# Summary Report

# **Drug Awareness and Perception Survey: 2014**

Prepared by

Salma Mirza

Research Analyst

Institutional Research Office

Collin College

September 21, 2015

Exe	ecutive SummaryV
Sur	rvey Objectives
Me	thodology2
Ins	trument3
Rep	oort
SEC	CTION I
I.	DEMOGRAPHIC BACKGROUND4
SEC	CTION II
II.1.	WHETHER RESPONDENTS HAD READ COLLIN'S ALCOHOL AND DRUG POLICIES6
II.2.	EXTENT TO WHICH RESPONDENTS PERCEIVED ALCOHOL AND DRUGS AS DANGEROUS8
	II.2.1. Extent to Which Alcohol and Drugs are Perceived as Dangerous-Views by Respondents' Gender10
	II.2.2. Extent to Which Alcohol and Drugs are Perceived as Dangerous-Views by Respondents' Age12
II.3.	PERCEPTIONS ABOUT CONSUMPTION OF ALCOHOL AND DRUGS BY COLLIN STUDENTS 16
	II.3.1. Percentage of Collin Students who Consume Alcohol, Drugs, and Tobacco -Perceptions by Respondents' Gender
	II.3.2. Percentage of Collin Students who Consume Alcohol, Drugs, and Tobacco -Perceptions by Respondents' Age
II.4.	EXTENT TO WHICH CERTAIN BEHAVIORS ARE RELATED TO ALCOHOL AND DRUG ABUSE
II.5.	PERCEPTIONS ABOUT THE EXTENT COLLIN'S ENVIRONMENT IS CONDUCIVE TO DRINKING AND DOING DRUGS
II.6.	PERCEPTIONS WHETHER COLLIN'S STUDENTS DRINK, SMOKE, AND DO DRUGS MORE COMPARED TO STUDENTS AT OTHER COLLEGES24
II.7.	ACTUAL USE OF ALCOHOL AND DRUGS BY RESPONDENTS25
	II.7.1. Respondents' Ever-Use of Alcohol and Drugs25
	II.7.2. Respondents' Use of Alcohol and Drugs within the Last Year
II.8.	PARTY BEHAVIOR AND CONSEQUENCES EXPERIENCED BY THE RESPONDENTS WITHIN THE LAST YEAR
	II.8.1. Respondents' Party Behavior within Last Year
	II.8.2. Consequences of Alcohol and Drug Use Experienced by Respondents within the Last Year
II.9.	OPINIONS ABOUT HOW DRINKING, DOING DRUGS, AND SMOKING IMPACTS ONE
II.1(	D. AWARENESS AND USE OF ACTIVITIES ON CAMPUS THAT ADDRESS DRUG USE AND ABUSE
	II.10.1 Awareness of Activities on Campus that Address Drug Use and Abuse
	II.10.2 Participation in Activities on Campus that Address Drug Use and Abuse

### **Table of Contents**

SECTION III	39
III.OPEN-ENDED RESPONSES	39
RECOMMENDATIONS:	40
APPENDICES	41
QUESTIONNAIRE	58

## List of Figures

Figure 1. Alcohol and Drug Policies Read by Gender	7
Figure 2: Intend to Read Drug Policies by Gender	7
Figure 3. Respondents Perception of Danger About the Listed Substances	9
Figure 4. Mean Responses of Perception of Danger	10
Figure 5. Respondents' Consumption Perception of the 14 Substances	17
Figure 6. Perception of Behavioral Outcomes	22
Figure 7. Behavioral Outcomes by Respondents' Gender	23
Figure 8. Behavioral Outcomes by Respondents' Age	23
Figure 9. Perceptions about Collin's Environment Regarding Availability and Use of Drugs	s and
Alcohol	24
Figure 10. Perceptions of Drugs, Alcohol and Tobacco Use by Collin Students versus Stu	dents
at Other Colleges	25
Figure 11. Frequency of Ever-Use of the 14 Substances by Respondents	27
Figure 12. Frequency of Use of the 14 Substances within Last Year by Respondents	29

### List of Tables

Table 1. Gender
Table 2. Age
Table 3. Student Status
Table 4. Marital Status
Table 5. Work Status
Table 6. Living Arrangements
Table 7. GPA
Table 8. Campus at Which Attend Most Classes
Table 9. To What Extent do you Think the Following are Dangerous? By Gender11
Table 10. To What Extent do you Think the Following are Dangerous? By Age 13-15
Table 11. What Percentage of Collin Students do you Think Consume the Following
Substances? By Gender
Table 12. What Percentage of Collin Students do you Think Consume the Following
Substances? By Age
Table 13. In General, When you Partied/Socialized Within the last Year How Often did you do
the Following?
Table 14. In the Last year, how Often Have the Following Occurred due to your Drinking or
Drug Use?
Table 15. In Your Opinion, how Does Drinking, Drugs and Smoking Impacts one?
Table 16. Which Activities on Campus are you Aware of That Address Drug use and Abuse36
Table 17. What can the College do to Improve Awareness? Major themes
Table 18. Respondents' Participation in the Drug Use and Abuse Awareness Activities on
Campus
Table 19. Frequency Distribution of Major Themes (Open-Ended Comments)
Table A.1A. Have you Read Collin's Alcohol and Drug Abuse Policies that Were Sent to you
(Via Mail and Electronically)? By Age of Respondents
Table A.1B. Do you Intend to Read Collin's Alcohol and Drug Abuse Policies That Were Sent to
you? (Via Mail and Electronically)? By Age of Respondents
Table A.2. Extent to Which the Following are Related to Alcohol and Drug Abuse Percentage
and Mean Responses by Gender
Table A.3. Perceptions of Extent of Availability of Drugs, and Extent to Which Collin's
Atmosphere is Conducive to Drinking, Drugs and Smoking- Mean Responses by
Respondents' Gender
Table A.4. Perceptions Whether Collin Students Drink More, do Drugs More, Smoke Marijuana
and Smoke More than Students at Other Colleges- By Gender45
Table: B.1: What the College Can do to Improve Awareness of Resources/Activities 46-49
Table: B.2: Any Other Comments or Suggestions?       50-57

### **Executive Summary**

Collin College administered its tenth biennial Drug Awareness and Perception Survey in the fall of 2014 to certify compliance with the US Department of Education Drug-Free Schools and Communities Act (Amendment 1989) that requires institutions of higher education to determine the effectiveness of their drug prevention policies. The overall objective of the survey was to assess awareness of Collin's policies on alcohol and drug use, to study respondents' perceptions about alcohol and drugs, their actual use, reasons for use, and to assess respondents' awareness of resources/activities that address drug use and abuse at Collin; and to review and revise (if needed) Collin's existing programs in light of findings from the survey.

An electronic survey was administered to a sample of 3,499 credit students who enrolled in the fall of 2014. Three hundred and ninety-eight valid responses were received, yielding a response rate of 11%. Sixty-eight percent of the respondents were females, 62 percent were part-time students and 32% were 23 to 29 year old. At a later stage in the analysis it was uncovered that the sample provided to the Institutional Research Office (IRO) had grossly underrepresented the 18-22 age group, thus adding bias to the analysis of data in relation to age. The key findings of the survey are presented below:

- Fifty-nine percent of the respondents indicated reading Collin's policies on the use and possession of alcohol and drugs sent to them electronically. Forty percent of the respondents did not read them. There is an 11 percent decline in the percentage of respondents not reading the policies compared to the previous administration. A major reason contributing to the decline could be a change in the practice of dissemination of the policies. Prior to fall 2014, drug policies were sent to students electronically as well as via US Mail separately. In 2014, Collin availed the procedural change offered by the US Department of Education that allowed institutions to send the drug policies electronically only. However, Collin still included the drug policies as an accompaniment to other mandatory information sent to students on an annual basis. Collin may consider either reverting to the practices followed in the earlier administration or try sending the drug policies separately from other essential information to ensure they catch more attention and are not lost in the clutter. In addition it may consider strengthening efforts to educate students to read the drug policies.
- Respondents were asked to indicate the extent to which they considered a list of 14 substances as dangerous on a five point scale, where "1" equaled "not dangerous" and "5" equaled "extremely dangerous." A majority of students rated all substances except alcohol, as "extremely dangerous." Ninety-four percent of respondents rated heroine to be "extremely dangerous," followed by cocaine (85 percent), ecstasy (82 percent), LSD (81 percent), speed (80 percent), K2 (71 percent), Un-prescribed use of prescription drugs and steroids or human growth hormones (63 percent) and un-prescribed use of over-the-counter drugs (60 percent). The lowest mean response was for alcohol (3.3) and the highest was for

heroin (4.8). A lower value on the scale indicates that an item is perceived less dangerous while a higher value indicates vice versa.

- Compared to males, more female perceived the 14 substances as "extremely dangerous."
- Analysis by respondents' age indicates that younger age groups perceived most of the 14 substances as "less dangerous" compared to respondents in the older age groups.
- Sixty percent of the respondents believed that more than half of Collin's students consumed alcohol, 22 percent thought more than half consumed marijuana. Another 16 and 7 percent believed that more than half of Collin's students used tobacco (smoked) and tobacco (chewed or snuffed). The highest mean perceived consumption on four-point scale was for alcohol (2.9), followed by tobacco (smoked) (2.1) and marijuana (2.0). The lowest mean perceived use was or heroin and LSD (0.7), cocaine (0.9) and K2 (0.9); these substances were also regarded as "extremely dangerous" by majority of the respondents.
- Respondents from both genders and all age groups perceived alcohol as the most consumed and heroin as the least consumed among the 14 listed substances.
- Fifty-five percent of the respondents believed traffic accidents were related to alcohol and drug abuse to "some" or "to a large extent." Another 55% related their usage to suicide, 52% to sexual assault, 49% to poor academic performance, and 41% to personal injuries, to "some" or "to a large extent."
- More than half of the respondents perceived that Collin College's environment was not conducive to drinking or to using drugs. Forty-one percent believed drugs were not available on Collin's premises.
- Compared to males, female respondents perceived Collin's atmosphere to be less conducive to drinking and to using drugs by 4 points each. There was no difference in the perceptions between genders regarding the availability of drugs on Collin's premises (mean response of 2).
- Compared to students at other colleges, 35% of the respondents believe that Collin's students smoke/use tobacco products "about the same," drink "about the same" (27 percent), and smoke marijuana "about the same" (31 percent). On average, about 31% of the respondents do not think that Collin's students consume more alcohol, or do more drugs compared to their peers at other colleges. Less than 3% of the respondents think Collin's students surpass peers at other colleges in drinking, using drugs or smoking (marijuana, and tobacco).
- Ninety-four percent of the respondents stated that they had never used steroids or human growth hormones, K2 (92%), LSD (90%), speed and ecstasy (85%), cocaine and un-prescribed use of prescription drugs (82%), tobacco (chewed or snuffed) (81%) and un-prescribed use of over-the-counter drugs (80%). Over 60% of the respondents consumed alcohol "occasionally"; 7% claimed they had "never" tried it. The daily ever-use for all substances was low; highest daily use was

reported for tobacco smoked (7%) followed by marijuana (3%). The percentage of respondents who selected "don't want to answer" option was below 5%.

- Within the last year (prior to survey), over 94% of the students stated that they had never used steroids, heroin, speed, LSD, ecstasy, K2, cocaine, and tobacco (chewed or snuffed).
- Around half of the respondents said they had occasionally consumed alcohol for fun, while another 22 percent admitted they had either consumed "often," "very often" or "always" when they partied/socialized within the last year. Thirty four percent consumed alcohol "occasionally" to alleviate stress while another 10 percent used it "often," "very often" and "always" to alleviate stress when socializing within the last year. Thirty-seven percent said they set a limit on the number of drinks they would have at a party "often," "very often" and "always." Five percent participated in drinking games "often," "very often," and "always" while 12% joined in such games "occasionally." Twenty-one percent said they "always" rode home with a designated driver. Nine percent "always" drove home themselves after partying. About 9% of the respondents "always" refused to drink and another 22% refused "often" and "very often."
- Respondents were asked, to indicate the frequency with which certain behavioral, physical, and emotional outcomes happened because of their drinking and/or drug use within last year. In general, a very high percentage of respondents checked the category "never" for the 17 listed behavioral, physical and emotional outcomes. Twenty-six percent of students reported having a hangover "occasionally," 17 percent reported feeling sick, 8 percent did something they regretted later, 7 percent got into fight with their significant other, 4 percent passed out while another 4 percent "occasionally" became really depressed.
- In order to understand respondents' views, the survey asked them to select from a list of statements that related to drinking, using drugs, and tobacco/tobacco products. Respondents were of the opinion that drinking helps one loosen up socially/overcome social inhibitions (53%), it destroys one (42%), it helps one relieve stress/deal with stress (39%), and that drinking makes one look disgusting (30%). With regards to how drugs impact one, respondents were of the opinion that drugs destroy one (71%), using drugs makes one look disgusting (51%), and that using drugs helps one relieve stress/deal with stress (10%). In reference to smoking tobacco or using tobacco products, 59% of the respondents thought use of tobacco destroys one, makes one look disgusting (58%) and that it helps one relieve stress/deal with stress (24%).
- Regarding the awareness of resources and activities offered by Collin, 62% of the students were familiar with counseling and resources, 48% with Student Health 101 online magazine and an additional 48% with educational materials (brochures and pamphlets). Over 50% of the students claimed reading the Student Health 101 magazine, 30% reported using counseling resources and 26% educational materials that address drug use and abuse.

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

- Collin needs to strengthen its efforts to educate students about the importance of reading the drug policies.
- Collin may consider either reverting to the dissemination practices for drug policies followed in the earlier administration or try sending the policies separately from other essential information to ensure they catch attention and are not lost in the clutter; this possibly may lead to a higher number of students reading them.
- Continue to publicize the available resources/activities at Collin that address drug use and abuse. Since many students disclosed that they resorted to drugs, drinking and smoking to relieve stress, students should be made more aware of healthier and safer methods of dealing with stress. It is important to dispel the notion that drugs, alcohol and smoking alleviate stress.
- Communicate with students using multiple mediums including social media, text messaging and emails to promote awareness about alcohol and drug use.
- Continue to organize events like "drug free week" to increase awareness.
- Consider involving faculty to talk in class about Collin's resources that deal with drug and alcohol use/abuse.
- Invite student organizations, faculty and medical practitioners to participate in seminars and other awareness activities at Collin.
- Increase efforts to educate students about the risks of alcohol and drug abuse focusing on younger age groups. Data shows that younger students have the highest risk of alcohol and drug use.
- Continue efforts to improve the response rate in future online surveys:
  - Promote awareness among students that any email from Snap Collin is not spam; rather it is one of Collin's official surveys administered through the Institutional Research Office.
  - Deploy the Drug Awareness and Perception survey a week after sending policies.
  - Continue to advertise the Drug Awareness Survey during the fall activities of the college.

## SUMMARY REPORT

## **DRUG AWARENESS AND PERCEPTION SURVEY: 2014**

### Survey Objectives

Collin College administered its biennial Drug Awareness and Perception Survey in the fall of 2014. The survey is administered in compliance with the U.S. Department of Education Drug-Free Schools and Campuses Act. According to this Act all institutions of higher education must revisit and review their alcohol and drug policies every two years. The survey has the following objectives:

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

### Methodology

- (1) Drawing a representative random sample: A random sample of 3,499 students was drawn from the enrolled credit students in the fall of 2014 by the Student Development. In order to ensure no minors were included in the sample, clear guidelines were provided by IRO to exclude less than 18 years olds because the survey asked sensitive questions, such as respondents' actual use of alcohol, drugs, and tobacco and the behavioral consequences experienced after consuming them. At a later stage in the analysis, it was noted that rather than excluding less 18 years olds from the sample, it had grossly underrepresented the 18-22 age group. This has added bias to the results, particularly to the analysis relating to age.
- (2) Informing the students about the upcoming survey: Collin's policies on the use and possession of alcohol and drugs were sent via CougarMail to every student enrolled in one or more credit classes. An electronic letter signed by the college president was sent to all students with a packet containing the policies. The cover letter requested the students to read the policies and informed them about Collin's upcoming Drug Survey. The letter also notified that some of them will be randomly selected to receive the survey and encouraged the students to respond to the survey.
- (3) Administering the survey: Drug Awareness and Perception Survey was administered electronically using Snap Surveys software. CougarMail addresses were retrieved using Banner and Argos. Every student in the sample was sent an invitation letter via CougarMail that included-the survey link and detailed instructions. The students were assured anonymity. Three hundred and ninety-eight valid responses were received, yielding a response rate of 11%.
- (4) Follow-up emails: A week later follow-up emails were sent to the entire sample of students. Because the survey was completely anonymous, there was no way to track who had responded earlier. Therefore the entire sample received a follow-up email which again assured anonymity and confidentiality of responses. Students were requested to respond, if they had not already done that.
- (5) Assurance of anonymity. Not only did the cover letter assure respondents anonymity of their responses, but the sensitive questions were also prefaced with the assurance that there was no way to link their responses to their identity. For sensitive questions respondents were given the option to check the box "do not want to answer."

