EXCESSIVE DRINKING ON AMERICA’S COLLEGE CAMPUSES

A Report from Senator Joseph R. Biden, Jr.
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Summary

- Binge drinking, or heavy episodic drinking, is higher education’s dirty little secret. It is arguably the number one public health problem facing American college students. Despite considerable recent effort, rates of college student binge drinking haven’t changed much.

- Most college students don’t binge, though a significant minority do. Binge drinking, usually defined as 5 drinks or more in a row for men, and 4 or more for women, is widespread. Two in five current students binge drink. One in five has binged three or more times in the past two weeks, and is a “frequent binge drinker.”

- Binge drinking is neither a harmless rite of passage, nor is it inevitable. Among the most risky things about binge drinking is how little we know about the worst outcomes, such as rape, suicide, and other deaths.

- Binge drinkers run much higher risks of alcohol-related problems than their nonbinging peers, ranging from getting behind in academic work to getting into trouble with campus or community police.

- Frequent binge drinkers are at particularly high risk.

- Nonbinging students on high-binge campuses are much more likely to experience “secondhand binge effects,” reporting a higher risk of a range of problems from having their study or sleep interrupted to unwanted sexual advances.

- Raising awareness is critical, and this report provides a comprehensive summary of what’s known about binge drinking and how it can be addressed.

- The Biden Binge Drinking Resolution urges colleges and universities to adopt broad environmental changes to address this issue. This report explains how these and other responses can help to lower risk. While there is no “magic bullet” that will prevent binge drinking, there are a number of promising approaches summarized in this report.
I. Binge Drinking: Higher Education’s Dirty Little Secret

Binge drinking is higher education’s dirty little secret\textsuperscript{1,2} It contributes to the saddest parts of college life, including violence, sexual assault and date rape, and even death. Go to any campus and you’ll probably hear many stories about alcohol-related problems. But we have to go beyond anecdotes to get a more comprehensive picture of the problem.

The headlines tell the story:

- At one of the finest liberal arts institutions in the country, drunken students pour out of a sports bar well after midnight. A fight in a parking lot leaves one student dying of head injuries. The police call the incident a homicide.
- At one of the finest technological universities, a brilliant freshman engineering student dies after a long night of heavy drinking.
- In March 2000, Harvard researchers report that frequent binge drinking has actually increased slightly, despite efforts to curb such behavior at hundreds of institutions.
- In June 2000, news stories announce that alcohol arrests at American colleges jumped 24 percent, the biggest increase in seven years.

But the headlines tell only a part of the story. The headlines miss some of the worst about college binge drinking. Some college deaths associated with binge drinking don’t make the headlines, sometimes because the colleges want to spare the family further embarrassment or dodge the bullet of bad press. Jeremy, a sophomore at a small suburban college, comes home to his off-campus apartment after celebrating his 20\textsuperscript{th} birthday with a friend. Friends find his body later in the morning, with his death attributed to drugs and alcohol. Other than a brief story in the college newspaper, area

\textsuperscript{1} I wish to thank the many people with whom my staff and I consulted during the preparation of this report. My particular thanks to George W. Dowdall, a professor of sociology at St. Joseph’s University who worked in my office on a Congressional Fellowship funded by the Sydney S. Spivack Program in Applied Social Research and Social Policy of the American Sociological Association.\textsuperscript{2} Although this report uses the phrase, “binge drinking,” some critics object to the phrase. Other terms for the same phenomenon are also in use: “heavy episodic drinking,” “irresponsible drinking,” and “high-risk drinking.”
newspapers do not cover the death. This may be the typical form of college alcohol-related death, and so the extent of this most serious part of the college binge drinking problem remains at present a “dirty little secret.”

Much of the cost of binge drinking is paid in problems that are far more common than death. One such consequence of binge drinking is violence against women, which has been one of my top concerns as a Senator. Among college women, violence includes physical abuse, dating violence, rape, and sexual intercourse without consent. One out of ten women who are frequent binge drinkers have experienced nonconsensual sex since the beginning of the school year. But the media rarely report on these incidents. These “dirty little secrets” are among the most serious and widespread consequences of binge drinking.

There are other “secrets.” Binge drinking is associated with higher risk of having ideas about suicide. Students who binge have lower grades. And alcohol abuse in college casts a long shadow: People who abused alcohol in college have a significantly higher risk of alcohol-related problems in middle age. But few of these problems make headlines.

To be fair, the headlines also miss some of the good news: most college students don’t binge drink, and the percentage of those abstaining from alcohol has actually increased during the late 1990s. Moreover, many colleges are working hard to address the problem of alcohol abuse, including much energetic and innovative work going on at the University of Delaware. There are many resources available for students, parents, and colleges, and more on the way.

This comprehensive report on college student binge drinking goes beyond anecdotes to ask and answer the following questions:

- What is binge drinking?
- How widespread is binge drinking?
- What consequences does binge drinking have for the individual drinker and for those nonbinging students in the immediate environment?

• What can be done to address binge drinking?
• What policy changes might be considered?

This report discusses an issue most people experience in very personal terms by looking further upstream at some of the broader factors that shape such personal experience. Where disagreements exist, this report tries to present both sides fairly, so that the reader has the opportunity to reach her or his own conclusion. This report also addresses questions of public policy, in contrast to most previous discussions of the topic which tended to dwell only on the individual student and not the entire social environment.

This report focuses on college students. Binge drinking is also a problem among those who don’t go to college. However, rates of binge drinking are higher among college students than their noncollege peers.6 This may reflect the unique environment of the contemporary American campus or the different characteristics of those who go to college and those who don’t. Whatever the reason, prevention and intervention programs directed at college students are different than those directed at their noncollege peers. Both the Biden Binge Drinking Initiative and this report focus on college students.

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II. What is Binge Drinking?

Binge drinking is a particular form of alcohol abuse. It is generally understood by most people to mean too much alcohol in too little time, often resulting in inebriation. More precise definitions are used by researchers. Recently, several national studies and authorities, including the Harvard School of Public Health College Alcohol Study (CAS), have defined binge drinking as drinking five or more drinks "in a row." The Harvard study further refines this definition as five drinks or more in a row for men and four drinks or more in a row for women. This definition, which equalizes the risk of alcohol-related problems between the sexes. This is sometimes referred to as the "5/4" definition.

Some researchers have taken issue with this definition. One objection is that the definition is too broad and inclusive, in effect making those who engage in moderate drinking appear immoderate. But scientists from the National Institute on Alcohol Abuse and Alcoholism define moderate drinking as only one or two drinks at a sitting, making this “5/4” definition well above moderate levels. ("Light" drinking is not defined.) Another objection is the use of the phrase “in a row,” rather than a more precise statement of the time over which alcohol is consumed. Still others claim that the weight or body mass of an individual has to be factored into the definition; critics tend not to provide detailed specifications for these measures. Some critics claim that measured blood alcohol concentrations of students returning to their dorms at night seem lower than might be expected from survey results, though other research indicates that drug and alcohol self-reports are reliable and valid. Variations on the “five drink” or “5/4” definitions of binge drinking are the most commonly used in research studies.

III. How Widespread is Binge Drinking?

With more than 14 million college students, establishing how widespread binge drinking is requires large national samples.\(^\text{13}\) Fortunately, the three largest efforts--the Harvard CAS, the CORE, and the Monitoring the Future study--have produced remarkably similar findings, even though their methodologies differ.\(^\text{14}\) To simplify presentation, this report will offer statistics and graphs from the Harvard study, unless otherwise noted.

In brief, the Harvard researchers took representative national samples of four-year colleges and universities in the Spring of 1993, 1997, and 1999, asking randomly-selected full-time students to complete self-administered mailed questionnaires.\(^\text{15}\) More than 15,000 students mailed back the questionnaires in each of the three survey years.

Using the "5/4" definition of binge drinking, the Harvard study reported that two in five college students were current binge drinkers, with one in five meeting the definition

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of "frequent binge drinkers" by having three or more episodes of binge drinking in the
two weeks before completing the survey.

There was a slight increase over time in the percentage of students who were frequent binge drinkers and in the percentage who abstained from alcohol completely, but otherwise little change was seen in the period from 1993 to 1999.

**Binge drinking rates at different colleges**

Rates of binge drinking tend to vary from zero to over 70 percent of students across the nation’s colleges.

Binge drinking rates vary extensively at the colleges in the study. While one percent of the students were binge drinkers at the lowest rate school in each survey, 70% were binge drinkers at the highest in 1993 (75% in 1997).\(^{16}\) When the colleges in the 1993 survey were stratified according to binging rate, it was noted that several characteristics impacted on the rate of binge drinking, including location, region, proportion of residential students, and racial composition. For example, women who attend women's colleges have lower rates of binge drinking than women who attend co-ed colleges.\(^{17}\) Other factors, such as size of enrollment or whether the college was public or private, were not related to the binging rate. Individual binge drinking is less likely if there are no alcohol outlets within one mile of campus or if the institution prohibits alcohol use for all persons (even those over 21) on campus.

