, followed by 52 percent for crack, 46 percent for Speed, 45 percent for cocaine, 43 percent for LSD and 40 percent for ecstasy. In case of the “Don't Know” category, the older students generally indicated a lack of knowledge about the perceived usage of the listed substances.

Table 3. *What Percentage of Collin Students do you Think Consume the Following Substances? Perceptions by Respondents' Gender*

		Perceptions of Consumption (in percent)					Total	N
		<5%	5-25%	26-50%	>50%	Don't know		
Alcohol (beer, wine & liquor)	Female	1.8	5.9	18.4	58.1	15.8	100	272
	Male	1.2	5.9	25.3	54.7	12.9	100	170
Cocaine	Female	37.7	21.6	6.0	1.9	32.8	100	268
	Male	41.2	22.9	5.3	1.2	29.4	100	170
Crack	Female	42.6	18.8	3.7	1.1	33.8	100	272
	Male	54.1	12.4	2.9	1.2	29.4	100	170
Ecstasy	Female	30.8	25.3	7.3	1.8	34.8	100	273
	Male	37.5	24.4	7.7	1.8	28.6	100	168
Heroin	Female	46.3	15.4	2.9	1.5	33.8	100	272
	Male	56.3	10.2	3.0	1.2	29.3	100	167
LSD	Female	38.0	21.8	3.7	1.1	35.4	100	271
	Male	44.4	18.9	6.5	1.8	28.4	100	169
Marijuana (such as pot, weed, hashish)	Female	6.6	16.8	24.9	28.6	23.1	100	273
	Male	5.4	21.0	26.9	28.1	18.6	100	167
Speed	Female	38.2	12.7	5.6	4.5	39.0	100	267
	Male	46.5	14.1	4.7	4.7	30.0	100	170
Tobacco (smoked)	Female	4.8	22.8	31.6	19.1	21.7	100	272
	Male	5.9	29.0	33.1	16.6	15.4	100	169
Tobacco (chewed, snuffed)	Female	14.4	25.1	24.4	12.2	24.0	100	271
	Male	21.3	30.8	16.0	13.0	18.9	100	169
Hookah (tobacco from water pipe)	Female	13.6	26.5	22.1	12.5	25.4	100	272
	Male	19.6	28.6	17.9	13.1	20.8	100	168
Un-prescribed use of prescription drugs	Female	11.9	32.6	15.9	8.9	30.7	100	270
	Male	17.6	27.1	19.4	7.6	28.2	100	170
Un-prescribed use of over-the-counter drugs	Female	21.6	26.4	15.4	6.2	30.4	100	273
	Male	34.1	22.4	11.2	3.5	28.8	100	170
Steroids or human growth hormones	Female	32.6	23.4	9.5	1.8	32.6	100	273
	Male	47.9	18.9	4.7	1.8	26.6	100	169
K2	Female	34.4	20.9	5.1	2.6	37.0	100	273
	Male	41.7	21.4	3.6	3.0	30.4	100	168

Table 4. *What Percentage of Collin Students do you Think Consume the Following Substances? Perceptions by Respondents' Age*

		Perceptions of Consumption (in percent)					Total	N
		<5%	5-25%	26-50%	>50%	Don't know		
Alcohol (beer, wine & liquor)	18-22	1.9	6.9	21.5	58.2	11.5	100	261
	23-29	1.1	5.7	23.0	63.2	6.9	100	87
	30-35	2.9	2.9	11.8	50.0	32.4	100	34
	36-40	0.0	0.0	23.5	35.3	41.2	100	17
	41+	0.0	4.4	20.0	48.9	26.7	100	45
Cocaine	18-22	44.6	21.9	5.0	1.2	27.3	100	260
	23-29	36.5	24.7	8.2	2.4	28.2	100	85
	30-35	30.3	18.2	3.0	3.0	45.5	100	33
	36-40	25.0	12.5	6.3	0.0	56.3	100	16
	41+	26.1	21.7	6.5	2.2	43.5	100	46
Crack	18-22	52.3	16.2	2.7	0.8	28.1	100	260
	23-29	49.4	16.1	3.4	2.3	28.7	100	87
	30-35	32.4	14.7	5.9	0.0	47.1	100	34
	36-40	29.4	17.6	0.0	0.0	52.9	100	17
	41+	30.4	17.4	6.5	2.2	43.5	100	46
Ecstasy	18-22	40.2	25.1	5.4	0.8	28.6	100	259
	23-29	26.4	26.4	13.8	4.6	28.7	100	87
	30-35	20.6	29.4	0.0	2.9	47.1	100	34
	36-40	11.8	23.5	11.8	0.0	52.9	100	17
	41+	26.1	17.4	10.9	2.2	43.5	100	46
Heroin	18-22	57.9	11.6	1.5	0.8	28.2	100	259
	23-29	48.8	14.0	4.7	3.5	29.1	100	86
	30-35	30.3	21.2	3.0	0.0	45.5	100	33
	36-40	23.5	23.5	0.0	0.0	52.9	100	17
	41+	32.6	13.0	8.7	2.2	43.5	100	46
LSD	18-22	43.2	22.4	5.4	1.2	27.8	100	259
	23-29	37.9	24.1	5.7	2.3	29.9	100	87
	30-35	38.2	11.8	0.0	0.0	50.0	100	34
	36-40	31.3	12.5	0.0	0.0	56.3	100	16
	41+	34.8	13.0	4.3	2.2	45.7	100	46

Table 4. *Continued 1*

		Perceptions of Consumption (in percent)					Total	N
		<5%	5-25%	26-50%	>50%	Don't know		
Marijuana	18-22	7.0	17.5	25.7	31.9	17.9	100	257
	23-29	3.4	29.9	23.0	33.3	10.3	100	87
	30-35	2.9	11.8	23.5	14.7	47.1	100	34
	36-40	5.9	5.9	23.5	17.6	47.1	100	17
	41+	8.7	13.0	32.6	10.9	34.8	100	46
Speed	18-22	45.5	13.6	4.7	4.7	31.5	100	257
	23-29	46.5	9.3	7.0	4.7	32.6	100	86
	30-35	23.5	20.6	2.9	2.9	50.0	100	34
	36-40	35.3	11.8	0.0	0.0	52.9	100	17
	41+	24.4	13.3	8.9	6.7	46.7	100	45
Tobacco (smoked)	18-22	5.4	25.8	31.9	20.8	16.2	100	260
	23-29	7.0	31.4	34.9	18.6	8.1	100	86
	30-35	2.9	8.8	32.4	14.7	41.2	100	34
	36-40	5.9	5.9	35.3	5.9	47.1	100	17
	41+	2.2	30.4	26.1	8.7	32.6	100	46
Tobacco (chewed, snuffed)	18-22	17.8	27.8	23.2	13.5	17.8	100	259
	23-29	21.8	31.0	20.7	13.8	12.6	100	87
	30-35	6.1	24.2	15.2	12.1	42.4	100	33
	36-40	11.8	17.6	23.5	0.0	47.1	100	17
	41+	13.0	23.9	13.0	8.7	41.3	100	46
Hookah	18-22	14.7	30.2	22.1	13.6	19.4	100	258
	23-29	17.2	29.9	24.1	16.1	12.6	100	87
	30-35	17.6	8.8	20.6	8.8	44.1	100	34
	36-40	23.5	17.6	5.9	5.9	47.1	100	17
	41+	13.0	26.1	8.7	6.5	45.7	100	46
Un-prescribed use of prescription drugs	18-22	15.4	33.5	16.2	8.5	26.5	100	260
	23-29	16.1	25.3	26.4	8.0	24.1	100	87
	30-35	6.1	27.3	12.1	9.1	45.5	100	33
	36-40	5.9	17.6	11.8	11.8	52.9	100	17
	41+	11.1	31.1	11.1	6.7	40.0	100	45

Table 4. *Continued 2*

		Perceptions of Consumption (in percent)					Total	N
		<5%	5-25%	26-50%	>50%	Don't know		
Un-prescribed use of over-the-counter drugs	18-22	29.5	27.2	13.0	4.2	26.1	100	261
	23-29	26.4	19.5	20.7	8.0	25.3	100	87
	30-35	20.6	20.6	11.8	2.9	44.1	100	34
	36-40	17.6	5.9	11.8	11.8	52.9	100	17
	41+	17.4	30.4	6.5	4.3	41.3	100	46
Steroids or human growth hormones	18-22	41.5	21.9	8.5	1.2	26.9	100	260
	23-29	40.2	25.3	6.9	3.4	24.1	100	87
	30-35	29.4	17.6	8.8	0.0	44.1	100	34
	36-40	23.5	17.6	5.9	0.0	52.9	100	17
	41+	28.3	19.6	4.3	4.3	43.5	100	46
K2	18-22	40.9	21.2	3.5	2.3	32.0	100	259
	23-29	40.2	24.1	3.4	5.7	26.4	100	87
	30-35	32.4	11.8	5.9	0.0	50.0	100	34
	36-40	23.5	17.6	5.9	0.0	52.9	100	17
	41+	17.4	23.9	10.9	2.2	45.7	100	46

Note. The 55+ age category was collapsed with 41-54 to form a 41+ category in order to have meaningful age-based comparisons.

II.4. EXTENT TO WHICH CERTAIN BEHAVIORS ARE RELATED TO ALCOHOL AND DRUG ABUSE

The respondents were asked to indicate the extent to which they believed traffic accidents, personal injuries, poor academic performance, sexual assault, and suicide were linked to alcohol and drug use. The responses were scored on a five-point scale where “1” indicated “to no extent” and “5” indicated “to a large extent.”

Figure 11 illustrates that by aggregating the “4” and “5” response categories, around 66% of the respondents linked alcohol and drug abuse to traffic accidents, 60% to sexual assault, 51% to suicide, 50% to poor academic performance, and 48% to personal injuries. The mean response ranged from 3.9 for traffic accidents to 3.4 for personal injuries (see Appendix Table A1).