Four hundred and one responses were received by the Institutional Research Office (IRO). The completed sample size gave a confidence of 95% with an error band of plus and minus 5 percent. The data was downloaded and processed by IRO using SPSS and Excel.

### Instrument

The 2014 survey instrument maintains the same structure and content as the one used in the 2012 survey (see Appendix C). It is divided into two sections. Section I relates to demographic and other background information about the respondents. Section II provides information on whether (1) respondents had read Collin's alcohol and drug policies or they intended to read them; (2) their perceptions of how dangerous the 14 listed substances were; (3) their perceptions of use of the 14 substances by Collin students; (4) their perceptions of the extent alcohol and drug use were related to traffic accidents, personal injuries, poor academic performance, sexual assault and suicide; (5) their perceptions of availability of drugs within the Collin environment and how conducive Collin's environment is to drinking and using drugs; (6) their perceptions of whether Collin's students drink and use drugs more compared to students at other colleges; (7) their frequency of ever-use of the 14 substances; (8) their frequency of use of the 14 substances within the last year (9) their party/socialization behavior within last year; (10) their frequency of physical, social, and other behavioral aftermaths of drinking and drug use within the last year; (11) their views about impacts of drinking, drugs, and tobacco; (12) their awareness and participation in activities/resources offered by Collin that address drug use and abuse, and (13) their suggestions on how Collin could improve awareness of its resources. The last question invited open-ended comments and suggestions from the students.

### Report

The report comprises of three sections which broadly match the overall flow of the survey instrument. Section I features the demographic profile of the respondents. Section II presents respondents' perceptions of the extent to which they considered the 14 substances as dangerous; their perceptions of consumption of the 14 substances by Collin students: the reason they think students consume drugs, alcohol and tobacco; their perceptions on the extent alcohol and drugs were responsible for traffic accidents, personal injuries, poor academic performance, sexual assault and suicide: their perceptions about Collin environment; their perceptions on whether Collin students do more drugs and/or consume more alcohol and/or smoke more than the students of other colleges; their ever use of the 14 items; their actual usage of the 14 items within the last year; what they did when they partied/socialized within the last year; their behavioral outcomes of drinking and drug use within the last year; their opinions on how drinking, drugs and tobacco use affects one; their awareness of activities/resources offered by Collin that address drug use and abuse; their participation in any of the activities/resources and how Collin could improve awareness of its resources. Section III presents qualitative analysis of open-ended comments.

# **SECTION I**

### I. DEMOGRAPHIC BACKGROUND

This section presents demographic information about the respondents including gender, age, student status, marital status, employment status, living arrangements, overall GPA and primary campus (Table 1-8).

Of the total respondents 68 percent were females while 29 percent were males. Only one percent of the respondents were 18 to 22 years of age; a drastic reduction from the 45 percent in 2012. As mentioned before, this is because of a gross misrepresentation of the 18-22 years age group. The sample cannot be deemed representative of the Collin population and hence derive biased results, specifically for age based analysis. Therefore caution must be exercised in making inferences on the data based on age comparisons.

Thirty-seven percent of the respondents were full time students, a reduction of 7 points from the 2012 survey, 47 percent were married, and around 74 percent were working either part or full time, which represents a 5 point increase from 2012. About half of the respondents lived with non-parents off campus and 32 percent lived alone off campus. Thirty-four percent of the responding students reported a GPA of over 3.5 and 33 percent between 3.0 and 3.49. Forty-seven percent of the respondents attended most classes at the Spring Creek campus and little over a quarter identified Preston Ridge as their primary campus.

	Frequency	Percent
Female	272	68.3%
Male	115	28.9%
Total	387	97.2%
No response	11	2.8%
Grand Total	398	100.0%

Table 2. Age		
	Frequency	Percent
18-22	5	1.3%
23-29	127	31.9%
30-35	73	18.3%
36-40	51	12.8%
41-54	114	28.6%
55+	25	6.3%
Total	395	99.2%
No response	3	0.8%
Grand Total	398	100.0%

#### **Table 3. Student Status**

	Frequency	Percent
Full-time	146	36.7%
Part-time	248	62.3%
Total	394	99.0%
No response	4	1.0%
Grand Total	398	100.0%

### **Table 4. Marital Status**

	Frequency	Percent
Single	155	38.9%
Married	188	47.2%
Separated	3	0.8%
Divorced	46	11.6%
Widowed	3	0.8%
Total	395	99.2%
No response	3	0.8%
Grand Total	398	100.0%

### Table 5. Work Status

	Frequency	Percent
Yes, full-time	211	53.0%
Yes, part-time	82	20.6%
No	98	24.6%
Total	391	98.2%
No response	7	1.8%
Grand Total	398	100.0%

### Table 6. Living Arrangements

	Frequency	Percent
Alone off campus	129	32.4%
With parent(s)	65	16.3%
With non-parent on campus	3	0.8%
With non-parent off campus	198	49.7%
Total	395	99.2%
No response	3	0.8%
Grand Total	398	100.0%

### Table 7. GPA

	Frequency	Percent
>3.5	135	33.9%
3.0 - 3.49	132	33.2%
2.5 - 2.99	69	17.3%
2.0 - 2.49	32	8.0%
<2.0	14	3.5%
No GPA (first-time-in-college)	13	3.3%
Total	395	99.2%
No response	3	0.8%
Grand Total	398	100.0%

# Table 8. Campus at Which Attend MostClasses

	Frequency	Percent
Central Park Campus (CPC)	74	18.6%
Spring Creek Campus (SCC)	185	46.5%
Preston Ridge Campus (PRC)	102	25.6%
Collin Higher Education Center	2	0.5%
Other	26	6.5%
Total	389	97.7%
No response	9	2.3%
Grand Total	398	100.0%

# **SECTION II**

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

The respondents were asked if they had read Collin's alcohol and drug abuse policies that were sent to them electronically. Around 60 percent of the respondents stated that they had read the policies whereas 40 percent stated they had not. Almost same percentages of males and females (59% and 60%) reported reading the policies (Figure 1). This is similar to 2012 where the gender differences were also minimal. However, compared to 2012, there is a decline of 11 percentage points in both genders who reportedly had not read the policies. A major reason contributing to this could be a change in the practice of dissemination of the policies. Prior to fall 2014, drug policies were sent to students electronically as well as via US Mail. For the 2014 administration, the policies accompanied other mandatory information which is sent on an annual basis. Collin may consider either reverting to the practices followed in the earlier administration or try sending the drug policies separately from other essential information to ensure they catch more attention and are not lost in the clutter; this possibly may lead to higher numbers reading them.

Seventy-two percent of the 55+ age group, 65 percent of the 41-45 age group and 61 percent of the 23-29 age group have reported to have read the policies. With the exception of 23-29 age group, the result is similar to the previous surveys where older respondents tend to read the policies as opposed to the younger age groups (Appendix Table 1A). It is pertinent to note here that some age groups had very few responses compared to others, thus making across group comparisons insignificant.

A follow-up question about the intention to read policies was posed to only those respondents who had not read them. Overall, of those who had not read the policies, 78 percent had no intention of reading them; this is two percent point less than that in the 2012 survey. Out of those who had not read the policies, 91 and 72 percent of the males and females respectively reporting no intention of reading them (Figure 2). Analysis by age indicates that 80 percent of 30-35 year-olds and over 75 percent of 23-29, 36-40 and 41-54 year-olds had no intention of reading Collin's drug policies. The remaining age-groups are not mentioned because their frequencies are too small for any meaningful analysis. (Appendix Table 1B). Collin needs to strengthen its efforts to educate students about the importance of reading the drug policies.

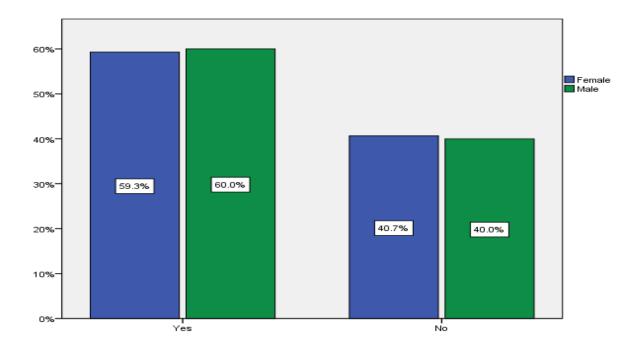


Figure 1. Alcohol and Drug Policies Read by Gender

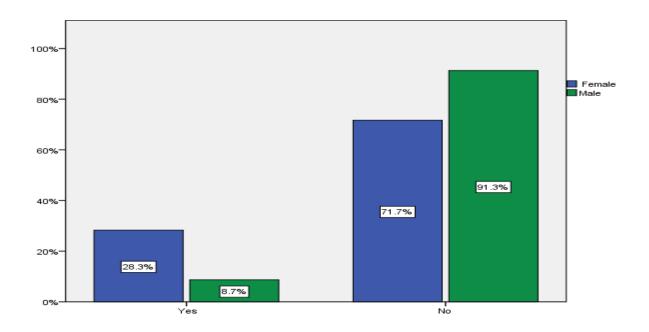


Figure 2: Intend to Read Drug Policies by Gender

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

The respondents were asked to indicate the extent to which they perceived a list of 14 substances as dangerous on a five-point scale where "1" represented "Not Dangerous" and "5" represented "Extremely Dangerous." Respondents could also select "Don't know" as a valid option. The list included alcohol (beer, wine, & liqueur), cocaine, ecstasy, heroin, LSD, marijuana (such as pot, weed, hashish), speed, tobacco (smoked), tobacco (chewed, snuffed), hookah (tobacco from water pipe), un-prescribed use of prescription drugs, un-prescribed use of over-the-counter drugs, steroids or human growth hormones and K2 (Herbs coated with synthetic chemicals that mimic marijuana high when smoked).

Figure 3 indicates that majority of students rated all substances except alcohol, as "Extremely Dangerous." Ninety-four percent of respondents rated heroine to be "Extremely Dangerous," followed by cocaine (85 percent), ecstasy (82 percent), LSD (81 percent), speed (80 percent), K2 (71 percent), un-prescribed use of prescription drugs and steroids or human growth hormones (63 percent) and un-prescribed use of over-thecounter drugs (60 percent).

Tobacco products (smoked as well as chewed or snuffed) each earned a rating of "Extremely Dangerous" from 38 percent of respondents while marijuana was regarded such by 36 percent of the respondents. At 28 percent, the percentage of respondents rating hookah as a "4" was the same as the percent rating it as "Extremely Dangerous." Alcohol was given a rating of "3" by 39 percent of the respondents with 18 percent regarding it as an "Extremely Dangerous" substance.

The mean<sup>1</sup> responses on a five-point scale where "1" equaled "Not Dangerous" and "5" equaled "Extremely Dangerous" indicate that 9 of the 14 listed substances had a mean rating of over 4.0. Heroin received the highest mean rating of 4.8, trailed by cocaine (4.7), ecstasy (4.6), speed (4.6), LSD (4.5), un-prescribed use of prescription drugs, steroids or human growth hormones and K2 (4.3) and un-prescribed use of over-the-counter drugs (4.2). The substances which received a mean rating of less than 4, included both tobacco categories (smoked and chewed or snuffed) with the same mean rating (3.8) followed by marijuana (3.5), hookah (3.4) and alcohol (3.3).

<sup>&</sup>lt;sup>1</sup> Mean excludes the "Don't know" response choice.

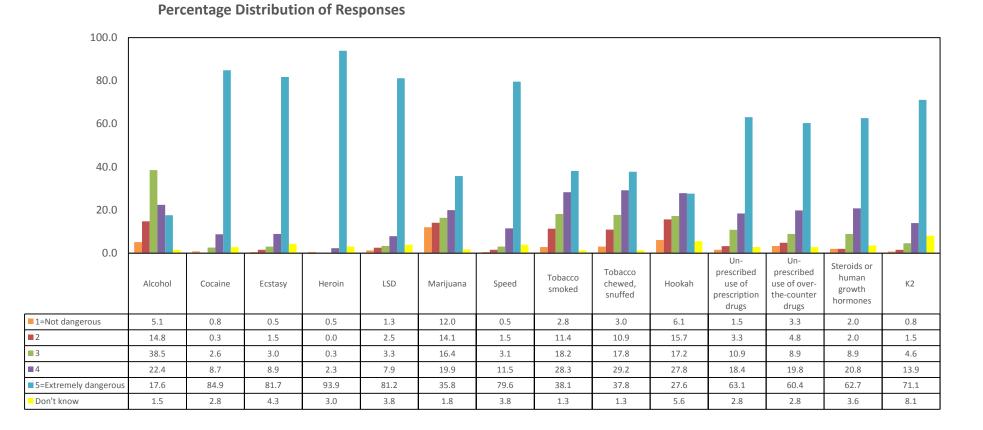


Figure 3. Respondents' Perception of Danger about the Listed Substances

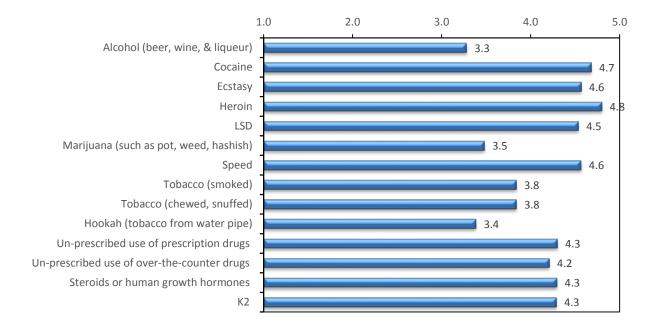


Figure 4. Mean Responses of Perception of Danger about the Listed Substances

# II.2.1. Extent to Which Alcohol and Drugs are Perceived as Dangerous-Views by Respondents' Gender

Table 9 presents the extent to which respondents find the listed substances as dangerous based on gender comparisons. Similar to the pattern in previous years, female respondents perceived the listed substances as more dangerous than their male counterparts. However, compared to previous years the gender differences have narrowed considerably. The percentage of women perceiving steroids or human growth hormones as "Extremely Dangerous" is higher by 12 points; cocaine by 10 points; LSD by 9 points, ecstasy and marijuana each by 7 points, K2 by 4 points and alcohol by 1 point. Conversely, slightly higher percentage of males regarded heroin and tobacco products (smoked as well as chewed or snuffed), as "Extremely Dangerous" than did females. Ninety-five percent of males perceived heroin as "Extremely Dangerous" is 2 percentage points higher in males than in females. Speed is considered "Extremely Dangerous" by 80 percent of both males and females. Following alcohol, hookah is considered the least dangerous out of the 14 listed substances. Equal percentage (27%) of males and females rated hookah as "Extremely Dangerous."