The variation in rates of binge drinking across American colleges is striking. Just like there is no typical American college student, so there is no typical American college. No one size fits all, whether we talk about individual students or particular colleges. This heterogeneity has very important implications with regard to prevention, intervention, and treatment of binge drinking.

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Why do students binge drink?

The National Institute on Alcohol Abuse and Alcoholism, the federal agency responsible for research about alcohol abuse, has asked a distinguished panel of college presidents, researchers, and prevention experts to examine college binge drinking; their report is expected to be published in 2002.18

Answering the question of why students binge drink requires an understanding of alcohol use and abuse in the broader society.19 Most Americans use alcohol, and the age of first use is a particularly critical factor in predicting the likelihood of dependency or abuse. In middle and late adolescence, alcohol use increases partly as a function of new freedoms and but decreases as new responsibilities are assumed.20 Young people also may be affected by the advertising of alcohol beverages and their appearance in the mass media.21

College students abuse alcohol at higher rates than their noncollege-going peers, though the reason for this difference is not entirely clear.22 Some of the gap between college and noncollege alcohol use patterns probably reflects the demographic differences between these two populations, with college-goers having more of those subpopulations likely to abuse alcohol at this age.23 Some of the answer reflects the particular environment that many students live in, with large numbers of underage

18 Staff communication with NIAAA scientists and administrators.
people in close proximity both to legal age alcohol users, and to bars and other alcohol outlets that vigorously promote heavy alcohol consumption.24 Differences in rates of binge drinking among colleges may reflect the large variation in these environmental factors. Much of the current thinking about preventing binge drinking begins with the assumption that changing the broad social environment is necessary to lower binge drinking rates.

The expectation that college will involve alcohol consumption, combined with easy availability, access, and low cost, make alcohol use by a majority of students and alcohol abuse by a substantial minority likely. But “likely” does not have to mean “inevitable,” and the more we know about why students drink or abuse alcohol, the more we may be able to change the current picture.

A large sample of college students responding to a questionnaire from the Core Institute25 said they thought alcohol had the following effects (percentage agreeing in parentheses):

- Breaks the ice (70%)
- Enhances social activity (69%)
- Gives people something to do (66%)
- Gives people something to talk about (59%)
- Allows people to have more fun (55%)
- Facilitates a connection with peers (54%)
- Facilitates male bonding (53%)
- Facilitates sexual opportunities (49%)
- Facilitates female bonding (41%)
- Makes it easier to deal with stress (35%)
- Makes women sexier (21%)
- Makes food taste better (14%)
- Makes men sexier (12%)
- Makes me sexier (12%)

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These attitudes probably reflect various external and internal factors, including previous positive experience with alcohol, sentiments held by many Americans, as well as the culture transmitted to newcomers on many college campuses. These inferences probably also reflect the impact of alcohol advertising on this age group, even if the ads are targeted at slightly older adults. Given such positive attitudes about alcohol, along with ease of access to alcohol, widespread use isn't surprising. 

IV. What Are the Consequences of Binge Drinking?

Consequences for the individual drinker

The consequences of binge drinking vary greatly from person to person. This variation poses some of the greatest challenges for prevention programs, since messages about the consequences of binge drinking rarely capture this diversity of response. Simply reciting statistics about overall harm of alcohol abuse does little to convince an individual that his/her personal drinking habits are dangerous.

For some students, binge drinking is not associated with any immediate negative outcomes. But in general, however, binge drinking raises the risk of alcohol-related problems, even if the "5/4" definition of binge drinking is employed. Bingers are more likely to get behind in school work, get into trouble with campus or community police, have unprotected or unplanned sex, or face other alcohol-related problems than nonbingers. Occasional binge drinkers have a higher risk of these problems than do nonbinging drinkers, and frequent binge drinkers have the highest risk of all.

Drinking styles of students

Many students have adopted a drinking style that centers on frequent and/or intense alcohol consumption. When the Harvard researchers asked about their activities during the month before the survey, a large minority of students told them they binged, and often drank with the intention of getting drunk. Depending on the survey year, between 1 in 3 and 1 in 5 students said they had been drunk three or more times in the previous month, and a slightly smaller percentage drank on ten or more days over the course of the month. Men were somewhat more likely than women to respond positively to these items, though the gap was not great.
Frequent binge drinkers are 7-10 times more likely to report alcohol-related problems than nonbinging drinkers.

There is a strong, positive relationship between the frequency of binge drinking and alcohol-related health and other problems reported by students. With regard to the more serious alcohol-related problems, the frequent binge drinkers were seven to ten times more likely than the nonbinge drinkers to get into trouble with campus police, damage property or get injured, not use protection when having sex, or engage in unplanned sexual activity. Men and women report similar incidence for most of the problems. However, among the frequent binge drinkers, 35 percent of the men and 9 percent of the women report damaging property and 16 percent of the men and 6 percent of the women report getting into trouble with the campus police.27

Drinking and driving

There is a positive relationship between binge drinking and driving under the influence of alcohol, and a large proportion of the student population reported driving after drinking alcohol. Binge drinkers reported significantly higher frequencies of dangerous driving behaviors than non-binge drinkers. The 1999 Harvard study reported driving after drinking by one in five nonbinging students, two in five of the occasional binge drinkers, and almost three in five of the frequent binge drinkers.\(^{28}\)

Number of safety or health problems

About one-half of the frequent binge drinkers (47 percent in 1993 and 52 percent in 1997) reported having experienced, since the beginning of the school year, five or more of a possible 12 alcohol-related problems (omitting hangover and including driving after drinking), compared to 14 percent of infrequent binge drinkers and 3 percent of non-binge drinkers. Frequent binge drinkers were 20 (1997) to 25 (1993) times more likely than nonbinge drinkers to experience five or more of these problems.\(^{29}\)

Consequences for others--"secondhand binge effects"

The Harvard researchers examined the percentage of nonbinging students who experienced "secondary binge effects," which include eight types of problems due to other students' drinking. These secondary effects range from being insulted or humiliated, to having studying or sleep interrupted to being a victim of sexual assault. Students at middle and high binge level schools were more likely than students at lower

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Nonbinging students on high-binge campuses are three times more likely to experience secondhand binge effects than those at low-binge campuses.

Almost a third of the Harvard study’s colleges have a majority of students who binge. Not only do these binge drinkers put themselves at risk, they also create problems for their non-binging fellow students. Nonbinging students on high-binge campuses were up to three times as likely to report being bothered by the drinking-related behaviors of other students than non-binging students at lower-binge campuses. These problems include being pushed, hit or assaulted, and experiencing an unwanted sexual advance.31

Alcohol dependence and alcoholism

These immediate consequences of binge drinking for the individual drinker and those around him or her are not the only adverse effects of such activity, however. Some binge drinkers—and many frequent binge drinkers—appear to match the clinical definitions of having a problem with alcohol, and thus should be receiving treatment.32 But many of these students deny they have a problem, and haven’t sought treatment. Moreover, there is some evidence that abusing alcohol in college increases the risk of long-term problems with alcohol.33

Campus crime

Like other Americans, college students are at risk of crime victimization, ranging from larceny to violent events such as rape. College students studying or living on a college campus are exposed to a unique set of both risk and protective factors. Arguably highest among the risks is the greater use of alcohol and other drugs on or near the campus than in the broader society.34

Thus far, efforts to understand and control campus crime have not thoroughly examined alcohol as a factor. It is well recognized that alcohol plays an important role in crime in the broader society.35 Alcohol also appears to be involved in much, if not most, crime on campus, although campus crime is difficult to measure at present.36,37

Alcohol abuse and drug use are particularly strategic issues for those concerned with college crime for two reasons. First, drugs are illegal for all students and alcohol is illegal for most undergraduates. Consequently, use and abuse of alcohol and drugs are of immediate importance to campus police and other college administrative personnel; they place substance use high--if not at the top--of the list of problems with which they

must deal. Second, alcohol and drugs are believed to increase the risk of criminal victimization on campus, as they do in the broader society.

Published reports of such phenomena as "date rape" present widely different and even contradictory pictures of whether college students are at very low or very high risk of victimization. Moreover, the role of alcohol and other drug use in victimization of all forms is even more unclear, and evidence of an effect of alcohol on college crime is mixed.

Bonnie Fisher, a distinguished criminologist, reports on a large survey of over three thousand college students and crime victimization. Rape and sexual assault victimization rates were higher on campus than off campus, and both rates were somewhat higher than for a comparable age group in the general population. The main predictor of being a victim of violent crime was participating in a lifestyle with high levels of partying on campus at night as well as taking recreational drugs regularly. However, alcohol use (defined by Fisher as the likelihood of regularly drinking three or more alcoholic beverages during the year) was not a statistically significant predictor of experiencing a violent victimization or a theft victimization.

One out of ten college women who are current frequent binge drinkers reported having involuntary sexual intercourse since the beginning of the school year, according to the recent Harvard study.

