The Ohio Substance Abuse Monitoring Network

June 2000 – January 2001

A Rapid Response Investigation

RAPID RESPONSE: DRUG USE ON COLLEGE CAMPUSES

A Rapid Response Report Prepared for the Ohio Department of Alcohol and Drug Addiction Services

In Collaboration with Wright State University & The University of Akron
DRUG USE ON COLLEGE CAMPUSSES IN OHIO

AKRON (SUMMIT / STARK)

AN OSAM RAPID RESPONSE REPORT
PREPARED FOR
THE OHIO DEPARTMENT OF ALCOHOL AND DRUG ADDICTION SERVICES

June 2000 – January 2001

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ABSTRACT

Qualitative data were obtained through four focus groups and two individual interviews. Two focus groups consisted of two college students from an urban college in Summit/Stark County. Another focus group consisted of a crime prevention police officer and college staff counselor from an urban college in Summit/Stark County. The last focus group consisted of seven college students from a rural college in Summit/Stark County. Two individual interviews were conducted with college students, one from an urban and the other from a rural college in Summit/Stark County.

In both the urban and rural colleges, students perceive marijuana to be almost as available and acceptable as cigarettes. Alcohol use has become customary for most college students who socialize outside of classes. Some students feel there is a stigma attached to those who do not use alcohol. The urban college students believe that the use of ecstasy by college students is lower than that of marijuana. However, some students believe ecstasy use has increased during the past six months to one year. Students expressed the belief that while in the past ecstasy use was limited to individuals who frequented the rave and bar scenes, use has spread to a more diverse population of students. For this reason they could not characterize the typical ecstasy user on campus.

Students also expressed concern over the wide use of prescription medications. Students perceive Ritalin and Vicodin to be widely used without prescriptions. Also, most students were unaware of any prevention services available on campus. However, most of the students were aware of counseling offered on campus.

Table 1: Qualitative Data Sources

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Table 2: Detailed Focus Group/Interview Information

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INTRODUCTION

1. Area Description

Akron, Ohio is a city of 223,019 people (1990 census) located in Summit County in northeast Ohio. Approximately 74% of Akron’s population is white, 24% is black and other ethnic/racial groups constitute the remaining two percent. Approximately 514,990 people inhabit Summit County. Of these, 87% are white,
12% are black and 1% are some other ethnicity. The median household income is estimated to be $28,996. Approximately 12% of all people of all ages in Summit County are living in poverty, and approximately 18% of all children under age 18 live in poverty. Approximately 43% of the people in Summit County reside in the city of Akron. Summit County contains several other incorporated cities. The largest of these cities is Cuyahoga Falls (containing approximately 10% of the population of Summit County), followed by Stow (5%), Barberton (5%) and Tallmadge (3%). The rest of Summit County’s inhabitants live in smaller towns and townships.

Canton, Ohio is a city of 84,161 people (1990 census) located in Stark County. Approximately 81% of the inhabitants of Canton are white, 18% are black and 1% are of some other ethnic groups. Approximately 367,585 people inhabit Stark County. Of this group, approximately 92% are white, 7% are black and 1% are of other ethnicity. The median household income is estimated to be $27,852. Approximately 11% of all people of all ages in Stark County are living in poverty, and approximately 16% of all children under age 18 live in poverty. Approximately 23% of the people in Stark County reside in the city of Canton. Stark County contains two other incorporated cities, Massillon (containing approximately 8% of the population of Stark County) and Alliance, which contains approximately 6% of the population. The rest of the inhabitants of Stark County live in surrounding villages and townships.

2. Data Sources and Time Periods
   - Qualitative data were collected through four focus groups and two individual interviews conducted between December 2000 and January 2001.

DRUG TRENDS

SUMMIT & STARK COUNTIES

Information was obtained through three focus groups and one individual interview at an urban college campus in Summit/Stark County. A fourth focus group and second individual interview took place at two rural colleges in Summit/Stark County. The focus groups and individual interviews took place between December 2000 and January 2001.

The information reported here on urban college drug use was obtained through a focus group with a crime prevention police officer and college staff counselor.
Each of the two remaining focus groups were conducted with two college students. The individual interview was conducted with a college student on December 6, 2000.

Information on drug use on rural colleges was obtained from a focus group with seven college students. An additional interview was conducted with a college student on December 28, 2000.

Because there appeared to be some differences in the trends for urban and rural campuses, we report them separately but in sequence for each area.

**Ecstasy (MDMA)**

**Urban:**

Most students perceive that they could obtain ecstasy if they wanted to. However, some believe that ecstasy is hard to obtain, while others feel it is very available. Some students perceive that ecstasy has increased in availability during the past six months to one year, while others perceive no change in availability during this time. The majority of the students said they saw an increase in ecstasy use during the past six months to one year. The majority of interviewed students also think that the use of ecstasy is accepted among college students on campus. The students characterized individuals who use ecstasy as “alternative,” hippie, young males, eccentric, and students who go to raves and/or techno bars after hours. A few of the students believed this user group to be expanding to include other populations on campus. Students estimated the cost of ecstasy to be 20 or 25 dollars a tablet. Most expressed the opinion that ecstasy is too accessible. They also perceive ecstasy to be dangerous because people do not know what is in it.

The prevention officer said that he has not had many arrests on campus where ecstasy was involved and he feels that the use of ecstasy is restricted mostly to the bar scene in the area surrounding campus. He believes ecstasy is much more available off than on campus. However, the counselor expressed the opinion that it is too hard to differentiate between off and on campus for the availability of ecstasy since the bars are on the edge of the campus and within walking distance for students. They both perceive no change in the availability of ecstasy for the past six months to one year. Both also believed that ecstasy a very acceptable drug among students.

**Rural:**

There was a consensus among the rural students that ecstasy is not very available on campus. However, a few of them have heard of other students using ecstasy. The students saw no change in the availability of ecstasy during the past six months to one year. They also believe its use is not widely accepted
by college students on their campus. However, a few of the participants said that there are students who neither approve nor disapprove of its use by other students. One student believes a lot of people think the use of ecstasy is okay as long as the user does not harm others. The students agreed that ecstasy use has been stable during the past six months to one year. One student estimated the cost of ecstasy as twenty dollars a tablet. Another student believes the cost to be about eight to ten dollars a “bit.” This student also characterized ecstasy users as individuals who go to raves, are fraternity boys, have piercings and/or tattoos, and are under the age of twenty-five. The other students were not able to generalize about the characteristics of those using ecstasy. The consensus among the group was that there are no problems associated with the use of ecstasy on campus.

GHB (Gamma-hydroxybutyrate) “date rape drug”

Urban:

The students perceive GHB to be available on campus. However, some students said that GHB was easy to obtain, while others believed it was difficult to find. The majority of students said there had been no change in the availability of GHB during the past six months to one year. However, a few students perceived an increase in availability of GHB during this time: “I know people who make it by her house.” “I know someone who was given it at some place we know, so it must be easy to get.” Generally, the interviewed students perceived an increase in GHB use during the past six months to one year. They also felt that GHB was more problematic at the bars in the area around campus.

The students agreed that college students do not accept the use of GHB. “People talk about doing it, but actual use for rape isn’t acceptable.” The students perceive the characteristics of those using GHB as guys who are not popular or good looking who need it to get girls. One student estimated that a pop cap full of GHB costs about five dollars.

Students cited several problems related to GHB. One student believes that an overdose is likely with GHB and can be very dangerous. The same student said that GHB is probably the most unacceptable drug to students. Another student said students cannot trust anyone around their drinks because of recent incidences of women being “slipped” GHB at local bars and subsequently being raped.

The prevention officer said he is not sure how available GHB is on campus. However, he believes it is being manufactured around town and on campus. He feels there has been a slight increase in the availability of GHB during the past six months to one year. He believes that GHB is starting to become popular again. The counselor perceives no change in availability of GHB during the past six months to one year. She does, however, believe that there has been an
increase in media coverage and concern for females during the past three years. They both perceive ecstasy use to be more acceptable among males.

Rural:

The students believe that GHB is not readily available on campus. The majority of the students perceive no change in the availability of GHB during the past six months to one year. However, a few students felt their had been a decrease in availability of GHB during this time. The students feel that GHB use had remained stable during the past six months to one year. They also believe that GHB use is not acceptable among the campus community. One student voiced the opinion that only those who use GHB find it acceptable. No one was able to estimate the cost of GHB. One student believes that those who use GHB are sexually aggressive. Another student perceives those who use GHB to be jocks and fraternities.

Marijuana

Urban:

Students all agreed that marijuana is available everywhere on campus. They perceive no change in the availability or use of marijuana during the past six months to one year. One student did, however, express the belief that marijuana use is highest for students entering college and lowest for those graduating from college.

The consensus among the interviewed students was that marijuana use is very acceptable. They perceive marijuana use to be just as acceptable as cigarette use. They also believe that those who use marijuana to be an everyday person. They perceive marijuana to cost about 25 to 30 dollars for an eighth and 120 dollars for an ounce. The high rates and volume of marijuana use by students was cited as a problem by focus group members.

The prevention officer believes that marijuana is very accessible. “It seems like we are arresting more people with it.” The counselor also expressed this belief. While the counselor saw no change in the availability of marijuana during the past six months to one year, the officer feels there has been a slight increase in availability during the past one to two years. Both the counselor and officer claimed that nearly all college students see the use of marijuana as very acceptable.
Rural:

Students agreed that marijuana is available to anyone who wants it: “Fairly common use among college students.” Most of the students believe marijuana has become more available during the past six months to one year. The students perceive marijuana to be highly accepted among the campus community. They believe that most students perceive no harm attributed to marijuana use. The majority of the students said they felt there had been an increase in the use of marijuana among students. A few students estimated that 1/8th of an ounce of marijuana could be purchased for about 20 to 25 dollars. One student estimated 1/4th of an ounce of marijuana costs about 50 to 65 dollars. Another student said an ounce costs about 110 dollars. The students believe anyone (and nearly everyone) could be or actually were using marijuana. One student expressed concern over the widespread use of marijuana.

Alcohol

Urban:

All students agreed that alcohol is available, acceptable, and used by nearly everyone on campus regardless of whether they are over or under 21 years old. Two students felt there had been an increase in availability of alcohol during the past six months to one year. “In every apartment a new cohort is drunk every single night, so it looks worse than when I just started.” “It’s getting worse, especially for incoming freshman.” However, two other students believed that alcohol was less available during the summer. They felt that the police had cracked down on parties and open container violations more during the past summer. Two of the students said the use of alcohol had remained stable during the past six months to one year. However, two other students felt there had been an increase over the same time period.

Interviewed students estimated that a case of beer sells for 14 or 15 dollars. They observed no difference in cost for alcohol for those who are underage. However, one student expressed the opinion that students who are under twenty-one buy only the amount of alcohol they can drink in one night so they will not have to store it. Another student said that students buy liquor and shots so they will not have to dispose of, or store anything left over. The participants described those using alcohol as: athletes, fraternity and sorority members, preppies, and those who go to bars. The students cited three major problems with alcohol use: 1) drinking and driving, 2) drinking just to fit in, even when one does not really want to drink, and 3) the expectation that on a student’s twenty-first birthday, they will drink until they pass out.

The counselor is not sure about the availability of alcohol on campus. However, the prevention officer believes students of all ages purchase alcohol in stores around the campus area. He also believes that alcohol is available in the
housing areas on campus. The counselor does think that alcohol is brought onto
the campus, but she also believes that alcohol is not being made available by the
college. Neither the officer nor the counselor observed any change in the
availability or use of alcohol over the past year. Both believe that alcohol use is
even more acceptable than marijuana use among college students. They believe
that those who do not drink are stigmatized and have more difficulty socializing
with other students because alcohol is usually present at social events.

