

Alcohol and Other Drug Research at Cornell University
Report to the Student Assembly
10/1/10

The following data are provided in response to the Cornell Student Assembly Resolution passed on 9/16/10 requesting “any information from Gannett Health Services regarding alcohol consumption on campus.” During the past decade, the University has engaged on ongoing survey research and departmental data collection to assess student alcohol and other drug (AOD) use. The data in this report were selected from multiple sources in order to inform the SA’s deliberations pertaining to the issue of student AOD use, and in particular the current discourse regarding the University’s Fraternity and Sorority Recognition Policy.

The surveys used to collect the data summarized below were each administered using similar methodologies. Each survey was administered to a randomly selected group of Cornell undergraduates (and in the case of the PULSE Survey, the entire undergraduate population). The surveys were voluntary and anonymous or confidential. The response rates for the surveys were typically close to 40%. Beginning in 2004, the surveys were administered online.

The data in the tables below provide an overview of patterns of consumption among undergraduates overall, with a focus on differences between fraternity and sorority members and non-members.

Table 1 summarizes the average number of drinks consumed by students in a typical week during the school year. The results suggest that the level of weekly consumption has remained relatively constant during the past decade, and that fraternity and sorority members tend to consume more than twice as many drinks as non-members.

**Table 1. Mean Number of Drinks Consumed in a Typical School Week
(Slope Day Survey 2004-2009)**

Year	2004 n=1330	2005 n=1685	2006 n=1756	2007 n=1722	2008 n=1658	2009 n=1973
Fraternity/sorority members	9.55	8.76	9.25	8.38	8.02	7.87
Non-fraternity/sorority members	4.20	3.65	3.47	3.50	3.20	3.15
All undergraduates	5.58	4.87	4.83	4.92	4.57	4.49

In the fall semesters of 2000, 2003, and 2005, Gannett administered the national Core Alcohol and Drug Survey (Core). The Core survey samples sizes ranged from 719 in 2000 to 1,969 in 2005. The national reference data below are based on responses from over 68,000 students who completed the Core survey in 2004.

Highlights of the findings from these administrations of the Core Survey include the following:

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Table 2. Percent of undergraduates using substances at least once within past year.

<u>Substance</u>	Cornell 2005	Cornell 2003	Cornell 2000	Nation 2004
Alcohol	83	85	82	85
Marijuana	30	34	31	33
Cocaine	4	3	2	6
Illegal drugs other than marijuana	4	4	6	---

Table 3. Percent of undergraduates reporting having experienced a negative consequence from alcohol or other drug use at least once in the past year.

<u>Consequence</u>	Cornell 2005	Cornell 2003	Cornell 2000	Nation 2004
Hangover	55	58	58	64
Memory loss	32	32	30	34
Missed a class	25	30	30	33
Performed poorly on a test or project	16	16	16	24
Been hurt or injured	14	14	12	16
Drove a car under the influence	13	12	17	31
Been in trouble with authorities	10	10	11	14
Thought I might have an AOD problem	8	10	10	11
Damaged property, pulled alarm, etc.	7	6	9	8

Variations in AOD use and related harm exist among subgroups in the student population. Trends that are consistent with national studies have been identified among Cornell students. For example, students from racial/ethnic minority groups consume lower levels of alcohol and illegal drugs and experience less AOD-related harm compared to white students, with Asian-Pacific Islander students reporting lower levels than under-represented minority students.

The 2005 Core Survey analysis of fraternity/sorority member and non-member use and related consequences is reflected in Tables 4 and 5.

Table 4. Percent of Cornell undergraduates using each substance at least once within the past year (2005).

<u>Substance</u>	Fraternity	Non-Fraternity	Sorority	Non-Sorority
Alcohol	98	79	95	81
Marijuana	53	25	52	26
Prescription stimulant (without a prescription)	16	5	12	4
Cocaine	13	4	8	3

Table 5. Percent of Cornell undergraduates experiencing negative consequences from alcohol or other drug use in the past year (2005).

<u>Consequence</u>	Fraternity	Non-Fraternity	Sorority	Non-Sorority
Hangover	87	49	85	50
Memory loss	62	24	59	30
Missed a class	55	20	54	22
Performed poorly on a test or project	29	12	35	14
Been hurt or injured	28	10	28	14
Drove a car under the influence	28	12	25	9
Been in trouble with authorities	26	10	13	7
Damaged property, pulled alarm, etc.	24	7	5	3
Thought I might have an AOD problem	18	8	14	6
Have been taken advantage of sexually	13	3	14	9

In the spring of 2006, Gannett administered the National College Health Assessment (n = 1,902). Tables 6 and 7 summarize selected findings from the NCHA.