A report from The National Center on Addiction and Substance Abuse at Columbia University summarizes evidence about substance abuse and sex. While its precise causal role remains unclear, alcohol is a powerful presence in a wide variety of youth sexual issues.

Fisher and Cullen have also conducted a large national survey of sexual

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39 A systematic review of this issue will be published as part of a report on college drinking to be issued by the National Institute on Alcohol Abuse and Alcoholism.
42 National Center on Addiction and Substance Abuse (CASA) at Columbia University. (1999).
victimization among college women. During a six-month reference period, 1.7 percent of the respondents reported experiencing a completed rape, and 1.1 percent an attempted rape. Four factors were significant predictors of these and other sexual victimizations: frequently drinking enough alcohol to get drunk, being single, having already experienced a sexual victimization before the beginning of the current school year, and living on campus (for on-campus victimization). This evidence supports the conclusion that alcohol abuse by college women raises the risk of sexual victimization.

It is crucial not to “blame the victim,” since rape is a violent crime, but it is also important to point out how the victim may unwittingly raise the risk of victimization through substance use.

Crimes associated with alcohol and drug use are arguably the most prevalent crimes on college campuses today. Alcohol use and abuse is by far the most prevalent form of substance use by college students. The Harvard data show that one in every four college students is a current year user of marijuana. Subgroups of students such as intercollegiate athletes are at higher risk of both alcohol abuse and drug use.

Alcohol plays a central role in many college populations. On college campuses as in the broader society, heavy episodic or binge drinking poses a danger of serious safety, health and other consequences for both the alcohol abuser and others in the immediate environment. As such it poses a major challenge to the criminal justice system. A national report that reviewed published studies concluded that alcohol was involved in two-thirds of college student suicides, in 90% of campus rapes and 95% of violent crime on campus. These findings support the view of college presidents that alcohol abuse is

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47 National Center on Addiction and Substance Abuse (CASA) at Columbia University. (1994).
the number one problem on campus. Alcohol abuse contributes to almost half of motor vehicle fatalities, the most important cause of death among young Americans.

Illicit drug use

Illicit drugs and their prevalence of use vary greatly within and among campuses. To clarify the problem, it helps to confine the analysis to the 83 percent of the students who were under age 24, since age plays a powerful role in shaping patterns of drug use. The Harvard researchers reported that the prevalence of use was highest for marijuana (24.8%), followed by psychedelic drugs other than LSD (4.7%); LSD (4.4%); amphetamines (3.6%); opiates (3.2%); tranquilizers (1.9%); cocaine (1.9%); barbiturates (1.3%); crack (0.4%); and heroin (0.1%). Aside from marijuana, college students primarily use alcohol as their substance of choice, in contrast to other populations.

Binge drinking is itself a risk factor for other substance use and abuse, and vice versa. In particular, students who binge drink are much more likely to use cigarettes and marijuana. In fact, the use of several substances (including alcohol) by college students is widespread and intertwined with binge drinking.

Less well understood is the abuse of licit drugs obtained through prescription and then abused by the individual student or others in her or his environment. Recent reports of student deaths involving the mixture of several licit and illicit drugs and alcohol are of concern.

Binge drinking and fatalities of college students

The stunning headlines about alcohol-related deaths at institutions across the country make this an issue of intense public interest. However, the enumeration of several dozen deaths each year in newspaper headlines hardly constitutes a definitive assessment of the extent of the problem. This glaring gap in data collection reflects the fact that American death certificates do not routinely report whether the deceased was a college student. Attention usually focuses on student deaths that occur on campus during the academic year, with less known about other deaths.

Alcohol abuse raises the risk of suicide among young people, and alcohol is involved in two-thirds of college student suicides. The increase in the minimum legal drinking age during the 1980s is estimated to have saved 125 lives from suicide per year among youths aged 18 to 20 years.\footnote{Birckmayer, J. & Hemenway, D. (1999).}

Costs of college binge drinking and underage drinking

From the facts above, it is obvious that the costs of college binge drinking must be substantial, but no precise estimates exist. However, estimates are available of the related problem of the costs of underage drinking. Note that underage drinking includes a far larger population than college binge drinking; the large number of Americans of traditional college age who don’t go to college as well as those of high school age or younger are included in the former but not the latter.

Far from being trivial, the annual overall costs of alcohol use by those under 21 is estimated at over $58 billion dollars. One estimate, prepared for the U. S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention, used current health and criminal justice data to arrive at these broad components:\footnote{Pacific Institute for Research and Evaluation (1999).}
• Violent crime: $35 billion
• Traffic crashes: $18 billion
• Suicide attempts: $1.5 billion
• Treatment: $1 billion
• Drowning: $0.5 billion
• Fetal alcohol syndrome: $0.5 billion
• Burns: $0.3 billion
• Alcohol poisonings: $0.3 billion

All in all, binge drinking by college students turns out not to be the innocent rite of passage celebrated in popular culture. Instead, such drinking subjects students to a much higher risk of a range of health and behavioral problems, and also raises the risk for those in the drinker’s immediate environment.
V. What Can Be Done About Binge Drinking?

Heightened awareness that college binge drinking is neither harmless nor inevitable may be the most important step in dealing with the binge drinking problem. Unfortunately, denial that this problem exists is widespread at colleges and universities. In the broader society, many people fail to see some of the dangerous correlates of alcohol abuse. Expecting quick and dramatic change in this situation is wrong, and we should be realistic in setting our goals and in thinking about the long-term nature of this problem. We should also expect that there will be no single dramatic intervention that “solves” this problem, but that a series of “countermeasures” may each contribute a small amount toward progress.

In the recent past, broad initiatives directed at the environment surrounding young people have had substantial success in reducing youth alcohol and drug problems. The increase in the minimum legal drinking age has saved thousands of lives, primarily in reducing deaths from car crashes, but also through reducing alcohol-related suicide deaths and youth homicide. Mothers Against Drunk Driving (MADD) has played a crucial role in leading efforts to deal with drunk driving and underage drinking.

There does not appear to have been a corresponding reduction in binge drinking or its correlates among college students. The challenge is now to address this problem with appropriate energy and resources. Some obstacles are formidable, including a widespread feeling that alcohol abuse is beyond human control or preferable to drug abuse; the general decline in interest among colleges and universities in shaping student behavior outside the classroom; and an absence of proven models to guide new efforts.

Efforts to change college student behaviors must take into account certain realities. These efforts must engage college students as autonomous adults, not as passive children. The national data show great variation in alcohol use and abuse

59 In this sense, college binge drinking might resemble the efforts against drunk driving. See Ross, H.L. (1992).
across institutions, suggesting that prevention programs have to abandon a “one size fits all” approach.\textsuperscript{61} Formal educational programs at colleges and universities have relatively modest effects on student values and behavior, and extensive research shows the peer group to have much more impact than formal efforts.\textsuperscript{62} Research on this question tends to ignore the dynamic factors affecting contemporary college students as they move through multiple roles, locations, and times of the year. Today’s college students are increasingly active consumers and in many cases have considerable money to spend.\textsuperscript{63} Alcohol remains the only consumer product that underage college students are unable to buy legally. Living arrangements have shifted, and young people who live outside parental homes or dormitories tend to use alcohol differently than those under closer family supervision.\textsuperscript{64}

Widespread public support exists for more effective enforcement of the minimum legal drinking age, and state or federal legislators do not seem anxious to roll back these laws.\textsuperscript{65} Many college students support more vigorous enforcement as well, though significant resistance by many binging students is likely. A variety of effective countermeasures against both student binge drinking and underage drinking are available (see below).

Institutional responses to binge drinking have varied. The approaches that have been used earliest in higher education, and which are still widely used, target the individual drinker. Other approaches take a wider view, attempting to change aspects of the larger environment. Responses to binge drinking also differ in whether or not they target underage drinking per se, given that many undergraduates are still under the minimum legal drinking age of 21.

\textsuperscript{63} Matthews, A. (1997).
\textsuperscript{64} Gfroerer, J.C., Greenblatt, J.C., & Wright, D.A. (1997).
\textsuperscript{65} See (http://epihub.epi.unm.edu/alcohol/default.htm)
Legal issues and liability

Several legal questions shape the response to binge drinking. In 1984, Congress passed legislation that encouraged states to adopt a uniform standard of 21 as the minimum drinking age. Done in part to respond to a perceived increase in alcohol-involved car crashes by adolescents, this action is credited with saving thousands of lives. The rise in the minimum drinking age has had complex effects on college alcohol use. On the one hand, it makes use of alcohol, let alone its abuse, illicit for the majority of traditional-age college students. On the other hand, it restricts colleges and universities from programs that might teach responsible or moderate drinking to those under 21. Some college administrators complain that this limitation hampers their efforts, and some even argue there is no consensus about the minimum drinking age. The latter claim seems contradicted by the unique political consensus required to raise the minimum legal drinking age in the 1980s—both Democratically-controlled houses of Congress, a Republican President, and the 50 state legislatures and governors all had to act. Moreover, opinion polling shows widespread support among Americans of all ages, and even strong support among college students, for the current minimum drinking age.