Rural:

Rural students all see alcohol as being readily available to students regardless of
age. They saw no change in the availability of alcohol during the past six months
to one year. The majority of the students believe alcohol use to be acceptable
among the campus community. While most of the students perceive an increase
in alcohol use during the past six months to one year, a few others perceive
alcohol use to be stable during this time. The students estimate the cost of
alcohol to vary depending upon the convenience store or bar that sells it. One
student estimated a can of beer to cost a dollar, while another student perceived
three cans of beer to cost five dollars. Another student perceives keg parties to
cost about two dollars.

The students characterized those who use alcohol as being anyone teenage to
older. One student felt that those who use alcohol more often are younger
students with no family responsibilities. The problems students cited with regard
to alcohol use on campus are fights breaking out, destruction of property, over
drinking, attitude changes and the inability of some people to handle themselves
when intoxicated.

**Hallucinogens (LSD, Mushrooms and PCP)**

Urban:

The majority of the interviewed students perceive hallucinogens to be fairly easy
to obtain. “If I left here I could have it in four hours, but it would be more work
than pot.” The students perceive no change in the availability of hallucinogens
during the past six months to one year. “A lot of people I know do them, not sure
how they get it, must be easy to get.” They agreed there has been no change in
the availability of hallucinogens during the past six months to one year. The
majority of the students felt there had been a decrease in the use of
hallucinogens during the past six months to one year.

Generally, the students felt that the use of hallucinogens is acceptable to many
people. However, they also perceive that there are people who do not accept the
use of hallucinogens. “I could be standing there and someone asks, “have any
mushrooms?” and I wouldn’t bat an eye. It’s not that popular but very accepted.”
A few of the students perceive mushrooms to be used more than any other hallucinogen.

One student estimated that acid costs about two to five dollars for a piece. However, the same student believes that ecstasy has taken the place of acid for users on campus. Students characterized rave people, hippies, alternatives and people who listen to techno music as most likely to use hallucinogens. A few of the students expressed concern that individuals who use hallucinogens may be dangerous to other students.

The officer and counselor agreed that availability and use of hallucinogens on campus is low and said this had been the case for the past year. The counselor also believes that hallucinogens are not popular among college students and that only a small group of individuals use them. She sees hallucinogens as the drug of the 1970’s.

Rural:

Most of the students said they do not know other students who use hallucinogens on campus. Those who have heard of other students using hallucinogens believe the availability is low and this has remained stable over the past six months to one year. The students believe that hallucinogen use is not accepted on campus. No one was able to discern a price for hallucinogens. One student described users of hallucinogens as: burnouts, loners and those not concerned with status. The other students characterized users as people who liked to experiment with drugs - not addicts.

**Powder Cocaine**

Urban:

Interviewed students believe that powder cocaine is not available on campus. The majority of the students were not sure if a change took place in the availability of powder cocaine during the past six months to one year. However, a few of the students felt there had been a decrease in the availability of powder cocaine during this time. “Not that I know, maybe I heard about it more last spring than now.”

None of the students were able to estimate the cost of powder cocaine. The majority of student-participants felt that its use is unacceptable among students. However, two of the students said that they have never heard other students putting down those who do use powder cocaine. The only problem students perceive is the highly addictive nature of powder cocaine. They believe that those using powder cocaine are also those who are “big boozers,” who have no direction, who have no future and who do not attend school. Students agreed
that cocaine is expensive and generally students cannot afford to use expensive drugs.

The prevention officer and the counselor agreed that powder cocaine is not highly available or used by the campus community. They both believe that availability and use have remained stable over the past six months to one year. They also agreed that powder cocaine is not accepted on campus because it is seen as too hard-core and expensive to be a recreational drug for students.

Rural:

Most rural students feel that powder cocaine is scarce on campus, but some students said that it could be acquired on campus if one knows where to look. The consensus among the students was that there had been no changes in any aspect of powdered cocaine and it remains generally unacceptable for use by members of the campus community. One student estimated that 1/8th of an ounce of powder cocaine costs about twenty-five dollars. One of the students said that those using powder cocaine are the heavy partying type. Other students perceive those who use powder cocaine to have red noses and big nostrils (from snorting) and to be “gangsters.”

**Methamphetamine**

Urban:

Three of the students said there is very little methamphetamine on campus, while two other students felt the availability was slightly higher. While most students perceived no change in availability during the past six months to one year, two students think that methamphetamine is more prevalent during exam time. Four of the students perceived a decrease in methamphetamine use during the past six months to one year while the others did not notice any change. None of the students were able to estimate the cost of methamphetamine.

The majority of students felt that methamphetamine had a low level of acceptability among college students. One student perceives that, “people don’t talk about it.” The students could identify no defining characteristics for those who use methamphetamine.

The prevention officer believes that methamphetamine is available and somewhat acceptable on campus primarily because it is so easy to make. The counselor perceives methamphetamine to be even more available than ecstasy. However, she said she has observed no change in the availability of methamphetamine during the past six months to one year. The counselor claims that there is a high level of acceptability for the use of methamphetamine for some academic majors. She believes that students who major in academic
areas of high demand and that require high performance are the students most likely to use methamphetamine.

Rural:

All but one rural student agreed that the use, availability and demand for methamphetamine on campus is very low, and felt there had been no change in the past year. The other student thinks there has been a decrease in the availability of methamphetamine during this time. The majority of students believe methamphetamine use is not acceptable among the campus community. One of the students characterized users as hyper and paranoid. Another student characterized a typical user as being depressed.

Special K (Ketamine)

Urban:

Only one student had heard about special K. However, that student was not able to perceive where they had heard about special K. The students all agreed that the use of special K is unacceptable to most students. “Nothing good is said about those using it.” The majority of the students were unable to characterize users of special K. However, one student perceives those using special K to be “hippie-ish.”

The prevention officer has never come across a case of special K during his career. The counselor is not sure about the availability of special K, but she has heard of special K among veterinarian students. Both believe that special K is not acceptable among college students.

Rural:

Only one student had ever heard of special K. However, the student perceives no availability and no change in the availability of special K during the past six months to one year on campus. This student perceives no problems and no acceptability of special K on campus.

Inhalants

Urban:

Students all said that inhalants are highly available due to the ability to purchase them in any store on or off campus. The students perceive no change in the availability of inhalants during the past six months to one year. One student had never heard of anyone using inhalants. Another student perceives that inhalants are easy to get. However, the same student said that inhalants are not used
much. Some of the students perceive inhalant use to be stable, while others perceive a decrease in inhalant use during the past six months to one year.

A few of the students perceive inhalant use to be very acceptable because it is so available. Other students perceive inhalant use to be accepted, but perceive it to be used more among high school students. Estimates of cost range from about 25 cents to 25 dollars depending on the item and size. Students could not characterize inhalant users. They perceive those who use inhalants to be the same as those using marijuana. They also thought that students who use inhalants are also not doing well.

The prevention officer perceives inhalant use to be “old school.” He has not seen inhalant use on campus. “If inhalants are used, I think it is still in the high school realm.” The counselor is unaware of any inhalant use among college students on campus. She perceives no change in the availability of inhalants during the past six months to one year. She believes inhalant use is low on campus because too many other drugs are available for college students to use.

Rural:

The students perceive inhalants to be available on campus, however, they do not perceive many students using inhalants. They all perceive no change in the availability of inhalants during the past six months to one year. They all perceive inhalant use to be stable during this time. A few of the students perceive inhalants to be acceptable among the campus community, while others perceive little acceptability. “More people accept than you think.” One student perceives five whippets to cost 20 to 25 dollars. Another student perceives locker room to cost 5 to 10 dollars. Others believe the price of inhalants to vary greatly. One student perceives those who use inhalants to be more experimental.

Crack Cocaine

Urban:

The students have never heard of anyone using crack cocaine. “Using this is a big deal, never heard of anyone using it.” They perceive no change in the availability of crack cocaine during the past six months to one year. They perceive no acceptability for those using crack cocaine. The students were not able to determine a price for crack cocaine. One student perceives those using crack cocaine to be homeless people. Another student perceives those using crack cocaine to have a “junky” image.

The prevention officer perceives crack cocaine to be available on campus because of the availability in the surrounding areas. “If someone wants it, it would not be hard to get.” The counselor believes the availability to be lower because it is not that popular. Therefore, she perceives a low acceptability of
those using crack cocaine among college students on campus. However, she believes that older returning students may be more accepting of crack cocaine use on campus. She also perceives no change in the availability of crack cocaine during the past six months to one year. The officer perceives crack cocaine use to be accepted but not as high as it used to be.

Rural:

The students perceive a very low availability of crack cocaine on campus. They perceive no change in the availability of crack cocaine during the past six months to one year. They also perceive crack cocaine use to be stable during this time. They perceive no acceptability for crack cocaine use on campus. “No one likes crack heads.” Some students perceive crack cocaine to be very expensive. Another student perceives a rock to cost 8 to 10 dollars. They were not able to perceive the characteristics of crack cocaine users on campus. However, one student believes that crack cocaine users are not the college student types.

**Heroin**

Urban:

The students have never heard of heroin being used on campus. They perceive no change in the availability of heroin during the past six months to one year. Some of the students did not know about the use of heroin, while other students were able to perceive heroin use to be stable during the past six months to one year. The students do not know the price of heroin. They perceive heroin use as not being accepted among college students. “Any needle drug is not ok.” Some of the students perceive those using heroin to resemble crack junkies and people who have tracks on their arms. Another student perceives that bouncers use steroids, cocaine and heroin.

The prevention officer perceives that heroin has died out. However, he has heard rumors that black tar is in the area. The counselor is not aware of any heroin use among college students on campus. They perceive no change in the availability of heroin during the past six months to one year. The counselor perceives a low acceptability of heroin use among college students. She believes that heroin is too expensive and is a 70s drug. For these reasons, she believes that heroin is not a college narcotic.

Rural:

The students perceive a very low availability of heroin on campus. However, one student has heard of a few people using heroin. They all perceive no change in the availability of heroin during the past six months to one year. Five of the students perceive heroin to be stable during the past six months to one year. However, three students perceive a decrease in the use of heroin during this
time. The students do not perceive heroin use to be acceptable among the campus community. One student perceives heroin to be very expensive. The same student perceives those using heroin to be jittery, having poor muscle tone and not likely to be on campus.

**DXM (Dextromethorphan)**

Urban:

Only one student had ever heard of DXM. That student knew of people drinking entire bottles of cough syrup for DXM. The same student perceives DXM to cost the same as the price of cough syrup. The student perceives those using DXM to have the same characteristics as those using inhalants.

The prevention officer has heard of DXM, but has not heard of DXM being used on campus. The counselor has heard of students getting mild stimulation from it, but has not heard of DXM being used on campus. They were unsure of the acceptability of DXM use among college students on campus.

Rural:

Most of the students perceive DXM to be highly available through drug stores. However, most students have not heard of people abusing products with DXM. They all perceive no change in the availability of DXM during the past six months to one year. They also perceive DXM use to be stable during this time. They perceive DXM to be acceptable among college students as long as it is not being abused. They perceive DXM to cost the same as a bottle of cough syrup.

**Prescription Medicines (e.g., Xanax, Ritalin, Vicodin, Percocet, Oxycontin, Prozac and Klonopin, etc.)**

Urban:

A few of the students perceive high availability, while a few other students perceive a lower availability in prescription medicines on campus. Also, a few students perceive no change in the availability of prescription medicines, while a few perceive an increase in the availability of prescription medicines during the past six months to one year. Some of the students perceive that most college students obtain prescription painkillers from having their wisdom teeth removed. “I know people who take Vicodin or pain pills just for fun when drinking.” Most of the students perceive prescription medicine use to be stable, but a few students perceive a slight increase in use during the past six months to one year. “I knew people having a hard time getting off Vicodin.”