Table 6. Number of Drinks Consumed the Last Time You "Partied"/Socialized
National College Health Assessment, Cornell, Spring 2006

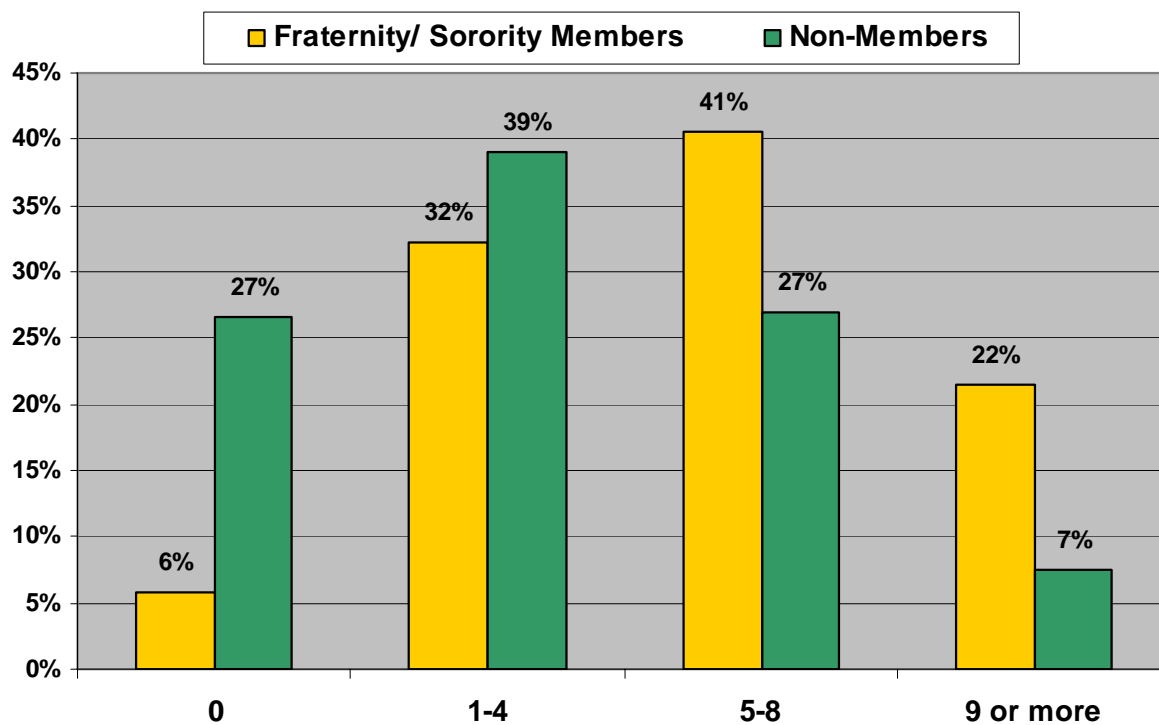
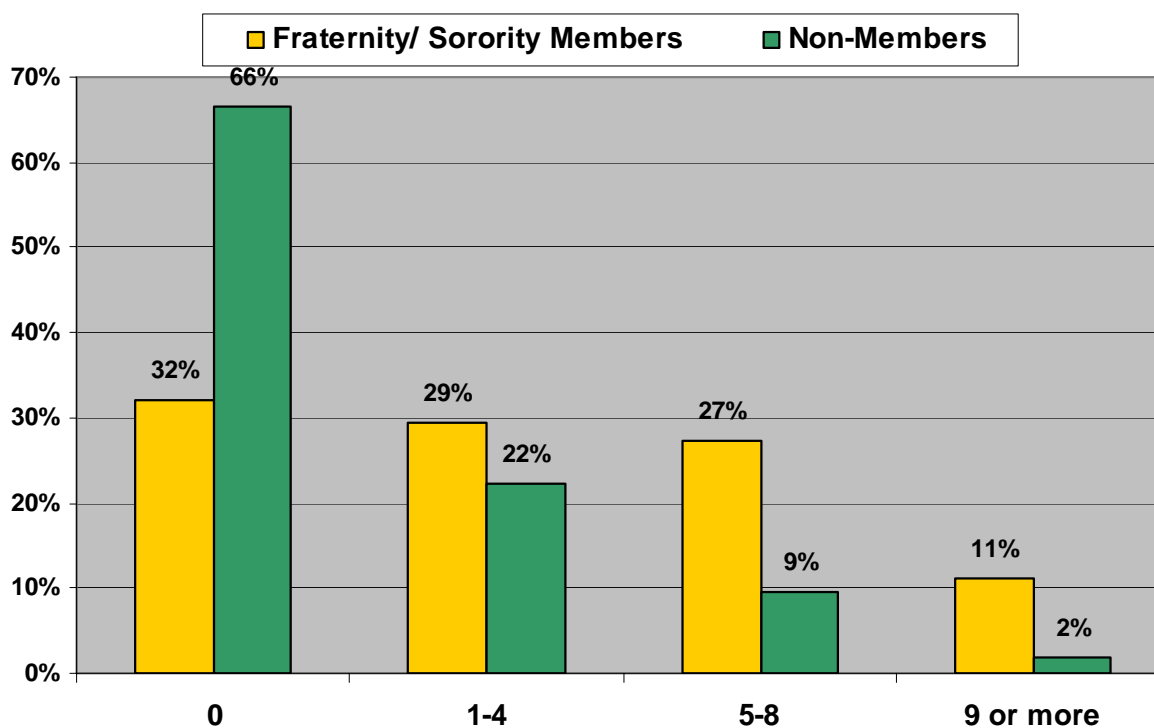


Table 8. Number of Times Students Consumed Five or More Drinks in a Sitting Within the Past Two Weeks
National College Health Assessment, Cornell 2006



In the spring of 2009, Cornell's Office of Institutional Research and Planning administered the PULSE Survey (n = 6,063, response rate = 46%). The results provide an additional view of alcohol use on campus. Table 9 presents data similar to the above variable on the NCHA, with a gender-specific measure of drinks in a sitting (five for males, four for females).

