

High-risk Drinking among College Students in Maryland: Identifying Targets for Intervention

*Results of the First Annual
Maryland College Alcohol Survey (MD-CAS)*

July 2014

A Report from



THE MARYLAND COLLABORATIVE
TO REDUCE COLLEGE DRINKING AND RELATED PROBLEMS

www.marylandcollaborative.org

About the Maryland Collaborative to Reduce College Drinking and Related Problems

The Maryland Collaborative to Reduce College Drinking and Related Problems began in 2012 with funding from the Maryland Department of Health and Mental Hygiene. The purpose of the Maryland Collaborative is to bring together Maryland colleges and universities toward a shared goal—to reduce excessive drinking among college students, by creating environments that support student and community health, safety, and success.

More information about the Maryland Collaborative can be found at www.marylandcollaborative.org.

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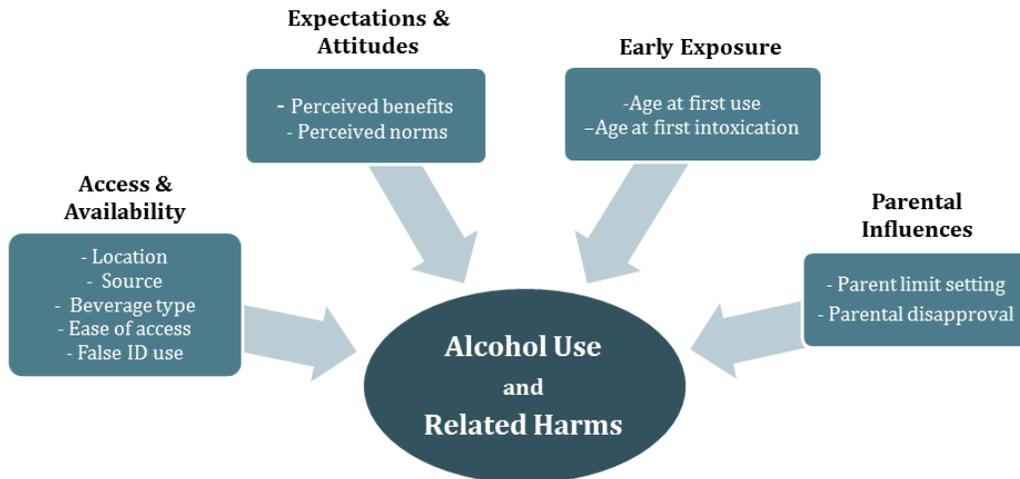
EXECUTIVE SUMMARY

In 2013, ten Maryland college and university presidents came together to form the Governance Council of the Maryland Collaborative to Reduce College Drinking and Related Problems, with a shared commitment to achieving a measurable reduction in excessive drinking on their campuses and throughout the state. Lack of a standard system for measuring the nature and extent of the problem at each school was a significant barrier to attaining this goal. Where measurement was happening, participating schools were using different metrics to assess drinking and related adverse consequences at their institutions, making it difficult to address problems on a statewide level. For this reason, and with support from the Maryland Department of Health and Mental Hygiene, the Maryland Collaborative set out to design and implement a measurement system that could provide information about the nature and extent of alcohol use and related problems at each school and the risk factors at each school. This information was regarded as indispensable for two key purposes: 1) to refine and target effective intervention strategies at salient risk factors; and 2) to measure the eventual impact of interventions on reducing excessive drinking.

This report describes the process of creating and administering the Maryland College Alcohol Survey (MD-CAS), and provides the aggregate results of the data collected from students in the first year of the survey (2014). Ten schools participated in the first annual MD-CAS; aggregate results from 4,209 students from nine of those schools are presented in this report.

The survey was designed to measure levels of alcohol use and excessive drinking, the alcohol-related consequences that drinkers experience, and the harms students experience as a result of other students' drinking. As shown in Figure 1, the survey included questions on suspected risk factors for excessive drinking relating to: 1) access and availability; 2) attitudes and expectations about use of alcohol and its perceived benefits; 3) early exposure to alcohol; and 4) parental influences. Doing this permits the participating schools to quantify the contribution of these risk factors and target interventions to address salient issues.

Figure 1. Suspected risk factors for college drinking measured in MD-CAS



Key Findings

College drinking is a national problem to which few college campuses are immune. Although some progress has been made in identifying potential targets for intervention, on average at the national level there is little evidence of measurable change. The Maryland Collaborative fully recognizes the widespread and costly nature of this problem and is committed to assisting schools in their efforts to implement interventions that target both high-risk environments and high-risk students. It is only through comprehensive approaches that involve multi-level, multi-component strategies that measurable change can be expected.

Prevalence

The prevalence of high-risk drinking among Maryland undergraduates is in line with expectations from other similar surveys on college campuses across the U.S. Nearly half (47%) of students surveyed in MD-CAS engaged in binge drinking at least once during the past month (defined for males as consuming five or more drinks in a row or within a couple of hours, and four or more for females). Among past-month drinkers in MD-CAS, 70% binge drank, with the average maximum number of drinks on any occasion being eight for men and five for women. In this report, we classified students as “high-risk” drinkers if they binge drank one to four times during the past month and “very high-risk” drinkers if they binge drank more than four times during the past month. These groups comprised 28% and 20% of the entire sample, respectively.

To place these findings in a national context, it is helpful to recall that in the most recent Monitoring the Future survey,¹ 35% of full-time U.S. college students engaged in binge drinking during the past two weeks. Direct comparisons between MD-CAS results and any prior national surveys are problematic due to a variety of methodological differences and therefore do not necessarily reflect a meaningful difference in binge drinking rates between college students in Maryland and the U.S. overall. In the case of Monitoring the Future, the discrepancy is likely attributable at least in part to differences in the time frame referenced (i.e., binge drinking during the past month versus past two weeks) and the types of schools included (i.e., four-year institutions versus a combination of two- and four-year institutions).