Overall, the students perceive prescription medicine use to be accepted among the college community. One of the students perceives prescription medicines
becoming more accepted because so many people are prescribed to them. The students perceive prescription medicines to cost what pharmacies sell them for or sometimes free from other students. One of the students perceives the cost of prescription medicines to vary depending on the amount another student has in supply. The students perceive the characteristics of those using prescription medicines to be the same as an every day person. The problems students perceive with prescription medicines are that they are too easy to obtain, they are often free, they are dangerous to mix with alcohol and they can become addictive.

The prevention officer perceives prescription medicines as being easy to obtain depending on the time of year. The counselor believes that prescription medicines are easy to get at a general practice. She perceives that prescription medicines are available, but she believes that they are not used much. She perceives that students do not use the college health services much. She believes that prescription medicines are not accepted when needed. She perceives that a stigma is attached to those who need certain prescription medicines. However, she perceives that those who chose to use prescription medicines without being prescribed are accepted more among college students on campus. The officer perceives that those students who try Xanax usually like it. He also perceives that Ritalin is heard about more in the media. He perceives that students who are caught with Ritalin in their pockets are not likely to be arrested.

Rural:

Most of the students perceive a high availability of prescription medicines on campus. “I've heard of people abusing the health center to get Vicodin.” One student perceives an increase in the availability of prescription medicines during the past six months to one year, while the rest of the students perceive no change in availability. While one student perceives an increase in the use of prescription medicine use during the past six months to one year, the rest of the students perceive no change in the use of prescription medicine. The students perceive a fairly high level of acceptability for prescription medicine use. One student perceives prescription medicine costing 2 to 4 dollars a pill depending on the type of medicine. Another student believes Ritalin costs about 10 to 15 dollars a pill. A third student believes a bottle of Vicodin costs 30 dollars. A fourth student perceives prescription medicines to be free. “They got the health center, they can just get if for free.” One student believes athletes with injuries use prescription medicine more than others.
Non-Prescription Drugs (e.g., No-Doze, Tylenol PM and Nyquil)

Urban:

The students perceive non-prescription drugs to be highly available on campus. The students say that non-prescription drugs are sold in stores around campus. The students perceive non-prescription drug use to be stable during the past six months to one year. However, one student perceives that non-prescription drug use increases around exam time. One of the students perceives the characteristics of those using non-prescription drugs to be overachievers. The students perceive that people rely too much on non-prescription drugs. They also believe that too many people think non-prescription drugs are “ok” to use because they are over-the-counter.

Both the prevention officer and counselor agree that non-prescription drugs are sold in stores around campus. They perceive no change in the availability of non-prescription drugs during the past six months to one year. They also perceive that non-prescription drug use is accepted among college students. They believe this to be true since non-prescription drugs are sold over-the-counter.

Rural:

The students perceive high availability of non-prescription drugs on campus. They also perceive an increase in the availability of non-prescription drugs during exam times. Half of the students perceive an increase in the use of non-prescription drugs during the past six months to one year. The students believe non-prescription drugs are accepted among the campus community. Since non-prescription drugs are over-the-counter, some students perceive that others think they are ok to use. The students believe non-prescription drugs to cost the same as retail prices. The students perceive that anyone could fit the characteristics of those using non-prescription drugs.

PREVENTION & COUNSELING SERVICES

Urban:

The counselor from the urban campus said that services were available to students through the campus counseling center. Students with mild to moderate problems could be handled in-house, and more serious cases were referred out. She also pointed out, however, that the counseling center does not see most students who have drinking or drug use problems. Students generally will “tuff it out” with the problem, or drop out of school having never visited a counselor. Severe problems are referred out to Edwin Shaw or Portage Path Behavioral
Services, but successful referral depends upon the financial status (i.e., insurance and ability to pay) of the student.

The urban college officer said that users are only identified by arrest, and the police do try to make referrals. They must abide by statutes however, and are not always successful in getting offenders into treatment. If referred, students are usually sent to an off-campus hospital.

A few of the students were aware of counseling offered on campus. These same students perceive counseling to be adequate but have never heard of anyone using it.

Prevention services are available on campus. Both the counselor and officer were involved with the freshman orientation that includes some prevention and information on counseling services available to students. There is also an “alcohol awareness coalition” on campus and a “drinking responsibly” program that is mandatory for all Greek organizations. Both interviewees felt that more prevention and intervention was needed.

The most pressing concern expressed by both was the lack of other activities on campus that do not promote drinking. The counselor was currently writing a grant to address this issue.

The students have never heard of any prevention on campus. One student perceives that prevention only took place after someone was caught using drugs. Two of the students remember something being mentioned about prevention in orientation. However, they are not aware of anything else about prevention. Students did say that the media attention in the past year to alcohol poisoning and binge drinking has heightened student awareness of the problems of drinking on campus.

Rural:

The students perceive a freshman orientation as the only real prevention service on campus. However, they say that it is only held once a year and only freshman are required to go. They do believe there are AA meetings available and they believe anyone will talk to you to help. Most said that someone would be able to refer you somewhere for treatment if requested. They believe group and single counseling sessions are available. They also felt that problems are addressed as they present themselves.
OTHER ISSUES RELATED TO DRUG USE AMONG COLLEGE STUDENTS

Urban:

The majority of the students never heard of anyone using the Internet to purchase or find recipes of drugs. However, one student has heard of others using the Internet to purchase marijuana seeds. The same student believes that this does not happen often because police are tracing packages. The prevention officer perceives the Internet to be widely used for recipes, particularly ecstasy and methamphetamine.

Reasons for Using Selected Drugs:

Students felt that ecstasy was a party drug taken to have fun. A few students said that GHB is used to relieve stress, and when used with alcohol it increases the buzz. Most agreed that marijuana is used to relax, to relieve stress and to bring about creativity. Alcohol is used to relieve stress and to have fun. Students saw hallucinogens as being used to increase creativity, to stay up to study and to stay up late to have fun. Powder cocaine is also used to stay up late and study, as is methamphetamine. One of the students referred to methamphetamine as “truckers love it.” Another believes that special K is used for the same reasons as cocaine. Most students felt that inhalants were used only to have a good time.

Most students agree that Ritalin is used to concentrate and relieve stress. One student said that some college students snort Ritalin if they do not have cocaine. Another student said, “some people will take anything, even penicillin to get a buzz.” The prevention officer thinks that some students will take Ritalin because of their study habits. Students perceive that non-prescription drugs are used to get high, stay up late to study, stay out all night to party and to help you sleep. “My friend drank a bottle of Nyquil to get high and got sick.” The students say that Nyquil is often used to counter the effects of No-Doze.

Rural:

Only a few of the students perceive others using the Internet for recipes. One of them believes that other students use the Internet for drink recipes. Another student believes you can find anything you want on the Internet.

Students believe marijuana is used to relieve stress. They perceive alcohol to be used to relieve stress and have a good time. One student believes methamphetamine is used to stay awake. The same student believes Special K is used to stay awake. This student believes inhalants are used for getting a burst of energy or a rush. The students believe Ritalin is used for settling down,
to get more energy and is mixed with alcohol. The students believe non-prescription drugs are used to stay up late and study or to stay up late and party. One student believes No-Doze is used to stay up late and Tylenol P.M. is used to go to sleep.

**CONCERNS & RECOMMENDATIONS**

**Urban:**

One of the students feels authorities should watch prescription medicines such as Vicodin more carefully. “Should be cracking down because the media has made it known that Vicodin can get you high.” Another student is concerned with the problem of anti-depressants becoming addictive when used often.

The officer and counselor believe there is a need for more education on the consequences of alcohol use. They feel that there should be a lot more on campus activities for students that do not involve alcohol. Presently, there are few extracurricular activities and the bars surround the campus making alcohol easily accessible to even underage students.

**Rural:**

One student believes the problem of drinking and driving is not stressed enough, while others believe only the over use of alcohol should be addressed. Students agreed that more emphasis should be put on the problem of students using other student’s prescription medicines. They also believe that more emphasis should be put on those people mixing the wrong prescription medicines together.
DRUG USE ON COLLEGE CAMPUSSES IN OHIO
CUYAHOGA COUNTY

AN OSAM RAPID RESPONSE REPORT
PREPARED FOR
THE OHIO DEPARTMENT OF ALCOHOL AND DRUG ADDICTION SERVICES

June 2000 - January 2001

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ABSTRACT

Qualitative data were obtained through a focus group consisting of five students from an urban college in Cuyahoga County. The focus group took place on December 15, 2000.

The interviewed students perceived marijuana to be highly available and socially acceptable among college students on campus. Alcohol use has become customary for most college students who socialize outside of classes. Some students feel there is a stigma attached to those who do not use alcohol. The college students believe that student use of ecstasy is lower than use of marijuana and that younger students in the club scene are more likely to use ecstasy. The students were less aware of other drugs on campus, but believed cocaine, crack and heroin, while not widely used by students, was readily available in the neighborhoods surrounding campus.

Other concerns expressed were with the wide use of prescription medicines. One student said that Ritalin is widely used without prescriptions. Also, most students were unaware of any prevention services available on campus. However, most of the students were aware of counseling services and referrals offered on campus.

Table 1: Qualitative Data Sources

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Table 2: Detailed Focus Group/Interview Information

December 15, 2000: College Students

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INTRODUCTION

1. Area Description

More than 1.4 million people live in Cuyahoga County, the most populous and urbanized of Ohio’s 88 counties. About half a million individuals reside in Cleveland. Although the poverty rate in the county suburbs has gradually increased (14%), the rate in Cleveland remains more than eight times higher - approximately 45% of Cleveland residents live in poverty. Poverty rates have increased while unemployment rates have declined to a record low in most areas.

2. Data Sources and Time Periods

- **Qualitative data** were collected through one focus group on December 15, 2000.

DRUG TRENDS

CUYAHOGA COUNTY

The following information was obtained through a focus group conducted with five college students at an urban college in Cuyahoga County on December 15, 2000.

Ecstasy (MDMA)

Students in this focus group believe that ecstasy is not readily available on campus. However, students felt that if someone is looking for ecstasy they will find it. They saw no change in availability of ecstasy during the past six months to one year. They also saw ecstasy use as stable during the past six months to one year.

Students believe the use of ecstasy is more acceptable among fraternities, sororities and certain departments on campus. They perceive that ecstasy use is mostly limited to younger white individuals involved in the club scene. These individuals are also perceived to be moody and between the ages of 18 and 20. The students also believe that ecstasy is used more among the gay population on campus.

GHB (Gamma-hydroxybutyrate) “date rape drug”

The interviewed students believe that GHB is not immediately available on campus. Most of the participants agreed that “GHB is out there, but it is only
available in certain cliques.” They perceive GHB to be available in the bar areas near campus. They observed no change in availability during the past six months to one year. They also saw the use of GHB as stable or decreasing as a result of the media attention to it during the past six months to one year.

All the participants believe that GHB is not a well-accepted drug on campus. This perception is especially true of female students. Most students (male and female) believe that certain male cliques (fraternities) may find GHB to be acceptable. They characterized those using GHB as males, jocks and those who belong to fraternities. The students were not able to determine the cost of GHB.

**Marijuana**

Students in our focus group claimed that marijuana is everywhere on campus. They cited incidents of use by students in the bathrooms, hallways and stairwells. They all agreed that they often encounter students in class who have the smell of marijuana on their clothing. For this reason, students believe that marijuana is highly available and easy to obtain. They had not seen any change in availability of marijuana on campus during the past six months to one year. The majority of the students saw marijuana use as stable, however, a few of the students believe they saw a slight increase in use during the past six months to one year.

Students perceive high acceptability within friendship groups of users (of marijuana). They believe it is more acceptable to be an occasional marijuana user than to use marijuana all the time. The students perceive that marijuana use is not favored among student organizations. They believe this to be true due to the consequences for organization members who are caught with marijuana.