Table 9. Percent of Students Consuming Five (Males) or Four (Females) Drinks in a Sitting Within the Past Two Weeks
Cornell PULSE Survey, Spring 2009

	Percent
All Respondents	45
Fraternity	78
Non-Fraternity	36
Sorority	66
Non-Sorority	33

**Table 10. Percent of Students Consuming Five (Males) or Four (Females) Drinks in a Sitting Within the Past Two Weeks, by Year and “Greek” Affiliation
 Cornell PULSE Survey, Spring 2009**

	Percent
First Year Students	33
Greek	68
Non-Greek	24
Sophomores	42
Greek	72
Non-Greek	31
Juniors	48
Greek	74
Non-Greek	38
Seniors	57
Greek	75
Non-Greek	48

In addition to the above survey findings, summary data regarding alcohol incidents provide an additional perspective on AOD use and misconduct. The data in Table 11 are taken from a database that tracks referrals to Gannett Health Services for alcohol interventions. The figures indicate the number of referrals in three categories: Judicial Administrator (JA) referrals, Medical Amnesty Protocol (MAP) referrals, and referrals from staff in Residential Programs (Res Hall) or West Campus (WC) Houses. When comparing these data to reports from the Judicial Administrator and Cornell University Police, some apparent differences may be observed. Both the Judicial Administrator’s data and the data below reflect the Fiscal/Academic Year, whereas the Cornell University data are tracked on a calendar year basis. In addition, incidents that occur near the end of the academic year may not be processed until the following year, resulting in minor discrepancies between the data sets. In addition, medical emergencies reported by CUP do not always result in a MAP referral. For example, some medical emergencies involve violations not covered by the MAP, such as committing an assault.

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**Table 11. Mandated Referrals to Gannett Health Services Resulting from AOD Incidents
Academic Years 2008-2009 and 2009-2010**

1st time AOD incidents

	7/1/09-6/30/10	7/1/08-6/30/09
JA referrals	252	259
MAP referrals	70	77
Res Hall/WC House referrals	185	177
Total Referrals	507	513

2nd time AOD incidents

	7/1/09-6/30/10	7/1/08-6/30/09
JA referrals	73	55
MAP referrals	9	9
Res Hall/WC House referrals	8	6
Total Referrals	90	70

3rd time AOD incidents

	7/1/09-6/30/10	7/1/08-6/30/09
Total Referrals	6	11

Office of the Judicial Administrator
Adjudicated Persons with Drug- And/or Alcohol - Related Violations for Past 10 Years¹

	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008 ²
Persons w/ Alcohol Related Violations	108	151	277	293	401	426	402	494	388	429
Persons w/ Drug Related Violations	13	36	56	35	44	42	73	53	45	117
Persons w/ Alc &/or Drug Related Violations	118	184	327	325	442	465	461	544	430	538
% Adjudicated Persons w/ Alc Related Violations	35%	35%	39%	46%	58%	61%	56%	49%	43%	58%
% Adjudicated Persons w/ Alc Rel. Violations (No Copyright)	n/a	n/a	42%	60%	65%	62%	61%	68%	69%	65%
% Adjudicated Persons w/ Drug Rel. Violations	4%	8%	8%	5%	6%	6%	10%	5%	5%	16%
% Adjudicated Persons w/ Drug Rel. Violations (No Copyright)	n/a	n/a	8%	7%	7%	6%	11%	7%	8%	18%
% Adjudicated Persons w/ Alc &/or Drug Rel. Violations	38%	42%	46%	51%	64%	66%	64%	54%	47%	73%
% Adjudicated Persons w/ Alc &/or Drug Rel Violations (No Copyright)	n/a	n/a	49%	66%	71%	68%	70%	75%	76%	82%

¹ This table reflects cases in which alcohol or drugs were involved, whether or not it was the primary charge (for example, use of a fake ID or property damage while intoxicated). The data includes only cases that have been adjudicated and where the individual was either in violation or received a warning. Finally, if a matter is both alcohol and drug related, it is counted in the total of alcohol and drugs only once; therefore the totals of “alcohol” and “drug” may be less than “alcohol and drug.”

² Not all cases referred in Academic Year 2008 were resolved by the time this data was generated. Therefore, one should expect the figures in this column to be updated in next year’s report. In past years, these numbers increased slightly (2 – 3 percentage points), most likely because common types of referrals that remain unresolved until the fall are fake IDs used on Slope Day or other year-end alcohol-related misbehavior.