Colleges are also required to follow two other federal laws. The Safe and Drug Free Schools Act and the Campus Security Act (Clery Act) require each institution of higher education to distribute a statement explaining the law and the institution’s drug and alcohol policy, as well as the consequences of violating them. Institutions are also required to conduct a review every two years to determine effectiveness and enforcement (see Figure 1). The extent of compliance with the law and its effectiveness in shaping student behavior remain unknown.

67 (http://www.iatf.org)
FIGURE 1. COMPLYING WITH THE DRUG-FREE SCHOOLS AND CAMPUSES ACT (34 CFR PART 86)

At a minimum, each school must distribute to all students and employees annually:

- **Standards of conduct** that clearly prohibit the unlawful use, possession, or distribution of illicit drug and alcohol on school property or as part of any school activities
- A **description of the applicable legal sanctions** under local, State, or Federal law for the unlawful possession or distribution of illicit drugs and alcohol
- A **description of the health risks** associated with the use of illicit drugs and the abuse of alcohol
- A **description of any drug or alcohol counseling, treatment, or rehabilitation or re-entry programs** that are available to employees or students
- A **clear statement that the institution will impose sanctions** on students and employees (consistent with local, State, and Federal law), and a description of those sanctions, **up to and including expulsion or termination of employment and referral for prosecution**, for violations of the standards of conduct

- The law further requires an institution of higher education to conduct a **biennial review** of its programs to:
  - Determine its **effectiveness** and implement changes if they are needed
  - Ensure that the **sanctions developed are consistently enforced**

**SOURCE:** Higher Education Center for Alcohol and Other Drug Prevention. (available at http://www.edc.org/hec/dfsca/minrequi.htm)

A second federal requirement comes from the Campus Security Act, now known as the Clery Act (named after Jeanne Ann Clery, a young woman who was raped and murdered in a university dormitory). The Clery Act requires colleges to gather and publicly report on crimes committed on campus, including those that deal with alcohol and drug arrests. Compliance with the law appears less than perfect, at least in part because of the difficulty in interpreting its requirements.69

The 22nd Amendment to the US Constitution repealed Prohibition, giving the individual states the responsibility to regulate the sale and use of alcohol. As a result, the 50 states have their own patchwork of laws and regulations, some of which deal with alcohol use by college students. Little research has been done on the effectiveness of these laws and their enforcement, though there is strong evidence that
enforcement efforts against underage alcohol consumption remain weak.

The Pacific Institute for Research and Evaluation examined ways of enforcing the existing underage drinking laws. Funded by the Office of Juvenile Justice and Delinquency Prevention (OJJDP), the Institute compiled its assessment of available strategies. As Figure 2 suggests, enforcement of the underage drinking laws might make use of a variety of countermeasures with varying effectiveness. Most of these interventions apply in the broader community, so that their effect should be felt by underage youth who attend college as well as those who don’t. (See the original document for brief statements of the evidence about their effectiveness and examples of their use.)

69 See the Security on Campus, Inc. website (http://campussafety.org)
FIGURE 2.
PACIFIC INSTITUTE FOR RESEARCH AND EVALUATION: STRATEGIES TO REDUCE UNDERAGE ALCOHOL USE (PRIORITY IN PARETHESIS)

**Limitations on access**

**Enforcement of minimum purchase laws**

*Enforcement aimed at retailers:*
- Vigorous use of compliance checks (very high)
- Application of appropriate sanctions to violating merchants (high)
- Education of merchants regarding techniques and responsibilities (high)
- Development of community support for enforcement (high)
- Dram shop liability for sales to minors (medium)

*Enforcement aimed at youth:*
- Use/lose laws and other penalties applied to violating youth (medium)
- Special police “party partols” to contain underage parties and ticket both minors and any adults who provide alcohol to them (medium)
- Penalties applied to the use of false identification (medium)
- “Cops in Shops” and similar programs that allow police to ticket minors attempting to purchase alcohol (medium)

**Strategies aimed at reducing social availability of alcohol**

- Keg registration laws (medium)
- Enforcement of laws against buying alcohol for minors (medium)
- Sales displays that discourage shoplifting (medium)
- Special enforcement campaigns to prevent parties where alcohol is served to minors (medium)

**Improvement of laws related to minimum purchase age**

- Improve laws regarding minors in possession of alcohol (high)
- Require sellers of alcohol to be at least 21 years old (medium)
- Make the manufacture or purchase of false identification a crime (medium)
- Make the provision of alcohol to minors an offense (medium)
- Prohibit minors from entering bars (medium)
- Make outlets liable for the harm that occurs as the result of providing alcohol to minors (medium)
Controls on availability in general
- Increase in price through excise taxes (very high)
- Conditional use permits for alcohol outlets (high)
- Controls on outlet location and density (high)
- Controls on hours of sale (high)

Expressions of community norms against underage use
- Prohibitions or controls on alcohol use at community events or in public areas (high)
- Prohibitions of alcohol sponsorship of public events (high)
- Media campaigns, media advocacy, and counteradvertising (high)
- Controls on alcohol advertising (medium)
- Community sponsorship of alcohol-free activities for youth (medium)
- Parent coalitions to reduce alcohol use by their children (medium)

Strategies based in schools and in other youth organizations
- School policies regarding alcohol use on school property or at school-sponsored events (high)
- Media literacy programs to make youth more sophisticated about the manipulative techniques of advertising (medium)
- Prevention curricula (low)

Prevention of impaired driving
- Establishment and enforcement of “zero tolerance” laws for drivers under 21 (very high)
- Sobriety checkpoints for impaired drivers (very high)
- Vigorous and well-publicized enforcement of impaired driving laws in general, as well as other traffic enforcement (high)
- Responsible beverage service techniques that can reduce sales to minors as well as reduce sales of alcohol to intoxicated persons (medium)

SOURCE: Pacific Institute for Research and Evaluation 1999: Table 1.

College and university administrators implement these requirements with varying degrees of energy and creativeness. Although some parents in particular might find this surprising, it has been decades since many colleges have acted in loco parentis (legally acting “in the place of the parent”), in large measure because of the changing legal environment. Liability concerns are probably a significant factor in this process. Legal advice from the American Council on Education, a nonprofit organization representing senior administrators at colleges and universities and higher education’s
most important voice nationally, reflects this complexity. Colleges are advised to address the problems of underage alcohol use, but not to create codes of conduct that might inadvertently expose them to lawsuits if colleges fail to enforce them effectively. Consequently, prudent administrators have ample reason to institute only minimum compliance with federal and state regulations.

Liability issues remain a largely unexplored area of research, but expert opinion suggests that colleges and universities pay relatively little in hard costs from alcohol-related litigation. Instead, most colleges fear the “soft costs” of bad press, thus providing a strong incentive to suppress public awareness of their alcohol-related problems.

During the 1980s, the U.S. Department of Education gave grants to hundreds of colleges to establish alcohol and drug prevention programs through its Fund for the Improvement of Post-Secondary Education program (FIPSE; usually pronounced "fip-see"). Unfortunately, grantees were not required to evaluate the effectiveness of their programs, and little was learned in any systematic way about prevention. Nonetheless, the FIPSE program led to the widespread establishment of alcohol programs, usually a mixture of education about the dangers of abuse, sometimes combined with counseling to those seeking treatment. The 1993 Harvard data found no correlation between FIPSE program development and a college’s binge drinking rates.

In part replacing the old FIPSE program, the Higher Education Center for Alcohol and Other Drug Prevention provides a source of advice for college administrators. The Higher Education Center, a non-governmental organization, is funded by a contract from the U.S. Department of Education. The Higher Education Center has been an advocate for environmental strategies against drug and alcohol use, including such components as the social norms approach mentioned above as well as the development of task forces, campus–community coalitions, and statewide groups of colleges. The Center has also provided technical assistance to individual colleges, organized a national annual meeting (another outgrowth of FIPSE), and published in

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71 Staff conversation with United Educators President.
73 See the Higher Education Center website (http://www.edc.org/hec)
print and on the web a series of bulletins and monographs about alcohol abuse. The Center’s operations have not yet been evaluated or audited, so it is unclear what effect it is having on higher education.

**Education about harm and risk to the individual**

Some of the most widespread reactions to binge drinking have been educational in nature. For example, during the 1980’s the U.S. Department of Education sponsored programs at hundreds of colleges and universities through grants from FIPSE. Many of these efforts spread the word among college students that alcohol abuse or binge drinking was harmful, much as the Drug Abuse Resistance Education (DARE) program attempts to inform a younger population about drug abuse. The FIPSE program also led to the development of offices for drug and alcohol education or counseling at many schools, many of which continue to this day. Their work has included offering educational programs at freshmen orientation, encouraging faculty to include alcohol and drug information in their courses (sometimes called “curriculum infusion”), and fostering the development of “wellness” programs and health-oriented messages on campus. Unfortunately, the FIPSE program did not include funding for evaluating whether the programs had their intended effects, and so little was learned about how best to address the problem.