Participants estimated the cost of marijuana to be about five dollars a bag, but it may also be obtained for free when used socially. All students in this group agreed that marijuana users could not be characterized – any student could be a user. However, the students believe that there is less experimentation with marijuana among the non-traditional students on campus.

**Alcohol**

The students believe the availability of alcohol is very high. They perceive that fraternity students store large quantities of alcohol in their houses. They believe that alcohol is easily obtainable for underage students. Students agreed that most of this high availability of alcohol is due to the proximity and lax security in the bars skirting the campus. They also cited what they believe to be the student’s motto: “when all else fails get drunk.” They saw no change in the availability of alcohol on campus during the past six months to one year. However, they do believe that alcohol use increases during school holidays and stabilizes at a lower rate of use during the rest of the year.
The students believe that the use of alcohol is highly acceptable. They claim that alcohol is everywhere on and off campus, and alcohol is tied to many social activities. They believe this is especially true after school hours. All the interviewed students claim that there is a great deal of pressure to use alcohol when associating in groups. They believe the cost of alcohol to be two to fifty dollars depending on the type of alcohol product purchased. Students believe that anyone may fit the characteristics of those who use alcohol on campus. However, they believe that non-traditional students are less likely to use alcohol because they are more serious about their studies, and usually have other family and work responsibilities.

**Hallucinogens (LSD, Mushrooms and PCP)**

Only a few students said they knew other students who use hallucinogens. The majority of the students believe that the use of hallucinogens is going out of style. For this reason, students perceive low availability of hallucinogens on campus. They also saw no change in the availability of hallucinogens during the past six months to one year. Students thought that the use by students of hallucinogens had remained stable over the past six months to one year. A few students guessed that the cost for a bag of mushrooms was about ten dollars.

The interviewed students perceive that the use of hallucinogens is more acceptable among younger crowds. They also think that experimentation with hallucinogens (defined by them as being used only once or twice) to be more acceptable than chronic or more frequent use. They distinguished between unacceptable use of hallucinogens, which interferes with everyday functioning and more acceptable experimental use (i.e., trying it once or twice). They characterized users as being more likely to belong to artsy, Goth, hippie, beatnik and gay populations on campus.

**Powder Cocaine**

The interviewed students said they were unaware of powder cocaine being available on campus. However, they agreed that powder cocaine is available immediately off campus. They saw no change in the availability of powder cocaine on campus during the past six months to one year. The majority of the students also believe the availability and use of powder cocaine has been stable during the past six months to one year. However, a few students perceive a slight increase in the use of powder cocaine during this time.

Participants perceive powder cocaine to be unacceptable socially on campus. They also perceive powder cocaine to be very expensive. The students saw powder cocaine as a high-class drug and believe that those who use powder cocaine are among the white working class population. They all agreed that students generally cannot afford to use expensive drugs such as cocaine and crack.
Methamphetamine

The students perceive no availability of methamphetamine on campus. They believe that those who do use methamphetamine are not on campus long because of the harsh reaction of the drug (e.g., the user becomes violent and burned out). They perceive no change in availability of methamphetamine during the past six months to one year. They also said the use of methamphetamine was stable during this time period.

All the students believe that the use of methamphetamine among students is unacceptable. However, they believe that if a student is using methamphetamine, s/he probably has friends who are accepting of their use of methamphetamine. They believe that users are mostly younger students who are involved in the rave and bar scenes.

Special K (ketamine)

The students perceive no availability or use of special K on campus and believe that this has been the case for the past six months to one year. The students are not sure what the cost of special K is, but believe that it is probably very high. They believe that special K is not an acceptable drug of use among students. The students perceive that those using special K are athletes and possibly animal trainers. A few students talked about the cessation of storage and use of animal tranquilizers in the biology department because of reports of abuse of these drugs.

Inhalants

The students perceive a very high availability of inhalants on campus. They agreed that since inhalants may be legally purchased at drug stores in the form of sprays and adhesives, there was no limit to the availability other than the ability to pay for them. For this reason, they saw no change in the availability and use of inhalants during the past six months to one year. They perceive inhalants to cost five dollars or less. They believe that the inhalants most used by students are whippets and whip-cream. The majority of the students perceive the use of inhalants to be acceptable. They agreed that most students believe that there is little risk of harm by breathing in the gas from a whipped-cream aerosol. They perceive that those using inhalants are younger white students.

Crack Cocaine

There was a consensus in the group that crack cocaine is not readily available on campus. However, the students also agreed that crack cocaine is highly available immediately off campus. The majority of the students believed there was no change in the availability of crack cocaine during the past six months to
one year. However, a few felt that if there was any change at all, it was a slight increase in availability of crack cocaine. They also perceive the use of crack cocaine to be stable during this same time. Again, however, if the students perceived a change at all, they believe there has been a slight increase in the use of crack cocaine. They agree that crack cocaine is a highly stigmatized drug among students. They said users would be seen as “crack heads” and there is a heavy stigma attached to that term. They also believe that crack cocaine is expensive. They agreed that some females trade sex for crack cocaine and that they were referred to as “strawberries.” However, they reiterated that generally, students do not use crack. Students are exposed to crack users when they go into the neighborhoods and bars surrounding campus. The students were unable to characterize those who use crack cocaine.

Heroin

Students agreed that they were unaware of heroin use by students on campus. They also believe that heroin is not available on campus but is easily obtained immediately off campus. They saw no change in either the availability or use of heroin by students on campus during the past six months to one year. All agreed that the use of heroin is highly unacceptable among students. They perceive that those using heroin are in a small group and probably do not brag about it. The students were not able to characterize a heroin user on campus, and were not well informed on pricing for heroin. They estimated the cost (no particular quantity) of heroin to be expensive—anywhere from 100 to 500 dollars or more.

DXM (Dextromethorphan)

The students had never heard of DXM (Dextromethorphan).

Prescription Medicines (e.g., Xanax, Ritalin, Vicodin, Percocet, Oxycontin, Prozac and Klonopin, etc.)

The students perceive prescription medicines as readily available on campus. They perceive Ritalin (more than other prescription medicines) as being used more often and easy to obtain. They also saw “a lot” of use by students of Percocet, Vicodin and Prozac. The group agreed that prescription drugs were easy to obtain legally through physicians, and students generally felt there was nothing wrong with sharing these drugs with friends who asked for them. The students perceive no change in the availability of prescription medicines during the past six months to one year on campus. However, they believe that the availability of Ritalin may be increasing. Overall, the students perceive the use of prescription medicines as stable during the past six months to one year on campus.
Students in our group reported that the use of prescription medicines is highly acceptable. They believe this is due to the high availability of prescription medicines on campus, and the fact that they are obtained legally.

The interviewed students estimated the cost of Percocet to be about ten dollars (per tablet) and about five dollars for Ritalin. They also perceive the best way to obtain prescription drugs is to find someone with a prescription. They characterized prescription drug abusers as more likely to be female and between the ages of 19 and 25. However, they also believed that some males and individuals of all ages also abuse prescription medicines. The students believe that older non-traditional students are less likely to experiment with prescription medicines.

Non-Prescription Drugs (e.g., No-Doze, Tylenol PM and Nyquil)

All the students in our group said that non-prescription drugs are readily available on campus. They believe that most non-prescription drugs are sold on campus. They perceive no change in availability of non-prescription drugs during the past six months to one year on campus. They agreed that the use of non-prescription drugs among students is highly acceptable as a way to make adjustments for heavy school, work and party demands. Use and availability have remained stable over the past six months to one year. While the group agreed that most students use over the counter medications at some time or another to stay awake (No-Doze) or go to sleep (Tylenol PM or Nyquil) overachieving students are more likely to use stimulants to stay awake to study, and students who like to party are more likely to use stimulants to stay awake, and then a sedative to allow them to sleep.

PREVENTION & COUNSELING SERVICES

A few of the students believe counseling is available on campus. Only one student was aware of all the prevention and counseling services available on campus. However, that student is a member of student government. This student believes these services are adequate. The same student perceives a need for more prevention in dorm-room areas. Generally, the group agreed that if a student sought out counseling or treatment they would find it, but that more could be done to reach students in the way of prevention, especially in the area of social drinking.

OTHER ISSUES RELATED TO DRUG USE AMONG COLLEGE STUDENTS

Most of the interviewed students did not believe that other students use the Internet to purchase or obtain drug recipes on campus. However, some said that they believe that a small number of students using the Internet for these reasons.
The group agreed that marijuana is used by students to help them think, to ease stress, lift their mood, boost creativity and to enhance sexual performance and enjoyment. Students perceive alcohol use as mostly an extra-curricular activity. However, they believe that alcohol is used for stress relief, easing the anxiety of social situations and for boosting confidence.

The students believe that Ritalin is used to stop nervousness and Xanax is used to reduce test anxiety. They also perceive that college students believe that taking a prescription medicine is a “quick fix” to their problems. They said that No-Doze and Metabolife are used to increase the ability to stay awake to study for finals. One student said a few people are using Nyquil as a replacement for alcohol on campus.

**CONCERNS & RECOMMENDATIONS**

Students’ major concerns were with the high acceptability of alcohol use and particularly the social pressure to drink even for non-drinkers. They felt that alcohol was too available to underage students as a result of the ease of obtaining false identification and also the laxness of retailers and bar owners in carding individuals.

Students were also concerned about the extent of use for prescription drug sharing, particularly Prozac and Ritalin. They had very little to offer in the way of recommendations other than to monitor prescriptions for Ritalin, and to enforce restrictions on drinking for under-age students.
Abstract

For the college population, both counselors and students perceive that alcohol is the most problematic substance. Heavy alcohol use is considered acceptable. Marijuana use was described as increasing or stable. It is often used for coping with stress. Ecstasy is readily available, and use is increasing. Use occurs in a highly charged social environment. Some students are accessing counseling services for depression, lack of motivation, or feelings of being let down. Counselors postulate that these symptoms are related to heavy ecstasy use. However students are resistant to connecting their drug use with these consequences. LSD use is reported as increasing and cocaine HCL use as decreasing. Amphetamines are used to help students study all night and to control weight. Counselors and peer leaders felt that prevention and counseling services were adequate. However, students are generally unaware of them. Prevention activities that show promise include late night events, linking drug and alcohol education with sexual health programming, social norming campaigns, and infusing drug and alcohol information into the academic curriculum. Faculty involvement needs to increase, according to one college preventionist and treatment counselor.

Of interest is the difference between students attending public and private institutions in terms of self-perception. Those from private institutions perceived themselves as more controlled users than their counterparts on the public campus. They also noted that academic expectations were higher and the living environment was heavily monitored. These factors were perceived to have a protective effect on use.

Table 1: Qualitative Data Sources

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<th>Date of Focus Group</th>
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<tr>
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</tr>
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<td>1-12-01</td>
<td>Counselor</td>
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Totals

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<th>TOTAL Number of Participants</th>
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<tr>
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Table 2: Detailed Focus Group/Interview Information

October 27, 2000: College Student Peer Leaders and Staff

<table>
<thead>
<tr>
<th>Age</th>
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<th>Gender</th>
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</tr>
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Recruitment Procedure: Contacted Wellness Center staff who recruited peer leaders

November 21, 2000: College Students

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</tr>
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<td>Alcohol user</td>
</tr>
<tr>
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<td>Female</td>
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<td>Alcohol user</td>
</tr>
<tr>
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<td>Marijuana user</td>
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Recruitment Procedure: Contacted college counselor who recruited students

November 28, 2000: College Students

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<td>Not a current user</td>
</tr>
<tr>
<td>19</td>
<td>White</td>
<td>Female</td>
<td>Not a current user</td>
</tr>
<tr>
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<td>White</td>
<td>Female</td>
<td>Advisor</td>
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<td>Female</td>
<td>Third year, marijuana user</td>
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<td>Second year, not a current user</td>
</tr>
<tr>
<td>19</td>
<td>White</td>
<td>Female</td>
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Recruitment Procedure: Contacted college counselor who recruited students
INTRODUCTION

Central Ohio is home to several universities and colleges, the largest of which is the main campus of The Ohio State University with an enrollment of about 46,000. According to the CORE Survey (1999) conducted at one central ohio university, alcohol and drug use patterns mirror national college trends. These data are supported by student and counselor opinions. The primary drug of choice is alcohol, and students from the smaller institutions often travel to the larger institutions to drink. Marijuana is also very common and Ecstasy use is on the rise. Counselors report polysubstance abuse.