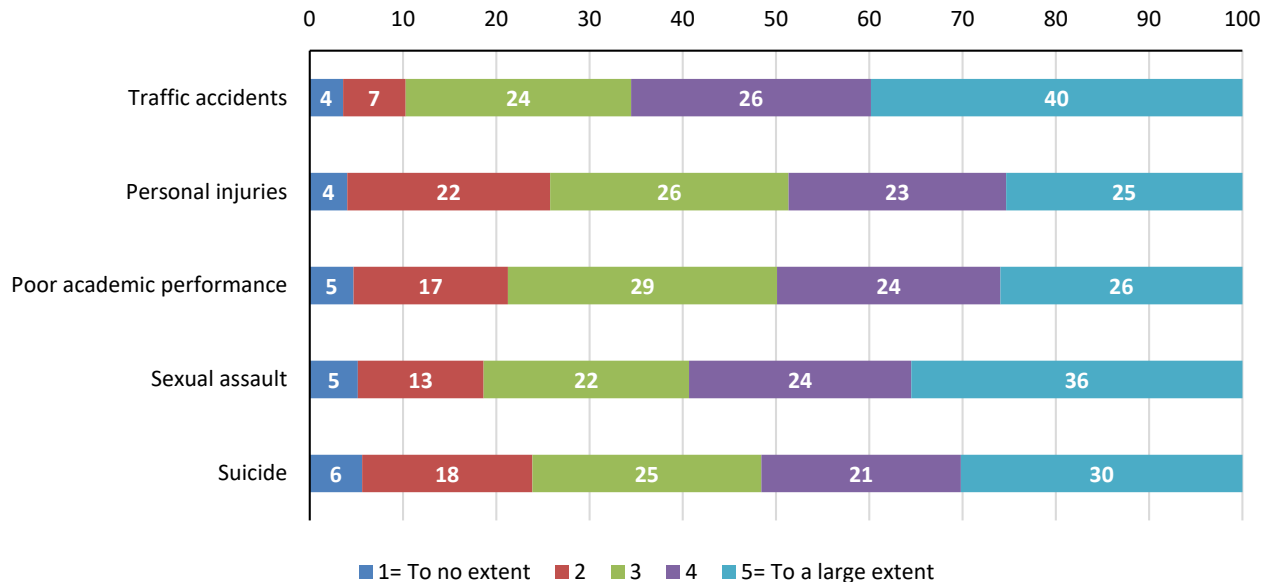


Figure 11. Extent to which Behavioral Outcomes Are Related to Alcohol and Drug Use (Respondents’ Perceptions in Percentage)

Figure 12 presents the mean responses for each of the behavioral outcomes by respondents' gender. Compared to males, the means were higher for females implying that females in general were more inclined towards attributing each of the behavioral outcomes to alcohol and drug use.

Figure 13 presents the mean responses of the extent to which respondents of different ages relate alcohol and drugs to the five behavioral outcomes. For each of the behavioral outcome, the highest mean responses on 5-point scale were observed for the 41+ age category; 4.1 for traffic accidents, 3.8 for personal injuries and poor academic performance, 4 for sexual assault and 3.9 for suicide.

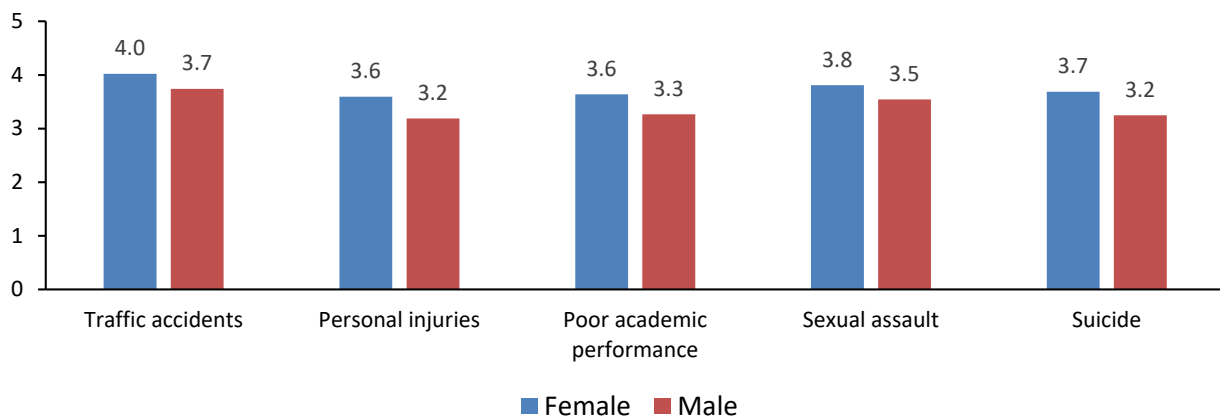


Figure 12. Behavioral Outcomes by Respondents' Gender (Mean Responses).

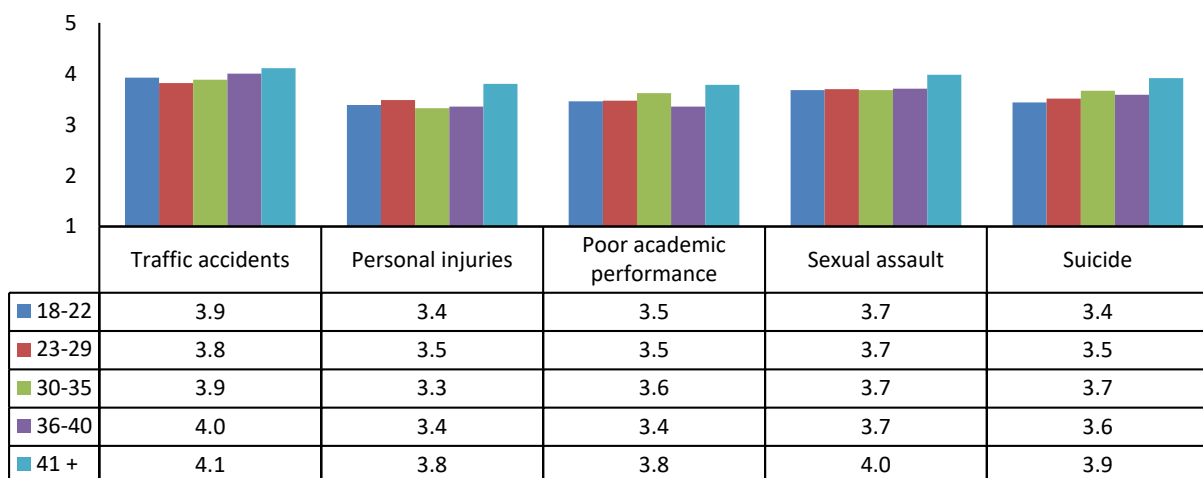


Figure 13. Behavioral Outcomes by Respondents' Age (Mean Responses)

II.5. PERCEPTIONS ABOUT THE EXTENT TO WHICH COLLIN'S ENVIRONMENT IS CONDUCTIVE TO DRINKING AND DOING DRUGS

Respondents were asked to indicate the extent to which they perceived drugs to be available in Collin, the extent to which Collin's environment was conducive to alcohol and drug use, and the extent to which sexual assault was prevalent within Collin's premises. The option regarding sexual assault was added in 2016 in order to gauge pervasiveness of sexual crime at Collin³. The responses were scored on a five-point scale where "1" equaled "to no extent" and "5" equaled "to a large extent." A "Don't know" option was also added in 2016 to allow students the freedom to express lack of knowledge on any of the statements.

Figure 14 shows that 45 percent of the respondents perceived that Collin's atmosphere was "to no extent" conducive to the use of alcohol, while 44 percent of respondents perceived that it was "to no extent" conducive to the use of drugs and to the prevalence of sexual assault. Adding the response choices "1" and "2" indicates that 57, 57, 53 and 38 percent of respondents perceive that Collin's atmosphere is less conducive to alcohol use, drug use, sexual assault and the availability of drugs. A large number of students selected the "Don't know" option in this question (44, 38, 33, and 30 percent for drug availability, prevalence of sexual assault, drug use and alcohol use respectively). Compared to males, female respondents' perception about the extent of availability and usage of drugs, alcohol and prevalence of sexual assault was slightly higher. Female students considered sexual assault to be slightly more prevalent than did their male counterparts (1.6 mean score for females versus 1.4 for males) (Appendix Table A2).

II.6. PERCEPTIONS WHETHER COLLIN'S STUDENTS DRINK, SMOKE, AND DO DRUGS MORE COMPARED TO STUDENTS AT OTHER COLLEGES

The respondents' opinion was sought about whether Collin students drank, smoked or used drugs more than students at other colleges. The response choices were "Yes," "No," "About the same" and "Don't know". Forty-one and 40 percent of the respondents were of the opinion that Collin's students did not do more drugs and drink more than peers in other colleges. Almost one-fourth of the respondents thought that Collin students do not smoke more marijuana, and use more tobacco compared to students at other colleges. As a matter of fact, 40, 37, 27, and 22 percent perceived that Collin students used tobacco products, smoked marijuana, drank alcohol and used drugs "About the same" as their peers at other colleges (Figure 15).

³ This was done to address the US Department of Education and Congress' concern about sexual assault on campuses.

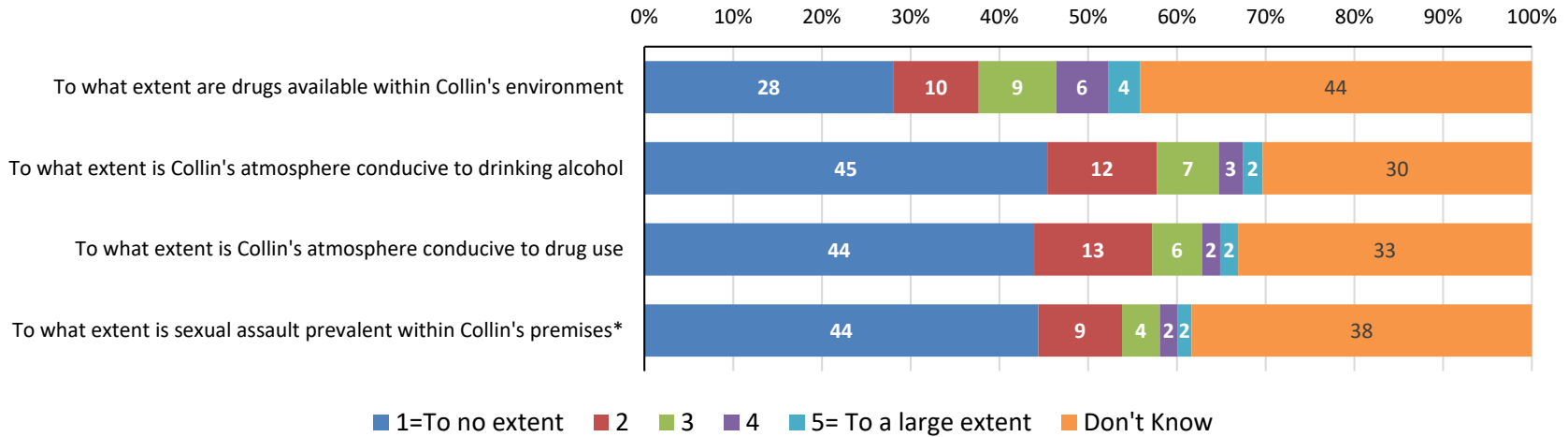


Figure 14. Respondents' Perceptions About the Extent to Which Collin's Environment is Conducive to Availability and Use of Drugs, Alcohol, and the Prevalence of Sexual Assault in its Premises