# Table 9. To What Extent do you Think the Following Are Dangerous?Perceptions by Respondents' Gender and Mean Response on Scale

		Perc	eptions o	of Danger	(in perce	ent)				
		1=Not				5=Extremely	Don't			
		dangerous	2	3	4	dangerous	know	Total	Ν	Mean <sup>2</sup>
Alcohol (beer, wine, & liquor)						-				
	Female	4.9	14.6	36.2	25.0	17.9	1.5	100	268	3.32
	Male	6.1	16.5	42.6	16.5	16.5	1.7	100	115	3.16
Cocaine										
	Female	0.7	0.4	1.1	6.4	88.0	3.4	100	267	4.70
	Male	0.9	0.0	6.2	12.4	78.8	1.8	100	113	4.63
Ecstasy										
	Female	0.7	1.5	1.5	7.7	84.1	4.4	100	271	4.60
	Male	0.0	1.8	6.2	10.6	77.9	3.5	100	113	4.54
Heroin										
	Female	0.7	0.0	0.0	2.2	93.3	3.7	100	270	4.76
	Male	0.0	0.0	0.9	2.6	94.7	1.8	100	114	4.87
LSD										
	Female	1.5	1.1	3.0	5.9	84.0	4.5	100	269	4.57
	Male	0.0	6.1	3.5	12.3	75.4	2.6	100	114	4.49
Marijuana (such as pot, weed, hashish)										
	Female	10.1	12.7	15.0	22.5	37.5	2.2	100	267	3.58
	Male	17.4	15.7	20.0	14.8	31.3	0.9	100	115	3.24
Speed										
	Female	0.7	1.5	2.2	11.2	80.1	4.1	100	267	4.56
	Male	0.0	0.9	5.2	10.4	80.0	3.5	100	115	4.59
Tobacco (smoked)										
	Female	3.3	8.5	17.7	32.5	36.5	1.5	100	271	3.86
	Male	1.7	18.3	20.9	19.1	39.1	0.9	100	115	3.73
Tobacco (chewed, snuffed)										
	Female	3.3	8.6	17.5	32.3	36.8	1.5	100	269	3.86
	Male	2.6	16.5	20.0	22.6	37.4	0.9	100	115	3.73
Hookah (tobacco from water pipe)										
	Female	6.3	11.5	17.8	30.7	27.0	6.7	100	270	3.41
	Male	5.2	26.1	17.4	20.9	27.0	3.5	100	115	3.28
Un-prescribed use of prescription drugs			o <b>7</b>		10.0			400	074	4.00
	Female	1.8	3.7	7.7	19.2	63.8	3.7	100	271	4.28
	Male	0.9	0.9	19.1	17.4	60.9	0.9	100	115	4.34
Un-prescribed use of over-the-counter drugs	<b>-</b> .						- <b>-</b>			
	Female	3.0	4.8	7.4	20.0	61.1	3.7	100	270	4.20
	Male	3.5	4.3	12.2	20.9	58.3	0.9	100	115	4.23
Steroids or human growth hormones	<b>F</b>	0.0		5.0	10.0	00 5		100	000	4.00
	Female	2.2	2.2	5.6	19.3	66.5	4.1	100	269	4.33
1/2	Female	0.9	1.7	15.7	24.3	54.8	2.6	100	115	4.23
K2		o =		o <b>7</b>	10 -	76.5		400	070	
	Male	0.7	1.1	3.7	13.7	72.2	8.5	100	270	4.30
	Female	0.9	1.7	7.0	15.7	67.8	7.0	100	115	4.27

<sup>&</sup>lt;sup>2</sup> Mean excludes the "Don't know" response choice.

# II.2.2. Extent to Which Alcohol and Drugs are Perceived as Dangerous-Views by Respondents' Age

Table 10 provides an analysis of the extent to which respondents in each age group regarded the 14 substances as dangerous. Generally, younger respondents regard each of the 14 substances as less dangerous compared to older respondents. The oldest age group (55 +) regarded most of the listed substances as "Extremely Dangerous" with the exception of heroin (led by 23-29 age group with mean response of 4.87), speed (led by 36-40 year old age group with mean response of 4.82) and un-prescribed use of prescription drugs (led by 18-22 year age group with a mean response of 4.60). However, with only 5 respondents belonging to the 18-22 year age group, caution must be exercised when assigning any inferential meaning to group comparisons across age groups.

An aggregate of the two response choices, "1= Not Dangerous" and "2" indicates that tobacco (chewed, snuffed) is perceived as least dangerous by 39 percent of 23-29 year olds; marijuana, by 37 percent of 23-29 year olds and alcohol by 25 percent of 23-29 year olds.

# Table 10. To What Extent do you Think the Following Are Dangerous?Perceptions by Respondents' Age and Mean Response on Scale

		Perceptions of Danger (in percent)									
		1=Not				5=Extremely	Don't				
	da	angerous	2	3	4	dangerous	know	Total	Ν	Mean*	
Alcohol (beer, wine, & liquor)											
	18-22	0.0	20.0	60.0	20.0	0.0	0.0	100	5	3.00	
	23-29	5.6	19.0	41.3	24.6	7.1	2.4	100	126	3.02	
	30-35	5.5	9.6	46.6	12.3	24.7	1.4	100	73	3.37	
	36-40	2.0	15.7	29.4	19.6	33.3	0.0	100	51	3.67	
	41-54	6.3	13.5	36.9	24.3	17.1	1.8	100	111	3.27	
	55+	4.2	12.5	20.8	37.5	25.0	0.0	100	24	3.67	
Cocaine											
	18-22	0.0	0.0	0.0	40.0	60.0	0.0	100	5	4.60	
	23-29	0.8	0.8	4.0	7.3	85.5	1.6	100	124	4.71	
	30-35	0.0	0.0	2.8	11.1	79.2	6.9	100	72	4.49	
	36-40	0.0	0.0	4.0	4.0	90.0	2.0	100	50	4.78	
	41-54	1.8	0.0	0.9	10.6	85.0	1.8	100	113	4.72	
	55+	0.0	0.0	0.0	0.0	95.8	4.2	100	24	4.79	
Ecstasy											
· · · · · · · · · · · · · · · · · · ·	18-22	0.0	0.0	0.0	40.0	60.0	0.0	100	5	4.60	
	23-29	0.0	2.4	2.4	11.9	78.6	4.8	100	126	4.52	
	30-35	0.0	2.8	4.2	11.3	76.1	5.6	100	71	4.44	
	36-40	0.0	2.0	3.9	2.0	88.2	3.9	100	51	4.65	
	41-54	1.8	0.0	3.5	7.0	84.2	3.5	100	114	4.61	
	55+	0.0	0.0	0.0	0.0	96.0	4.0	100	25	4.80	
Heroin	55+	0.0	0.0	0.0	0.0	30.0	4.0	100	25	4.00	
Heroin	40.00	0.0	0.0	0.0	20.0	00.0	0.0	100	-	4.00	
	18-22		0.0	0.0	20.0	80.0	0.0	100	5	4.80	
	23-29	0.0	0.0	0.0	1.6	96.1	2.4	100	127	4.87	
	30-35	0.0	0.0	0.0	4.2	88.7	7.0	100	71	4.61	
	36-40	0.0	0.0	2.0	0.0	96.0	2.0	100	50	4.86	
	41-54	1.8	0.0	0.0	2.6	93.9	1.8	100	114	4.82	
	55+	0.0	0.0	0.0	0.0	96.0	4.0	100	25	4.80	
LSD											
	18-22	0.0	0.0	20.0	20.0	60.0	0.0	100	5	4.40	
	23-29	0.8	4.0	4.8	4.8	80.6	4.8	100	124	4.46	
	30-35	1.4	4.2	2.8	11.1	75.0	5.6	100	72	4.38	
	36-40	0.0	3.9	0.0	5.9	88.2	2.0	100	51	4.73	
	41-54	2.6	0.0	2.6	11.4	80.7	2.6	100	114	4.60	
	55+	0.0	0.0	0.0	0.0	96.0	4.0	100	25	4.80	

### Table 10. Continued

			Perceptions	s of Danger	(in percen					
		1=Not				5=Extremely	Don't			
	d	angerous	2	3	4	dangerous	know	Total	Ν	Mean*
Marijuana (such as pot, weed, hashish)									5 127 72 51 109 25 5 126 72 51 112 24 5 127 72 51 114 25 5 125 72 51 114 25 5 125 72 51 114 25 5	
	18-22	0.0	0.0	20.0	80.0	0.0	0.0	100	5	3.80
	23-29	19.7	17.3	19.7	16.5	26.0	0.8	100	127	3.09
	30-35	15.3	18.1	12.5	15.3	37.5	1.4	100	72	3.38
	36-40	5.9	9.8	19.6	19.6	45.1	0.0	100	51	3.88
	41-54	7.3	11.9	14.7	25.7	36.7	3.7	100	109	3.61
	55+	0.0	4.0	8.0	16.0	68.0	4.0	100	25	4.36
Speed										
	18-22	0.0	0.0	0.0	40.0	60.0	0.0	100	5	4.60
	23-29	0.0	1.6	4.0	14.3	76.2	4.0	100	126	4.53
	30-35	0.0	1.4	1.4	11.1	77.8	8.3	100	72	4.40
	36-40	0.0	2.0	3.9	3.9	90.2	0.0	100	51	4.82
	41-54	1.8	1.8	3.6	12.5	77.7	2.7	100	112	4.54
	55+	0.0	0.0	0.0	0.0	95.8	4.2	100	24	4.79
Tobacco (smoked)										
	18-22	0.0	20.0	40.0	20.0	20.0	0.0	100	5	3.40
	23-29	4.7	14.2	17.3	34.6	28.3	0.8	100	127	3.65
	30-35	1.4	15.3	16.7	27.8	34.7	4.2	100	72	3.67
	36-40	2.0	7.8	19.6	25.5	45.1	0.0	100	51	4.04
	41-54	2.6	8.8	22.8	25.4	39.5	0.9	100	114	3.88
	55+	0.0	4.0	0.0	16.0	80.0	0.0	100	25	4.72
Tobacco (chewed, snuffed)										
	18-22	0.0	40.0	20.0	20.0	20.0	0.0	100	5	3.20
	23-29	4.8	13.6	16.8	36.8	27.2	0.8	100	125	3.66
	30-35	2.8	12.5	15.3	30.6	37.5	1.4	100	72	3.83
	36-40	2.0	7.8	21.6	25.5	43.1	0.0	100	51	4.00
	41-54	2.6	8.8	22.8	25.4	37.7	2.6	100	114	3.79
	55+	0.0	4.0	0.0	12.0	84.0	0.0	100	25	4.76
Hookah (tobacco from water pipe)										
	18-22	0.0	0.0	40.0	40.0	20.0	0.0	100	5	3.80
	23-29	12.6	26.0	21.3	24.4	12.6	3.1	100	127	2.89
	30-35	4.2	15.3	15.3	30.6	31.9	2.8	100	72	3.63
	36-40	3.9	9.8	17.6	29.4	35.3	3.9	100	51	3.71
	41-54	2.7	10.6	16.8	30.1	30.1	9.7	100	113	3.45
	55+	0.0	4.0	0.0	20.0	64.0	12.0	100	25	4.08

#### Table 10. Continued

		P	Perceptions	s of Danger	(in percer	nt)				
		1=Not				5=Extremely	Don't			
		dangerous	2	3	4	dangerous	know	Total	Ν	Mean
Un-prescribed use of prescription drugs										
	18-22	0.0	0.0	0.0	40.0	60.0	0.0	100	5	4.6
	23-29	0.8	6.3	17.3	18.1	54.3	3.1	100	127	4.0
	30-35	1.4	2.8	16.7	16.7	59.7	2.8	100	72	4.2
	36-40	2.0	0.0	5.9	21.6	70.6	0.0	100	51	4.5
	41-54	2.6	1.8	5.3	18.4	69.3	2.6	100	114	4.4
	55+	0.0	4.0	0.0	16.0	72.0	8.0	100	25	4.3
Un-prescribed use of over-the-counter drugs										
	18-22	0.0	0.0	0.0	60.0	40.0	0.0	100	5	4.4
	23-29	5.6	7.9	14.3	21.4	48.4	2.4	100	126	3.9
	30-35	1.4	5.6	9.7	20.8	56.9	5.6	100	72	4.1
	36-40	3.9	2.0	3.9	19.6	70.6	0.0	100	51	4.5
	41-54	2.6	1.8	7.0	17.5	67.5	3.5	100	114	4.3
	55+	0.0	8.3	0.0	12.5	79.2	0.0	100	24	4.6
Steroids or human growth hormones (for body building)										
	18-22	0.0	0.0	0.0	80.0	20.0	0.0	100	5	4.2
	23-29	3.2	3.2	12.0	22.4	54.4	4.8	100	125	4.0
	30-35	1.4	1.4	6.9	22.2	62.5	5.6	100	72	4.2
	36-40	0.0	2.0	9.8	17.6	68.6	2.0	100	51	4.4
	41-54	2.6	1.8	8.8	18.4	66.7	1.8	100	114	4.3
	55+	0.0	0.0	0.0	12.0	84.0	4.0	100	25	4.6
K2										
	18-22	0.0	0.0	0.0	40.0	60.0	0.0	100	5	4.6
	23-29	0.8	2.4	6.3	16.7	63.5	10.3	100	126	4.0
	30-35	0.0	0.0	5.6	11.1	70.8	12.5	100	72	4.1
	36-40	0.0	3.9	3.9	13.7	74.5	3.9	100	51	4.4
	41-54	1.8	0.9	3.5	14.0	74.6	5.3	100	114	4.4
	55+	0.0	0.0	0.0	4.0	88.0	8.0	100	25	4.5

\*Mean excludes the "Don't know" response choice

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

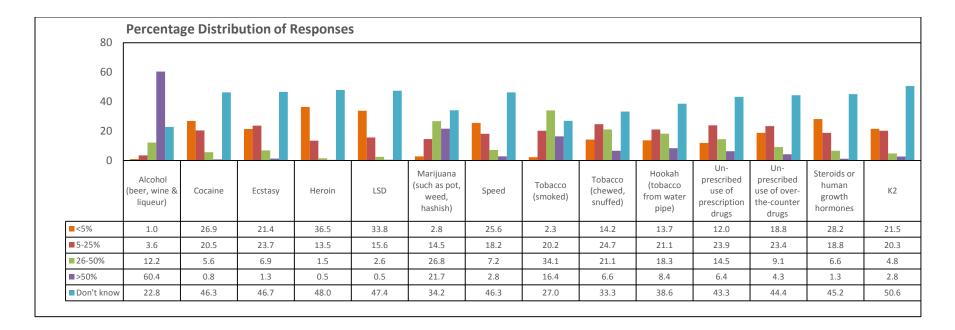
In order to seek information about the prevalence of alcohol and drugs in Collin's environment, the survey asked the respondents, "What percentage of Collin's students do you think consume the following substances?" The list of 14 substances was followed with five response choices: "<5," "5-25%," "26-50%," ">50%," and "Don't Know."

Figure 5 indicates that 60 percent of the respondents think that more than half of the students at Collin consume alcohol; 22 percent marijuana, 16 percent tobacco (smoked) and 7 percent tobacco (chewed or snuffed). Another 34 and 27 percent of the respondents respectively perceive that tobacco (smoked), and marijuana is used by "26-50%" of Collin students.

With the exception of tobacco (smoked) (27 percent), and alcohol (23 percent), high percentages of respondents stated "Don't Know" about the extent of consumption of the 14 substances by Collin students. The highest percentage of respondents selecting the "Don't Know" option were for K2 and heroin usage (51 and 48 percent respectively). These were followed by LSD (47 percent), ecstasy (47 percent), speed (46 percent), cocaine (46 percent) and steroids or human growth hormones (45 percent). Compared to 2012 data, the percentage of respondents selecting "Don't Know" was higher for each item. In the case of heroin, speed and ecstasy, the percentage of respondents opting for "Don't Know" was around 11 percentage points higher from 2012. For K2 and LSD the percentage was 10 points higher; for cocaine 9 points; for marijuana and steroids 8 points; tobacco (smoked), un-prescribed use of prescription drugs and un-prescribed use of over-the-counter drugs, 7 points, and alcohol and hookah it was 6 percentage points higher from 2012.