The successor to the FIPSE program is the Safe and Drug Free Schools Program, most of whose energy goes into work among elementary and secondary schools. The postsecondary part of this initiative offers a grant program whose main thrust changes from year to year. During the previous year, the program encouraged the development of campus-community coalitions.

In the Spring of 2000, the Safe and Drug Free Schools Program announced the following topics for grants to institutions of higher education. The first was to:

…develop or enhance, implement, and evaluate campus-based prevention strategies. Grantees will focus attention on and develop solutions to reduce

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74 See the website of the Safe & Drug Free Schools Program (U.S. Department of Education) (http://www.ed.gov/offices/OESE/SDFS)
75 Ibid., section on “FY2000 Funding Opportunities,” CFDA 84 184H and N.
high-risk drinking among college students (specifically student athletes, first-year students, or students attending two-year institutions) and/or prevent violent behavior by college students.

The second program asks grantees:

…to identify models of innovative and effective alcohol and other drug prevention programs in higher education and to disseminate information about those programs to parents of prospective college students and to colleges and universities where similar efforts may be adopted.

Peer education

Among the more common responses to binge drinking is the use of peer educators to transmit an anti-abuse message to other students. Peer counselors are sometimes employed by colleges and universities. In other instances, student-led groups such as Bacchus, GAMMA, or Students Against Destructive Decisions attempt to influence their peers. To date, there has been no independent evaluation of these programs. Though there is probably no harm in supporting these initiatives, it would be important to know whether they have any measurable impact.

Environmental approach

More recently, the U.S. Department of Education has funded the development of the Higher Education Center for Alcohol and Other Drug Prevention. The Center has made available through its web site a variety of materials supporting prevention, but especially centering on an "environmental" approach. This approach argues that educational efforts warning about harm have limited if any impact on student behavior. Instead, prevention must begin with a broad effort to change the total environment.

The Center recommends that each campus form a task force to address binge drinking; create a campus-community coalition; and band together with other institutions

76 For information about these groups, see the website of Inter-Association Task Force on Alcohol and Other Substance Abuse Issues (http://www.iatf.org)
77 See the Higher Education Center for Alcohol and Other Drug Prevention (http: www.edc.org/hec).
to form statewide coalitions. The Center’s web site also provides a large number of publications about various topics, such as the extent of drug and alcohol use by college students; how to measure or estimate use; the consequences of use and abuse; and prevention, intervention, and treatment.

Two recent publications explain the environmental approach in detail. The Higher Education Center presents the old and new approaches:

Stated simply, traditional approaches to prevention have tacitly accepted the world as it is and then tried to teach students as individuals how to resist its temptations. In contrast, with the environmental management approach, there is a coordinated effort to change the world—that is, the campus and community environment—in order to produce a large-scale impact on the entire campus population, including students, faculty, staff, and administrators.78

This passage might alert the reader to one of the most significant challenges of the environmental approach in the new century. A number of pressures, including such diverse movements as the rise of distance education and the decline of in loco parentis, are changing the meaning of the traditional campus. Consequently, the assumption that all college students are powerfully tied to local campuses may be inaccurate.

A broader environmental approach is suggested by consultants working to improve enforcement of underage drinking.79 Most of the interventions represent adaptation of successful strategies to the unique circumstances of college populations, though a few (e.g. substance-free dorms or interventions targeted at fraternities,

sororities, or college athletes) have no parallel in other settings. Figure 3 presents some of the intervention strategies suggested.

### Figure 3.
Campus Environmental Strategies

- **Policies.** Clear rules regarding the sale, possession, and use of alcohol on campus, as well as consistently enforced penalties for violating the rules.
- **Alcohol-free alternatives.** Venues and events that provide students with the opportunity to socialize in an alcohol-free environment.
- **Responsible beverage service.** Training for managers, alcohol servers, and social hosts to reduce the risks of sales to minors, intoxication, and impaired driving.
- **Restrictions on industry marketing.** Limitations on the amount and type of pro-drinking messages that students see on campus and in association with campus events.
- **Social norms interventions.** Efforts to establish positive social norms and expectations about alcohol use, including strong intolerance for alcohol misuse.
- **Substance-free housing.** On-campus residences set aside for students who are committed to living in an environment free of illicit drugs, and often alcohol and cigarettes as well.
- **Interventions with campus Greek organizations.** Strategies focused specifically on fraternities and sororities, organizations often associated with high levels of binge drinking and alcohol-related problems.
- **Campus-community collaborative strategies.** Efforts to ensure that schools and their surrounding communities work together to enforce relevant alcohol-related laws and establish consistent messages about responsible hospitality.


### Interventions that target high-risk drinkers

Many college students have already been using (or abusing) alcohol for an extended period; some started in high school or even earlier. For these students, prevention must give way to intervention. Fortunately, strong evidence exists that effective interventions exist. Marlatt and his colleagues at the University of Washington
have reported on successful interventions that target high-risk drinkers.\textsuperscript{80} This research demonstrates that relatively inexpensive programs can effect behavior change even among students with substantial duration of high-risk drinking. The research is based on rigorous experimental design and therefore is quite convincing.

Students who choose to live in fraternity and sorority houses are at highest risk of binge drinking, while those who are members but not residents of Greek organizations are not far behind.\textsuperscript{81} Expanded efforts to work with Greek organizations in addressing high-risk drinking promise worthwhile results.

Athletes as well as those students who think athletics are very important in college constitute another high-risk group.\textsuperscript{82} Coaches could play a significant role in shaping attitudes and behavior of student athletes. Secretary of Health and Human Services Donna Shalala has argued strongly that college athletics and alcohol promotions should be divorced.\textsuperscript{83}

**Developing community coalitions against substance abuse**

Several public and private efforts are underway to foster the growth of community coalitions, though only a small proportion of colleges are currently involved.\textsuperscript{84} With funding primarily from the Robert Wood Johnson Foundation, Join Together provides support and encouragement for the development of broad community coalitions against substance abuse and gun violence. Its web site provides training material and current press summaries.\textsuperscript{85} Mothers Against Drunk Driving is a force in many American communities.\textsuperscript{86} Its commitment to working against both underage drinking and college binge drinking makes it an excellent potential partner for a college–community coalition. The Community Anti-Drug Coalitions of America offers

\textsuperscript{84} Wechsler, H., Nelson, T., & Weitzman, E. (2000).
\textsuperscript{85} See the website of Join Together (http://www.jointogether.org)
\textsuperscript{86} See the website of Mothers Against Drunk Driving (MADD) (http://www.madd.org)
support and technical advices to many efforts across the country.\textsuperscript{87} The Office of National Drug Control Policy funds Drug-Free Community Coalitions.\textsuperscript{88}

**Organizing students against secondhand binge effects**

Other efforts involve organizing college students who bear the greatest costs of alcohol abuse in their everyday lives. The Center for Science in the Public Interest, in collaboration with Cornell University and the University of North Carolina, sponsors an effort, called appropriately enough, Had Enough?\textsuperscript{89} Student-led groups against alcohol abuse such as Bacchus and Gamma, and fraternities and sororities should be part of these efforts.\textsuperscript{90} It is important that student groups organized against alcohol abuse include significant numbers of mainstream students, so that their legitimacy is ensured.

**Presenting media campaigns against binge drinking**

Because binge drinking is widespread, several organizations and people concerned with tackling the problem have been attracted to the idea of conducting a broad media campaign that could change attitudes. A leading higher education organization, the National Association of State Land Grant Universities and Colleges (NASULGC), presented a series of ads that appeared in major newspapers across the United States just before the beginning of the Fall 1999 academic year.\textsuperscript{91} Efforts like this should be expanded and evaluated. The Office of National Drug Control Policy is now fielding a media campaign against illicit drugs.\textsuperscript{92} The campaign omits alcohol abuse, but much will be learned about how to change attitudes and behaviors about substance abuse. Critics argue that alcohol should be included in such campaigns.

\textsuperscript{87} See the CADCA website: (http: //www.cadca.org)

\textsuperscript{88} See the ONDCP Drug-Free Communities website (http: //www.whitehousedrugpolicy.gov/prevent/drugfree.html)

\textsuperscript{89} See (http: //www.HadEnough.org)

\textsuperscript{90} See the webiste of Inter-Association Task Force on Alcohol and Other Substance Abuse Issues (http://www.iatf.org)

\textsuperscript{91} See the NASULGC website (http: //www.nasulgc.org/BingeDrink/Default.htm)

\textsuperscript{92} See the ONDCP Drug-Free Communities website (http://www.whitehousedrugpolicy.gov/prevent/drugfree.html)
Correcting misperceived norms about student alcohol use

Another approach currently enjoying some popularity in college prevention efforts begins with the assumption that many college students misperceive how much alcohol abuse actually goes on. Survey evidence supports this assumption, with students believing that their peers drink significantly more than they actually do. Prevention takes the form of correcting these misperceived norms, and so this position is currently called the social norms approach.\(^93\) Imaginative media campaigns help students adjust their impression of how much alcohol abuse actually occurs on campus. Its advocates point to success on a number of campuses, though there are also press reports of campuses where the approach has failed. The approach could be broadened to change norms about the propriety of those over 21 supplying minors with alcohol.