DRUG TRENDS

Marijuana
Marijuana use is perceived as increasing or stable on college campuses in Central Ohio. Use is considered commonplace and this substance is easily obtained. Pot is often used to self-medicate for high anxiety and to treat the symptoms of attention deficit disorder. At one university, smoking pot in the residence halls was not unusual.

“I had somebody walk into my dorm room with a bag of it and ask if I wanted any. He just walked in. He had no idea who was in the room. He didn’t care. Our hall would be very smoky – like you couldn’t see from one end to the other because people would be smoking so much it was like through their doors and into the hallways. If the resident advisor isn’t there, nobody else is going to do anything about it.”

One counselor reported that denial is the highest in users of this drug. Consequences are not immediately severe. “It scares them to death that it might be taken out of their life. It becomes perpetual. It becomes the main coping skill.”

Alcohol
Alcohol is believed to cause the most harm. “Drunkenness is a goal. Get drunk, go to a party and drink some more. You have to get drunk before you go to the
party.” Alcohol is often not perceived as being a drug. Alcohol is often used in the residence halls and resident advisors are limited in the actions they can take. One resident advisor commented:

> “Basically, we are not cops and we can’t, we don’t have search warrants so we can’t, you know we can suspect it, but we have to have proof that they are doing it. You have to have a specific reason. If you see someone with a particularly square backpack you pretty much know (they have a six-pack) but you can’t stop somebody and say, ‘Open up your backpack.’ We pretty much advise them that we know what they have and they should get rid of it as soon as possible. But once we catch them, we document it to the hall director. The hall directors meet with the advisors. The first couple of sessions (with the student) are just kind of educational.”

Students from private institutions reported that residence halls were strictly monitored and use was not common in that context. One campus experienced excessive violence and property damage related to alcohol use during football season. One student was stabbed, several cars were overturned, and 129 dumpsters were burned. The president of the university responded quickly with student sanctions. In addition, he sent out an e-mail to all students, faculty and staff relaying the facts surrounding the disturbances and the consequences that were to be imposed. He also sent a letter to parents of students advising them of the efforts made, and accepting responsibility for the welfare of the students. He sent a letter to all students promising action to ensure a safe environment.

**Ecstasy**

Ecstasy is increasing in availability according to participants in all focus groups, including active users and counselors. One counselor noted that there seems to be a pipeline from the Cleveland area and described users as younger (16-20) with a need for external stimulation. Use occurs in a highly energized social environment. Some clients fit the ADHD profile and most have what was described as a “poor work ethic.” Clients come to the counseling office complaining of depression, lack of motivation, feeling let down, or for relationship problems, and are unable to make the connection between their drug use and these psychological consequences. Both counselors stated they are seeing users who are experiencing increased tolerance to club drugs, particularly ecstasy. There is a degree of secrecy surrounding the use of designer drugs. Students “don’t want to blow the cover. There is a lack of understanding of the destructive side of it,” said one counselor.

**Hallucinogens**

Hallucinogens are easy to get according to the student participants. There is an increase in availability and variety in forms of LSD. Gelcaps run $5; cubes, $4; and paper, $3. Mushrooms are harder to get.
Gamma-hydroxybutyrate (GHB) & Ketamine
GHB is highly associated with the Greek community. Both GHB and ketamine are considered recreational. Therefore, it is difficult for the student to make a connection between the use of these drugs and consequences experienced. Designer drugs appear to be replacing cocaine on campus although cocaine is easy to get.

Other Drugs
Other drugs of use include prescription drugs. However, use is primarily among those students who use a variety of substances. However, they are seldom considered drugs of first choice. One counselor reported that Ritalin is occasionally stolen from other students and siblings. He also reported seeing a client “whose kidneys are shutting down because of chronic abuse of no-doiz. The no-doiz was an attempt to get her out of depression. On top of that, she was drinking 10 beers a pop.” There is a perceived decrease in cocaine use among college students. Inhalants are rarely used, but both counselors reported past use in some of their clients. Amphetamines are used to study all night or to lose weight.

PREVENTION AND COUNSELING SERVICES
Counselors and student peer leaders felt that prevention and counseling services were adequate, but students are generally unaware of them. Students typically will not seek information/referral unless they are in a crisis situation. One student said:

“People learn from their own experiences. No one ever learns from anyone else. I’ve sat through plenty of like, don’t do drugs seminars and those don’t do a thing except encourage me more. I don’t know why. I don’t think there’s anything anyone can say to make me stop doing drugs. I don’t want to. My mind is made up.”

Education and prevention sessions are typically poorly attended. Resident advisors are required to offer substance abuse education, however attendance is optional. According to the counselors prevention activities that seem effective include late night events, linking drug and alcohol with sexual health programming, social norming campaigns, curriculum infusion, and attempting to link use with consequences.

OTHER ISSUES RELATED TO DRUG USE AMONG COLLEGE STUDENTS
The Internet is used to get drug information and occasionally recipes. The perception was that students are not inclined to use the Internet to purchase or
sell drugs. One counselor has been treating several students for Internet addiction, not related to drug use.

**CONCERNS AND RECOMMENDATIONS**

There is still the widespread belief that drugs and alcohol affect “someone else.” Typically drug and alcohol issues are delegated to student services. However, their influence is seen as limited. One counselor said, “The faculty are the ones who touch the lives of the students more than student services ever will. Administrators need to stand upon the essential importance of faculty being involved. We’re not being student centered. That’s being employee centered. That’s being college centered.” He suggested putting the same amount of resources in adjunct faculty as full time faculty as they tend to have more student contact at his institution. Office hours need to be included in the contracts of adjuncts. Collaboration between student services and faculty needs to increase. Faculty are too quick to refer to student services and not to recognize the influence they have in the lives of students.
DRUG USE ON COLLEGE CAMPUSES IN WEST-CENTRAL OHIO

AN OSAM RAPID RESPONSE REPORT
PREPARED FOR
THE OHIO DEPARTMENT OF ALCOHOL AND DRUG ADDICTION SERVICES

June 2000 - January 2001

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Abstract

Among area college students, alcohol is the most available and most accepted drug of abuse. It’s popularity and acceptability among college students increases its potential for abuse by students. Marijuana is readily available and highly acceptable among many college students. Many students report it to be so accepted by their peers that unconcealed use of the drug is common. MDMA (ecstasy) was perceived as gaining in popularity among college students over the past two years, and in the past year, availability and abuse has increased substantially. Drugs such as GHB, ketamine and rohypnol are perceived as relatively rare in availability and abuse on college campuses in west-central Ohio. However, many students are aware of the potential dangers these drugs present as “date-rape” drugs. The abuse of hallucinogens is perceived as low, but readily available. Students we interviewed believed drug and alcohol prevention services and counseling were available at their university, but exactly how and where to access these services was unclear to many students.

The limitations of this study must be noted. The findings are based on a limited number of interviews and may not be representative of patterns of drug and alcohol abuse on colleges and universities in west-central Ohio. Further research is needed to confirm and elaborate our preliminary findings.

Table 1: Qualitative Data Sources.

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<thead>
<tr>
<th>Focus Groups</th>
<th>Date of Focus Group</th>
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<td>College students/active users, recovering users.</td>
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<tr>
<td></td>
<td>11/16/00</td>
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<td></td>
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Table 2: Detailed Focus Group/Interview Information

October 26, 2000: University Counselor/Prevention Specialist.

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<th>Experience/Background/Major</th>
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Recruitment Procedure: The participant was recruited after contacting the Drug and Alcohol Prevention Office at a local university.

November 13, 2000: College Students

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Recruitment Procedure: Participants were recruited by contacting university drug and alcohol prevention offices and asking personnel to recruit a diverse group of volunteers knowledgeable about drug trends on the campus.

November 16, 2000: College Students.

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<td>White</td>
<td>Male</td>
<td>Sophomore Middle Childhood Education major</td>
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Recruitment Procedure: Participants were recruited by contacting university drug and alcohol prevention offices and asking personnel to recruit a diverse group of volunteers knowledgeable about drug trends on the campus.

INTRODUCTION

Qualitative data were obtained from two focus groups with college students and an individual interview conducted between October 26, 2000 and November 16, 2000. In total, 16 individuals participated. Statistical data on alcohol arrests were obtained from university crime reports publicly available on the Internet. Drug and alcohol abuse data were obtained from the 1999 Core Drug and Alcohol Survey which is published every two years.

LIMITATIONS

We emphasize that this report is based on small samples of college students from area campuses. None of our findings refer to any specific college campus. The findings cannot be generalized to all college campuses in the west-central Ohio region. Further confirmation of the findings is needed.

DRUG TRENDS
Alcohol

The perception among area college students and prevention specialists participating was that alcohol was readily available to college students regardless of age, and students described an atmosphere that was very accepting and at times even encouraging of alcohol abuse. Participants believed that alcohol abuse on campus has remained high at steady levels over the past six months to one year.

Supporting these qualitative findings, statistical data from the 1999 Core Drug and Alcohol Survey, a national survey of drug and alcohol use among college students, show that between 69%-77% of students on campuses we investigated had used alcohol in the past 30 days. The average number of alcoholic drinks consumed per week by students on these campuses ranged from 5.0-7.8 drinks. Reported binge drinking (drinking 5 or more drinks in one setting) within the last two weeks on these campuses ranged from 44%-56%. All of these figures are above the national average.

When asked if alcohol abuse was considered to be a problem on their campuses, participants overwhelmingly agreed that it was. Students reported that many students drink so frequently that their schoolwork suffers and they eventually fail college coursework. As one student commented:

“I seen so many people just flunk out of college, you know, just because all they wanted to do was get drunk every night.”

Another student commented that the high frequency of drinking among some students seems to be motivated by a “new found freedom” away from parents or other authority figures:

“I think more, I don't know, it seems like at college everyone’s away from their parents finally and it's just like if they get their hands on alcohol, watch out. I think alcohol's a problem on campus.”

Although alcohol abuse was considered a problem on area college campuses, students believed college law enforcement practices did little to reduce the problem. Some students described a tolerant attitude by campus police toward student abuse of alcohol. For example, as long as students did not get into physical fights or drive a vehicle while intoxicated, participants suggested that campus authorities were unlikely to make an arrest (despite underage drinking). Students reported that although law enforcement officers will arrest students for DUI, the number of arrests made for DUI was only a minute fraction of the number of students actually driving intoxicated. The following statement from a student exemplifies this perception:

“There’s a lot [of students driving intoxicated]. It's like it doesn't matter how drunk you are as long as you're the least drunk and that's who's gonna drive.”

Data from the 1999 Core Drug and Alcohol Survey support this perception. Only .4%-1.8% of college students surveyed at the area colleges we investigated reported being arrested for DUI or DWI. However, 31%-38% of these same students had actually driven a vehicle while intoxicated. As seen in Exhibit 1, campus law enforcement officers are much more likely to issue disciplinary citations for alcohol violations as compared to actual legal citations.

In summary, alcohol on area campuses in west-central Ohio is perceived as highly available and acceptable among college students. Most participants believed that students who abuse alcohol do not seem to be deterred by campus law enforcement practices for either underage drinking or driving while intoxicated, given that few arrests result from these actions. In general, all participants we interviewed perceived alcohol abuse as a significant problem on their campus.