* New item added in 2016

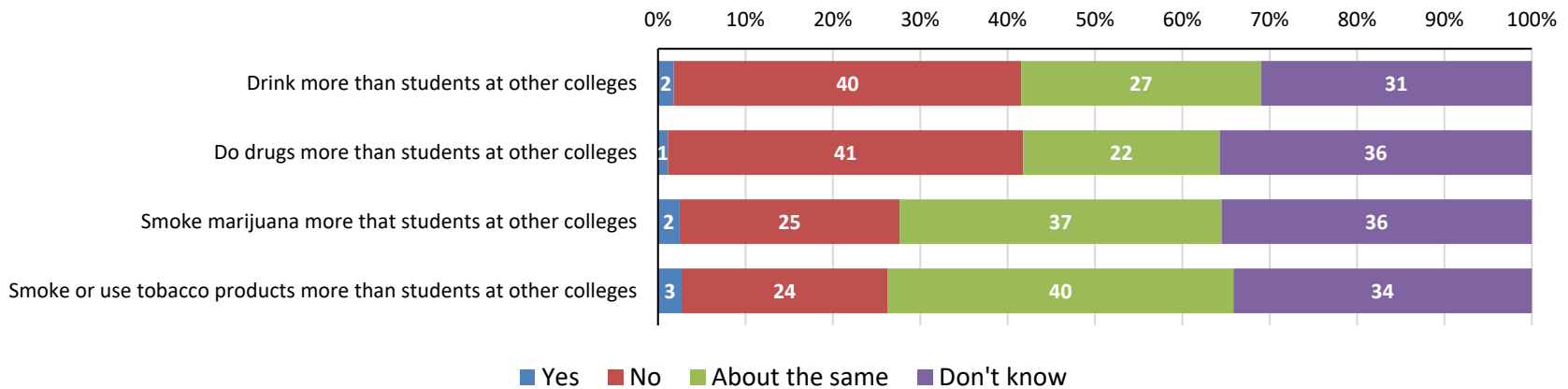


Figure 15. Respondents' Perceptions of Drugs, Alcohol and Tobacco Use by Collin Students Versus Peers at Other Colleges

II.7. ACTUAL USE OF ALCOHOL AND DRUGS BY RESPONDENTS

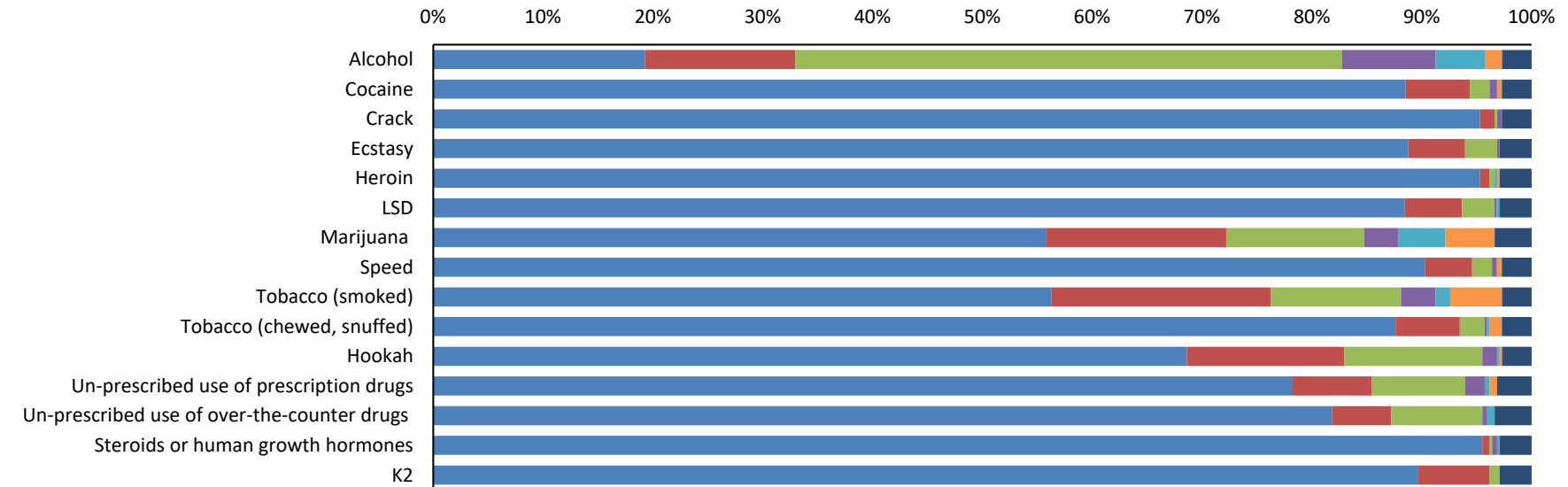
The Drug Awareness and Perception Survey posed two questions to respondents about their own use of alcohol, tobacco and drugs. The first question asked about ever use, and the second question about their use of the 15 listed substances within the last year (the year before the survey). Even though the survey was anonymous, still in view of the sensitive nature of these questions, the respondents were reassured that their identity was protected and that their answers could not be linked to their identity in any way. In addition, they had the option to check “do not want to answer” and proceed to the next question in the survey.

II.7.1. Respondents’ Ever-Use of Alcohol and Drugs

The first question asked “How often have you ever used any of the following substances?” This was followed by the list of 15 substances, each to be answered on a six-point scale with choices, “never,” “tried once,” “occasionally,” “often,” “very often,” and “daily.” They also had the option to select “do not want to answer.”

Figure 16 indicates that an overwhelming majority (96%) of respondents stated that they had “never” used steroids or human growth hormones. Ninety-five percent stated “never” for heroin and crack, 90 percent for speed and K2, 89 percent for cocaine and ecstasy, 88 percent for LSD and tobacco (chewed or snuffed), 82 percent for un-prescribed use of over-the-counter drugs, and 78 percent for un-prescribed use of prescription drugs. Fifty-six percent of the respondents stated that they had “never” used tobacco (smoked) and marijuana.

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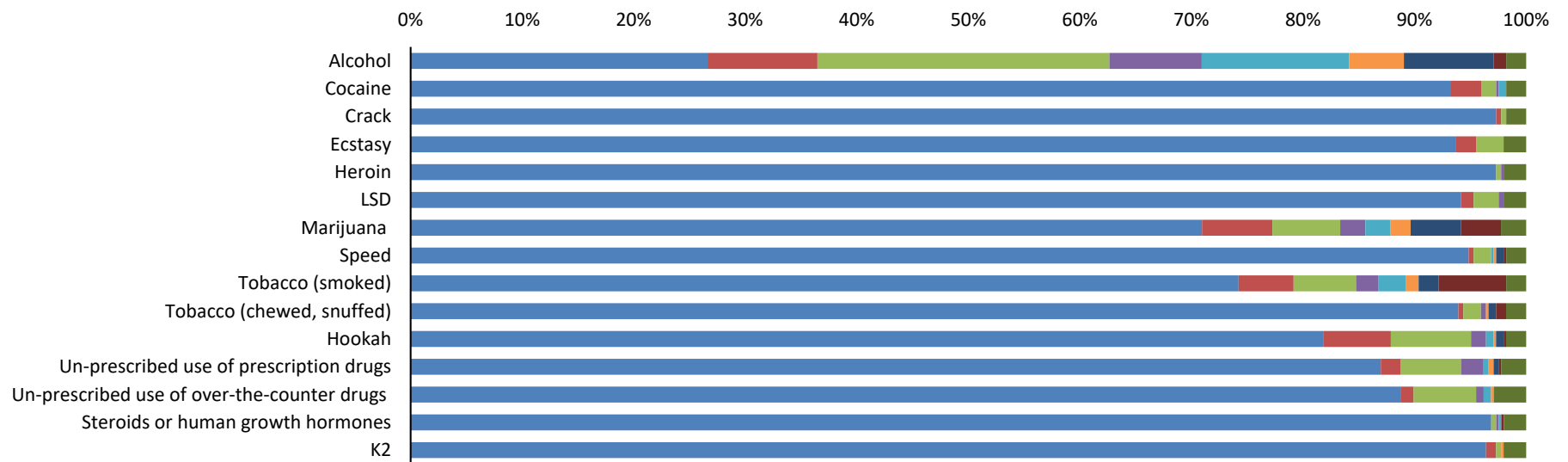
	Never	Tried once	Occasionally	Often	Very often	Daily	Do not want to answer
Alcohol	19	14	50	9	4	2	3
Cocaine	89	6	2	1	0	0	3
Crack	95	1	0	0	0	0	3
Ecstasy	89	5	3	0	0	0	3
Heroin	95	1	0	0	0	0	3
LSD	88	5	3	0	0	0	3
Marijuana	56	16	13	3	4	4	3
Speed	90	4	2	0	0	0	3
Tobacco (smoked)	56	20	12	3	1	5	3
Tobacco (chewed, snuffed)	88	6	2	0	0	1	3
Hookah	69	14	13	1	0	0	3
Un-prescribed use of prescription drugs	78	7	9	2	0	1	3
Un-prescribed use of over-the-counter drugs	82	5	8	0	1	0	3
Steroids or human growth hormones	96	1	0	0	0	0	3
K2	90	7	1	0	0	0	3

Figure 16. Respondents' Frequency of Ever-Use of the 15 Substances (in Percent)

II.7.2. Respondents' Use of Alcohol and Drugs within the Last Year

Information was sought on the most recent use of the 15 items by asking, "Within the last year how often did you use any of the following?" The responses were scored on an 8-point scale that had the following response choices "never," "tried once," "less than 6 times a year," "once a month," "2-3 times a month," "once a week," "2-5 times a week," and "daily." The respondents also had the option to opt out of answering the question by selecting "do not want to answer."

Like the previous question, a large majority of the respondents indicated "never" using most of the listed substances within the last year. Around 97 percent of the respondents said they had "never" used crack, heroin, and steroids or human growth hormones, 96 percent stated "never" for K2, 95 percent for speed, 94 percent ecstasy, LSD and tobacco (chewed, snuffed), 93 percent for cocaine, 89 percent for un-prescribed use of over-the-counter drugs, 87 percent for un-prescribed use of prescription drugs and 82 percent for hookah. Although 74 percent of the respondents divulged that they had "never" used tobacco, around 6 percent admitted smoking "daily." Overall, only two percent of the respondents said they did not want to answer for all the listed items except for un-prescribed use of over-the-counter drugs for which three percent refrained from responding (Figure 17).



	Never	Tried once	Less than 6 times a year	Once a month	2-3 times a month	Once a week	2-5 times a week	Daily	Do not want to answer
Alcohol	27	10	26	8	13	5	8	1	2
Cocaine	93	3	1	0	1	0	0	0	2
Crack	97	0	0	0	0	0	0	0	2
Ecstasy	94	2	2	0	0	0	0	0	2
Heroin	97	0	0	0	0	0	0	0	2
LSD	94	1	2	0	0	0	0	0	2
Marijuana	71	6	6	2	2	2	5	4	2
Speed	95	0	2	0	0	0	1	0	2
Tobacco (smoked)	74	5	6	2	2	1	2	6	2
Tobacco (chewed, snuffed)	94	0	2	0	0	0	1	1	2
Hookah	82	6	7	1	1	0	1	0	2
Un-prescribed use of prescription drugs	87	2	5	2	0	0	0	0	2
Un-prescribed use of over-the-counter drugs	89	1	6	1	1	0	0	0	3
Steroids or human growth hormones	97	0	0	0	0	0	0	0	2
K2	96	1	0	0	0	0	0	0	2

Figure 17. Respondents' Frequency of Use of the 15 Substances within Last Year (In Percent)

II.8. PARTY BEHAVIOR AND CONSEQUENCES EXPERIENCED BY THE RESPONDENTS WITHIN THE LAST YEAR

Respondents were asked (1) how often they used drugs and/or alcohol when they partied or socialized within the last year; and (2) what was the frequency of certain physical, social, and/or other behavioral consequences of drinking or using drugs.