Figure 5 also presents the mean<sup>3</sup> response of perception of consumption of the 14 substances on a 4-point scale. A lower value on the scale indicates a lower perceived consumption and a higher value represents a higher perceived consumption of a substance. The highest mean value on the scale was for alcohol (2.9), followed by tobacco (smoked) (2.1) and marijuana (2.0). The lowest mean values were for heroin (0.7), LSD (0.7), cocaine (0.9) and K2 (0.9). The above analysis is based on respondents' perceptions only and may not entirely be a representation of the true usage in the college. Many factors influence respondents' perceptions including gender and age, for which tables 11 and 12 provides a comprehensive analysis.

<sup>&</sup>lt;sup>3</sup> Mean excludes the "Don't know" response choice.



Mean Response on a 4-point Scale

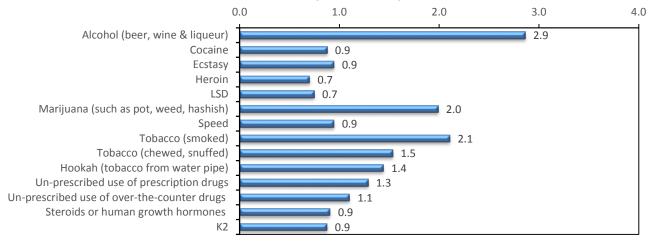


Figure 5. Respondents' Perceptions of Consumption of the 14 Substances by Collin Students

### II.3.1. Percentage of Collin Students who Consume Alcohol, Drugs, and Tobacco -Perceptions by Respondents' Gender

Analysis based on gender indicates that for each of the 14 substances, females as opposed to males perceived that a higher percentage of Collin's students consumed the 14 substances. Over 60 percent of females and 58 percent of males perceive that more than half of the student body at Collin consumed alcohol. Over 22 percent of females and 19 percent of males believed that the consumption of marijuana was prevalent in over 50% of the student body. In the case of tobacco (smoked), around 19 percent of females believe that more than half of the students at Collin consumed it, whereas only 11 percent of males believed so. The gender gap in the "> 50" category was largest in the case of un-prescribed use of prescription drugs where around 9 percent of females and only 1 percent of males felt that usage was prevalent in over half of Collin students.

The percentage of respondents holding the opinion that less than 5% of Collin students consume any of the 14 substances was more in males than in females. Around 40 percent of males felt that the percentage of people using heroin in Collin was less than 5% as opposed to 35 percent of females. The largest gender gap in this category was 9 percentage points for tobacco (chewed or snuffed) followed by 8 points for cocaine and for steroids; 6 points for LSD and K2 and 5 percentage points for speed (Table 11).

### II.3.2. Percentage of Collin Students who Consume Alcohol, Drugs, and Tobacco -Perceptions by Respondents' Age

Table 12 shows an analysis of perceived consumption of alcohol and drugs by Collin students based on respondents' age. The mean responses show that 18-22 year-olds show the highest perceived consumption for all the 14 substances. Additionally, with the exception of un-prescribed use of over-the-counter drugs and steroids, the perceived consumption of the 14 substances declines as the age of the respondent rises. The highest mean response for perceived consumption among 18-22 year old respondents is for alcohol (4.0) and the lowest is for heroin, LSD and speed (1.40). The 55+ age group perceive the consumption to be lowest for all but 2 of the 14 substances. In the case of un-prescribed use of over-the counter drugs the highest mean response belongs to 18-22 year olds (2.0), and the lowest belongs to 18-22 year olds (0.92). Similarly, for steroids, the highest mean response belongs to 18-22 year olds (0.83). For all other substances, the pattern of mean decline by age is notably visible. Perhaps because older students do not spend as much time on campus as younger students do and are not privy to the extent of usage of the listed substances.

The age comparisons of the mean perceptions cannot be deemed indicative of the perceptions of Collin's student body because of the gross underrepresentation of Collin's largest age group, 18-22 year olds.

#### Table 11. What Percentage of Collin Students do you Think Consume the Following Substances? Perceptions by Respondents' Gender and Mean Response on Scale

		F	Perceptions	of Consumpt	tion (in pe	ercent)			
		<5%	5-25%	26-50%	>50%	Don't know	Total <sup>4</sup>	Ν	Mean⁵
Alcohol (beer, wine & liqueur)									
	Female	0.4	3.3	13	61.7	21.6	100	269	2.93
-	Male	2.6	4.3	11.3	58.3	23.5	100	115	2.78
Cocaine									
	Female	24.7	21.7	6.4	1.1	46.1	100	267	0.92
	Male	33.3	17.5	3.5	0	45.6	100	114	0.79
Ecstasy	E	04.0	04.0	07	4.0	10.1	100	000	0.07
	Female	21.2	24.2	6.7	1.9	46.1	100	269	0.97
l levela	Male	23	23.9	6.2	0	46.9	100	113	0.89
Heroin	Female	35.3	15.6	1.5	0.7	46.8	100	269	0.74
	Male	35.3 39.8	15.6 9.7	1.5	0.7	40.8 48.7	100	269 113	0.74
LSD	Iviale	39.0	9.7	1.0	0	40.7	100	113	0.05
230	Female	32.6	16.5	2.6	0.7	47.6	100	267	0.76
	Male	32.0	13.3	2.0	0.7	45.1	100	113	0.70
Marijuana (such as pot, weed, hashish)	Iviale	50.9	15.5	2.1	0	40.1	100	115	0.74
Manjuana (Such as pot, weed, hashish)	Female	2.6	13.4	28	22.4	33.6	100	268	2.03
	Male	3.5	18.4	24.6	19.3	34.2	100	114	1.91
Speed	maio	0.0	10.1	21.0	10.0	0112	100		1.01
opood	Female	24.3	18.7	7.5	3.7	45.7	100	267	0.99
	Male	28.9	16.7	7	0.9	46.5	100	114	0.87
Tobacco (smoked)				-					
	Female	1.5	17.3	36.9	18.5	25.8	100	271	2.21
	Male	4.3	27.8	28.7	11.3	27.8	100	115	1.91
Tobacco (chewed, snuffed)									
	Female	11.5	23	24.5	8.2	32.7	100	269	1.64
	Male	20.9	29.6	13.9	3.5	32.2	100	115	1.36
Hookah (tobacco from water pipe)									
	Female	12.2	21.9	19.6	9.3	37	100	270	1.52
	Male	17.4	20	16.5	6.1	40	100	115	1.31
Un-prescribed use of prescription drugs									
	Female	11.2	23.8	14.9	8.6	41.6	100	269	1.38
	Male	14.9	25.4	13.2	0.9	45.6	100	114	1.09
Un-prescribed use of over-the-counter drugs									
	Female	18.6	23.8	9.3	5.9	42.4	100	269	1.18
	Male	20.9	21.7	9.6	0	47.8	100	115	0.93
Steroids or human growth hormones	_ ·			_		15.0	105	070	0.00
	Female	26.3	20	7	1.5	45.2	100	270	0.93
140	Male	34.2	15.8	6.1	0	43.9	100	114	0.84
K2	E	00	00.7	0.0	~	50	400	070	0.00
	Female	20	20.7	6.3	3	50	100	270	0.92
	Male	26.1	20	1.7	1.7	50.4	100	115	0.78

Collin IRO sm; 9/21/2015; Page 19 of 66 J:\IRO\Mirza\Drug Awareness & Perceptions Survey\Fall 2014\Drug Awareness Report-Final.docx

 <sup>&</sup>lt;sup>4</sup> Percentages may not add to 100% due to rounding.
 <sup>5</sup> Mean excludes the "Don't know" response choice.

		Perceptions of Consumption (in percent)							
		<5%	5-25%	26-50%	>50%	Don't know	Total	Ν	Mean
Alcohol (beer, wine & liqueur)									
	18-22	0	0	0	100	0	100	5	4.00
	23-29	1.6	3.2	11.1	66.7	17.5	100	126	3.08
	30-35	1.4	4.2	9.7	59.7	25	100	72	2.78
	36-40	2	6	10	54	28	100	50	2.60
	41-54	0	3.5	16.7	57	22.8	100	114	2.85
	55+	0	0	12	52	36	100	25	2.44
Cocaine									
	18-22	40	60	0	0	0	100	5	1.60
	23-29	33.3	25.4	4	0.8	36.5	100	126	0.99
	30-35	30.6	15.3	5.6	1.4	47.2	100	72	0.84
	36-40	22.4	22.4	4.1	0	51	100	49	0.80
	41-54	23.2	15.2	9.8	0	51.8	100	112	0.83
	55+	8	20	0	4	68	100	25	0.64
Ecstasy									
-	18-22	40	60	0	0	0	100	5	1.60
	23-29	31	23	7.1	2.4	36.5	100	126	1.08
	30-35	25	22.2	5.6	0	47.2	100	72	0.86
	36-40	10	34	4	2	50	100	50	0.98
	41-54	15.2	21.4	10.7	0	52.7	100	112	0.90
	55+	12	12	0	4	72	100	25	0.52
Heroin					-				
	18-22	60	40	0	0	0	100	5	1.40
	23-29	45.7	14.2	1.6	0.8	37.8	100	127	0.82
	30-35	33.8	16.9	0	0.0	49.3	100	71	0.68
	36-40	36	12	0	0	43.3 52	100	50	0.60
	41-54	30.4	11.6		0	54.5	100	112	0.60
				3.6 0	4				
LSD	55+	20	8	0	4	68	100	25	0.52
-20	10.00	60	40	0	0	0	100	5	1.40
	18-22			0					
	23-29	38.9	18.3	4	0.8	38.1	100	126	0.91
	30-35	34.7	19.4	0	0	45.8	100	72	0.74
	36-40	33.3	16.7	0	0	50	100	48	0.67
	41-54	32.1	8.9	4.5	0	54.5	100	112	0.63
	55+	12	12	0	4	72	100	25	0.52
Marijuana		_	_			_		_	
	18-22	0	0	60	40	0	100	5	3.40
	23-29	3.2	18.4	25.6	28.8	24	100	125	2.32
	30-35	5.5	15.1	27.4	20.5	31.5	100	73	2.00
	36-40	2	18	28	14	38	100	50	1.78
	41-54	1.8	11.5	27.4	17.7	41.6	100	113	1.78
	55+	0	4.2	20.8	16.7	58.3	100	24	1.38
Speed					-				
-	18-22	60	40	0	0	0	100	5	1.40
	23-29	33.9	20.5	7.9	0.8	37	100	127	1.02
	30-35	26.8	14.1	5.6	4.2	49.3	100	71	0.89
	36-40	22	18	8	4	48	100	50	0.98
	41-54	19.6	17.9	8	2.7	51.8	100	112	0.90

# Table 12. What Percentage of Collin Students do you Think Consume the Following Substances?Perceptions by Respondents' Age and Mean Response on Scale

Collin IRO sm; 9/21/2015; Page 20 of 66 J:\IRO\Mirza\Drug Awareness & Perceptions Survey\Fall 2014\Drug Awareness Report-Final.docx

		Perceptions of Consumption (in percent)							
		<5%	5-25%	26-50%	>50%	Don't know	Total	Ν	Mean
Tobacco (smoked)									
	18-22	0	40	40	20	0	100	5	2.80
	23-29	4.7	18.1	35.4	20.5	21.3	100	127	2.29
	30-35	2.7	16.4	35.6	20.5	24.7	100	73	2.24
	36-40	0	28	28	14	30	100	50	1.96
	41-54	0.9	21.1	36.8	11.4	29.8	100	114	1.99
	55+	0	16	24	12	48	100	25	1.52
Tobacco (chewed, snuffed)	40.00	0	00	0		0	400	-	0.40
	18-22	0	80	0	20	0	100	5	2.40
	23-29	22.2	20.6	20.6	8.7	27.8	100	126	1.60
	30-35	12.5	23.6	23.6	8.3	31.9	100	72	1.64
	36-40	12	36	14	6	32	100	50	1.50
	41-54	7.9	25.4	27.2	3.5	36	100	114	1.54
Heekeh	55+	16.7	8.3	8.3	4.2	62.5	100	24	0.75
Hookah	18-22	0	20	60	20	0	100	5	3.00
	23-29	12.6	20	25.2	20 13.4	26.8	100	5 127	
	23-29 30-35					20.0	100		1.86
	30-35 36-40	13.7 18	26 26	13.7 12	9.6 2			73 50	1.45
	30-40 41-54					42	100 100	50 114	1.14
		14.9 8.3	15.8 16.7	17.5 4.2	5.3 4.2	46.5 66.7			1.20
Un-prescribed use of prescription drugs	55+	0.3	10.7	4.2	4.2	00.7	100	24	0.71
on-prescribed use of prescription drugs	18-22	20	40	20	20	0	100	5	2.40
	23-29	12.6	24.4	18.9	8.7	35.4	100	127	1.53
	30-35	12.0	23.9	11.3	5.6	39.4	100	71	1.33
	36-40	8	36	8	5.0 4	44	100	50	1.24
	41-54	10.6	20.4	15	3.5	50.4	100	113	1.20
	55+	0.0	20.4	13	12	68	100	25	1.00
Un-prescribed use of over-the-counter drugs	337	0	0	12	12	00	100	25	1.00
on presended use of over the counter drugs	18-22	40	40	0	20	0	100	5	2.00
	23-29	23.8	22.2	12.7	6.3	34.9	100	126	1.32
	30-35	21.9	23.3	5.5	5.5	43.8	100	73	1.02
	36-40	18	30	6	0.0	46	100	50	0.96
	41-54	14.2	23.9	8.8	0.9	52.2	100	113	0.92
	55+	4	8	12	12	64	100	25	1.04
Steroids or human growth hormones	001	•		.=		0.			
eterenae er mannan grennin hennenee	18-22	60	20	0	20	0	100	5	1.80
	23-29	37	17.3	6.3	0	39.4	100	127	0.91
	30-35	24.7	20.5	8.2	1.4	45.2	100	73	0.96
	36-40	28	22	4	0	46	100	50	0.84
	41-54	23.9	17.7	8	0	50.4	100	113	0.83
	55+	8.3	16.7	4.2	12.5	58.3	100	24	1.04
K2	-		-		-				
	18-22	40	20	20	20	0	100	5	2.20
	23-29	29.9	17.3	5.5	1.6	45.7	100	127	0.87
	30-35	21.9	21.9	4.1	5.5	46.6	100	73	1.00
	36-40	18	30	2	0	50	100	50	0.84
	41-54	15.9	20.4	5.3	1.8	56.6	100	113	0.80
	55+	4	12	4	8	72	100	25	0.72

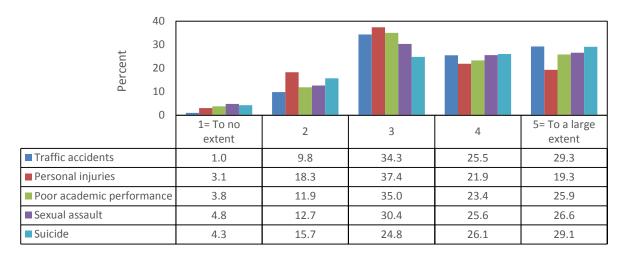
#### Table 12. Continued

Collin IRO sm; 9/21/2015; Page 21 of 66 J:\IRO\Mirza\Drug Awareness & Perceptions Survey\Fall 2014\Drug Awareness Report-Final.docx

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

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

Figure 6 illustrates that by aggregating the "4" and "5" response categories, around 55% of the respondents linked alcohol and drug abuse to traffic accidents, 55% to suicide, 52% to sexual assault, 49% to poor academic performance, and 41% to personal injuries. The mean response ranged from 3.72 for traffic accidents to 3.36 for personal injuries (Appendix Table 2).



#### Figure 6. Perception of Behavioral Outcomes

Figure 7 presents the mean responses for each of the behavioral outcomes by respondents' gender. Compared to males, the means were higher for females indicating that females are generally more inclined towards attributing each of the behavioral outcomes to alcohol and drug use. Adding the response choices, "4" and "5" for each behavior, perceptions of females were higher by 9 points for suicide, 8.5 points for sexual assault, 6.8 for personal injuries, 5.2 for traffic accidents, and 4.2 for poor academic performance (Appendix Table 2).