Marijuana

Students perceived marijuana to be readily available on their campuses and reported that marijuana
availability (already at very high levels) grows slightly more available each year. All participants perceived the use of marijuana as very acceptable on area college campuses, stating that the abuse of marijuana is often times not concealed by the abuser. One student’s remarks exemplify this perception:

“...few years ago I could say that, you know, whoever would do it [smoke marijuana] would sneak off into another room, you know, if it's at an apartment complex, sneak into a room in the apartment. But this year, I saw people just doing it right out in front of the house. I mean just passing around a joint.”

While most participants believed that marijuana abuse was a problem on their campus, others only perceived its abuse as a problem if it interfered with others (e.g., physical attacks, vandalism). Participants stated that marijuana was frequently available at parties and believed that 10%-20% of students at these parties are abusing the drug. Lending support to these findings, data from the 1999 Core Drug and Alcohol Survey show that 14%-17% of college students surveyed on area college campuses reported using marijuana at least once in the past 30 days. Students abusing the drug three or more times per week ranged from 4%-6.7%.

As with alcohol, students on one campus perceived that campus law enforcement practices minimized the pursuit of legal charges against students for using marijuana. One student who worked as a “Community Advisor” (a student responsible for managing students in a college dormitory) made the following statement about law enforcement practices on her campus:

“I guess it’s so common now…that they [campus police] were talking to the students about it [marijuana use]. It was like, uh, oh, it’s not that serious. Everybody has a run-in with marijuana. And it kinda irritated me because, you know, any time you have a situation where drugs are involved, you’re supposed to call Public Safety and it’s supposed to be made an example that this is not something that is condoned...you know, here on, on campus.

And for, uh, the officers to come out and make it seem as if it’s not that big of a deal because it’s so common...”

In all fairness other participants explained that law enforcement on area campuses faced numerous obstacles implementing the law, including the sheer size of the problems themselves.

In summary, marijuana abuse on area college campuses is believed to be very acceptable among most area college students, and the availability of the drug (already at a high level) is reportedly increasing slightly each year. As reported by the 1999 Core Drug and Alcohol Survey, it is the most frequently abused illicit drug on the college campuses we investigated.

MDMA/Ecstasy

All participants perceived a significant increase in the abuse of MDMA (ecstasy) among college students. When asked how available ecstasy was on campus, several students responded that it was “everywhere.” Lending support to the recent popularity of ecstasy among college-aged students, one university’s student newspaper published a full-page article in January of 2001 describing the dangers associated with the abuse of ecstasy.

Students perceived the availability of ecstasy as steadily increasing over the past two years, and that the availability of the drug had increased greatly in the past year. Based on data from the Core Drug and Alcohol Survey in 1999, 1%-2.6% of students surveyed reported using ecstasy in the past 30 days. Commenting on the increased abuse of ecstasy among college students, a drug and alcohol prevention specialist we interviewed had this to say:

“I anticipate that when we do the Core Survey the next time that we’re gonna see… one of
the questions on the new Core Survey talks about...designer drugs, ecstasy, MDMA...I can almost guarantee that this is gonna go up.*

Students stated that ecstasy was very easy to find and that it was commonly used at parties. One participant (and recovering addict) who frequented dance clubs made the following statement:

“You can't turn around in the club without seeing somebody that's, that's doing it, or somebody offering it, or something like that.”

Several students were aware of recent deaths attributed to the abuse of ecstasy. One such death was the unpublicized death of a fellow college student that occurred approximately two weeks prior to one of our focus groups.

Other “Club Drugs”

In sharp contrast to the knowledge students had about ecstasy on their campuses, very few students had any information about such drugs as GHB (Gamma-hydroxybutyrate), ketamine (Special K) or rohypnol (roofies). In fact, most participants had never heard of or had seen these drugs on their campuses.

Despite their lack of knowledge about these drugs, most participants did express a heightened awareness to the potential predatory uses of these drugs. Several female students stated that they only go to clubs or bars with their friends and that they never leave their drinks unattended, thereby reducing the chances of being drugged and sexually assaulted. As one female student stated:

“I drink sometimes, you know... but, uh, I will, I, I don't even leave, I will leave my drink with her [my friend]... because she is my friend. You know, she's not gonna let anything happen to me.”

A drug and alcohol prevention specialist (who is also responsible for sexual assault prevention and education) justified the concerns of these female students—reporting that she had noticed an increase in students she works with talking about the use of these drugs as “date-rape” drugs.

LSD

Students we interviewed described the use of hallucinogens such as LSD to be relatively moderate on their campuses. The perception was that these drugs could be easily obtained. LSD, in particular, was thought to be as available as ecstasy. Reported use of a hallucinogenic drug in the past 30 days ranged from 1.8%-3% among the area college students surveyed by the Core Drug and Alcohol Survey for 1999.

Other Drugs

Despite the recent increases in cocaine HCL and heroin abuse among college-aged individuals (as reported in the January 2001, Surveillance of Drug Abuse Trends in the State of Ohio, OSAM report), all participants we interviewed did not perceive increases in these drugs among students on their campuses. In fact, most were unaware of any abuse of these drugs by students on their campuses. Supporting these observations, 1999 Core Drug and Alcohol Survey data reporting use within the last 30 days of cocaine and heroin (opiates) ranged from .8%-2.1% and .4%-1.2%, respectively.

Although individuals participating in our focus groups did not perceive increases in availability or abuse of heroin or cocaine, it is possible that these increases do exist and that students knowledgeable about these particular drugs differ from the students we were able to recruit for our investigation. It is likely that abuse of these drugs is limited and hidden among college students who use them.

PREVENTION & COUNSELING SERVICES

Most of the students we interviewed were unable to specifically identify alcohol and drug prevention
or counseling services on their campuses. All students believed such services existed, however. Students aware of drug and alcohol prevention and counseling services stated that most students are not aware of the available services because much of the information about them is presented during freshman orientation. Unfortunately, freshman orientation is often not mandatory on some college/university campuses, and many students do not attend it.

Students at one campus reported that most prevention activities occur during “Alcohol Awareness Week” and include activities such as wearing “beer goggles” to demonstrate how alcohol can impair one’s vision, and a contest to create “mocktails” or non-alcoholic drink alternatives. A participant suggested that her university was in the process of implementing a “Parental Notification System” that will notify parents when their son or daughter is disciplined by the university for a drug- or alcohol-related incident (or other legal incident).

In summary, students we interviewed believed drug and alcohol abuse services existed at their university, but most were unable to provide specifics as to what these services were or where they could be accessed. As reported by the prevention specialist we spoke with, prevention services focus mainly on alcohol-related issues. Also, the extent of these services vary from university to university. For example, one of the universities we collected data from had a recently hired full-time drug and alcohol prevention specialist, whereas the other university had a drug and alcohol specialist who had to devote 65% of her time to sexual assault issues.

OTHER ISSUES RELATED TO DRUG USE AMONG COLLEGE STUDENTS

When asked about students using stimulant drugs such as Ritalin to help them do well in their classes (e.g., stay up late studying or boost memory), participants did not perceive this as a common practice among students. However, participants did report the occasional use of “No Doze” or other caffeine tablets to help students stay alert while studying throughout the night.

CONCERNS & RECOMMENDATIONS

♦ The increased availability and abuse of MDMA (ecstasy) on college campuses should be carefully monitored. Prevention efforts should be focused on populations at risk for abusing this increasingly popular drug.

♦ Increasingly available drugs such as GHB, ketamine and rohypnol, which have the potential to be used as predatory drugs, increase the likelihood of sexual assault. As such, universities should work to educate students about the dangers of these drugs and ways to protect themselves.

♦ Given the qualitative and supportive statistical data on students driving while intoxicated, stronger educational and preventative measures should be implemented to reduce this extremely dangerous behavior among college students.
Exhibit 1: Alcohol-related Arrests & Judicial Affairs Referrals
West-Central Ohio Universities

Note: Combined arrest statistics for the universities we investigated. “Legal Citation” refers to an arrest made by campus police and involving the legal system. Legal Citations can also include non-students (e.g., individuals attending events held on university property). “Judicial Affairs Referral” refers to a student being referred to the university for disciplinary action. University officials (e.g., community advisors) other than Public Safety (campus police) can make Judicial Referrals.
DRUG USE ON COLLEGE CAMPUSES IN OHIO
(PORTAGE COUNTY)
AN OSAM RAPID RESPONSE REPORT
PREPARED FOR
THE OHIO DEPARTMENT OF ALCOHOL AND DRUG ADDICTION SERVICES

June 2000 - January 2001

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and
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Funding for this report provided by the Center for Substance Abuse Treatment under Contract No. 270-97-7033 (State Demand and Needs Assessment: Alcohol and Other Drugs).
Abstract

The information provided by the participants in three focus groups with college students suggests that the use of marijuana and alcohol are the most prevalent drugs. It appears as though marijuana use is considered normative among many, with no associated stigma. Ecstasy is available and is beginning to be used among a wider array of types of students. It is no longer limited to those who go to raves. While lower in prevalence, concern was expressed about the increasing use of prescription painkillers.

Concerns were expressed about alcohol use on campus. Some students believed that too much concern is paid to the use of marijuana and that people should be more concerned about the misuse of alcohol. Students tended to agree that drug use is not limited to certain types of students. Some of the students expressed a need for a change in orientation toward drug use on campus. Treatment alternatives should be provided as an alternative to expulsion.

Qualitative Data Sources

Three focus groups were conducted between December 2, 2000 and December 13, 2000 with a total of 15 participants. All of the focus groups took place at a Midwestern, state university. The focus groups included undergraduate students who were currently enrolled at the university. The data contained in this report was gathered through successful completion of three focus groups that were audio-taped and summarized.

Table 1: Qualitative Data Sources

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The information provided by the participants of the university focus groups is presented in the following report. Participants were recruited using flyers that were posted around campus. Recruited students were diverse in terms of race/ethnicity, gender, participation on athletic teams, and membership in Greek organizations. Participants in the focus groups were asked about their perceptions of price and use patterns of the array of illicit drugs. The goal of this research is to attempt to get a picture of drug use trends from the perspective of students at a Midwestern university.
1. ECSTASY (MDMA)

Students had differing perceptions of the availability of ecstasy on campus. All students agreed that ecstasy was available on campus, but most stated that the availability had stayed the same or decreased in the past six months.

In general, students felt that ecstasy was an acceptable drug on campus. Some students felt that it was not as acceptable as other drugs, but still more acceptable than it has been in the past. Once associated with the “rave crowd,” ecstasy has recently become more of a mainstream drug. All students agreed that ecstasy is used by a wider range of people than it once was. Some stated that ecstasy may appear to be more available now than in the past six months because it has become more mainstream.

Ecstasy usually comes in the form of a tablet. It sells for about $20 to $25 per tablet. One student stated that there is a lot of imitation ecstasy available, and that “real” ecstasy will cost more than imitation; anywhere from $30 to $55 per tablet.

Students stated several reasons for using ecstasy. Ecstasy helps the user to have a good time and increase the ability to socialize easily. Ecstasy allows the user to lower his/her inhibitions and feel good about him/herself. Furthermore, students may use ecstasy to feel popular or to fit in with the crowd. Ecstasy also heightens the user’s senses. Several students stated that ecstasy is often used by individuals or couples to heighten sexual feelings.

Some perceived problems and/or consequences associated with ecstasy include the harm that it does to the body. Some students cited recent television programs that discussed the effects of ecstasy. These students reported that ecstasy has serious effects on the brain of the individual who uses it. Furthermore, students perceived that using alcohol with ecstasy may be fatal. Students also stated that people who use ecstasy to feel good about themselves will often feel worse after the effects of the drug have worn off.