II.8.1. Respondents' Party Behavior within Last Year

The respondents were asked, "In general, when you partied/socialized within the last year, how often did you do the following?" The question was followed by a list of 16 activities that ranged from "used tobacco (smoked, chewed, snuffed)" to "got into binge drinking" to "refused to drink," to "drank because was pressured by peers" to "rode home with designated driver."

Thirty-six percent of the respondents admitted consuming alcohol "occasionally" for fun. Another 20 percent admitted consuming alcohol "often," "very often" or "always" when they partied/socialized within the last year. Twenty-two percent consumed alcohol "occasionally" to alleviate stress, while another 11 percent used it "often," "very often" and "always."

A little over one-third of the respondents refused to drink "often," "very often," and "always." Twenty-five percent said they set a limit on the number of drinks they would have at a party "often," "very often" and "always." Nine percent participated in drinking games "often," "very often," and "always" while 20 percent did so "occasionally." Seventeen percent said they "always" rode home with a designated driver, whereas, seven percent "always" drove home themselves after partying.

Table 5. *In General, When you Partied/Socialized Within the Last Year, How Often did you do the Following?*

	In general when you partied/socialized within the last year ...						Total (%)	N
	Never	Occasionally	Often	Very often	Always	Do not want to answer		
Used tobacco (smoked, chewed, snuffed)	78.4	9.9	3.4	2.5	3.2	2.7	100	444
Consumed alcohol to alleviate stress	64.6	21.8	7.3	3.4	0.5	2.5	100	441
Consumed alcohol for fun	41.3	36.4	7.4	7.9	4.3	2.7	100	445
Combined non-alcoholic beverages with alcohol	56.1	24.1	8.6	5.7	2.5	3.0	100	440
Alternated coffee with alcohol	90.7	4.3	1.1	0.5	0.5	2.9	100	441
Participated in drinking games	68.9	19.4	3.8	3.8	1.4	2.7	100	444
Set limit on the number of drinks you would have at the party	61.1	10.3	7.4	6.5	11.0	3.6	100	445
Got drunk despite set limit	83.4	9.6	1.6	2.0	0.2	3.1	100	446
Asked friend not to let you exceed a certain limit of drinks	76.4	10.4	4.3	2.5	2.0	4.3	100	441
Rode home with designated driver	55.6	11.7	5.9	5.9	17.3	3.6	100	444
Drove home yourself	71.5	11.4	2.9	3.1	7.4	3.6	100	446
Mixed drugs with alcohol	84.7	9.9	1.3	0.4	0.7	2.9	100	445
Got into binge drinking*	86.9	5.6	2.5	1.4	0.7	2.9	100	444
Refused to drink	36.0	25.9	11.0	10.6	12.8	3.6	100	444
Held a drink in hand so others should not pressurize you	86.5	6.3	2.2	0.9	1.1	2.9	100	445
Drank because was pressurized by peers	91.2	4.5	1.1	0.2	0.0	2.9	100	443

* Binge drinking: men consuming 5 or more drinks; women consuming 4 or more drinks generally within a two hour period.

II.8.2. Consequences of Alcohol and Drug-Use Experienced by Respondents Within the Last Year

Respondents were asked, “Within the last year, how often have the following occurred due to your drinking or drug use?” The list of 17 items included behavioral, physical, emotional, and other effects of drinking and drug use. The items ranged from “had a hangover,” to “took advantage of someone sexually,” to “got into trouble with police,” to “got arrested for DUI/DWI.”

In general, an overwhelming majority of respondents checked the category “never” to all the listed outcomes that ranged from 99 percent for getting arrested for DUI to 69 percent for having a hangover. One-fourth of the students reported having a hangover “occasionally.” Twenty-two percent felt sick with nausea or vomiting “occasionally” and eight percent did something they regretted later. Seven percent “occasionally” passed out, missed class the next day, became involved in unprotected sex, or became really depressed. Six percent “occasionally” got into fight with significant other, while 3 percent admitted they “occasionally” had suicidal thoughts (Table 6). Only up to one percent of the respondent checked “do not want to answer.”

Table 6. *In the Last Year, How Often Have the Following Occurred Due to Your Drinking or Drug Use?*

	In the Last Year, How Often Have the Following Occurred Due to your Drinking or Drug Use? (in Percent)						Total (%)	N
	Never	Occasionally	Often	Very often	Always	Do not want to answer		
Had a hangover	68.8	24.7	3.8	1.3	0.4	0.9	100	445
Passed out (forgot where you were, what you did)	89.6	7.2	1.4	0.9	0.0	0.9	100	444
Felt sick (nausea, vomiting)	73.6	22.1	2.0	0.9	0.2	1.1	100	444
Missed class the next day	91.6	6.5	0.5	0.5	0.0	0.9	100	443
Got into fight with significant other	91.0	6.3	0.9	0.7	0.0	1.1	100	443
Became physically abusive	98.0	0.9	0.0	0.0	0.0	1.1	100	445
Became destructive (damaged property, own or others)	98.0	0.7	0.2	0.2	0.0	0.9	100	444
Harassed others	97.7	1.1	0.2	0.0	0.0	0.9	100	444
Got into trouble with police	98.0	1.1	0.0	0.0	0.0	0.9	100	444
Received speeding ticket	98.0	1.1	0.0	0.0	0.0	0.9	100	445
Got arrested for DUI/DWI(driving under the influence of alcohol/ while intoxicated)	98.9	0.2	0.0	0.0	0.0	0.9	100	445
Became Involved in unprotected sex	87.9	7.4	2.2	0.7	0.4	1.3	100	445
Was taken advantage of sexually	96.9	1.8	0.0	0.2	0.0	1.1	100	445
Took advantage of someone sexually	97.5	0.9	0.5	0.0	0.0	1.1	100	443
Became really depressed	89.6	7.2	0.9	0.9	0.2	1.1	100	444
Had suicidal thoughts	94.8	2.5	0.7	0.7	0.2	1.1	100	445
Did something you regretted later	88.3	8.1	1.4	0.9	0.2	1.1	100	444

II.9. OPINIONS ABOUT HOW DRINKING, DOING DRUGS, AND SMOKING IMPACTS ONE

Respondents' opinions were sought on how drinking, using drugs and smoking impacts one. They were asked to show their agreement with a list of 11 statements by checking them; they could select multiple statements.

Table 7 indicates that 50 percent of the respondents thought drinking helps overcome social inhibitions, 34% thought that it destroys one, 32% believed it helps one relieve stress/deal with stress, 30% thought it lets one have more fun, while 20% thought drinking helps alleviate boredom and makes one look disgusting.

The table further indicates that 56% of the respondents believe drugs destroy one, 38% think using drugs makes one look disgusting and 21% think using drugs helps one relieve stress/ deal with stress. In reference to smoking tobacco or using tobacco products, 52% of the respondents thought it destroys one, 49% believed smoking makes one look disgusting and 24% opined that smoking helps one relieve stress/help deal with stress.

In all three categories – drinking, drugs and smoking – relieving stress was one of the top three items the respondents selected. These finding suggest that students' involvement in various activities, and participation in clubs and programs should be promoted so as to help them overcome stress, and to expose them to healthier forms of stress relief. This may help dispel the notions that drinking, doing drugs, or smoking can help them deal with anxiety and stress. In addition, awareness should be promoted about stress reducing seminars and other resources offered by Collin to expose them to healthy outlets to relieve and deal with stress. Figure 18 indicates a very low use of Special Presentations that deal with stress etc.

Table 7. *In Your Opinion, How Does Drinking, Doing Drugs and Smoking Impacts One?*

	Count	%	Total
Drinking			
Helps loosen up socially/overcome social inhibitions	225	50.3	447
Let's you have more fun	136	30.4	447
Makes you look cool	16	3.6	447
Helps make friends	66	14.8	447
Makes you feel valued by friends	10	2.2	447
Helps develop relationships	57	12.8	447
Helps alleviate boredom/something to do	89	19.9	447
Relieves stress/helps deal with stress	141	31.5	447
Helps escape from problems	68	15.2	447
Destroys you	152	34.0	447
Makes you look disgusting	89	19.9	447
Drugs			
Helps loosen up socially/overcome social inhibitions	83	18.6	447
Let's you have more fun	66	14.8	447
Makes you look cool	10	2.2	447
Helps make friends	38	8.5	447
Makes you feel valued by friends	10	2.2	447
Helps develop relationships	30	6.7	447
Helps alleviate boredom/something to do	59	13.2	447
Relieves stress/helps deal with stress	94	21.0	447
Helps escape from problems	71	15.9	447
Destroys you	252	56.4	447
Makes you look disgusting	170	38.0	447
Smoking tobacco or using tobacco products			
Helps loosen up socially/overcome social inhibitions	46	10.3	447
Let's you have more fun	9	2.0	447
Makes you look cool	18	4.0	447
Helps make friends	21	4.7	447
Makes you feel valued by friends	6	1.3	447
Helps develop relationships	14	3.1	447
Helps alleviate boredom/something to do	43	9.6	447
Relieves stress/helps deal with stress	109	24.4	447
Helps escape from problems	23	5.1	447
Destroys you	231	51.7	447
Makes you look disgusting	219	49.0	447

Note. Students could check multiple items.

II.10. AWARENESS AND USE OF ACTIVITIES ON CAMPUS THAT ADDRESS DRUG USE AND ABUSE

Collin is committed to keeping its environment drug-free, and as part of its commitment to educate students, it has a number of programs in place. Awareness of these programs was assessed through the question, “Which activities on campus are you aware of that address drug use and abuse?” This was followed by a list of seven resources/activities: “Counseling and Resources,” “Educational Materials,” “Online Screening for Mental Health,” “Student Health 101,” “Special Presentations,” “Special Exhibitions,” and “Referral Information.” The survey invited responses only in the case of “yes” hence if an item was left blank, by default it meant that the respondent was not aware of that particular resource/activity.

II.10.1 Awareness of Activities on Campus that Address Drug Use and Abuse

Table 8 presents findings from the survey regarding awareness of activities that address drug use and abuse. Nearly 60 percent of students indicated that they were aware of “Counseling and Resources” trailed by 41 percent for “Educational Materials” and “Student Health 101.” Twenty-eight percent of respondents acknowledged that they were not aware of any activities. This underscores the necessity of directing more efforts towards publicizing the available resources and services and at the same time exploring new ways to improve awareness, and to reach out to students.