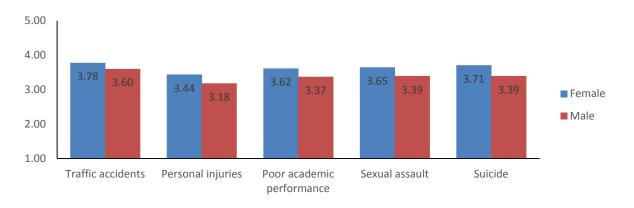




Figure 8 presents the mean responses of the extent to which respondents of different ages relate alcohol and drugs to the five behavioral outcomes. Excluding 18-22 year olds from the analysis, the highest mean response was observed for 55+ for traffic accidents, sexual assault (4.16) followed by suicide (4.24). Traffic accidents had the highest mean for 23-29, 30-35 and 41-45 year old respondents (3.65, 3.73 and 3.73 respectively), and suicide had the highest mean for 36-40 years group (3.84). Since age groups composition in the survey sample is not representative of the age groups composition at Collin, it is not advisable to assign inferential meaning to analysis based on age groups.

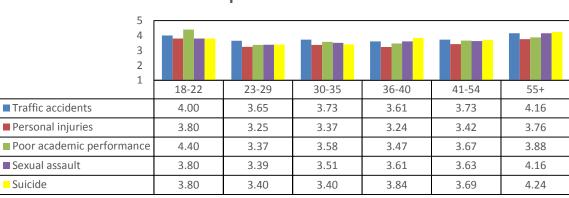




Figure 8. Behavioral Outcomes by Respondents' Age

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

Respondents were asked to indicate the extent to which they perceived drugs to be available in Collin's environment and the extent to which Collin's environment it was conducive to alcohol and drug use. The responses were scored on a five-point scale where "1" equaled "to no extent" and "5" equaled "to a large extent."

Figure 9 shows that 57 and 56 percent of respondents perceived that Collin's atmosphere was "to no extent" conducive to the use of drugs and alcohol. Adding the response

choices "1" and "2" indicates that 84, 80 and 72 percent perceive that Collin's atmosphere is less conducive to drug use, alcohol use and the availability of drugs. Aggregating response categories "4" and "to a large extent", around 9 percent of respondents perceived that drugs were available within Collin and 7 and 5 percent felt that Collin's atmosphere was conducive to alcohol and drug use respectively.

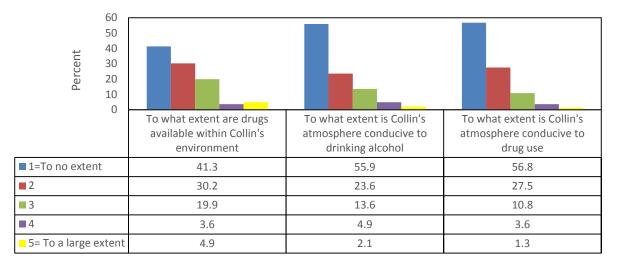


Figure 9. Perceptions about Collin's Environment Regarding Availability and Use of Drugs and Alcohol

Compared to males, female respondents perceive Collin's atmosphere to be less conducive to drinking and drug use whereas the perceptions on drug availability within Collin premises are equal at a mean response of 2. The percentage of male respondents providing a rating of "1" is 4 points lower than females for the extent to which Collin's environment is conducive to drinking or drug use (Appendix Table 3).

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

The respondents' opinion was sought about whether Collin students drank, smoked or used drugs more than students at other colleges. The response choices were "yes," "no," and "about the same" and "don't know". Thirty one percent of the respondents disagreed with the statement that Collin's students drank more or used drugs more than their peers at other colleges. Twenty-four and 22 percent said "no" to the statement that Collin students at other colleges. Thirty-five, 31, 27 and 22 percent indicated that Collin students used tobacco products, smoked marijuana, drank alcohol and used drugs "about the same" compared to peers at other colleges. The highest proportion of students said they "don't know," whether Collin's students were using more drugs (46 percent), marijuana (44 percent),

tobacco products (42 percent) or alcohol (42 percent) compared to students at other colleges (Figure 10).

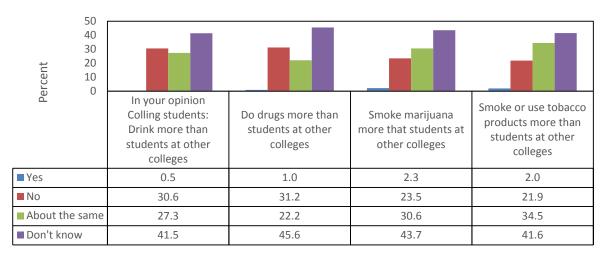


Figure 10. Perceptions of Drugs, Alcohol and Tobacco Use by Collin Students versus Students at Other Colleges

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

The Drug Awareness and Perception Survey asked respondents to provide information about their own use of alcohol, tobacco and drugs. Two questions were posed, one asking about ever use and the other about use of the 14 listed substances and the other about using them within the last year (the year before the survey). Even though the survey was anonymous, still in view of the sensitive nature of these questions, the respondents were reassured that their identity was protected and that their answers could not be linked to their identity in any way. In addition, they had the option to check "do not want to answer" and proceed to the next question in the survey.

### II.7.1. Respondents' Ever-Use of Alcohol and Drugs

The first question asked "How often have you ever used any of the following substances?" This was followed by the list of 14 substances, each to be answered on a six-point scale with choices, "never," "tried once," "occasionally," "often," "very often," and "daily." They also had the option to select "do not want to answer."

An overwhelming majority of respondents stated that they had "never" used steroids or human growth hormones and heroin (94%), K2 (92%), LSD (90%), speed and ecstasy (85%), cocaine and un-prescribed use of prescription drugs (82%), tobacco (chewed or snuffed) (81%) and un-prescribed use of over-the-counter drugs (80%). For tobacco

(smoked), 40% of the respondents denied ever consuming it, a 10 percentage point decline from 2012. This may be attributed to the smoking ban at Collin.

Twenty-eight percent of respondents shared that they had tried tobacco (smoked) "once," 15 percent claimed they used it "occasionally," and 7 percent admitted using it "daily." Twenty-six percent of respondents disclosed trying marijuana "once," 10 percent using it "occasionally," and 2% using it "often." Twenty percent admitted using hookah "once," 9% "occasionally" and less than 1% "often." The highest usage was reported for alcohol, 62 percent consumed it "occasionally," 14 percent "often," and 5 percent "very often." The daily ever-use for all substances was low; highest daily use was for tobacco smoked (7%) followed by alcohol and marijuana (3%). The percentage of respondents who selected "don't want to answer" was consistent, ranging from 5% for alcohol to 4% for all other categories.

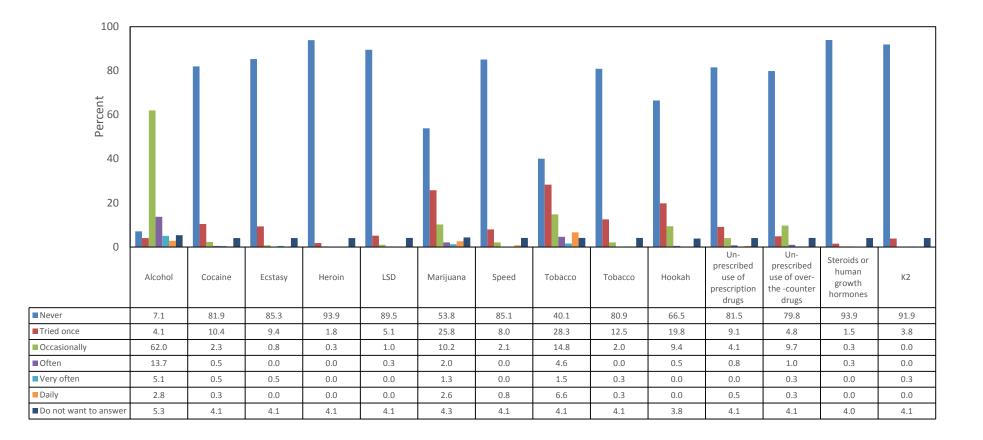


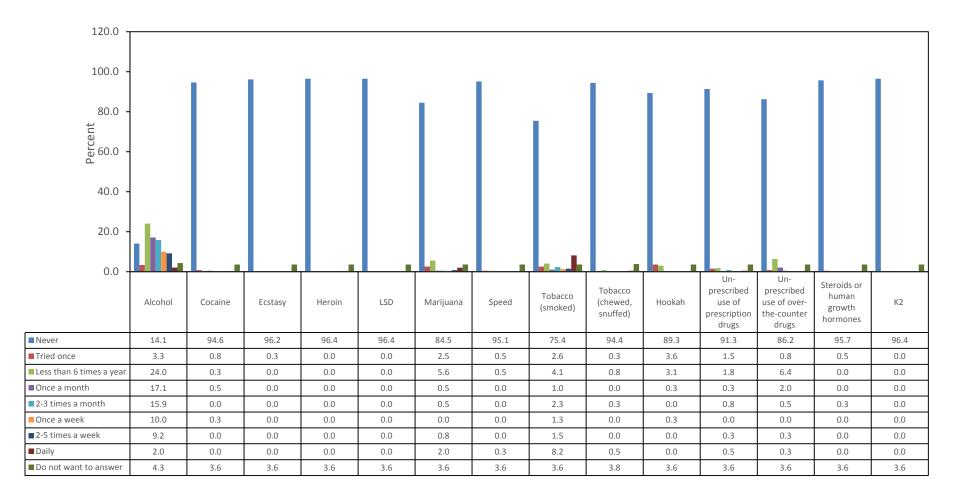
Figure 11. Frequency of Ever-Use of the 14 Substances by Respondents

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

Information was sought on the most recent use of the 14 items by asking respondents, "Within the last year how often did you use any of the following?" The responses were scored on an 8-point scale that had the following response choices "never," "tried once," "less than 6 times a year," "once a month," 2-3 times a month," "once a week," 2-5 times a week," and "daily." The respondents also had the option to opt out of answering the question by selecting "do not want to answer."

Like the previous question, a large majority of the respondents indicated "never" using most of the listed substances. Around 96 percent of the respondents said they had "never used" ecstasy, heroin, LSD, steroids or human growth hormones and K2, 95 percent stated the same for cocaine and speed, 94 percent for tobacco (chewed or snuffed), 91 percent for un-prescribed use of prescription drugs, 89 percent for hookah, 86 percent for un-prescribed use of over-the-counter drugs and 85 percent stated that they had never used marijuana. Although 75 percent of the respondents divulged that they had "never" used tobacco, around 8 percent admitted smoking "daily," probably representing a section of habitual smokers amongst the respondents. Compared to the 2012 survey, this statistics shows a decline of 5 percentage points.

Alcohol remained by far the most frequently consumed substance where the responses were dispersed across the scale with 24 percent of the respondents indicating that they used it "less than 6 times a year," 17 percent "once a month," 16 percent "2-3 times a month," 10 percent "once a week," and 9 percent "2-5 times a week." Only 14 percent of the respondents checked "never" and 2 percent selected "daily."



#### Figure 12. Frequency of Use of the 14 Substances within Last Year by Respondents

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

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

### II.8.1. Respondents' Party Behavior within Last Year

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

About half of the respondents admitted consuming alcohol "occasionally" for fun, while another 22 percent admitted consuming "often," "very often" or "always" when they partied/socialized within the last year. Thirty-four percent consumed alcohol "occasionally" to alleviate stress when socializing within the last year, while another 10 percent used it "often," "very often" and "always." Thirty-seven percent said they set a limit on the number of drinks they would have at a party "often," "very often" and "always." Five percent participated in drinking games "often," "very often," and "always" while 12 percent joined in such games "occasionally." Twenty-one percent said they "always" rode home with a designated driver. Nine percent "always" drove home themselves after partying. It is interesting to note about 9 percent of the respondents "always" refused to drink and another 22 percent refused "often" and "very often." Aggregating these response choices brings the total of students who refuse a drink to over 30 percent. In general, the results indicate that most Collin students stay away from hard drugs, however, they do consume alcohol and/or resort to social drinking often. (Table 13).

### Table 13. In General, When you Partied/Socialized Within the Last Year, how Often did you do the Following?

	In general when you partied/socialized within the last year …							
	Never	Occasionally	Often	Very Often	Always	Do not want to answer	Total (%)	N
Used tobacco (smoked, chewed, snuffed)	76.9	8.4	3.8	2.3	4.6	4.1	100	394
Consumed alcohol to alleviate stress	51.2	34.0	4.4	4.2	1.8	4.4	100	385
Consumed alcohol for fun	24.6	49.1	11.3	8.2	2.8	4.1	100	391
Combined non-alcoholic beverages with alcohol	49.9	29.7	9.5	4.6	2.3	4.1	100	391
Alternated coffee with alcohol	87.9	6.2	0.5	1.0	0.3	4.1	100	389
Participated in drinking games Set limit on the number of drinks you would have at the party	79.1 48.7	12.2 10.5	2.8 11.3	1.5 5.9	0.5 19.7	3.8 3.8	100 100	392 390
Got drunk despite set limit	40.7	9.4	1.0	0.8	0.0	3.8	100	393
Asked friend not to let you exceed a certain limit of drinks	81.6	7.1	2.6	0.3	4.6	3.8	100	392
Rode home with designated driver	51.2	13.3	5.6	4.6	21.0	4.3	100	391
Drove home yourself	63.9	16.3	4.6	1.8	8.9	4.6	100	393
Mixed drugs with alcohol	92.5	2.3	0.8	0.3	0.3	3.9	100	389
Got into binge drinking	91.0	3.6	0.8	0.8	0.0	3.8	100	391
Refused to drink	31.6	33.7	10.8	11.1	8.7	4.1	100	389
Held a drink in hand so others should not pressurize you	89.8	4.6	1.3	0.3	0.3	3.8	100	392
Drank because was pressurized by peers	94.9	1.3	0.0	0.0	0.0	3.8	100	393

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

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

In general, an overwhelming majority of respondents checked the category "never" to all the listed outcomes. The highest was 96 percent for "got arrested for DUI/DWI," for "received speeding ticket," and for "got into trouble with the police." The lowest was 67 percent for "had a hangover" and 79 percent for "felt sick." Twenty–six percent of students reported having a hangover "occasionally," 17 percent reported feeling sick, 8 percent did something they regretted later, 7 percent got into a fight with significant other, 4 percent passed out while another 4 percent "occasionally" became really depressed. Three percent of the respondents admitted they "occasionally" had suicidal thoughts and another 3 percent "occasionally" had unprotected sex. In addition, 2 percent reported "often" or "very often" becoming involved in unprotected sex following drinking or drug use. One percent of the respondents reporting that they "occasionally" were taken advantage of sexually. The most frequent incidence was reported for "had a hangover" where almost a third of the respondents reporting that they experienced it "occasionally," "often" or "very often" (Table 14).

This result also identifies alcohol as the most consumed substance with students disclosing frequent occurrences of hangovers or feeling sick after its use. Perhaps promoting programs that educate students on productive ways to deal with stress and the harmful effects of alcohol would help in educating students about restraint.