2. METHAMPHETAMINE

Most of the students interviewed did not have knowledge of the availability of methamphetamines on campus. Several stated that they heard that it was available to some extent, but did not know specifically how available it is. The few students who had knowledge about the availability of methamphetamines on campus stated that the availability has been consistent over the last six months. These students also stated that use has probably decreased due to the decreased popularity of the drug in the “raver” crowd and the unacceptable nature of the drug in the general student population.

The students with knowledge about methamphetamines stated that the price is less than that of ecstasy, but they could not specify a price.
Some students were aware of the effects of the drug. These effects include a high probability of addiction, weight loss, and blisters in the nose and mouth.

Two students stated that some students may try methamphetamines, but most who try it do not do it a second time. Reasons for continued use include feeling good, staying up for long periods of time, and affordability of the drug.

3. **GHB (Gamma-hydroxybutyrate)**

Most students stated that they did not have knowledge of the availability or use of GHB on campus. Several students reported that they had never seen or heard of the drug on campus. One student suggested that GHB is not a drug that the average college student would do for fun.

4. **SPECIAL K (Ketamine)**

Most students had never heard of Special K. Most of the students who had heard of it stated that they did not have knowledge of the availability or use of Special K on campus. Several students stated that Special K is not available on campus. One student said that if a student wanted Special K, s/he would have to go to a veterinarian to obtain it. These students also stated that Special K is not a drug that is used by the average college student.

5. **MARIJUANA**

All students agreed that marijuana is readily available on campus. Over the last six months, the availability of marijuana on campus has been increasing. Marijuana is very easy to obtain on campus.

All students stated that you cannot “type” students who use marijuana. Students from all groups use marijuana. Students interviewed agreed that at least fifty percent of the campus population has used marijuana or use marijuana on a regular basis. Several students stated that they believed that the percentage of current users is as high as seventy-five to eighty percent of the student population. Several students perceived the frequency of use to have increased over the last six months. The increased availability and frequency of use of marijuana on campus is attributed to the acceptability of the drug across a wide variety of groups. Many students use marijuana on a regular basis (daily), others use it to be accepted and to be part of the crowd.

The price of marijuana depends on the quality, but students agreed that good quality marijuana sells for about $50 for a 1/8 ounce bag. High quality marijuana is readily available on campus.
Students stated that the availability and frequency of use of marijuana is high on campus because students do not perceive the drug as having the negative effects that are attributed to other drugs such as alcohol. Students perceive marijuana as a natural “from the earth,” calming drug that relieves stress. Students believed that unlike alcohol, marijuana does not make the user violent or lower his/her inhibitions. Furthermore, students perceive marijuana as a non-addictive drug. Some students also stated that marijuana is easier than alcohol for underage students to access. According to most of the students interviewed, the only problem associated with marijuana use is the chance of being arrested for possession.

6. INHALANTS

Most students agreed that inhalants are widely available at any drug store, but that they are not widely used by or perceived as attractive to college students. Most students associated most inhalants with junior high school kids. However, nitrous oxide is one form of inhalant that is more likely to be used by college students. Some students stated that they have seen nitrous oxide balloons at parties, but that tanks of nitrous oxide are very difficult to attain. Consequently, use is rare. Two students stated that use has decreased since last semester. The others did not know.

When nitrous oxide balloons are available, a balloon is generally $3 to $5.

Students with knowledge of nitrous oxide use on campus stated that students use nitrous oxide to get a quick, intense “buzz.” These students stated that people who use nitrous oxide may be typed as those who do drugs more frequently because of the amount of time and effort that go into attaining and using the drug.

Perceived problems associated with the use of inhalants include cognitive impairment, cell damage and an increased risk of death from use.

7. ALCOHOL

All students agreed that alcohol is readily available on campus, even to underage students. Students also perceived a very high frequency of use on campus. Many students stated that the number of students who use alcohol has remained consistent, but that the amount of problem drinking has been increasing in the last six months.

All students agreed that recreational use of alcohol is widely accepted on campus. Several students who live in dormitories stated that the use in dorms is very high, even in “dry” dormitories. Students also stated that the incidence of keg parties has increased over time. A few students disagreed with these statements, stating that alcohol abuse decreases as students get older.
While people from all groups use alcohol, students generally agreed that males on campus as have more problems with alcohol abuse than do females. These problems include binge drinking, getting sick from drinking, having to call the paramedics, increased violent tendencies, increased vandalism, black-outs, DUI's, and decreased school performance. Also, many students claimed that alcohol is a problem drug because it is frequently used in conjunction with other drugs such as marijuana and ecstasy.

8. HALLUCINOGENS

A few students stated that hallucinogens are not readily available on campus. However, most students agreed that hallucinogens (specifically mushrooms and acid) are available on campus. However, they are difficult to attain unless you know someone who sells them. All students agreed that there has been a decrease in the use of mushrooms and acid on campus due to the difficulty in attaining them, the general unacceptability of hallucinogens in the general college population, and the fact that most people who use hallucinogens only use them on an experimental basis.

Our participants indicated that hallucinogens are generally not viewed as acceptable to the general college population. Several students stated that users of hallucinogens are more likely to be younger (i.e., freshman or sophomores) and/or members of groups who use harder drugs.

When acid is available, it generally sells for $5 to $7 a hit (whether in liquid, tab, or paper form). No students had knowledge regarding the price of mushrooms.

Some perceived problems associated with the use of hallucinogens include increased emotional problems deriving from use, the unpredictability of the effects of the drug, and the fact that the drug stays in the system throughout your life. These problems give hallucinogens a bad reputation with students, leading many students to stay away from the drug because they are scared of the possible effects.

9. COCAINE

9.1 Cocaine Hydrochloride

According to all students, powder cocaine is available on campus, although it is not readily available. Several students stated that one needs to know someone in order obtain powder cocaine. In general, students were unaware of changes in trends of use and availability. However, a couple students stated that powder cocaine went out of style for a while but is gaining popularity again.

Students had mixed perceptions about the acceptability of powder cocaine on campus. Some students felt that it was not as highly stigmatized as drugs such as crack cocaine and heroin. However, all students agreed that it was not something that you would do in front of other people unless it was a specific group of cocaine users.
Powder cocaine is perceived as too expensive a drug to be used by college students. A couple of students agreed that an eight ball of powder cocaine (roughly four lines) goes for about $250.

9.2 Crack Cocaine

Most students agreed that crack is available on campus, but they did not know how available. Crack cocaine is thought to be used only within specific groups and is generally highly stigmatized.

10. HEROIN

Some students stated that heroin is also (probably) available on campus, but they were unaware of the amount of availability. Some students stated that they did not have any knowledge about the availability of heroin. Most students agreed that college students in general do not want to use heroin because they are scared of the drug and the drug is highly stigmatized. However, a few students stated that heroin is gaining popularity on campus.

11. DXM (Dextromethorphan)

Most students interviewed did not have knowledge of the use of DXM on campus. A few stated that they knew or had heard of some students abusing Robitussin or Nyquil.

12. PRESCRIPTION MEDICINES

Many students had knowledge of other students using prescription medicines in a recreational manner on campus. The prescription medicines cited include Vicodin, Oxycontin, Dilaudid, Xanax, Codeine, Prozac, and Percocet. Students agreed that prescription drug use is not that common on campus. Prescription drugs are used on an availability basis. A few students stated that you have to wait for someone to get hurt before these drugs become available. These pills are usually not bought, but shared among friends. One student reported that she knew of instances where students would injure themselves (intentionally fall off the top bunk) in order to obtain pain medications.

13. OTHER DRUGS

The only other drug that was mentioned by a student was a “wet.” A wet is a cigarette or marijuana joint dipped in formaldehyde. Problems associated with smoking a wet include long-term psychological problems.
PREVENTION AND COUNSELING SERVICES

Are there drug treatment and counseling services available to college students?

All students agreed that there are drug treatment and counseling services available to college students. Students stated knowledge of psychological counseling services on campus, the health center on campus, the athletic department on campus (available to athletes), as well as counseling services not associated with the university that are available in town.

Are the available services adequate?

Most students agreed that the available services are adequate. Several students stated that they liked the confidential nature of the services as well as the fact that the services are free. Several students did criticize the fact that the services mainly focus on alcohol and marijuana problems, but some did recognize that referral services are often available. In addition, several students stated that students with drug problems should not be kicked out of school. Rather, they should be sent to drug counseling.

Are there drug prevention services available to college students?

Most students seemed apathetic about drug prevention services. Most agreed that drug prevention services are ineffective because most drugs are socially acceptable and because these services do not work if people do not take advantage of them. Furthermore, several students stated that some preventative campaigns may make students want to do the drugs more or may sound silly to students, therefore reducing their effectiveness.

Is the Internet used by college students to attain drug information, to attain drug recipes, or to attain drugs?

While some students stated that the Internet is not used to attain information regarding drugs, most students agreed that the Internet is used to attain information on drugs and their recipes. However, all agreed that students do not use the Internet to buy drugs.

CONCERNS AND RECOMMENDATIONS

In general, the students interviewed agreed that alcohol is a major problem on campus. Binge drinking is common. Among the students in our focus groups, the belief is that drinking is not seen as problematic by university administrators. In addition to the heavy drinking that takes place off campus, many students report a lot of drinking on campus as well. Even in the dorms that are designated as “wellness” dorms, much
drinking takes place. All participants agree that more attention needs to be paid to this issue. Finally, in terms of alcohol, most students agreed that alcohol is more of a problem among younger, underclass students.

Many of the students made the claim that users of drugs are not easily characterized. For the most part, the students in the focus groups were unable to characterize the users of any of the drugs discussed. Even drugs that used to be considered “raver” drugs are spreading to other populations of students. Many of the students expressed the opinion that even good students and other students who might not be considered to be drug users are as likely to be users as those who fit the traditional stereotype.

There is a reported widespread use of marijuana. Marijuana is perceived to be highly acceptable. Some of the students felt that this was a problem that needed to be taken more seriously because marijuana leads to the use of other drugs and/or because its use has long-term negative consequences. Others strongly believed that too much concern is paid to the use of marijuana and that people should be more concerned about the misuse of alcohol.

Some of the students expressed a need for a change in orientation toward drug use on campus. Treatment alternatives should be provided as an alternative to expulsion.
DRUG USE ON COLLEGE CAMPUSES IN OHIO

MAHONING COUNTY, OHIO

AN OSAM RAPID RESPONSE REPORT
PREPARED FOR
THE OHIO DEPARTMENT OF ALCOHOL AND DRUG ADDICTION SERVICES

June 2000 - January 2001

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and
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Funding for this report provided by the Center for Substance Abuse Treatment under Contract No. 270-97-7033 (State Demand and Needs Assessment: Alcohol and Other Drugs).
Abstract

Qualitative data gathered from three focus groups held on December 11 and December 14, 2000, provided the majority of the information expressed in this report. All three focus groups consisted of undergraduate college students from a state university in Northeastern Ohio. The students were divided into three groups: resident students, commuter students and students who participate in Greek campus life.

It appears from the information gathered from these students that alcohol continues to be the number one drug problem on the college campus especially among underage, first and second year students. The ability to obtain alcohol, even if underage, is not a problem. Underage students are served alcohol in many bars especially those nearest the campus. Marijuana use is on the increase, with first and second year students having the highest usage. It is the second favorite drug of college students and can be obtained anywhere, even on the campus. Most students don’t see either alcohol or marijuana as a problem. The students were not as familiar with the various “Club Drugs” such as Ecstasy, GHB, Rohypnol and Ketamine. Ecstasy was the drug that the students were most familiar with and they stated that it is readily available especially at bars/clubs. There is an increased usage of Ecstasy among students and it is more accepted. Neither form of cocaine, which is a hidden drug, is high on the list. However, those who use it know where to obtain it. The street forms of Methamphetamine are not in great demand, but legal forms such as Vivarin are often used during finals. Females use diet pills quite often. There is some use of LSD but it is not as accepted. The general college population fears heroin and Inhalants are seen as a high school/junior high drug. Prescription drugs, in particular pain pills, are quite well accepted and often shared by friends. Tranquilizers are also used but not to the same extent. Prescription drugs are not seen as “using drugs.” Both male and female athletes use steroids but few other college students use them. Those who take steroids know where to obtain them.