Table 8. *Which Activities on Campus Are You Aware of that Address Drug Use and Abuse?*

Activities	Count	% Aware
Counseling & Resources	265	59.3
Educational Materials (such as informational brochures & pamphlets)	181	40.5
Online Screening for mental health	98	21.9
Student Health 101	182	40.7
Special Presentations (such as how to cope with stress, relationships etc.)	126	28.2
Special Exhibits (such as resource tables, screenings for depression, alcohol etc.)	95	21.3
Referral Information (such as community resources)	100	22.4
I am not aware of any activities	126	28.2

Note a) The percentages do not add to 100 because respondents could check more than one item.

Note b) The percentages are computed out of 447 responses.

Respondents who were not aware of any activities were asked, “What can the college do to make students like you aware of the above activities?” Fifty valid responses were received. Eight themes that emerged from the qualitative analysis of the comments are presented in the order of tally in Table 9. Some comments were categorized under more than one theme, therefore the aggregate of frequencies corresponding each theme exceeds 50.

Table 9. *What Can the College do to Improve Awareness? (Major Themes)*

Main Themes	Count*
Use emails to inform students.	15
Advertise more using posters/flyers on bulletin boards and other strategic places.	11
I am not interested/don't care about this/ I don't know.	9
Include it in a course/class/meetings or provide literature to educate students.	8
Announcements from professors/counselors to educate students in and out of classes.	6
I am not the right candidate for this survey/I don't use these substances so don't need to know.	6
Provide information and spread the word.	5
Use social media, Website, Cougar Web.	4

*The aggregate of frequencies corresponding with each theme exceeds the number of comments received as some comments are placed under more than one theme.

II.10.2 Participation in Activities on Campus that Address Drug Use and Abuse

The previous section (II.10.1) sought information from respondents about their awareness of Collin resources/activities that addressed drug use and abuse, this section goes a step further to pursue only those respondents who were aware of the resources to find whether they had availed any of the listed activities/resources they said they were aware of. Hence a comparison of awareness and use of the resources was made to get a better sense of the use of Collin’s resources (Fig 18).

Figure 18 shows large gaps in respondents’ use of each resource compared to the awareness of each resource. Only 10 percent of 447 respondents indicated to have availed “Counseling and Resources” in contrast to nearly 60 percent who were aware of it. Nine percent of the respondents indicated “Reading Educational Materials” compared to 40 percent who were aware of the resource. The lower use of some resources is understandable as not everyone needs Counseling or “Online Screening for Mental Health.” However, some areas call for better usage like “Special Presentations dealing with stress; stress has been identified as a major reason for drug, alcohol and tobacco use.

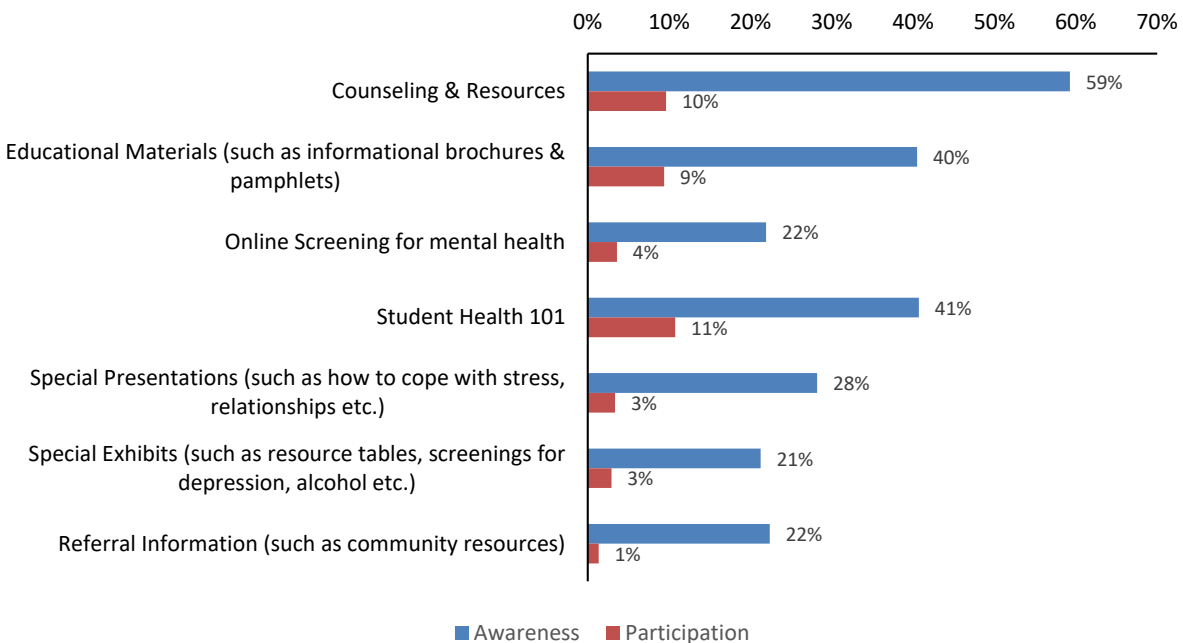


Figure 18. Awareness of Activities/Resources on Collin Campuses Versus their Use

Note a) Percentages for Awareness and Participation are computed out of 447 responses.

Note b) Percentages do not add to 100 because respondents could check more than one item.

Note c). The Figure does not include “I am not aware of any activities” because the survey question was asked only to those who were aware of any of the listed activities.

II.11. AWARENESS ABOUT THE DIGNITY INITIATIVE EVENTS

In 2016 a new question was added to assess student awareness about Collin's multi-year effort called the Dignity Initiative to educate students and the community about various aspects of violence against women and to empower individuals to take action. As part of this initiative, Collin has launched a series of events such as lectures, panel discussions and screening of films etc. Students were asked to indicate whether they were aware of the events happening at their respective campuses. Nearly half of the survey respondents (49 percent) indicated that they were aware of the events taking place at their campuses. These findings are indicative of success of this effort, as the initiative was launched only six months prior to the administration of the Drug Awareness and Perception Survey.

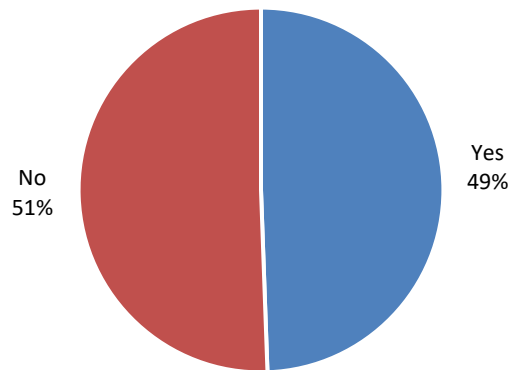


Figure 19. Awareness About the Dignity Initiative

SECTION III

III.1 OPEN-ENDED RESPONSES

The survey concluded with requesting respondents to provide additional comments and suggestions. Forty-two valid responses were received. These responses were distilled into eight main themes. Some respondents provided comments that related to more than one theme, therefore those comments were placed under more than one into theme. Hence the aggregate number of comments in the thematic analysis (Table 10) does not tally with the total number of comments received. Appendix Table B2 presents each theme with verbatim comments along with some recommendations and suggestions.

Table 10. *Frequency Distribution of Major Themes (Open-Ended Comments)*

Main Themes	Count*
Thank you or comments praising Collin.	9
Comments about survey instrument/methodology.	8
Experience of drugs/alcohol use at Collin.	6
Personal opinions about drugs usage/alcohol/smoking.	6
Suggestions on how Collin can assist students who need help.	4
Comments about "Dignity Initiative."	2
Comments about not being the right candidate for the survey.	2
No comments or N/A.	13

*The aggregate of frequencies corresponding with each theme exceeds the number of comments received as some comments are placed under more than one theme.

SUGGESTED RECOMMENDATIONS:

Based on quantitative and qualitative analyses, the following recommendations are suggested to the policy makers.

- Collin needs to further strengthen its efforts to educate students about the importance of reading the drug policies.
- Reinforce its efforts to publicize the resources/activities at Collin that address drug use and abuse and explore new ways not only to improve awareness but also to promote the use of resources (if needed).
- Based on students' comments, post flyers, posters about types of available programs at the most visited areas (hallways, entrance of the buildings, atrium, and bulletin boards and the College's website).
- Make students more aware of healthier and safer methods of dealing with stress and promote their involvement in various activities such as clubs and programs. This will help dispel their notions that alcohol, drugs, or smoking alleviate anxiety and stress.
- Communicate with students using multiple mediums including social media, text messaging and emails to promote awareness.
- Continue to organize events like "drug-free week" to promote awareness.
- Based on students' comments, Collin may consider involving faculty to talk in class about Collin's resources that deal with drug and alcohol use/abuse; give extra credit for attending drug awareness courses.
- Invite student organizations, faculty and medical practitioners to participate in seminars, and awareness activities.
- Introduce programs like the Dignity initiative to educate students about the risks of alcohol and drug abuse.
- Continue efforts to improve the response rates in future online surveys:
 - Promote awareness among students that any email from surveys@webhost.snapsurveys.com is not spam; rather it is one of Collin's official surveys administered through Snap Surveys by Collin's Institutional Research Office.
 - Continue to post flyers about the Drug Awareness Survey prior to its launch and advertise the Survey during the fall activities of the College.

APPENDICES

APPENDIX A

Appendix Table A1

Extent to Which the Following Outcomes Are Related to Alcohol and Drug Abuse Perceptions and Mean Responses by Respondents' Gender

To What Extent do you Think the Following Are Related to Drug, Alcohol and Tobacco Use?								
	1= To no extent	2	3	4	5= To a large extent	Total (%)	N	Mean response on 5-point scale
Both Genders								
Traffic accidents	3.6	6.7	24.2	25.7	39.8	100	447	3.9
Personal injuries	4.0	21.7	25.6	23.3	25.3	100	446	3.4
Poor academic performance	4.7	16.6	28.9	23.9	26.0	100	447	3.5
Sexual assault	5.2	13.5	22.0	23.8	35.5	100	445	3.7
Suicide	5.6	18.2	24.5	21.4	30.2	100	444	3.5
Females								
Traffic accidents	2.9	4.7	23.7	24.5	44.2	100	274	4.0
Personal injuries	2.6	17.9	26.0	24.5	28.9	100	273	3.6
Poor academic performance	1.5	15.7	29.6	24.1	29.2	100	274	3.6
Sexual assault	4.0	12.5	19.4	26.7	37.4	100	273	3.8
Suicide	4.0	14.0	23.9	25.4	32.7	100	272	3.7
Males								
Traffic accidents	4.7	10.0	24.7	27.6	32.9	100	170	3.7
Personal injuries	6.5	28.2	24.7	21.2	19.4	100	170	3.2
Poor academic performance	10.0	18.2	27.6	23.5	20.6	100	170	3.3
Sexual assault	7.1	15.4	26.0	18.9	32.5	100	169	3.5
Suicide	8.3	25.4	25.4	14.8	26.0	100	169	3.2

Appendix Table A2

*Perceptions of the Extent to which Collin's Atmosphere is Conducive to Drinking, Drug Use, Sexual Assault and Availability of Drugs
Percentage and Mean Responses by Respondents' Gender*