### Table 14. In the Last Year, How Often Have the Following Occurred due to your Drinking or Drug use?

	In the Last Year, How Often Have the Following Occurred Due to your Drinking or Drug Use?							
	Never	Occasionally	Often	Very Often	Always	Do not want to answer	Total (%)	N
Had a hangover	67.4	25.7	1.8	1.3	0.0	3.8	100	393
Passed out (forgot where you were, what you did)	92.6	3.6	0.0	0.0	0.0	3.8	100	391
Felt sick (nausea, vomiting)	78.5	16.6	0.5	0.3	0.3	3.8	100	391
Missed class the next day	94.6	1.3	0.0	0.3	0.0	3.8	100	391
Got into fight with significant other	89.0	6.6	0.3	0.0	0.0	4.1	100	392
Became physically abusive	95.4	0.5	0.3	0.0	0.0	3.8	100	393
Became destructive (damaged property, own or others)	94.6	1.6	0.0	0.0	0.0	3.9	100	387
Harassed others	94.6	1.5	0.0	0.0	0.0	3.8	100	392
Got into trouble with police	95.7	0.5	0.0	0.0	0.0	3.8	100	391
Received speeding ticket Got arrested for DUI/DWI(driving under the influence of	95.9	0.3	0.0	0.0	0.0	3.9	100	388
alcohol/ while intoxicated)	95.7	0.5	0.0	0.0	0.0	3.8	100	392
Became Involved in unprotected sex	90.8	2.6	1.0	1.0	0.3	4.3	100	392
Was taken advantage of sexually	94.6	1.3	0.0	0.0	0.0	4.1	100	390
Took advantage of someone sexually	95.2	1.0	0.0	0.0	0.0	3.8	100	393
Became really depressed	91.0	4.1	0.3	0.8	0.0	3.8	100	391
Had suicidal thoughts	93.1	2.8	0.0	0.0	0.0	4.1	100	393
Did something you regretted later	87.5	8.2	0.0	0.3	0.0	4.1	100	392

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

Respondents' opinions were sought on how drinking, using drugs and smoking impacts one. They were asked to show their agreement with a list of 11 statements by selecting them; they could check multiple statements. The survey invited responses only in case of "yes," hence, if a statement was left blank, by default it meant that the respondent did not check that statement (for questionnaire, see Appendix C).

Table 15 indicates that 71% of the respondents believe drugs destroy one, 51% think using drugs makes one look disgusting and 10% think using drugs helps one relieve stress/ deal with stress. In reference to smoking tobacco or using tobacco products, 59% of the respondents thought it destroys one, 58% believed smoking makes one look disgusting and 24% opined that smoking helps one relieve stress/help deal with stress. Fifty-three percent of the respondents think drinking helps overcome social inhibitions, 39% believed it helps one relieve stress/helps deal with stress, 30% thought that it destroys one, 16% thought drinking makes one look disgusting, while 20% thought it lets one have more fun.

These finding suggest that students' involvement in various activities, clubs and programs should be promoted so as to help them overcome social inhibitions and expose them to healthier forms of expression. This may help in dispelling the perception that they need to rely on alcohol in order to loosen up socially. In addition, awareness should be promoted about stress reducing seminars and other resources offered in order to expose them to healthy outlets to relieve and deal with stress.

	Count	%	Total
Drinking			
Helps loosen up socially/overcome social inhibitions	210	52.8	398
Let's you have more fun	78	19.6	398
Makes you look cool	3	0.8	398
Helps make friends	26	6.5	398
Makes you feel valued by friends	4	1.0	398
Helps develop relationships	17	4.3	398
Helps alleviate boredom/something to do	49	12.3	398
Relieves stress/helps deal with stress	156	39.2	398
Helps escape from problems	57	14.3	398
Destroys you	119	29.9	398
Makes you look disgusting	63	15.8	398
Drugs			
Helps loosen up socially/overcome social inhibitions	42	10.6	398
Let's you have more fun	21	5.3	398
Makes you look cool	5	1.3	398
Helps make friends	14	3.5	398
Makes you feel valued by friends	6	1.5	398
Helps develop relationships	7	1.8	398
Helps alleviate boredom/something to do	25	6.3	398
Relieves stress/helps deal with stress	40	10.1	398
Helps escape from problems	39	9.8	398
Destroys you	284	71.4	398
Makes you look disgusting	202	50.8	398
Smoking			
Helps loosen up socially/overcome social inhibitions	24	6.0	398
Let's you have more fun	4	1.0	398
Makes you look cool	8	2.0	398
Helps make friends	12	3.0	398
Makes you feel valued by friends	1	0.3	398
Helps develop relationships	5	1.3	398
Helps alleviate boredom/something to do	48	12.1	398
Relieves stress/helps deal with stress	94	23.6	398
Helps escape from problems	16	4.0	398
Destroys you	235	59.0	398
Makes you look disgusting	229	57.5	398

## Table 15. In Your opinion, how Does Drinking, Drugs and Smoking Impacts one?

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

Collin is committed to keeping its environment drug-free, and as part of its commitment to educate students, it has a number of programs in place. Awareness of these programs was assessed through the question, "Which activities on campus are you aware of that address drug use and abuse?" This was followed by a list of seven resources/activities: "counseling and resources," "educational materials," "online screening for mental health," "student health 101," "special presentations," "special exhibitions," and "referral information." The survey invited responses only in the case of "yes" hence if an item was left blank, by default it meant that the respondent was not aware of that particular resource/activity.

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

Table 16 indicates that 62% of the respondents were familiar with "counseling and resources" services offered by Collin, 48% with "student health 101" and with "educational materials," and 35% with "special presentations." Compared to the 2012 survey, the overall awareness about all the services offered by Collin was higher and the percentage of the respondents who were not aware about these activities was lower. Twenty-five percent of the respondents checked "I am not aware of any activities," showing a decrease of 14 percentage points from 2012 (Appendix Table 4). This is a positive development and Collin should continue directing more efforts towards publicizing the available resources and services and at the same time exploring new ways to improve awareness and to reach out to students.

	Count	%	Total
Counseling & Resources	247	62.1	398
Educational Materials (such as informational brochures & pamphlets)	189	47.5	398
Online Screening for mental health	96	24.1	398
Student Health 101*	192	48.2	398
Special Presentations (such as how to cope with stress, relationships etc.)	139	34.9	398
Special Exhibits (such as resource tables, screenings for depression, alcohol etc.)	92	23.1	398
Referral Information (such as community resources)	105	26.4	398
I am not aware of any activities	100	25.1	398

#### Table 16. Which Activities on Campus are you Aware of that Address Drug Use and Abuse

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

Respondents who were not aware of any activities were asked the following conditional open-ended question: "What can the college do to make students like you aware of the above activities?"

Sixty-one valid responses were received from the students. Ten main themes that emerged from the qualitative analysis of the comments are presented in Table 17. Detailed comments with frequencies are included in the Appendix Table B1. A large number of comments received pertained to the students' perception that they were not the right candidates for the survey or did not care about it. Some respondents suggested that a link should be provided at Cougar Web where students should be made more aware about the events/activities happening around them. Another suggestion related to sending text messages and/or using social media to keep students in the loop.

Main Themes	Ν	%
More Advertising should be done	5	8.2
Use emails, social media, text messaging, CougarWeb	10	16.4
Arrange more events/public speaking forums to educate students	7	11.5
I do not care/ I take personal responsibility	5	8.2
Online student, therefore not aware of activities	3	4.9
I am not the right candidate for this survey	8	13.1
I am not interested/don't care about this	6	9.8
I don't know/ other Comments	5	8.2
I don't need a service like that	10	16.4
I have noticed drug abuse at Collin but no action seems to have been taken.	2	3.3

#### Table 17. What can the College do to Improve Awareness

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

Since 2012, an interactive question was added that presented a respondent with only those Collin activities about which the respondent had indicated an awareness about (discussed in the preceding section), and asked respondents to select activities that they had participated in. The respondents were asked to check only those activities s/he had used. The survey redirected the respondents to the next question if they had not checked that they were aware of the activity, skipping usage question for that activity altogether.

A total of 111 students indicated that they had participated in one or more of Collin's activities that address drug use and abuse, which is a 28% improvement from the 87 students responding in 2012. Table 18 presents a breakdown of the responses in this category. More than half of the responses indicated reading the monthly online Student Health 101 magazine. Thirty percent indicated using the Counseling and Resources, 26

percent the Educational Materials, 14 percent the online screening for mental health, 7 percent participated in special presentations, 7 percent used the Special Exhibits, and 5 percent indicated utilization of Referral Information.

## Table 18. Respondents' Participation in the Drug use and Abuse Awareness Activities on Campus

	Ν	%
Counseling & Resources	33	29.7
Educational Materials (such as informational brochures & pamphlets)	29	26.1
Online Screening for Mental Health	15	13.5
Student Health 101	57	51.4
Special Presentations (such as how to cope with stress, relationships etc.)	8	7.2
Special Exhibits (such as resource tables, screenings for depression, alcohol etc.)	8	7.2
Referral Information (such as community resources)	5	4.5

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

## **SECTION III**

### III.1 OPEN-ENDED RESPONSES

The survey concluded with requesting respondents to provide additional comments and suggestions. Sixty-six valid responses were received. These responses were distilled into nine main themes. Some respondents provided comments that related to more than one theme, therefore those comments were segregated into separate themes. Hence the aggregate number of comments under the thematic analysis (Table 19) does not tally with total comments in the detailed table (Appendix Table B2).

In order to make the most effective use of qualitative analysis, it is imperative to review Table 19 in conjunction with Appendix Table B2, since placement of comments under each theme is subjective and a result of synthesis.

Main Themes	Count
Personal experience about drug/alcohol use	2
Comments about survey instrument/methodology	13
Comments about not being the right candidate for the survey	11
Experience of drugs use in Collin	3
Suggestions	10
Praising Collin	5
Personal opinions about drugs usage/alcohol/smoking	9
Side comments of significant importance	3
No comments	12

#### Table 19. Frequency Distribution of Major Themes (Open-Ended Comments)

## **RECOMMENDATIONS:**

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

- Collin needs to strengthen its efforts to educate students about the importance of reading the drug policies.
- Collin may consider either reverting to the dissemination practices for drug policies followed in the earlier administration or try sending the policies separately from other essential information to ensure they catch attention and are not lost in the clutter; this possibly may lead to a higher number of students reading them.
- Continue to publicize the available resources/activities at Collin that address drug use and abuse. Since many students disclosed that they resorted to drugs, drinking and smoking for stress relief, they should be made more aware of healthier and safer methods of dealing with stress. It is important to dispel the notion that drugs, alcohol and smoking alleviate stress.
- Communicate with students using multiple mediums including social media, text messaging and emails to promote awareness.
- Continuing to organize events like "drug free week" to increase awareness is another method that will improve awareness.
- Consider involving faculty to talk in class about Collin's resources that deal with drug and alcohol use/abuse.
- Invite student organizations, faculty and medical practitioners to participate in seminars, and awareness activities.
- Increase efforts to educate students about the risks of alcohol and drug abuse focusing on 18-22 year olds. Data shows that younger students have the highest risk of alcohol and drug use.
- Continue efforts to improve the response rate in future online surveys:
  - Promote awareness among students that any email from Snap Collin is not spam; rather it is one of Collin's official surveys administered through the Institutional Research Office.
  - Ensure that Drug Awareness and Perception survey is deployed a week after sending the drug policies.
  - Continue to advertise the Drug Awareness Survey during the fall activities of the college.

**APPENDICES** 

#### **APPENDIX A**

#### **APPENDIX TABLE 1A**

## Have you Read Collin's Alcohol and Drug Abuse Policies that Were Sent to you (Via Mail and Electronically)? By Age of Respondents

	Have you read (	oolicies				
	Yes	%	No	%	Total	%
18-22	1	20.0%	4	80.0%	5	100%
23-29	76	60.8%	49	39.2%	125	100%
30-35	35	48.6%	37	51.4%	72	100%
36-40	29	58.0%	21	42.0%	50	100%
41-54	74	64.9%	40	35.1%	114	100%
55+	18	72.0%	7	28.0%	25	100%
All Ages	233	59.6%	158	40.4%	391	100%

#### **APPENDIX TABLE 1B**

## Do you Intend to Read Collin's Alcohol and Drug Abuse Policies that Were Sent to you (Via Mail and Electronically)? By Age of Respondents

	Do you inter					
	Yes	%	No	%	Total	%
18-22	1	25.0%	3	75.0%	4	100%
23-29	11	22.9%	37	77.1%	48	100%
30-35	7	20.0%	28	80.0%	35	100%
36-40	5	23.8%	16	76.2%	21	100%
41-54	9	23.1%	30	76.9%	39	100%
55+	1	14.3%	6	85.7%	7	100%
All Ages	34	22.1%	120	77.9%	154	100%

#### **APPENDIX TABLE 2**

# Extent to Which the Following are Related to Alcohol and Drug Abuse Percentage and Mean Responses by Gender

	To What Ext Related to							
-	1= To no extent	2	3	4	5= To a large extent	Total (%)	N	Mean Response on Scale
Both Genders								
Traffic accidents	1.0	9.8	34.3	25.5	29.3	100	396	3.72
Personal injuries	3.1	18.3	37.4	21.9	19.3	100	393	3.36
Poor academic performance	3.8	11.9	35.0	23.4	25.9	100	394	3.56
Sexual assault	4.8	12.7	30.4	25.6	26.6	100	395	3.56
Suicide	4.3	15.7	24.8	26.1	29.1	100	395	3.60
Females								
Traffic accidents	0.7	8.9	33.9	24.7	31.7	100	271	3.78
Personal injuries	2.6	15.3	38.8	22.4	20.9	100	268	3.44
Poor academic performance	3.3	11.1	35.4	21.0	29.2	100	271	3.62
Sexual assault	4.1	11.4	29.5	25.8	29.2	100	271	3.65
Suicide	2.6	13.7	25.5	26.9	31.4	100	271	3.71
Males								
Traffic accidents	0.9	13.0	34.8	27.8	23.5	100	115	3.60
Personal injuries	3.5	26.1	33.9	21.7	14.8	100	115	3.18
Poor academic performance	5.3	15.0	33.6	29.2	16.8	100	113	3.37
Sexual assault	5.3	16.7	31.6	26.3	20.2	100	114	3.39
Suicide	7.0	20.2	23.7	25.4	23.7	100	114	3.39

#### **APPENDIX TABLE 3**

Perceptions of Extent of Availability of Drugs, and Extent to which Collin's Atmosphere is Conducive to Drinking, Drugs and Smoking/use of Tobacco Products.