Direct Consequences

Alcohol consumption was related to experiencing a wide variety of negative consequences. Among students who drank during the past year, 34% blacked out, 14% were hurt or injured, 13% drove a car when they had been drinking, 8% damaged property, and 7% were taken advantage of sexually. Nearly one in four past-year drinkers (24%) missed class or performed poorly on a test as a result of drinking. Not surprisingly, the level of drinking was directly correlated with the number of negative consequences experienced. For instance, more than one in four high-risk drinkers and more than half of very high-risk drinkers experienced four or more negative consequences from drinking. Based on their scores on a screening test, approximately one in three past-month drinkers would benefit from at least brief advice from a clinical professional to reduce their alcohol consumption.

“Harms Due to Others’ Drinking” or “Secondhand” Consequences

In addition to resulting in direct consequences, excessive drinking can have secondhand effects on others. Many students experienced adverse consequences during the past year as a result of other students’ drinking, including having to “babysit” or take care of another student who was drunk (54%), experiencing interruptions in their sleep (54%) or studying (42%), being insulted or humiliated (22%), getting into serious arguments or quarrels (22%), or experiencing unwanted sexual advances (15% overall; 17% of females) or sexual assault (2%).

Risk Factors for High-risk Drinking

Access and Availability

Ease of access to alcohol contributes to high-risk drinking, and approximately 90% or more of the students said that alcohol is easy or very easy to obtain—regardless of their own level of drinking. With regard to social availability, high- and very high-risk drinkers were more likely to live in off-campus housing or apartments and less likely to live at home, relative to students with less risky drinking patterns. Regardless of where they lived, 68% of past-month drinkers reported drinking at an off-campus party, and 17% had taken advantage of free unlimited drinks at fraternity/sorority parties. A quarter of underage students who drank during the past month used a false ID to access alcohol during this period, and of these, 91% were high-risk or very high-risk drinkers. Half or more of students perceived it unlikely or very unlikely that local police, their school, or their parents would be notified if they were caught using a false ID to access alcohol.

Expectations and Attitudes

Overestimating the amount that others consume is a known risk factor for excessive drinking, because it is a reflection of the idea that excessive drinking is “normal.” Similarly, believing that alcohol consumption has benefits (e.g., reduces stress or facilitates social interactions) is also associated with greater levels of drinking, despite the fact that many of these perceived benefits are exaggerated. The survey data showed that Maryland students both overestimated the alcohol consumption of their peers and believed that alcohol had several personal and social benefits such as “helping people make friends.” These beliefs were most inflated among high-risk and very high-risk drinkers. Moreover, nearly half (49%) of the very high-risk group reported their friends consumed a large quantity of drinks (seven or more) on a typical drinking day. This group was also significantly more likely than the other risk groups to report that their friends expect them to drink seven or more drinks on a drinking day.

Early Exposure

Research shows that the earlier one begins to drink, the more likely it is that they will experience problems due to drinking later in life. The results revealed that many Maryland undergraduates enter college with pre-established drinking patterns. Students who began drinking early in their lives and who became intoxicated prior to coming to college were more likely to drink excessively in college. For example, a majority of students in the very high-risk group (65%) and almost half of the high-risk group (47%) were 16 years old or younger when they had their first drink. Nearly three-quarters of the very high-risk drinkers had gotten drunk prior to age 18, as compared with 25% of the moderate-risk drinkers.

Parental Influences

Consistent with the findings of research studies, and contrary to common assumptions about “forbidden fruit,” students whose parents did not allow them to drink alcoholic beverages during high school were far *less* likely than other students to drink excessively in college. For example, over three-quarters of low-risk drinkers (83%) said their parents did not permit them to consume alcoholic drinks during high school, compared with 38% of very high-risk drinkers. Students in the lowest-risk drinking category had parents who were more disapproving of drinking in college, compared with parents of very high-risk students.

Recommendations

Interventions

The high prevalence of particular risk factors observed from the MD-CAS survey findings can guide choices about future interventions. Students with high-risk drinking histories can and should be identified early to mitigate the likelihood of numerous alcohol-related consequences they will experience in college. Access to alcohol can be reduced through effective enforcement of existing laws, and implementation of strategies such as social host ordinances can reduce high-risk drinking in off-campus housing. The Maryland Collaborative is actively working to implement these and other evidence-based strategies on college campuses and in communities across the state. Additionally, parents need to know the importance of not permitting underage drinking in high school and of continued dialogue with their children as they make their way through college. To this end, the Maryland Collaborative is developing a parent-focused website to facilitate these conversations.

Next Steps

The MD-CAS data provide an unprecedented, comprehensive look at the proportion of Maryland college students who are engaging in excessive drinking and highlight risk factors for excessive drinking, some of which might be common across campuses and others that might be unique to each campus. This information can refine existing approaches and guide the development of tailored interventions best suited to address salient issues. Annual administration of the survey will document how excessive drinking changes over time as a way of measuring the impact of those interventions. Future iterations of the survey might explore additional risk factors such as stress, depression, student need for and use of services, place of last drink, and price paid for drinks.

The MD-CAS data provides schools in the Maryland Collaborative with an opportunity to take a data-driven approach to addressing excessive drinking on a statewide level and in their choices of interventions for their respective campuses. This report, in combination with the Maryland Collaborative’s *Guide to Best Practices*,² represents a critical step towards making measurable progress in reducing excessive drinking on college and university campuses in Maryland.