	To What Extent is Collin's Atmosphere Conducive to Drinking, Drug Use and Sexual Assault?						Total (%)	N	Mean response on 5-point scale*
	1=To no extent	2	3	4	5= To a large extent	Don't Know			
Both Gender									
To what extent are drugs available within Collin's environment	28.0	9.6	8.7	5.8	3.6	44.2	100	446	2.1
To what extent is Collin's atmosphere conducive to drinking alcohol	45.4	12.4	7.0	2.7	2.2	30.3	100	445	1.6
To what extent is Collin's atmosphere conducive to drug use	43.9	13.3	5.6	2.0	2.0	33.1	100	444	1.6
To what extent is sexual assault prevalent within Collin's premises	44.4	9.4	4.3	2.0	1.6	38.3	100	446	1.5
Females									
To what extent are drugs available within Collin's environment	24.5	7.7	10.2	5.8	3.3	48.5	100	274	2.1
To what extent is Collin's atmosphere conducive to drinking alcohol	41.8	12.5	6.2	3.3	2.2	34.1	100	273	1.7
To what extent is Collin's atmosphere conducive to drug use	40.3	15.0	4.0	2.6	1.1	37.0	100	273	1.6
To what extent is sexual assault prevalent within Collin's premises	38.7	9.5	4.7	2.2	1.8	43.1	100	274	1.6
Males									
To what extent are drugs available within Collin's environment	33.7	13.0	6.5	5.9	4.1	36.7	100	169	2.0
To what extent is Collin's atmosphere conducive to drinking alcohol	50.9	12.4	8.3	1.8	2.4	24.3	100	169	1.6
To what extent is Collin's atmosphere conducive to drug use	49.4	10.7	8.3	1.2	3.6	26.8	100	168	1.6
To what extent is sexual assault prevalent within Collin's premises	53.3	9.5	3.6	1.8	1.2	30.8	100	169	1.4

* Mean excludes the "Don't Know" category.

Appendix Table A3

*Whether Collin Students Drink, do Drugs, Smoke Marijuana, Smoke Tobacco and Use Tobacco/Tobacco Products More than Students at Other Colleges.
Perceptions by Respondents' Gender (in Percent)*

In your opinion..	Yes	No	About the same	Don't know	Total	N
Both Genders						
Drink more than students at other colleges	1.8	39.8	27.4	31.0	100	445
Do drugs more than students at other colleges	1.1	40.7	22.5	35.7	100	445
Smoke marijuana more that students at other colleges	2.5	25.2	36.9	35.5	100	445
Smoke or use tobacco products more than students at other colleges	2.7	23.6	39.6	34.2	100	445
Female						
Drink more than students at other colleges	0.7	38.2	26.8	34.2	100	272
Do drugs more than students at other colleges	0.0	40.1	21.7	38.2	100	272
Smoke marijuana more that students at other colleges	1.5	24.3	36.0	38.2	100	272
Smoke or use tobacco products more than students at other colleges	2.2	23.5	37.1	37.1	100	272
Males						
Drink more than students at other colleges	3.5	41.8	28.8	25.9	100	170
Do drugs more than students at other colleges	2.9	41.2	24.1	31.8	100	170
Smoke marijuana more that students at other colleges	4.1	26.5	38.2	31.2	100	170
Smoke or use tobacco products more than students at other colleges	3.5	22.9	44.1	29.4	100	170

APPENDIX B. MAJOR THEMES OF OPEN ENDED COMMENTS

Appendix Table B1. *What the College Can Do to Improve Awareness of Resources/Activities?*
Major Themes of the Respondents' Comments

Major Themes	Comments	Suggestions/Recommendations
Use emails to inform students. (N=15)	<ol style="list-style-type: none"> 1. Emails. (4) 2. Email the students on CougarMail. 3. Emails and posters. 4. Emails, attending drug abuse awareness courses for extra credit. 5. Emails, tables in the atrium with information, part of syllabus in class. 6. I would usually look at my email for things like this. 7. Inform students by sending them emails. 8. Maybe send emails to let students know what resources they have. 9. Post them online and send out emails and post them in the buildings. 10. Put flyers on bulletin boards, have professors remind students before and after spring break, and send an email once a month titled "Drug use and abuse Help." 11. Put slideshows or send email with information about different drugs and what they do to your body after you consume them. 12. Send out emails or have a call center in case something is out of hand. 	<p>Communicate with students using multiple mediums including social media, text messaging and emails to promote awareness.</p> <p>Consider providing extra credit for attending drug awareness courses.</p> <p>Provide information about what drugs do to the human body.</p>
Advertise more using posters/flyers on bulletin boards and other strategic places. (N=11)	<ol style="list-style-type: none"> 1. Advertise. 2. Emails and posters. 3. Emails, tables in the atrium with information, part of syllabus in class. 4. For me personally, there is not anything the college can do because I simply go to classes and leave. But for someone who does pay attention to the activities around campus, the college could make the activity more known. Use social media, posters on doors, etc. 5. Not really sure, maybe advertise it more. I mean it's a proven fact that the number one reason people don't get help is because they don't realize there are people out there who can help. 6. Post more pictures/posters about the types of programs/activities the campus offers around the entrances of the buildings. 7. Post them on the Collin website or on the bulletin boards where you guys post the other events going on at the campus. 8. Posters in more noticeable places perhaps? Probably most effective in hallways that lead into classrooms. 9. Put flyers on bulletin boards, have professors remind students before and after spring break, and send an email once a month titled "Drug use and abuse Help." 10. Put posters or signs are the most populated parts of the campus so a majority of people can see it. 11. Put slideshows or send email with information about different drugs and what they do to your body after you consume them. 	<p>Continue to post flyers about the survey prior to its launch and advertise the Drug Awareness Survey during fall activities of the College.</p> <p>Post pictures/posters about the types of programs/activities the campus offers at the most visited areas (around the entrances of the buildings, hallways, atrium, college website and bulletin boards.)</p>

Appendix Table B.1 *Continued 1*

Major Themes	Comments	Suggestions/Recommendations
I am not interested/don't care about this/ I don't know. (N=9)	<ol style="list-style-type: none"> 1. For me personally, there is not anything the college can do because I simply go to classes and leave. But for someone who does pay attention to the activities around campus, the college could make the activity more known. Use social media, posters on doors, etc. 2. I am not interested. 3. I do not know. (2) 4. I don't know. I have never thought about it enough to offer you anything of value. 5. No idea. 6. Not make me take a dumb survey. 7. Nothing. 8. Nothing because I don't do any of that. 	
Include it in a course/class/meetings or provide literature to educate students. (N=8)	<ol style="list-style-type: none"> 1. Emails, attending drug abuse awareness courses for extra credit. 2. Emails, tables in the atrium with information, part of syllabus in class. 3. For this to be valued among college kids, professors need to speak more of it. Coddling the situation doesn't achieve anything. Have a day set a side that is dedicated to letting students be aware of their options. 4. Just provide literature, but don't be preachy about it and only provide ways to be safe because odds are you are not going to convince anybody. 5. Mandatory surveys, as people will most likely not be interested in drug-awareness programs unless they are forced to know about them. 6. Maybe a meeting on Friday or Monday after or before the weekend get started. 7. Talk about it more in our classes. 8. Talk about these activities in class once a semester. 	<p>Involve faculty to talk about Collin's resources in class.</p> <p>Give extra credit for attending drug awareness courses.</p> <p>Provide ways to be safe.</p>
Announcements from professors/counselors to educate students in and out of classes. (N=6)	<ol style="list-style-type: none"> 1. Announce it. 2. Announcements in class rather than email. 3. Ask professors to talk about these activities in class. 4. For this to be valued among college kids, professors need to speak more of it. Coddling the situation doesn't achieve anything. Have a day set a side that is dedicated to letting students be aware of their options. 5. I think that Collin College definitely needs to be more vocal about these free resources. I think that every professor needs to become more educated about these services and voice them to their students. It would be a great idea for the counsellors in counseling and resources to make themselves known to the student body & have frequent health fairs open to campus for students. 6. Put flyers on bulletin boards, have professors remind students before and after spring break, and send an email once a month titled "Drug use and abuse. Help" 	<p>Continue to publicize available resources/activities at Collin that address drug use and abuse.</p> <p>Involve faculty to talk about Collin's resources in class.</p>

Appendix Table B.1 *Continued 2*

Major Themes	Comments	Suggestions/Recommendations
I am not the right candidate for this survey/I don't use these substances so don't need to know. (N=6)	<ol style="list-style-type: none"> 1. I am web based. 2. I don't need to be aware about the above activities because neither I nor anyone I hang out with do drugs, smoke, nor drink. 3. I take online classes. 4. Not much - I'm not part of that culture so there's literally no reason for me to seek out any of this information. 5. Nothing because I don't do any of that. 6. The reason that I am not aware of these services is because I never smoke, drink or do drugs so I never had the need for knowing about these services. 	
Provide information and spread the word. (N= 5)	<ol style="list-style-type: none"> 1. Hand out information about them with ever sack of legal marijuana sold at the campus store (get out of the early 1900's thinking and figure out that weed is a PLANT and is not harmful. What is harmful is the damage police and the judicial system do to people who use marijuana.) 2. I think that Collin College definitely needs to be more vocal about these free resources. I think that every professor needs to become more educated about these services and voice them to their students. It would be a great idea for the counsellors in counseling and resources to make themselves known to the student body & have frequent health fairs open to campus for students. 3. Make sure opportunities are communicated to students that take online classes. 4. Provide more information. 5. Use students to participate, and get the word out without being overbearing. 	<p>Continue to publicize the available resources/activities at Collin that address drug use and abuse.</p> <p>Continue to advertise the Drug Awareness Survey during the fall activities of the college.</p> <p>Ensure that information about the resources is communicated to online students.</p>
Use social media, Website, CougarWeb. (N=4)	<ol style="list-style-type: none"> 1. For me personally, there is not anything the college can do because I simply go to classes and leave. But for someone who does pay attention to the activities around campus, the college could make the activity more known. Use social media, posters on doors, etc. 2. Post more about them on Cougarweb. 3. Post them on the Collin website or on the bulletin boards where you guys post the other events going on at the campus. 4. Post them online and send out emails and post them in the buildings. 	<p>Communicate with students using multiple mediums including social media, text messaging and emails to promote awareness.</p> <p>Post information on CougarWeb.</p>

Appendix Table B2. *Any Other Comments or Suggestions?*
Major Themes of the Respondents' Comments