Percentage and Mean Responses by Respondents' Gender

	To What Extent Do You Think the Following are Related to Drug, Alcohol and Tobacco Use?							
	1=To no extent	2	3	4	5= To a large extent	Total (%)	N	Mean Response on Scale
Both Gender								
To what extent are drugs available within Collin's environment	41.3	30.2	19.9	3.6	4.9	100	387	2.01
To what extent is Collin's atmosphere conducive to drinking alcohol	55.9	23.6	13.6	4.9	2.1	100	390	1.74
To what extent is Collin's atmosphere conducive to drug use	56.8	27.5	10.8	3.6	1.3	100	389	1.65
Females								
To what extent are drugs available within Collin's environment	41.5	28.7	21.5	3.8	4.5	100	265	2.01
To what extent is Collin's atmosphere conducive to drinking alcohol	57.3	23.6	13.1	4.5	1.5	100	267	1.69
To what extent is Collin's atmosphere conducive to drug use	58.4	26.2	10.9	3.4	1.1	100	267	1.63
Males								
To what extent are drugs available within Collin's environment	42.0	32.1	16.1	3.6	6.3	100	112	2.00
To what extent is Collin's atmosphere conducive to drinking alcohol	53.1	23.9	15.0	4.4	3.5	100	113	1.81
To what extent is Collin's atmosphere conducive to drug use	53.6	30.4	10.7	3.6	1.8	100	112	1.70

#### **APPENDIX TABLE 4**

Perceptions Whether Collin Students Drink More, do Drugs More, Smoke Marijuana and Smoke or Use Tobacco Products More than Students at Other Colleges. Percentage Responses by Respondents' Gender

About Don't the In your opinion, Collin students.... Yes No Total Ν same know Both Genders Drink more than students at other colleges 395 0.5 30.6 27.3 41.5 100 397 Do drugs more than students at other colleges 1.0 31.2 22.2 45.6 100 396 Smoke marijuana more that students at other colleges 2.3 23.5 30.6 43.7 100 397 Smoke or use tobacco products more than students at other colleges 2.0 21.9 34.5 41.6 100 Female Drink more than students at other colleges .4 27.8 29.3 42.6 100 270 Do drugs more than students at other colleges 1.5 29.8 22.4 46.3 100 272 271 Smoke marijuana more that students at other colleges 2.6 44.3 100 21.8 31.4 Smoke or use tobacco products more than students at other colleges 2.9 19.5 35.7 41.9 100 272 Males Drink more than students at other colleges 0.0 39.1 22.6 38.3 100 115 Do drugs more than students at other colleges 0.0 35.7 20.9 43.5 100 115 Smoke marijuana more that students at other colleges 1.7 27.8 28.7 41.7 100 115 Smoke or use tobacco products more than students at other colleges 0.0 27.8 32.2 40.0 100 115

### APPENDIX B. MAJOR THEMES OF OPEN ENDED COMMENTS

#### Table: B.1: What the College Can Do to Improve Awareness of Resources/Activities?

Major Themes of the Respondents' Comments

Major Themes	Comments	Suggestions
Use emails, social media, text		Promote awareness among students
messages, CougarWeb to	2. Emails, Home page advertising	that any email from Snap Collin is not
inform students (N=11)	3. I'm not sure. Maybe email e-pamphlets or something similar?	spam; rather it is one of Collin's official
	<ol><li>More e-mail information. Hand out flyers</li></ol>	surveys administered through the
	5. Most students and most people would tend not to look for the above resources unless they needed them or were having problems.	Institutional Research Office.
	<ol> <li>Just make a link to the above resources available on the main CougarWeb web page so that people can find when they need help.</li> </ol>	Contact students via email, pamphlets,
		flyers, texts to send information.
	<ol><li>Put things online. Send information the students cougar web, occasional school flyers mailed to homes</li></ol>	
	<ol><li>Send me a text with activity date time and subject</li></ol>	
	9. send out emails and letters for people to know what activities there are on campus	
	<ol><li>Send small emails of information, maybe one per week.</li></ol>	
	11. Social media	
I am already aware / I don't	1. I have only had 1 drink in the last few years, and that was a few weeks ago, I am not	
need a service like that (N=10)	interested in drinking and have NEVER smoked anything. I do not need any services like this.	
	2. I tune that stuff out. Because I do not do them or associate with those who do.	
	3. I'm a mom. I'm aware of drug use, but I'm not exactly a teenager that would be pressured	
	into this sort of thing.	
	4. I don't really drink and or socialize with other college students. I just go to class and come	
	home. If I drink at all it is with family at meals.	
	<ol> <li>I'm just part time so it would have to be via a mechanism that would draw my attention away from the courses. Not email since I filter most.</li> </ol>	
	6. I'm not interested in these activities.	
	<ol> <li>Not much, as I live off campus and actively ignore anything not involved in my major.</li> </ol>	
	8. Nothing, I am a Medical professional, and they wouldn't tell me anything I don't already	
	know.	
	<ol> <li>Nothing, I am a non-traditional student, and I do not use my educational opportunity to socialize.</li> </ol>	
	<ol> <li>Well first of all I don't drink smoke or use drugs so I don't need any information because I abstain.</li> </ol>	

Major Themes	Comments	Suggestions
I am not the right candidate for this survey (N=8)	<ol> <li>Honestly much of this don't apply to me. I come to class, then when it's over I leave. I don't have any more interaction outside of that.I am an older student, married, with 2 children.</li> <li>I am probably not your ideal demographic for taking this survey.I am really not interested myself.</li> <li>I own a drug testing business and am well aware of what drug use can do to individuals and families. I hope you do get the word out to every your person that drugs DESTROY LIVES.</li> <li>I am sure there has been enough communication about the programs offered. However due to my age I generally glance over things that are not relevant to me. I do not drink, do drugs, smoke, etc</li> <li>I don't abuse alcohol or drugs, nor am I in an age group that is likely to feel pressured or really even attend parties on a regular basis, so would not have need to seek out these programs.</li> <li>I think that whatever programs CCCC have, they should be targeted to different age groups. I am 49 and I might have one drink in a year. I do not do drugs period. I do smoke cigarettes and I have since I was 16. I am in law enforcement, so I do not need direction on drugs or alcohol. Has CCCC considered having DARE come into the college and speak to students?</li> <li>I'm an older student. Most of the questions here don't apply to me.</li> <li>My alcohol consumption is usually wine with dinner and friendshardly a destructive practiceyet that was never a choice to choose from in the survey. I also realize this survey was meant for students far younger than me. I'm not aware of any of these specific resources because I don't need them.</li> </ol>	Consider inviting DARE to come and speak to students.
Arrange more events/public speaking forums to educate students (N=7)	5. Students needed to be on the alert, aware of, and to evaluate about all unpleasant	Involve faculty to talk about Collin's resources in class. Invite student organizations, faculty and medical practitioners to participate in conferences, and awareness activities.

Major Themes	Comments	Suggestions
I don't care/ I take personal responsibility for my actions (N=5)	<ol> <li>Don't need help being aware, there is enough information out there and I take personal responsibility</li> <li>I really don't care, I also think it is none of your business.</li> <li>I do smoke cigarettes and I have since I was 16. I am in law enforcement, so I do not need direction on drugs or alcohol.</li> <li>Nothing. I'm old and set in my ways. Plus I don't care.</li> <li>Students like me don't care</li> </ol>	
I don't know/ other comments (N=5)	<ol> <li>I have never heard of these awareness groups at Collin.</li> <li>Not sure</li> <li>Nothing beyond current activity.</li> <li>Tell us</li> <li>Your academic admission or academic advisor (Whatever they themselves) department is a joke. Those ladies need a training like a two year old babies need a training for how to eat from without making a mess. They are almost eight of them and they think they are the best, but they are not. Actually, they are the biggest negative feeling in this whole Collin County College.</li> </ol>	
More Advertising should be done (N= 5)	<ol> <li>Advertise</li> <li>Advertise more.</li> <li>Advertise the programs more or have a professor give the information</li> <li>Advertise them in emails. I take most classes online and am rarely on campus. So if they are advertised on campus only I never see them.</li> <li>More advertising, and tell all of the professors and let the professors tell the students about all of them please and thank you.</li> </ol>	Continue to publicize the available resources/activities at Collin that address drug use and abuse. Continue to advertise the Drug Awareness Survey during the fall activities of the college.

Major Themes	Comments	Suggestions
I am an online student so am not aware (N=3)	<ol> <li>I attend mostly online classes.</li> <li>They are likely doing much to make on-campus student services available, but I am not aware of what. I also don't abuse alcohol or drugs, nor am I in an age group that is likely to feel pressured or really even attend parties on a regular basis, so would not have need to seek out these programs.</li> <li>I don't attend on campus, but online for most classes. I am really not aware of the social stuff at the college.In all fairness I go to class online and then have 1 Saturday class. I do not go into the main halls at school so I do not see much.</li> </ol>	
Incidence of drugs usage/drinking/smoking in Collin (N=2)	<ol> <li>Kind of a joke when there are guys that work for this school that do drugs and brag about never being drug tested.</li> <li>Ok. I was on campus 5 days a week for 4 years as a part-time assistant and full-time student. I witnessed every day the use of tobacco products on campus and drinking of alcoholic beverages. I reported every incidence but it continued every day! No one time did I witness any kind of prevention presentations nor solutions to help with these incidences. I almost lost a child</li> </ol>	

## Table: B.2: Any Other Comments or Suggestions?Major Themes of the Respondents' Comments

Major Themes	Comments	Suggestions
Comments about survey	<ol> <li>Based on this questionnaire I believe this test is going to yield very little useable data and it is coming from a very naive prospective.</li> </ol>	1. Promote awareness among students that any
instrument/methodology (N=13)	2. For me the questions were too vague. "Too dangerous," how?	email from Snap Collin is not spam; rather it is one
	3. I know this survey is given randomly, but I did not enjoy taking this survey at all.	of Collin's official surveys administered through the
	4. I think this survey is retarded and will do nothing but compile data so someone can make money or look good in a comparison of other colleges.	Institutional Research Office.
	5. I would like to acknowledge the fact of bias questions in the survey. Please separate marijuana from the "drug" category or include alcohol in it.	Awareness and
	6. Some of this survey should have a does not apply in addition to does not want to answer. Also - in some cases the question may be different if in a different context. I think some of the questions could have been worded a little differently.	Perception survey a week after sending policies.
	7. Some questions are too broad like when it comes to counseling - counseling for what? Drugs or other personal issues which are not drug-related?	<ol> <li>Continue to advertise the Drug Awareness Survey during the fall activities of</li> </ol>
	8. stupid survey	the college.
	9. The context is important for some questions. For example: I have been in an environment where others were drinking, but I was never asked to drink so I never had to refuse.	
	10. The format and layout of your survey makes it difficult to read. Also, there are several errors in word selection and usage. This survey seems silly to me in general.	
	11. The many of these questions in this survey did pertain to me since I don't go out and party. I don't smoke & I have never tried drugs. I have no reason to take part in those type of activities pertained in this survey.	
	12. The personal questions are lame, but I can see the point of the overall survey. Good luck!	
	13. There are fallacies to the survey such as alcohol may be used on weekends but not during the school week.	

Major Themes	Comment	S	Suggestions
Comments about not being the right candidate for the	living	of these questions did not pertain to me because I am married. Such as the questions about with or without a parent and having unprotected sex after drinking. These questions should have removed when I checked the box next to "married".	Increase efforts to educate students about the risks of alcohol and drug abuse
survey (N=11)		nearly 40 years old and I served my country in the United States Marine Corps. I think it is more a little ridiculous that I can't have a glass of wine or a beer at an evening school function.	focusing on 18-22 year olds. Data shows that younger students have the highest risk
	that I h among	69 and a widow for 14 yrs. Also, I hold a MS degree. My life is fulfilling and, in the over five years have been on the Spring Creek campus, I haven't noticed any drug and/or related incidents g the students. I have to admit that I am not looking in that direction! Most likely the peer group notice the signs of drug/alcohol abuse.	of alcohol and drug use.
		a mature adult who lives with my husband of over 30 years, so I really don't get involved in parties gs or anything of the sort.	
	Collin in my up, lea the ve or my	older than the average college student, though perhaps I fall closer to the average student age at than I would at a larger university. I have done all of my "partying" when I was in high school and early 20s. Now I am married and have the responsibilities of a mother and a wife. Having grown arned my limits and how to properly prioritize, drinking alcohol is not an issue for me. I do have ery occasional glass of wine with a girlfriend or my husband. When I do drink, I do so in my home husband drives home. I don't know that the answers to my questions help very much with the se of this survey; I do not feel I am the target demographic.	
	6. I'm alr	most 30, and married with a child. I have no idea what a lot of these kids on campus are doing.	
	52), I a	It sure that my answers are going to be of use in this survey. As a non-traditional student (age am not social with the majority of students and not aware of what is happening with drug and ol abuse.	
	clue o	I am over 40, and many of my classes are online, I don't have many campus classes. I have no in how much drugs are or are not available on the campuses. On the ' which campus do you take ost classes on' question, is it possible to add an 'online' option?	
		I am over 50 my responses to this survey are probably not very relevant to the general student of Collin College, and I don't really consider the general student population as peers.	
		I couldn't help much, because I have not really seen drug abuse at the campus, I'm 34 and never any drugs in my life thanks to the influenced of my parents. Good luck surveying the Collin nts.	
		nay want to remove older adults returning to school from your survey as I do not believe our nses will help your target group.	

Major Themes	Comments	Suggestions
Suggestions (N=10)	1. Continue with our campus police presence on all of our campuses	<ol> <li>Involve faculty to talk about Collin's resources in class.</li> </ol>
	2. Counseling services need to be kept private I was told the counsellors share the information to people who ask for it when it's not about them.	<ol> <li>Invite student organizations, faculty and medical</li> </ol>
	3. Create more awareness on drug abuse and control to students, most students are not aware of them. Also, help students know other available resource in campus where they can get help in case they use drugs or are addicted to them.	practitioners to participate in conferences, and awareness activities.
	4. Education classes about the subject.	3. Consider making students
	5. Have police sweep the campus with drug dogs occasionally. In my opinion, if someone is carrying drugs on his person, he does not need to be on campus or even allowed to enroll. I would prefer a drug free and alcohol free campus as well as smoke free (including E-cigs). I don't like the smell and it does get in your clothes and hair just like cigarette smoke. Also, who knows what someone puts in their E-cig. In my opinion, they should not be allowed at all in any public place.	attend a mandatory class that educates them and talks about the available resources
	6. I think that the professors should REQUIRE students to attend at least one class per semester for a grade or extra credit. This will force students to know what is available to them and to educate them at the same time. If they don't need it, someone they know might need it.	
	7. I would love to see a Substance Abuse Counseling major offered at Collin College. I have taken classes in that area at East field, but it's more difficult to do there than it would have been if offered in Collin County. I plan to transfer to the University of North Texas to obtain a degree in Rehabilitative Studies with a minor in Addictions, and I believe it would be beneficial for Collin to partner with UNT in some way.	
	<ol> <li>If the school would reduce stress/work load of classes that would help at least the frequency of usage/abuse. When you have lecture/recitation/lab/online homework for each class that is just ridiculous. And people wonder why students feel the need to let loose whenever possible.</li> </ol>	
	9. IF there is a service to advertise on campus about finding rides home from partying, that would help these young students. Find services for them so that they would not have to drink & drive home.	
	10. You really should put more resources into teaching students the dangers of marijuana. The kids in my classes seem to think there's nothing wrong with it and that it's harmless and should be legalized. To be honest, they've already smoked too much by thinking that. Because they're as dumb as a rocks.	

Major Themes	Co	mments	Suggestions
Personal opinion about	1.	Drugs and tobacco are for losers. I only drink once or twice a year and if you NEED alcohol to function you are pathetic. Tobacco is for pansies too.	
drugs/alcohol/smoking usage (N=9)	2.	I think a little bit of alcohol is okay, but if it becomes addictive, or if you drink until you are drunk, or you drink every night, then yes it is dangerous. Smoking can be dangerous to your health. I don't condone smoking, but I also know people who have lived long, healthy lives and smoked. I think it's a personal decision. Yes, I may have a drink to "loosen me up" but it's usually only one or two over several hours. I hope it helps.	
	3.	I drink wine at home or around family only and very seldom. I am not a smoker and have never done drugs. I tried marijuana one time when I was a teen, over 30 years ago.	
	4.	I smoke high quality kush everyday, and I'm aware of its effects but I continue to use. I also drink premium beer (Dos Equis, Heineken, Corona) imported not domestic. But I only drink two beers a day, no more. I study hard and believe hard work does pay off. I'm Hispanic first one to go to college, trying hard for my "familia". I also use Cocaine, not everyday twice a week (too expensive) maybe, but I use it as a reward when I finish a test or a semester project. I don't use at school just at my house. I don't get wasted drunk I enjoy the taste. Besides that smoke some good weed ull see the world in a different view.	
	5.	It is hard to lower my level of thinking to such a general degree to which you ask these kinds of questions. All the things talked about here can be dangerous but they can only hurt you if you let it. I have answered that I tried cocaine it was a quite the amount but it doesn't mean that I got addicted to it. That is because I do not let it affect me or the reality in which I am living in. The same goes for alcohol. I enjoy drinking casually with my friends but little by little I find myself like alcohol less and less. I don't see the point in it.	
	6.	For what it's worth I think I'd prefer to smoke marijuana over drink, but drinking is legal while marijuana isn't. There's an inherent legal risk with acquiring marijuana that doesn't exist with alcohol. I find myself more emotionally volatile with alcohol and the after-effects are less than desirable. I've never had that experience with marijuana. In my opinion, its unfortunate there's such a negative stigma with marijuana.	
	7.	The reason I didn't read the informational e-mail, and have no intention to read the informational e-mail, is because I know that Collin College takes this very seriously and that they have "things" (whatever they may be) in place to help deal with alcohol/substance abuse.	
	8.	This country is so obsessed with criminalization that it creates its own problems. Legalize and get police out of the subject and let intelligent people get involved. Prisons are full of marijuana criminals for possession of a plant. This country is so collectively stupid it's unreal.	
	9.	Colin's policies on drinking, drugs, and tobacco are well intentioned but may be overdone. First, Collin does not students living on campus so most of the usage polices have little to no direct effect on students. Second, many of Collin students are older returning students not students away from home for the first time. I am nearly 40 years old and I served my country in the United States Marine Corps. I think it is more than a little ridiculous that I can't have a glass of wine or a beer at an evening school function. Additionally, I think that the policy against vapor devices is completely misguided. I don't use them but they do not have the same ill effects that smoking does.	