Enforcing the underage drinking laws

One of the most important parts of the environment is the supply of alcohol, particularly to minors. Some prevention efforts target the enforcement of the laws restricting access to underage persons.\(^94\)

Though there is significant public support for enforcing these laws, there is also widespread cynicism about their effectiveness.\(^95\) Evidence exists, however, that these laws have saved thousands of lives, and are among the most effective public health interventions against youth substance abuse.\(^96\)

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95 For a discussion of how alcohol is addressed as a public issue, see the website of Public Agenda (http://www.publicagenda.org).
96 Secretary of Health and Human Services (1997).
Reducing binge drinking as a national health goal

Reducing binge drinking has been targeted as a national health goal, part of a comprehensive health planning process led by the Surgeon General of the United States. Figure 4 presents a section of the “Healthy People 2010” goals, seeking to reduce binge drinking.97 This statement is noteworthy for several reasons, including the seriousness with which it treats binge drinking (including by college students) as a national health problem, its optimism about the possibility of change, its use of a definition of binge drinking similar to the one employed in this report, and its emphasis on broad environmental prevention and intervention strategies, again like those discussed in this report.

97 For the entire text, go to (http://www.health.gov/healthypeople.htm).
FIGURE 4.
The Surgeon General’s “Healthy People 2010:” Goal 26-11.
Reduce the proportion of persons engaging in binge drinking of alcoholic beverages.

Binge drinking is a national problem, especially among males and young adults. Nearly 15 percent of persons 12 or older reported binge drinking in the past 30 days, with young adults aged 18 to 25 years more likely (27 percent) than all other age groups to have engaged in binge drinking. In all age groups, more males than females engaged in binge drinking: among adults, the ratio was two or three to one. Rates of binge drinking varied little by educational attainment. People with some college, however, were more likely than those with less than a high school education to binge drink.

The perceived acceptance of problematic drug-using behavior among family, peers, and society influences an adolescent’s decision to use or avoid alcohol, tobacco, and drugs. The perception that alcohol use is socially acceptable correlates with the fact that more than 80 percent of American youth consume alcohol before their 21st birthday, whereas the lack of social acceptance of other drugs correlates with comparatively lower rates of use. Similarly, widespread societal expectations that young persons will engage in binge drinking may encourage this highly dangerous form of alcohol consumption.

Passage of higher minimum purchase ages for alcoholic beverages during the mid-1980s reduced but did not eliminate under aged drinking. Many States are examining the use of additional restrictions and penalties for alcoholic beverage retailers to ensure compliance with the minimum purchase age.

To address the problem of binge drinking and reduce access to alcohol by underaged persons, several additional policies and strategies may be effective, including:

- Tougher State restrictions and penalties for alcoholic beverage retailers to ensure compliance with the minimum purchase age.
- Restrictions on the sale of alcoholic beverages at recreational facilities and entertainment events where minors are present.
- Improved enforcement of State laws prohibiting distribution of alcoholic beverages to anyone under age 21 years and more severe penalties to discourage distribution to underaged persons.
- Implementation of server training and standards for responsible hospitality. (Management and server training educate waitresses, waiters, bartenders, and supervisory staff on ways to avoid serving alcohol to minors and intoxicated persons).
- States could require periodic server training or use the regulatory authority of alcohol distribution licensing to mandate a minimal level of training for individual servers.
- Institution of a requirement that college students reporting to student health services following a binge drinking incident receive an alcohol screening that would identify the likelihood of a health risk. An alcohol screening would provide student health services with the information needed to assess the student’s drinking and refer the student to an appropriate intervention.
- Restrictions on marketing to underaged populations, including limiting advertisements and promotions. Although alcohol advertising has been found to have little or no effect on overall consumption, this strategy may reduce the demand that results in illicit purchase or binge consumption.
- Higher prices for alcoholic beverages. Higher prices are associated with reductions in the probability of frequent beer consumption by young persons and in the probability of adults drinking five or more drinks on a single occasion.
- Binge drinking among women of childbearing age (defined as 18 to 44 years) also is a problem because of the risk for prenatal alcohol exposures. Approximately half of the pregnancies in the United States are unintended, and most women do not know they are pregnant until after the sixth week of gestation. Such prenatal alcohol exposures can result in fetal alcohol syndrome and other alcohol-related neurodevelopmental disorders.
What colleges are doing

A survey of over 700 college administrators provides a snapshot of what colleges are doing as of the spring of 1999 (See Table). On the positive side, a large proportion of colleges have begun the process of addressing binge drinking by putting together task forces and examining policies. But clearly those approaches that might touch on the earlier antecedents of binge drinking in college--such as working with high school students--or that bring colleges into collaboration with their communities--such as regular meetings--are in use at only a small number of institutions. A key issue concerns student leadership, participation and involvement in this issue. Without student participation, efforts by college administrators or faculty will have little effect.

## Prevention Programs in Use by American Colleges (N=734)

<table>
<thead>
<tr>
<th>PROGRAM</th>
<th>% OF COLLEGES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outreach to high school students</td>
<td>17.0</td>
</tr>
<tr>
<td>Regular meetings with neighborhood</td>
<td>24.1</td>
</tr>
<tr>
<td>Outreach to families</td>
<td>34.7</td>
</tr>
<tr>
<td>Coop agreement with community agencies</td>
<td>39.7</td>
</tr>
<tr>
<td>Officer to evaluate program impact</td>
<td>40.3</td>
</tr>
<tr>
<td>No ads for off-campus bars/clubs</td>
<td>51.3</td>
</tr>
<tr>
<td>Measures extent of binge drinking</td>
<td>54.6</td>
</tr>
<tr>
<td>Special outreach to athletes</td>
<td>59.1</td>
</tr>
<tr>
<td>Task force deals with on-campus abuse</td>
<td>60.0</td>
</tr>
<tr>
<td>Alcohol-free dorms/floors</td>
<td>62.0</td>
</tr>
<tr>
<td>Special outreach to Greeks</td>
<td>67.1</td>
</tr>
<tr>
<td>No use at tailgate parties</td>
<td>75.9</td>
</tr>
<tr>
<td>Substance-abuse officer</td>
<td>76.9</td>
</tr>
<tr>
<td>No use at home games</td>
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</tr>
<tr>
<td>No kegs to Greek houses</td>
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<tr>
<td>No ads at home sports events</td>
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<tr>
<td>Outreach to all students</td>
<td>96.6</td>
</tr>
<tr>
<td>No kegs in dorms</td>
<td>98.1</td>
</tr>
</tbody>
</table>

**SOURCE:** Wechsler, Kelley, Weitzman, San Giovanni, Seibring 2000: Table 3.
What the University of Delaware is doing

The University of Delaware has been involved in an innovative and effective program for the past three years to combat binge drinking.

A special University-community coalition, funded under a grant from the Robert Wood Johnson Foundation and the American Medical Association, has been actively working to oppose the negative second-hand consequences of high-risk drinking, with an emphasis on addressing the environment and the social norms that surround it. Working together, University and Newark community members have instituted a number of policy changes on the campus, in the city and in the state.

For example, UD was the first school to institute a policy of notifying parents when students are charged with a violation of campus policy. Changes also were made to the judicial system for students, including faster turnaround and stiffer penalties, as well as a three-strikes-and-you’re-out policy. UD instituted a five-star rating system for fraternities and sororities tying the privilege of rushing to a chapter’s academic standing and social conduct, and the social hosting policies of the fraternity system have been changed for special events that are open to the campus. The University also began enforcing a longstanding tailgating policy that requires such activity to stop when football games begin.

In the community, the coalition has successfully lobbied for changes in city zoning, including deed restricting recently constructed retail buildings on Main Street from ever being able to sell alcohol. Most recently, the coalition worked with city officials to add dormitories to the list of protected sites in a city ordinance that determines areas where commercial establishments may not offer discounted drink specials. New state legislation now governs “last call” practices and requires alcohol license applicants to advertise their intent in two community newspapers.
Recognizing that problems with alcohol frequently begin before college age, the University/Schools Alliance works with high schools to create and implement comprehensive alcohol prevention programs involving students, staff and parents. In addition, the coalition is actively working to increase public awareness of the problems affiliated with binge drinking and in both providing young people with alternative, non-alcohol related activities and celebrating those who do take part in them.