Major Themes	Comments	Suggestions/Recommendations
Thank you, or comments praising Collin. (N=9)	<ol style="list-style-type: none"> 1. Collin College takes pride in the welfare of their students and I am glad there are resources available for students that are having drug issues. Thanks for letting me be a part of this survey. 2. Good survey, thank you. 3. In my college experience, I feel that Collin College does a great job in providing a positive environment that promotes a serious and professional pursuit of higher education. 4. Thank you for creating an anonymous survey about an important topic. 5. Thank you for your concern. 6. Thank you. (2) 7. This is great to hear. I would love to help with this. Pm. 8. This survey asked really good questions. Thanks for the opportunity to be involved in the survey. 	
Comments about survey instrument/methodology. (N=8)	<ol style="list-style-type: none"> 1. Add sugar to the list of drugs. 2. Good survey. 3. I do not feel this survey accurately identified all possible substances that could be used by students. There was no mention of benzodiazepines, barbiturates, or psychoactive substances that are legal and non-synthetic. Also hypnotic sleep aids like zolpidem or temazepam. Also I do not feel this survey gave much options for students when it came to the "Drugs lead to..." I feel that there are many more possible reasons one may use drugs besides the ones listed. This survey came across fairly biased towards negative outcomes and results. 4. I think it would be vitally important to focus these drug-awareness surveys on known, harmful drugs rather than tobacco and marijuana which damage the lungs but not much else. In doing so, you may be able to deter people from doing drugs such as cocaine (a widely used drug despite its dangers) and the use of un-prescribed drugs such as Xanax. The use of Xanax has skyrocketed among college students, and focusing your efforts on the awareness and eradication of its use would be extremely beneficial to everyone on campus and beyond, as often people will take a large amount of this drug and be in an almost drunken stupor, which increases the chances of car wrecks and general reckless behavior. Alcohol is widely abused but creating a solution to this problem would prove difficult as it's widely available and highly valued by college students for its perceived "coolness". Showing that alcohol can damage the adolescent brain would be an effective way to deter its use, as many students fail to act unless there is a very real consequence that can affect them immediately, rather than relying on the future discontinuation of its use. In fact, showing that certain drugs can cause immediate brain damage could possibly scare students into stopping, however the scientific basis of these claims must be provable or else doing so would be malicious, even if it's for a good cause. 5. If this survey is being used to promote a prohibitionist agenda, which it seems to me that it is, then be cognizant of the fact that nobody intelligent is going to be convinced. 6. In the last few sections, marijuana should not be included in the overall "drug" category. It is recreationally legal in 6 states and medicinally legal in about 29 states. Had it been separated from the "drug" category, some of my answers would have been different. 	<p>Continue to update the list of drugs in the survey.</p> <p>Exclude marijuana from list of drugs as it is legal in many states.</p>

	<p>7. Make your surveys less one-sided. You assumed that kids socialized and attended college parties, to which I had to answer "Never" therefore giving an inaccurate response since I don't go to parties simply because I'm not interested. There was also a part where you asked if the students drank alcohol if they were abusive, became more abusive or even raped someone. Do you really believe someone would admit to doing that, or wanted to say "yes" in a survey? I get that the information being shared is confidential but students will still lie. Also, with the part asking about the percentage of Collin students doing drugs or alcohol- I only go to one campus. I cannot judge for all of the other locations if I just go to one for a couple of hours per day, which would also give inaccurate responses.</p> <p>8. One question was worded weird "Drank because was pressurized by peers."</p>	
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Appendix Table B.2 *Continued 1*

Major Themes	Comments	Suggestions/Recommendations
Experience of drugs/alcohol use at Collin. (N=6)	<ol style="list-style-type: none"> 1. Collin is a really good college from my perspective. I don't see any suspicious activity or anyone ever getting harassed. The college has a friendly environment and people seem pretty nice in general. If Collin students do use drugs or alcohol to an extent where their grades are affected, I expect that they just drop out because I don't see students here who appear so. 2. I don't drink because I'm not old enough and do not do any kind of drug because I care about my body. However, many students I've talked with either drink or use marijuana regularly, but not commonly on campus. 3. I feel as if I consume a whole lot of drugs and alcohol because Collin College is a very boring community, and there is nothing better to do. 4. I have no idea what students do in regards to "partying." I am much older than your average student. I can tell you, however, there is a man that drives around the parking lot near the library that more than likely sells drugs. What kind, I have no idea. I happened to have a flat tire and ended up sitting in my car for a long time. I observed some suspicious behavior from a non-student and students approaching the vehicle. 5. So far, every Collin College student I have met seems committed to academic integrity and had a goal they are pursuing. I have honestly not heard about any drug/alcohol issues on or off campus since going to school here. 6. The Preston Ridge Campus appears to be relatively drug free, with the occasional person who shows up high on weed. I don't even see many people smoking on campus. I think the lack of dormitories on campus makes it very difficult for anyone to abuse drugs and alcohol, while still being able to get to class. 	<p>Initiate healthier on-campus activities that allow students to engage with one another socially and provide them a platform to channel their energies in safer outlets.</p>
Personal opinions about drugs usage/alcohol/smoking. (N=6)	<ol style="list-style-type: none"> 1. Alcohol and drug abuse has always been a problem. I don't believe there is a way to crack down on it unless there is something illegal being done. It is a social norm in the age group that attends college, always has been and always will be. 2. Don't chalk drug or alcohol use up to peer pressure. I have experimented with both many times and I can say that all of those occasions have been of my own personal will. 3. I don't drink because I'm not old enough and do not do any kind of drug because I care about my body. However, many students I've talked with either drink or use marijuana regularly, but not commonly on campus. 4. I feel sorry for those who use drugs and alcohol in order to compensate for their short comings, insecurities, mental health and their self-esteem. 5. If people felt more valued, some would not feel the need to fill their voids with alcohol/drugs. It would be nice to see more messages of encouragement on school billboards, doors mirrors, etc. 6. Never done drugs or alcohol, but I don't judge anyone that has. I don't believe anyone should be judged for their past or current decisions because you never know what is going on in their life. Sometimes all you can do is just be there for a person, because, often times, if there is a drug or alcohol problem, they are struggling in some way. Obviously this is a generalization and may not apply to every case, but all we can do to help an addiction is to be judge free and be there to listen. 	<p>Awareness should be promoted about resources offered in order to expose students to healthy outlets to relieve and deal with stress.</p>

Appendix Table B.2 *Continued 2*

Major Themes	Comments	Suggestions/Recommendations
<p>Suggestions on how Collin can assist students who need help. (N=4)</p>	<p>1. Collin needs more availability to help for mentally ill students that cannot go through the disability services office. It is much harder to complete those forms that you all seem to believe, especially when you only have a psychiatrist that prescribes medications. They do not do counseling, and therefore cannot answer the questions on those forms. In addition, as an Autistic student on your campus, on behalf of all autistic students on your campus, we would like to peacefully request that you immediately terminate your support of the organization "Autism Speaks". They are notorious for their negative treatment of autistic individuals, much of the money that they gather is not spent on autistic people at all, they have no autistic members of staff, and much of their marketing is little more than propaganda that casts many of us in a very negative light. They lobby for an autism cure instead of the autism awareness they are supposed to be supporting, which many of us find quite concerning. It is deeply upsetting to many of us that you participated in their "Light It Up Blue" campaign, instead of the "Light It Up Red" campaign that is supported and run by autistic people. We would like to please request that you instead support organizations such as the Autistic Self Advocacy Network, the Autism National Committee, and the Autism Network International, and remove support and pamphlets for Autism Speaks, to support the health of your Autistic Students, and please give us more access to accommodations and counseling. Removal of the controversial and offensive puzzle piece for our disorder and replacing it with the rainbow infinity sign we use for autism awareness would also be greatly appreciated. It would also greatly help if you would go about better informing all professors about disorders like Autism, Depression, OCD, Anxiety, ADHD and Insomnia, and how they affect school performance, as they have, often unknown to the general public, effects on us, such as removal of our ability to work due to running out of energy (or "spoons") for the day, due to the amount of work it takes to live with our disorders, panic attacks during classes, insomnia and how it effects student work and attention, autism and how it makes group work, and interpersonal communication with professors very difficult, ADHD and how it makes taking tests with time limits very hard, as well as sitting still in class an impossibility, how all of them make reaching exact time limits on certain assignments extremely difficult, and how professors can work with students with disabilities to make their experience in the class as beneficial as the experience of those without them. Communication and panels run by people with these disabilities for the professors would go a very long way, and if you asked through email, I'm sure you would find many disabled Collin students that are more than happy to come and speak to the faculty about their disability and the things that could help them. Without these proper services, it is very hard for mentally and physically disabled students on campus to not fall into the trap of self-medicating, or alcohol, in order to function in a college setting. Professors giving out the contact information for disability services and counseling, as well as Collin sending out emails that tell in detail exactly what all offices for disabled students can and cannot do,</p>	<p>Consider involving faculty to talk in class about Collin's resources that deal with drug and alcohol use/abuse.</p> <p>Invite student organizations, faculty and medical practitioners to participate in seminars, and awareness activities.</p> <p>Students' involvement in various activities, clubs and programs should be promoted so as to help them overcome stress, and to expose them to healthier forms of expression. This may help dispel the notion that alcohol, drugs, or smoking alleviate anxiety and stress.</p> <p>Consider providing more availability of help to the mentally ill students through the disability services office.</p>

	<p>as well as making the testing center a more quiet and safe place, giving students ways to anonymously ask for help through a text based system, giving out the number to the suicide hotline, and giving students a simple form on the Collin website to anonymously suggest changes to benefit us would greatly help each and every student on campus. I will be at Collin for another 3 semesters, completing the classes necessary to get my associates degree, at a slightly slower pace than most due to my disabilities and what I can and cannot do as a result of them. I, along with the other students on campus, would really appreciate having these things implemented, for the betterment of our college experience. If you want more information on autism speaks, and why you should not be supporting them, please refer to one of the autism advocacy groups above. I thank you your understanding and cooperation in all of this, and hope to work in an environment that is friendly and safe for all students, both disabled and not.</p> <p>2. I think it would be vitally important to focus these drug-awareness surveys on known, harmful drugs rather than tobacco and marijuana which damage the lungs but not much else. In doing so, you may be able to deter people from doing drugs such as cocaine (a widely used drug despite its dangers) and the use of un-prescribed drugs such as Xanax. The use of Xanax has skyrocketed among college students, and focusing your efforts on the awareness and eradication of its use would be extremely beneficial to everyone on campus and beyond, as often people will take a large amount of this drug and be in an almost drunken stupor, which increases the chances of car wrecks and general reckless behavior. Alcohol is widely abused but creating a solution to this problem would prove difficult as it's widely available and highly valued by college students for its perceived "coolness". Showing that alcohol can damage the adolescent brain would be an effective way to deter its use, as many students fail to act unless there is a very real consequence that can affect them immediately, rather than relying on the future discontinuation of its use. In fact, showing that certain drugs can cause immediate brain damage could possibly scare students into stopping, however the scientific basis of these claims must be provable or else doing so would be malicious, even if it's for a good cause.</p> <p>3. If people felt more valued, some would not feel the need to fill their voids with alcohol/drugs. It would be nice to see more messages of encouragement on school billboards, doors, mirrors, etc.</p> <p>4. Make tuition cheaper thanks (:</p>	
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Appendix Table B.2 *Continued 3*

Major Themes	Comments	Suggestions/Recommendations
Comments about "Dignity Initiative." (N=2)	<ol style="list-style-type: none"> 1. I love the idea of The Dignity Initiative and would love to receive emails or invitations to the events. 2. Why does it have to be violence against women? Criminals who commit acts of violence usually view everyone as a target. 	Introduce programs like the Dignity initiative to educate students about the risks of alcohol and drug abuse.
Comments about not being the right candidate for the survey. (N=2)	<ol style="list-style-type: none"> 1. Great questions but I am the wrong demographic. A 50-year-old grandmother. 2. I take online classes only. 	
No comments or N/A. (N=13)	<ol style="list-style-type: none"> 1. Despite all attempts, Collin College is a joke and most of the staff sucks [..]*. You will always be known as a community college so why the name change? Maybe one day I will have the satisfaction of watching this pathetic school system crumble into nothing. 2. Marijuana is a joke. 3. N/A 4. None. (10) 	

* Redacted due to offensive nature of comment.