Table 1: Qualitative Data Sources.

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Recruitment Procedure: These students were recruited by the Assistant Director of Student Activities.

December 11, 2000: College Students

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Recruitment Procedure: These students were recruited by other students and the Housing Coordinators.

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Recruitment Procedure: These students were recruited by the Assistant Director of Student Activities and other students.
INTRODUCTION

From reports received from the Higher Education Center for Alcohol and Other Drug Prevention (HEC) 44% of college students “binge drink,” that is having five or more drinks at a sitting. The CORE Institute Alcohol/Other Drug Survey conducted on this Northeastern Ohio University campus in 1999 reported that 45% of the student population binge drink compared to 42% reported in the 1997 CORE Survey results. The 1999 survey also reported that 69% of this university population drinks alcohol and 67% of those who drink are underage.

In relation to other drug use the HEC reported that marijuana has become a major problem on college campuses across the nation, second only to alcohol. It further reported an increase in the use of “Club Drugs,” Ecstasy and MDMA, especially at “Raves” (all night dance parties). Rohypnol and GHB are called the “Date Rape” drugs. These are seen on the rise with GHB becoming more popular for personal use. Reports from the students who took part in this study along with the results of the CORE Survey, indicate that the use of marijuana is definitely on the rise from 32% according to the 1997 CORE Survey to 38% in 1999. The use of the “Club Drugs” has risen from 2% in the 1997 survey to 10% in the 1999 survey. Amphetamine use has also increased slightly from 9% in 1997 to 10.5% in 1999 as indicated by the CORE Survey.

DRUG TRENDS

MARIJUANA:

1. This drug is highly available all around campus. It can be purchased on campus and in the residence halls. It is easy to obtain and some college students deal in it. It is more available this year.
2. Marijuana is very accepted on campus. The majority of students see nothing wrong with smoking it. Students perceive it as less dangerous than alcohol and some see it in the same class as alcohol.
3. The usage of marijuana is on the rise and their is an increase this year perhaps to the availability of the drug. There are more daily users and the first and second year students smoke it more than the upper-class students.
4. There is no special characteristic of users. Some of the students still believe marijuana smokers are not very interested in school. Some students believe the drug helps them with studying, playing sports etc. The use is so accepted that other students don’t look down on or have any special characteristics for marijuana smokers.
5. It is a problem but not seen as a problem.
6. Marijuana is very affordable for college students, about $30 for an 1/8-oz. bag.

ALCOHOL:

1. Alcohol is available anywhere. It doesn’t matter if you are of legal age or not.
Many stores sell it to underage students and don’t bother to check identification. Older students buy it for underage students. Many bars serve to underage students. By the time a student is 21 years of age the big deal is to be able to purchase it without any worry.

2. The students believe that 90% of students drink but less than half drink to get drunk. Students think nothing of drinking between classes or at lunchtime. It is more acceptable to drink than to not drink. Partying is equated with heavy drinking.

3. Underage students drink much more and there is more drinking by this group than before. Females like fruity drinks like wine coolers, the males prefer beer but hard liquor is definitely on the rise by both sexes.

4. Since drinking is so accepted by students even those who drink heavily are not stereotyped. Heavy users are believed to skip class more and to be the ones who “flunk out.”

5. Drinking is a big problem. Students drink with the intention of getting drunk and to escape their problems. It is a problem because so many students think you are suppose to drink or that everyone does it.

6. Beer is very cheap. You can get whatever you want because there are so many different brands and prices. Many bars have specials on different nights and cater to the college students. Students spend about $20 to $60 a week on alcohol. Males spend more.

**ECSTASY/MDMA:**

1. This drug is pretty readily available. It is more available in bars.
2. Some students think it is cool while others do not. It is seen as the person’s choice so it is accepted.
3. There is an increased usage of this drug. Those who use it are more open about it.
4. There is no definite stereotype of this drug user. There are those who use it that no one would expect to use it. Some students believe that users of this drug are those who get poor grades and don’t care about school.
5. Some students believe it is a problem others do not.
6. Responses differed on price from $20 to $30 a tablet to only $10 a tablet.

**GHB/ROHYPNOL:**

1. The students had little knowledge of these drugs and were unaware of their use on campus.
2. They are accepted by those who use them but others don’t accept them at all.
3. There is more usage in clubs but individual use was unknown.
4. Unsure of the characteristics of those who use the drug themselves but anyone who uses these drugs on another is deemed a “rotten” person.
5. Some of the students believed them to be a problem but others had no
knowledge.
6. Their cost was unknown.

KETAMINE (SPECIAL K):

1. The students had little knowledge of the availability of this drug.
2. Some of the students believed it was not accepted, others did not know and some heard it was sometimes used along with Ecstasy.
3. Most of the students believed there was little use of this drug.
4. The students had no idea of characteristics of users.
5. The students weren't aware of much usage so the feeling was that it was not a problem.
6. The students had no idea of the cost of this drug.

METHAMPHETAMINES:

*Street drug:*

1. Little availability of this type.
2. This form is not very accepted.
3. The students were unsure of the use.
4. There was some perception that users would not be in college or wouldn't stay very long.
5. The students had no idea.
6. There was no knowledge of the cost.

*Over-the-counter:*

1. These forms are very accessible - Vivarin/No Dose/Diet Pills. Vivarin was available this year in the free “College Survival Packs.”
2. Athletes were seen as being the heavier users. Females use more diet pills.
3. There is a greater use of these drugs during midterms and finals week.
4. There were no special characteristics believed of users.
5. Some of the students believed they are a problem and others did not know.
6. Seen as affordable for college students.

COCAINE:

*Hydrochloride:*

1. “If you really want it you would know where to get it.” Some students believed it was hard to get.
2. Cocaine is not very accepted by college students.
3. This is a “hidden” drug, it is not used openly.
4. This drug was seen as being used by middle or more upper-class individuals.
5. The students were not aware of much use so they did not see it as a problem.
6. This drug is perceived by students to be expensive.

\textit{Crack:}

1. It is not available on campus and there was no knowledge where to get it.
2. This drug was seen as not being accepted.
3. Crack is seen as being “scary” and there is no use on campus. The students didn’t know any other students who use it.
4. The belief is that Crack is used by a lower class of people and minorities.
5. The students were unsure, they didn't know any users of this drug.
6. The cost was unknown.

\textbf{HALUCINOGENS:}

1. Some of the students were aware of LSD and mushrooms “shrooms.” Some of the students believed that LSD was more available and mushrooms harder to get. Other students had no idea.
2. These drugs are not as accepted. They are not used openly.
3. The students believed there was little use of LSD. Some use of mushrooms.
4. There weren’t any special characteristics of users of these drugs.
5. Since there was little knowledge of usage of these drugs they were not seen as a problem.
6. Many students were unsure of the cost of these drugs, there was a mention of $20 a “hit.”

\textbf{HEROIN:}

1. The students didn’t believe the drug was available to college students.
2. There was a fear of this drug among students.
3. The students believed there was little use of heroin by their peers.
4. The students had no special characteristics for heroin users.
5. The students were not aware of much use so it was not seen as a problem.
6. The students believed that the drug was expensive.

\textbf{INHALANTS:}

1. There appears to be little use of this class of drugs by the students save for some nitrous oxide at parties.
2. There is some use at parties but this class of drugs is seen as being used by high school students.
3. The students felt there was little use.
4. The students were not aware of any special characteristics of inhalant users.
5. The students didn’t believe there was a problem with inhalants among their peers.
6. The students knew various forms of inhalants and knew that many were inexpensive.

**DXM:**

The students were not aware of this drug on campus. In general there was little knowledge of this drug in any of the question areas.

**PRESCRIPTION DRUGS:**

**Pain Pills:**

1. These types of drugs are often obtained from friends and are often passed out to friends. They are seen as prevalent on campus.
2. These drugs are accepted. A common statement made by students is, “I need a Vicodin.” These drugs are not viewed as “using drugs.” They are often mixed with alcohol to get a faster high.
3. Some of the students believed these drugs are on the increase and others felt it is the same.
4. The students didn’t know if these drugs are a problem.
5. Some students stated that a tablet was $5 others didn’t know.

**Tranquilizers:**

1. Availability was unknown.
2. These drugs are not viewed as “using drugs.”
3. Any increase or decrease of this drug was unknown.
4. The students didn’t have any stereotype for users.
5. The students had no idea of cost.

**OTHER DRUGS:**

**Steroids:**

1. The students stated that if you want these drugs you know where to get them.
2. Both male and female athletes use these and they are accepted. The athletes state that they know how to get around their drug tests.
3. There is a perception that steroids are on the rise among athletes.
4. The students believed it is a problem but the users don’t see anything wrong with the drug.
5. The students had no idea of the cost.
Ritalin:
Some of the students had heard that others were using this drug but most had no knowledge about it.

PREVENTION & COUNSELING SERVICES

Counseling:

The students were aware of the University Counseling Center, the Catholic Campus Ministry, and the Student Health Services as places to obtain counseling and help for alcohol/other drug use. They were aware of the First Year Student Center as more of a referral source but that many first year students would talk to their Peer Assistants for help. The students' perceptions of the services were basically correct.

Prevention:

The students who participated in this study stated that most students wouldn't go to prevention programs. Even if a student has had a bad experience with alcohol or other drugs it doesn't seem to have an effect on them and they won't go for any educational programs. The students discussed the Alcohol 101 Program and the DUI Eyes. They knew that the Greek System has put on programs for National Collegiate Alcohol Awareness Week.

OTHER ISSUES RELATED TO ALCOHOL & DRUG USE AMONG COLLEGE STUDENTS:

The students reported that they were not aware of their peers using the Internet to purchase drugs but did know that some students had purchased drug paraphernalia over the Internet.

The students discussed the reasons why their peers used alcohol/other drugs. They listed the following reasons: to fit in, to make new friends, out of boredom, out of curiosity, for fun, to feel good or feel different, due to freedom of not living at home, as a stress reliever, to escape from problems, because they just want to get high, and because it is their last chance to be free and have fun before the responsibility of a job and family.

The concept of 21 shots on students' 21st birthday was mentioned. Some of the students had heard of this practice. One of the students stated she had tried that but couldn't get past 6 shots. Other students knew someone who had tried this.
CONCERNS & RECOMMENDATIONS:

The students stated that a major concern of their peers is about getting home safely after a night of drinking. They fear getting a DUI or something else happening to them because they are drunk or in a blackout. The students believed that some students also have concerns for their friends who do drink too much or who are using drugs and they don't know what they can do for them.

Several recommendations were verbalized by the students. They stated that the University Counseling Center should be moved to a more available location for students, that many students do not know about its existence and that there is a stigma about going to counseling that needs to be changed.

Better education needs to be provided. Many students know a lot about alcohol and other drugs by the time they get to college but they don’t know the true facts or the reality of these drugs. The students recommended that Peer Education Programs work best. That the information needs to be presented in an interactive manner and not in such a negative manner. More information needs to be presented at Orientation Programs. Posters need to be less negative and biased, that these types turn the students off. Posters need to give clear information. The definition of “binge drinking” also needs to be clarified, the current definition turns students off and they pay no attention to the dangers of abusive drinking.

Finally, the students stated that the legal aspects and factors need to be clearly communicated to the students. The disciplinary issues on campus or with his/her specific academic program needs to be clear, as well as what can happen to a student when he/she applies for a job or what professions will not hire someone if he/she has a drug arrest or had problems drinking and driving. Also the effects on the rest of his/her education if they get into trouble even on campus.