**National Institute on Alcoholism and Alcohol Abuse (NIAAA) programs**

Responding to the absence of well-evaluated prevention programs for college students, the National Institute on Alcoholism and Alcohol Abuse (NIAAA, the federal health agency that does basic and applied research on alcohol issues) published a request for proposals to develop and evaluate new prevention programs. It will be some time before results are published let alone employed at other sites. 99 NIAAA has also established an advisory panel on college drinking, but again publication of results will not occur until 2001 at the earliest.

With the dearth of scientific findings, practitioners rely on what appears to be promising practices, and each campus cobbles together its own programs, often without consultation. Given the treatment or counseling backgrounds of personnel and their tendency to be lodged in student affairs, programs often turn inward on the individual student, and rarely seem to engage questions of the supply of illegal alcohol. (Drug policy in the United States is far different, with great interest in supply reduction and interdiction. 100) In general, programs rest on variations on education and social norms, borrowing heavily from practice used for adolescents. 101

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99 See the website of the National Institute on Alcohol Abuse and Alcoholism (http://www.niaaa.nih.gov).
100 See ONDCP website (http://www.whitehousedrugpolicy.org).
101 For a detailed glimpse of the variety of prevention programs, see “Promising Practices,” compiled by David Anderson and Gail Gilgram, supported by a grant from the Century Council. The text is available at (http:..www.prompac.gmu.edu).
VI. Policy Alternatives: What More Should Be Done?

Hopefully, there will soon be a change in the right direction. It makes sense to consider several alternatives now being discussed in the field, not to necessarily endorse them, but to summarize what’s being considered.

There are many initiatives currently under way across the country, primarily at the state and local level. Local initiatives have the main advantage of being entirely under the control of local people, who can craft a response that suits the unique circumstances, available resources, and particular strengths of the place.

Among the most successful interventions against substance abuse are broad environmental interventions such as the passage by all the states (led by federal action) of a standard minimum legal drinking age of 21. That single intervention has saved thousands of lives.

Several new initiatives are national in scope, and suggest ways to better respond to the problem of binge drinking. Unlike local work, these national initiatives depend on successful mobilization by national organizations, government, or political and industry leaders, and so their successful implementation is necessarily more unpredictable.

Biden Binge Drinking Resolution

Concern over nationwide problems with college binge drinking and a request from President David Roselle of the University of Delaware led to efforts to pass the Biden Binge Drinking Resolution, enacted into law as part of the 1998 Higher Education Act Reauthorization.102 The resolution (whose full text appears in an appendix to this report) asks colleges and universities to address binge drinking through six broad environmental changes:

102 (The full text of the resolution is found in an appendix to this report; the original is found at S. Res. 192, March 5, 1998 (see also H. Res. 321, November 9, 1997, and P.L. 105-244, Sec. 119, “Binge Drinking and College Campuses.”)
• Appoint a task force to establish a policy on reducing alcohol and other drug-related problems
• Provide students with the opportunity to live in an alcohol-free environment
• Enforce a zero-tolerance policy on the consumption of alcohol by minors
• Eliminate alcoholic beverage-related sponsorship of on-campus events
• Enforce vigorously a college’s disciplinary codes against those who violate campus alcohol policies
• Work closely with the local officials in the town in which the college is located.

Recent data suggest that some of the policies, such as establishing a task force, have been adopted by the overwhelming majority of institutions. Others, such as working with the community, have been used by a small minority of institutions.

Raise binge drinking on the national agenda of higher education

While many individual institutions have begun to address the issue, alcohol abuse appears only sporadically on the national agenda of higher education. Each of the large national organizations in higher education should be asked to begin formal efforts to define how its members can work on this issue.

Clearly, America’s national leaders in higher education recognize the seriousness of the problem and the necessity of making progress on it. In the coming months one hopes for more evidence that these national associations are devoting more attention to the issue, by devoting time in their national meeting programs as well as coverage in their publications.

Particularly crucial will be the continuing leadership of those in higher education who deal directly with student affairs issues. The National Association of Student Personnel Administrators (NASPA) has been working on responses to alcohol abuse for a long time. NASPA’s experience and leadership will be invaluable. Another key

104 For an essay about how the 28 Jesuit colleges and universities should address binge drinking, see Dowdall, G.W. (2000). The essay appears in the monthly newsletter of the Association of Jesuit Colleges and Universities, a member of the Washington Higher Education Secretariat.
105 See the website of NASPA (National Association of Student Personnel Administrators (http://www.naspa.org).
group are those individuals and organizations with experience in public health and health care, such as the Association of American Medical Colleges.\textsuperscript{106}

**Invest more in research on alcohol questions**

Alcohol problems are estimated to cost much more to society than the cost of illicit drugs, yet current spending on research about alcohol is much less than devoted to illicit drugs. Expenditures for the primary research agency on alcohol, the National Institute on Alcohol Abuse and Alcoholism (NIAAA), should match those devoted to the study of illicit drugs by the National Institute on Drug Abuse (NIDA). This is not to say that NIDA’s funding should be diminished. To the contrary, NIDA produces brilliant research and is a most worthy investment of federal dollars. NIAAA should receive a comparable sum, however, to address alcohol abuse adequately. Among the highest priorities would be better reporting on death certificates of the degree of substance use in unnatural deaths as well as suitable occupation and employment questions to allow understanding how many students are involved in alcohol-related crashes.

**Invest more in prevention, intervention and treatment**

One of the primary sources for funding these activities is the Substance Abuse Prevention and Treatment Block Grant to the individual states administered by the Substance Abuse and Mental Health Services Administration.\textsuperscript{107} More than $1.65 billion is transferred to the states, with 35 percent targeted at alcohol abuse issues. A comprehensive evaluation of how well block grant spending has accomplished its goals would shed light on future funding decisions.

\textsuperscript{106} See the website of Association of American Medical Colleges (http://www.aamc.org)
\textsuperscript{107} Staff communication with SAMHSA administrators. See also National Association of State Alcohol and Drug Abuse Directors, Inc. (1999).
Other federal efforts that might impact on binge drinking should be evaluated to assess their efficacy and suggest ways to improve their operation, such as the Safe and Drug Free Schools and Communities grant program; the Higher Education Center; compliance with the Clery Act about campus safety; and the Office of Juvenile Justice and Delinquency Prevention “Enforcing the Underage Drinking Laws” Program. The Surgeon General has promised to convene a workshop on alcohol abuse, but it is noteworthy that his office has yet to address this problem as it has addressed smoking or mental illness.\textsuperscript{108}

The minority of students who show signs of clinical alcohol dependence or abuse may need treatment now. For those who may have advanced to alcoholism, Alcoholics Anonymous and other self-help programs offer free and confidential assistance.\textsuperscript{109} A range of substance abuse treatment programs for adolescents, youth, and young adults are also offered.\textsuperscript{110} The Harvard data show that many students who report various forms of alcohol abuse do not seek treatment.

**Expand and evaluate private and nonprofit efforts**

Several programs about alcohol abuse have come from private and nonprofit sources. The Century Council, funded by American distillers, is an educational foundation that sponsors several programs, such as the *Alcohol 101* compact disk distributed to college students, literature and software about alcohol abuse, and a description of alcohol abuse programs in its publication *Promising Practices*.\textsuperscript{111} Individual firms in the alcohol industry also offer educational programs, primarily through the production and distribution of advertising against abuse. Evaluating the efficacy of these programs would produce valuable information.

Nonprofit organizations also offer programs. Mothers Against Drunk Driving has added the goal of combatting underage drinking to its already formidable efforts against

\textsuperscript{108} DrugStrategies (1999).
\textsuperscript{109} [Alcoholics Anonymous](http://www.aa.org)
\textsuperscript{111} “Promising Practices,” compiled by David Anderson and Gail Gilgram, supported by a grant from the Century Council. The text is available at [http: ..www.prompac.gmu.edu](http://www.prompac.gmu.edu).
drunk driving. It has formed a commission on college drinking, and presumably will involve its local chapters in efforts to deal with binge drinking. Evaluation of its success would be very useful.

Funded by the Robert Wood Johnson Foundation, the American Medical Association’s “A Matter of Degree” program has supported comprehensive environmental prevention efforts at ten universities across the country for the past several years. One of them is the University of Delaware, which has been devoting increased attention to these efforts. An extensive evaluation effort led by Drs. Henry Wechsler and Elissa Weitzman of the Harvard School of Public Health should provide insight into what works and why. Preliminary data suggest that “A Matter of Degree” campuses have had success, particularly in reducing the harm associated with binge drinking through broad environmental approaches.¹¹²

Other nonprofit agencies have played leading roles in addressing binge drinking, including the Center for Science in the Public Interest and the National Council on Alcoholism and Drug Dependency.

Student involvement is a central—perhaps the central—challenge for prevention, intervention, and treatment. Efforts by organizations such as the National Association for Student Personnel Administrators, whose members are the frontline student affairs officers at most colleges and universities, deserve special encouragement.