APPENDIX C

QUESTIONNAIRE

DRUG AWARENESS AND PERCEPTION SURVEY: 2016

Please indicate your:**Gender**

- Female
 Male

Age

- 18-22
 23-29
 30-35
 36-40
 41-54
 55+

Student Status in fall 2016

- Full-time
 Part-time

Marital Status

- Single
 Married
 Separated
 Divorced
 Widowed

Are you working?

- Yes, full-time
 Yes, part-time
 No

What are your living arrangements?

- Alone on campus
 Alone off campus
 With non-parent on campus
 With non-parent off campus
 With parent(s)

What is your overall GPA?

- >3.5
 3.0 - 3.49
 2.5 - 2.99
 2.0 - 2.49
 <2.0
 No GPA (first-time-in-college)

At which campus do you attend the most classes?

- Central Park Campus (CPC)
 Spring Creek Campus (SCC)
 Preston Ridge Campus (PRC)
 Collin Higher Education Center (CHEC)
 Other

Please specify your other campus.**Drug Awareness and Perceptions****Have you read Collin's alcohol and drug abuse policies that were sent to you via email in fall 2016?**

- Yes
 No

Do you intend to read Collin's alcohol and drug abuse policies that were sent to you via email?

- Yes
 No

To what extent do you think the following substances are dangerous:

	<i>1=Not dangerous</i>	2	3	4	<i>5=Extremely dangerous</i>	<i>Don't know</i>
Alcohol (beer, wine, & liqueur)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cocaine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Crack	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ecstasy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Heroin	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
LSD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marijuana (such as pot, weed, hashish)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Speed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tobacco (smoked)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tobacco (chewed, snuffed)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hookah (tobacco from water pipe)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Un-prescribed use of prescription drugs (such as, pain medicine, Ritalin, antidepressants etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Un-prescribed use of over-the-counter drugs to <u>get high</u> (such as, cough & cold medicines)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Steroids or human growth hormones (for body building)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
K2 (Herbs coated with synthetic chemicals that mimic marijuana high when smoked)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What percentage of Collin's students do you think consume the following substances?

	<i><5%</i>	<i>5-25%</i>	<i>26-50%</i>	<i>>50%</i>	<i>Don't know</i>
Alcohol (beer, wine & liqueur)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cocaine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Crack	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ecstasy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Heroin	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
LSD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marijuana (such as pot, weed, hashish)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Speed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tobacco (smoked)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tobacco (chewed, snuffed)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hookah (tobacco from water pipe)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Un-prescribed use of prescription drugs (such as, pain medicine, Ritalin, antidepressants etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Un-prescribed use of over-the-counter drugs to <u>get high</u> (such as, cough & cold medicines)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Steroids or human growth hormones (for body building)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
K2 (Herbs coated with synthetic chemicals that mimic marijuana high when smoked)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

To what extent do you think the following are related to alcohol and drug abuse?

	<i>1= To no extent</i>	2	3	4	<i>5= To a large extent</i>
Traffic accidents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal injuries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Poor academic performance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexual assault	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Suicide	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

In your opinion:

	<i>1=To no extent</i>	2	3	4	<i>5= To a large extent</i>	<i>Don't Know</i>
To what extent are drugs available within Collin's environment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To what extent is Collin's atmosphere conducive to drinking alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To what extent is Collin's atmosphere conducive to drug use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To what extent is sexual assault prevalent within Collin's premises	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

In your opinion Collin students:

	Yes	No	About the same	Don't know
Drink more than students at other colleges	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Do drugs more than students at other colleges	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Smoke marijuana more than students at other colleges	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Smoke or use tobacco products more than students at other colleges	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Now we would like to ask some questions about YOUR usage of the following listed substances. Once again, we assure you that there is no way to link your responses to your identity. If you do not want to answer a question, then check the "do not want to answer" box and move to the next question.

How often have you EVER used any of the following?

	Never	Tried once	Occasionally	Often	Very often	Daily	Do not want to answer
Alcohol (beer, wine & liqueur)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cocaine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Crack	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ecstasy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Heroin	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
LSD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marijuana (such as pot weed, hashish)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Speed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tobacco (smoked)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tobacco (chewed, snuffed)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hookah (tobacco from water pipe)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Un-prescribed use of prescription drugs (such as pain medicine, Ritalin, antidepressants, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Un-prescribed use of over-the-counter drugs (such as, cough and cold medicines)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Steroids or human growth hormones (for body building)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
K2 (Herbs coated with synthetic chemicals that mimic marijuana high when smoked)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Within the LAST YEAR how often did you use any of the following?

	Never	Tried once	Less than 6 times a year	Once a month	2-3 times a month	Once a week	2-5 times a week	Daily	Do not want to answer
Alcohol (beer, wine & liqueur)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cocaine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Crack	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ecstasy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Heroin	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
LSD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Marijuana (Pot, weed, hashish)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Speed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tobacco (smoked)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tobacco (chewed, snuffed)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hookah (tobacco from water pipe)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Un-prescribed use of prescription drugs (such as pain medicines, Ritalin, antidepressants, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Un-prescribed use of over-the-counter drugs (such as, cough and cold medicines)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Steroids or human growth hormones (for body building)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
K2 (Herbs coated with synthetic chemicals that mimic marijuana high when smoked)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

In general, when you partied/socialized within the **LAST YEAR** how often you did the following:

	Never	Occasionally	Often	Very Often	Always	Do not want to answer
Used tobacco (smoked, chewed, snuffed)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consumed alcohol (beer, wine or liqueur) to alleviate stress	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consumed alcohol (beer, wine or liqueur) for fun	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Combined non-alcoholic beverages with alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Alternated coffee with alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participated in drinking games	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Set limit on the number of drinks you would have at the party	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Got drunk despite set limit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Asked friend not to let you exceed a certain limit of drinks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rode home with designated driver	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drove home yourself	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mixed drugs with alcohol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Got into binge* drinking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Refused to drink	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Held a drink in hand so others should not pressurize you	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drank because was pressurized by peers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* definition of binge drinking: men consuming 5 or more drinks; women consuming 4 or more drinks generally within a two hour period.

Within the **LAST YEAR**, how often have the following occurred due to your drinking or drug use:

	Never	Occasionally	Often	Very Often	Always	Do not want to answer
Had a hangover	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Passed out (forgot where you were, what you did)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Felt sick (nausea, vomiting)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Missed class the next day	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Got into fight with significant other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Became physically abusive	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Became destructive (damaged property, own or others)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Harassed others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Got into trouble with police	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Received speeding ticket	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Got arrested for DUI/DWI (driving under the influence of alcohol/ while intoxicated)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Became Involved in unprotected sex	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Was taken advantage of sexually	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Took advantage of someone sexually	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Became really depressed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Had suicidal thoughts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Did something you regretted later	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

In your opinion **drinking:**
(Please check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Helps loosen up socially/overcome social inhibitions | <input type="checkbox"/> Helps alleviate boredom/something to do |
| <input type="checkbox"/> Lets you have more fun | <input type="checkbox"/> Relieves stress/helps deal with stress |
| <input type="checkbox"/> Makes you look cool | <input type="checkbox"/> Helps escape from problems |
| <input type="checkbox"/> Helps make friends | <input type="checkbox"/> Destroys you |
| <input type="checkbox"/> Makes you feel valued by friends | <input type="checkbox"/> Makes you look disgusting |
| <input type="checkbox"/> Helps develop relationships | |

In your opinion **drugs:**
(Please check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Helps loosen up socially/overcome social inhibitions | <input type="checkbox"/> Helps alleviate boredom/something to do |
| <input type="checkbox"/> Lets you have more fun | <input type="checkbox"/> Relieves stress/helps deal with stress |
| <input type="checkbox"/> Makes you look cool | <input type="checkbox"/> Helps escape from problems |
| <input type="checkbox"/> Helps make friends | <input type="checkbox"/> Destroys you |
| <input type="checkbox"/> Makes you feel valued by friends | <input type="checkbox"/> Makes you look disgusting |
| <input type="checkbox"/> Helps develop relationships | |

**In your opinion Smoking tobacco or using tobacco products:
(Please check all that apply):**

- | | |
|---|--|
| <input type="checkbox"/> Helps loosen up socially/overcome social inhibitions | <input type="checkbox"/> Helps alleviate boredom/something to do |
| <input type="checkbox"/> Lets you have more fun | <input type="checkbox"/> Relieves stress/helps deal with stress |
| <input type="checkbox"/> Makes you look cool | <input type="checkbox"/> Helps escape from problems |
| <input type="checkbox"/> Helps make friends | <input type="checkbox"/> Destroys you |
| <input type="checkbox"/> Makes you feel valued by friends | <input type="checkbox"/> Makes you look disgusting |
| <input type="checkbox"/> Helps develop relationships | |

**Which activities on campus are you aware of that address drug use and abuse?
(Please check all that apply)**

- Counseling & Resources
- Educational Materials (such as informational brochures & pamphlets)
- Online Screening for mental health
- Student Health 101*
- Special Presentations (such as how to cope with stress, relationships etc.)
- Special Exhibits (such as resource tables, screenings for depression, alcohol etc.)
- Referral Information (such as community resources)
- I am not aware of any activities

* Online Health magazine sent to students monthly via cougarmail.

What can the college do to make students like you aware about the above activities?

**In which of the following activities on campus have you participated?
(Please check all that apply)**

- Counseling & Resources
- Educational Materials (such as informational brochures & pamphlets)
- Online Screening for mental health
- Student Health 101*
- Special Presentations (such as how to cope with stress, relationships etc.)
- Special Exhibits (such as resource tables, screenings for depression, alcohol etc.)
- Referral Information (such as community resources)

* Online Health magazine sent to students monthly via cougarmail.

Collin College has launched a multi-year effort called, "The Dignity Initiative," to educate students and the community about various aspects of violence against women and to empower individuals to take action. As part of this initiative, Collin has launched a series of events such as lectures, panel discussions and screening of films etc.

Are you aware of such events happening at your campus?

- Yes
- No

Any other comments or suggestions?

***Thanks for completing the survey!
Please click on the red submit button to send the survey.***

If you would like to discuss any aspects of the survey or need assistance with more resources, information and services, please contact Linda Qualia at 972-881-5779 or email lqualia@collin.edu

If you have any problem sending your response, please contact smirza@collin.edu



**Counseling
Services**