Encourage public-private partnerships such as National Alcohol Screening Day

National Alcohol Screening Day is sponsored by a broad coalition of government, nonprofit, and private organizations.¹¹³ Screening Day represents the type of public–private collaboration that should be expanded. The March 2000 national efforts to publicize Screening Day included a special focus on college alcohol


¹¹³ See the website of National Alcohol Screening Day (http://www Namisp.org/alcohol.htm)
screening. Screening Day offers individuals a chance to meet with professionals who can assess alcohol problems and refer them to appropriate services.

**Expand and broaden grants to curb campus violence**

Alcohol is involved in violence against college women. While the precise causal role alcohol plays in such violence is still to be determined, enough evidence exists for its powerful correlation with violence perpetration and victimization to warrant special attention.\textsuperscript{114} Recent evidence suggests that alcohol plays much more than an exacerbating role, and probably plays a causal role in violent crime, both in perpetration and in raising the risk of victimization.\textsuperscript{115} While it is absolutely correct that alcohol use should never function as an excuse for violence, it is also true that alcohol abuse plays a role in creating violence.\textsuperscript{116}

I have been leading the efforts to ban “date rape drugs” such as GHB and rohypnol, but the reality is that alcohol is the biggest culprit when it comes to date rape. It makes sense to expand funding of college prevention programs to curb the role of alcohol and other drugs in sexual victimization and date rape, not only directed against potential predators but also against victimization. It also makes sense to provide grants with adequate evaluation support, so that higher education can learn what works and why.\textsuperscript{117}

\textsuperscript{114} Bureau of Justice Statistics (1998).
\textsuperscript{115} Bureau of Justice Statistics (1998).
\textsuperscript{117} Dowdall, G.W., DeJong, W., & Austin, B. (under review).
VII. Conclusions

Binge drinking is neither harmless nor inevitable. Like the broader problem of alcohol abuse, many discount its harm or minimize its costs. Denial that there is a problem is a central part of the alcohol problem, whether on campus or not.118

While most students don’t binge, enough do to create problems for themselves and others. A substantial minority, roughly one out of ten of current college students, have high risk of alcohol-related problems. What little is known of the long-term effects should raise serious questions in its own right.

Alcohol abuse is particularly hard to address, involving consumption of a legal product by individuals who enjoy traditional American freedom and autonomy. In order to address this problem properly, we must address both the personal responsibility of the individual and the responsibility of society and its institutions.

Binge drinking remains higher education’s dirty little secret. Some of the most serious health and behavioral problems, ranging from drunk driving to date rape and sexual assault, are either caused by it or greatly aggravated by it. Occasional headlines about relatively rare events like alcohol-related deaths break an otherwise remarkable silence about alcohol abuse. On college campuses, events that have some or even a lot of alcohol-related roots are reported and discussed as if there were no connection. The prevailing modes of addressing the problem rest on models of somehow strengthening weak individuals, rather than weakening strong economic forces.

A generation ago, Americans could comfortably admit to their peers that they had used illicit drugs at least experimentally. But now that the costs to our society are more clear to us all, moral disapprobation has ended such guilt-free admissions.

A generation ago, date rape, sexual assault, and other violence against women were never discussed in public, and were left as purely private tragedies. But now we know the cost of silence on those questions is too great.119 It’s time for a change in attitude about binge drinking, so another generation doesn’t pay its costs.

Sporadic reports of alcohol-related violence or accidental death occasionally

118 Quindlen (2000).
push college binge drinking into public consciousness, but for the most part the issue remains beneath the radar of public opinion. With over 3,000 institutions of higher education spread across the country, few individual communities devote more than sporadic attention to an issue that in the aggregate constitutes a major, arguably the major, public health problem for college students. And as this report has argued, many of the most serious costs are hidden from public view.

**GET REAL about alcohol misuse by college students**

We need to GET REAL about alcohol misuse by college students, by moving on a number of fronts:

- **Responsibility**
- **Education**
- **Approbation**
- **Leadership**

We should “get real” about binge drinking.

**Responsibility** is at the heart of any change for the better in college student binge drinking. Individual students have to take responsibility for their own behavior and its potential impact on others. Efforts by colleges to inform students that most college students don’t binge drink may help in reducing misperceptions in this area.

**Education** begins by laying aside the dangerous myth that binge drinking is a harmless rite of passage. This report has provided the evidence that it isn’t. But we also have to balance this with the good news that most college students don’t binge, and that the majority support efforts to curb irresponsible and in many cases illegal behavior. The deliberate and careful work of college students, faculty and staff will pay off.
But it can’t just be about individual college students. The communities surrounding colleges, perhaps led by such groups as Mothers Against Drunk Driving, will have to tackle the question of illegal access to alcohol. Local alcohol beverage industry leaders will have to join in the efforts to make sure only those of legal age have access to alcohol. Colleges and communities will have to take on the difficult challenge of curbing the illegal aftermarket that provides alcohol to youth.

**Approbation** will be key. We all know the power of social disapprobation. It took the energy, creativity, and persistence of Mothers Against Drunk Driving to push for the kinds of changes that have made drunk driving socially unacceptable and legally prohibited. Twenty years ago a person wouldn’t have hesitated to admit occasional or experimental use of cocaine, but today it would be greeted with alarm. Smoking used to be publicly accepted in most situations, and even normative. But a concerted effort by many advocates began the long process of changing attitudes and behaviors, with real victories for public health.

**Leadership** on this issue will be crucial. There must be change on the national level, if present efforts to deal with binge drinking need more support. We now know that alcohol misuse causes even more death, illness, and crime than does illegal drugs. The problem of alcohol abuse deserves a place on the national agenda.

Justice Brandeis once observed that sunshine is the best disinfectant. We need to “get real” about binge drinking. Violence against women was once a problem that, as a nation, we were ashamed to discuss or acknowledge. We had to bring it out into the sunshine of public discussion to make progress.\(^{120}\) So too with college student binge drinking. We need to fight the impulse to trivialize it, to ignore its links to campus crime and violence, and to look the other way as laws against underage drinking are violated. We’ll need to keep this issue high on the agenda of both higher education and our local communities. Working together, we can stop college binge drinking from being higher education’s dirty little secret.

\(^{120}\) Biden, Jr., J. R. (1999a).


programs and policies. Manuscript under review.


National Association of State Alcohol and Drug Abuse Directors, Inc. (1999). *An inventory of state prevention activities funded under the 20 percent prevention set-aside of the Substance Abuse Prevention and Treatment Block Grant*. Washington: NASADAD and ONDCP.


APPENDIX: INTERNET RESOURCES

Alcohol Epidemiology Program, University of Minnesota
(http://epihub.epi.unm.edu/alcohol/default.htm)

A Matter of Degree (American Medical Association)
(http://www.ama-assn.org/special/aos/alcohol1/aboutus.htm)

Alcoholics Anonymous
(http://www.aa.org)

Association of American Medical Colleges
(http://www.aamc.org)

Century Council
(http://www.centurycouncil.org)

Core Institute
(http://www.siu.edu/departments/coreinst/public_html)

Center for Substance Abuse Prevention
(http://www.samhsa.gov/csap/index.htm)

Center for Substance Abuse Treatment
(http://www.samhsa.gov/csat/csat.htm)

Center for Science in the Public Interest Alcohol Policies Project
(http://www.cspinet.org/booze/index.html)

Drug Strategies
(http://www.drugstrategies.org)

Enforcing Underage Drinking Laws: The Training Center
(http://www.pire.org/udetc)

Had Enough?
(http://www.cspinet.org/booze/hadenough/index1.html)

Higher Education Center for Alcohol and Other Drug Prevention
(http://www.edc.org/hec)
Harvard School of Public Health College Alcohol Study  
(http://www.hsph.harvard.edu/cas)  

Inter-Association Task Force on Alcohol and Other Substance Abuse Issues  
(http://www.iatf.org)  

Join Together  
(http://www.jointogether.org)  

Mothers Against Drunk Driving (MADD)  
(http://www.madd.org)  

Monitoring the Future Study  
(http://www.monitoringthefuture.org)  

National Alcohol Screening Day  
(http://www.nmisp.org/alcohol.htm)  

National Center on Addiction and Substance Abuse at Columbia University (CASA)  
(http://www.casacolumbia.org)  

National Council on Alcoholism and Drug Dependence  
(http://www.ncadd.org/index.html)  

National Clearinghouse for Alcohol and Drug Information (http://www.health.org/about.htm)  

National Institute on Alcohol Abuse and Alcoholism  
(http://www.niaaa.nih.gov)  

National Association of Student Personnel Administrators  
(http://www.naspa.org)  

Office of National Drug Control Policy  
(http://www.whitehousedrugpolicy.org)  

Prevention Primer  
(http://www.health.org/pubs/primer)  

Promising Practices: Campus Alcohol Strategies  
(http://www.prompac.gmu.edu)  

Public Agenda  
(http://www.publicagenda.org)  

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Safe & Drug Free Schools Program (U.S. Department of Education)
(http://www.ed.gov/offices/OESE/SDFS)

Security on Campus, Inc.
(http://campussafety.org)

Washington Higher Education Secretariat
(http://www.whes.org)