Major Themes	Comments	Suggestions
Praising Collin (N=5)	<ol> <li>Continue with the good work. Making students aware of chemical abuse is important. The decisions that they make when they are young can forever shape their lives. Many college students see Alcohol and drugs as a natural part of the college experience. It is important to reinforce a healthy life style and positive peer pressure regarding alcohol and drugs at the college level.</li> </ol>	
	2. I don't know much about drug or alcohol use or abuse on Collin campuses since I'm an online student. I know Collin College is highly thought of by everyone I know who are not associated with Collin at all. It seems like Collin would have the potential to have less drug and alcohol use since the campuses are not live-on campuses. It seems like the atmosphere at all Collin campuses would not encourage drug or alcohol use since there are not dorms and students on the campuses 24-hours a day. I think Collin is wonderful!	
	3. I hope that kids that do drugs eventually grow out of it. Thanks for spreading the word to all campuses.	
	4. I think Collin County is a great school.	
	<ol> <li>I think Collin probably has a lower rate of drug and alcohol abuse because so many of the students have to work as well, as opposed to the large, expensive schools where students feel less responsibility for their own finances/lives.</li> </ol>	

Major Themes	Comments	Suggestions
Experiences about drug/alcohol use in Collin (3)	<ol> <li>About a year ago I was in the computer lab at the Frisco campus (the one with the Macs in it) and overheard students talking on the phone to a dealer. They were 'placing their order' with the dealer for the drugs they wanted. This is the only time I have heard this type of conversation on a campus. it was scary at how in the open they were doing this and didn't seem to mind that there was a stranger in the room who could over hear everything they were saying.</li> <li>Maybe you should drug test your employees a few have bragged about how easy their job is, get</li> </ol>	<ol> <li>Collin may provide guidelines to students about pervasiveness and presence of drugs in the apartment complexes nearby. Presence of illicit substances in the area can be ascertained by discrete interviews with the</li> </ol>
	<ul> <li>financial aid, and then go and spend a lot of it on drugs.</li> <li>The school isn't the problem the student living id the problem, I was able to smoke and purchase drugs on that campus apartments if I wanted too. Unfortunately I had to find out the hard way that the SCHOOL APARTMENTS wasn't a safe place after being shot in my shoulder walking to my apartments by GROWN MEN that had no business being in those UNGATED UNPROTECTED apartments. So I moved, it's sad that my parents sent me to your school to be safe and their 20 year old daughter was shot. I also had friends living there without paying rent, multiple basketball players was having relations with the staff that worked in the apartments. One time I bargained with the apartment people to take my 40° TV until I paid my rent off and once I paid it they added charges to my account and told me they could keep my TV or pay the rest. I knew it was a lie but I was so ready to get away from those people I just let them keep everything plus the horrible memories that those apartments gave mel When the horrible tragedy happened to me at the Collin College student housing nobody reached out to me but he told me since the school wasn't affiliated with the campus then there was nothing they could dol Typical (Clearly the campus is for the student so to say you'll are not connected is crap) students move there to go to your school. So this survey is ''OK' but will not solve anything! You might get a few students that actually log into their emails period, then the other few will not even read your emails if it isn't pertaining to their school check! This school isn't safe and will not be drug free because of those apartments! I have worked in Customer service all my life, so it pity's me to know this email and the tragedy I faced will go unheard of and unnoticed because your job is to protect your school no matter what. That's why when the media came because there was a shooting across the street from a well-known campus the apartment people turned them around</li></ul>	discrete interviews with the students who have had taken up residence there in the past or who presently reside there.

Major Themes	Comments	Suggestions
Other comments of significant importance (N=3)	1. I believe the following goes hand in hand. What are we hiding from? Alcohol and drug abuse continue to kill America. The same seminars, pamphlets, speakers, hugs, smiles, handshakes, at-a-boy or girl do not work. Recently there was a pro-women against abuse revival on campus. Everyone but representatives of the United States government was on hand. I did not go from table to table to look at what information was being made available. Abuse effects everyone and in large part to what parents allow, where they draw the line, how they were raised, and the expectations that the child has as being permissible. Again I did not see the information available but what I was hearing was men are the devil. We want sex and we will find a way to get from you, your sister, and your daughter, whom ever. Men are designed differently we are not given outlets for exploring or concentrating those desires in a constructive way in society. Unless you consider masturbation or XXX outlets. Those outlets are only good when you are of age. Masturbation may very well be more powerful than any of the stated drugs because it natural and "reloaded every use" and apparently studies of said that it is equal in high to cocaine and heroin. This sounds like a massive case for love. People not caring about others. Others doing what they can to get attention and affirmation. Who is going to help protect both the men and women? Science is not working. Things are bad and are getting worse. Men are not going to stop desiring women. Women are not going stop doing what they are doing to get their desires met. So all of this will continue. We know it but we do not acknowledge it. There is a poison in the air and we continue to try and spray it with glade. Men do not have to be the way they are. This is a fact. I am becoming different but I am saved. So there are other avenues they might be tried. Men have and will do wrong. We need help and direction.	
	<ol> <li>I wish some of the professors were not rude to myself and to other students, and some of these professors really don't need to cuss in the classroom. I sure don't like when my professor cussing and I don't appreciate going to class and have a professor always be rude and cuss all the time during the class. I am here to learn and not have a professor be rude and cusses in the class. That is disrespectful for the students. I will respect the professors, but they need to really get a grip and learn how to be nice and not come to teach when there mad and angry all the time, and respect me and the other students. A lot of students don't come back when teacher bully students or say mean and rude things and cuss when in the class room. Some professor make me feel worse. I know I am a good student and person. I treat everyone nice and kind. I want that back. I am here to learn better for me and to better for myself.</li> <li>It is good to get involved in students life in order to help them get of the need to use drugs. Most of the time boredom and lack of knowledge, or bad relation between parents or teacher with students lead to loneliness.</li> </ol>	

Major Themes	Comments	Suggestions
Personal experiences about drug / alcohol abuse (N=2)	<ol> <li>Alcohol nearly destroyed my life and because of the pamphlets about alcohol and Alcoholics Anonymous on campus I was aware. I think students need to be more aware. I know that universities such as UTD have AA meetings I believe that Collin College should have something like this as well. I have now been in recovery for over a year. Thanks!</li> <li>I use to drink more when I was in mid twenties, but now I grew out of that because I felt crappy afterwards and you can't accomplish anything when you're hungover or tired. A lot of my friends are older than me and still live like 20 yr. olds and I hardly ever see them now because I grew up and they kept the SAME behaviors. People need to realize that you can make better friendships by doing something without alcohol/drugs being involved. Some people might just need a stress reliever, so they should find a communication outlet, sport or workout, activity instead &amp; no one really wants to actually listen or do anything, or even if they do it they think they still need to drink afterwards.</li> </ol>	address drug use and abuse. 2. Since many students disclosed that they
No Comments (12)	1. N/A (2)	
	2. No / None (4)	
	<ol> <li>No comments because student should know how to protect themselves and keep away from unpleasant activities.</li> </ol>	
	<ol> <li>I am afraid I am not much help. I do not smoke or do drugs and I haven't touched alcohol in five years. I even stopped drinking soda almost two years ago.</li> </ol>	
	5. No. What the heck is going on campus that made this survey a necessity?	
	<ol> <li>I am by no means a frequent drinker, party go-er or drug user. I am very ignorant and naive when it comes to drug use. Please take my opinions with a grain of salt.</li> </ol>	
	7. Thank you for your time. I just had to let you know whoever is reading this, as a student how I feel. Have a great day. I do not drink. I do not smoke. I do not do drugs. I will never did anything of these that you asked in this survey.	
	8. Thank you	

## APPENDIX C

## QUESTIONNAIRE

## DRUG AWARENESS AND PERCEPTION SURVEY: 2014



## Drug Awareness and Perception Survey: Fall 2014

### Please indicate your:



What is your overall GPA?

- C >3.5 C 3.0 - 3.49
- 2.5 2.99
- 2.0 2.49

<2.0

No GPA (first-time-in-college)

#### At which campus do you attend the most classes?

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

Please specify your other campus.

## **Drug Awareness and Perceptions**

Have you read Collin's alcohol and drug abuse policies that were sent to you (via mail as well as electronically) in fall 2014?

C Yes C No

Do you intend to read Collin's alcohol and drug abuse policies that were sent to you (via mail as well as electronically)?

Yes

C No

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

	1=Not dangerous	2	3	4	5=Extremely dangerous	Don't know
Alcohol (beer, wine, & liqueur)	C	0	0	0	0	C
Cocaine	0	0	0	0	0	0
Ecstasy	C	0	C	0	0	0
Heroin	C	0	0	0	0	0
LSD	0	0	C	0	0	C
Marijuana (such as pot, weed, hashish)	C	C	C	0	0	C
Speed	C	C	C	C	0	0
Tobacco (smoked)	C	C	C	C	C	0
Tobacco (chewed, snuffed)	C	C	C	C	C	C
Hookah (tobacco from water pipe)	C	C	C	0	C	0
Un-prescribed use of prescription drugs (such as, pain medicine, Ritalin, antidepressents etc.)	0	C	0	C	•	C
Un-prescribed use of over-the-counter drugs to <u>get high</u> (such as, cough & cold medicines)	0	•	0	0	0	0
Steroids or human growth hormones (for body building)	C	C	0	0	0	C
K2 (Herbs coated with synthetic chemicals that mimic marijuana high when smoked)	0	0	0	0	0	0

Alcohol (beer, wine & liqueur)	<5%	5-25%	26-50%	>50% C	Don't know
Cocaine	0	C	0	0	0
Ecstasy	0	C	C	0	0
Heroin	0	C	0	0	C
LSD	0	0	0	0	0
Marijuana (such as pot, weed, hæhish)	0	0	0	0	0
Speed	C	C	C	0	C
Tobacco (smoked)	0	0	0	0	C
Tobacco (chewed, snuffed)	0	0	C	0	C
Hookah (tobacco from water pipe)	0	0	0	0	C
Un-prescribed use of prescription drugs (such as, pain medicine, Ritalin, antidepressents etc.)	0	2	-	0	0
Un-prescribed use of over-the-counter drugs to <u>get hig</u> h (such as, cough & cold medicines)	0	0	0	0	0
Steroids or human growth hormones (for body building)	C	C	0	0	0
K2 (Herbs coated with synthetic chemicals that mimic marijuana high when smoked)	0	0	0	0	0

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

Traffic accidents	1= To no extent	2 C	3 C	4 C	5= To a large extent
Personal injuries	C	0	0	0	0
Poor academic performance	C	0	C	0	0
Sexual assault	C	0	0	0	0
Suicide	0	0	0	0	0

#### In your opinion:

To what extent are drugs available within Collin's environment	1=To no extent	2 C	° C	4 C	5 = To a large extent C
To what extent is Collin's atmosphere conducive to drinking alcohol	C	0	0	0	0
To what extent is Collin's atmosphere conducive to drug use	0	0	0	0	0

#### In your opinion Collin students:

Drink more than students at other colleges	Yes	No	About the same	Don't know
Do drugs more than students at other colleges	0	0	0	0
Smoke marijuana more that students at other colleges	С	С	0	0
Smoke or use tobacco products more than students at other colleges	0	0	0	0

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

Alcohol (beer, wine & liqueur)	Never	Tried once	Occasio nally	Often	Very often	Daily	Do not want to answer
Cocaine	C	0	0	0	C	C	0
Ecstasy	C	C	0	C	C	C	C
Heroin	C	0	0	C	0	0	C
LSD	C	0	0	C	C	C	0
Marijuana (such as pot weed, hashish)	C	C	0	C	0	C	0
Speed	C	C	0	0	C	С	0
Tobacco (smoked)	C	C	C	0	0	C	0
Tobacco (chewed, snuffed)	C	C	C	C	C	C	C
Hookah (tobacco from water pipe)	Ô	C	0	C	0	C	0
Un-prescribed use of prescription drugs (such as pain medicine, Ritalin, antidepressents, etc.)	C	0	0	C .	C	-	C
Un-prescribed use of over-the -counter rugs (such as, cough and cold medicines)	0	0	0	0	0	0	0
Steroids or human growth hormones (for body building)	0	C	0	0	0	0	0
K2 (Herbs coated with synthetic chemicals that mimic marijuana high when smoked)	0	C	0	0	0	0	0

#### How often have you EVER used any of the following?

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

Never	Tried once C	Less than 6 times a year C	Once a mo nth C	2-3 times a mo nth C	Once a week	2-5 times a week C	Daily C	Do not want to an swer
Cocaine	C	C	0	C	0	C	C	0
Ecstasy	C	C	C	C	C	C	C	C
Heroin C	0	C	0	C	0	C	0	0
LSD C	C	C	C	C	C	С	C	0
Marijuana(Pot, weed, hashish) 📀	0	C	0	0	0	0	C	0
Speed C	0	C	0	0	0	C	C	0
Tobacco (smoked) 🔘	0	0	0	0	0	0	0	0
Tobacco (chewed, snuffed)	0	С	0	0	0	0	C	C
Hookah (tobacco from water pipe)	0	0	0	0	0	0	0	0
Jn-prescribed use of prescription drugs ( (such as pain medicines, Ritalin, antidepressents, etc.)	0	C	0	0	0	0	0	0
Un-prescribed use of over-the-counter O drugs (such as, cough and cold medicines)	0	0	0	0	0	0	0	0
Steroids or human growth hormones (for body building)	C	0	C	С	0	0	C	0
K2 (Herbs coated with synthetic C chemicals that mimic marijuana high when smoked)	0	0	0	0	0	•	0	0

Used tobacco (smoked, chewed, snuffed)	Never	Occasion ally C	Often C	Very Often	Always	Do not want to answer
Consumed alcohol (beer, wine or liqueur) to alleviate stress	0	C	0	0	0	0
Consumed alcohol (beer, wine or liqueur) for fun	0	C	C	0	0	0
Combined non-alcoholic beverages with alcohol	0	0	0	0	0	0
Alternated coffee with alcohol	0	C	0	0	0	C
Participated in drinking games	0	C	0	C	0	0
Set limit on the number of drinks you would have at the party	0	C	C	C	0	C
Got drunk despite set limit	0	0	0	0	0	0
Asked friend not to let you exceed a certain limit of drinks	C	0	C	9	0	C
Rode home with designated driver	0	0	C	0	O	0
Drove home yourself	C	C	C	0	0	C
Mixed drugs with alcohol	0	C	0	C	0	C
Got into binge* drinking	C	0	C	C	C	C
Refused to drink	C	C	0	0	0	0
Held a drink in hand so others should not pressurize you	C	0	C	0	0	0
Drank because was pressurized by peers	C	0	0	0	0	C

#### In general, when you partied/socialized within the <u>LAST YEAR</u> how often you did the following:

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

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

Had a hangover	Never	Occasion ally	Often C	Very Often	Always	Do not want to answer
Passed out (forgot where you were, what you did)	0	0	0	0	C	C
Felt sick (nausea, vomiting)	C	C	C	C	C	C
Missed class the next day	0	0	C	0	C	0
Got into fight with significant other	0	C	C	0	C	C
Became physically abusive	0	C	C	0	C	C
Became destructive (damaged property, own or others)	0	C	C	0	C	C
Harressed others	0	0	0	0	0	C
Got into trouble with police	0	C	C	C	C	C
Received speeding ticket	0	0	0	0	0	0
Got arrested for DUI/DWI(driving under the influence of alcohol/ while intoxicated)	C	0	C	C	C	0
Became Involved in unprotected sex	0	0	0	0	0	C
Was taken advantage of sexually	0	0	C	C	C	0
Took advantage of some one sexually	0	0	0	0	0	0
Became really depressed	C	C	C	0	C	C
Had suicidal thoughts	0	0	C	0	0	0
Did something you regretted later	0	0	C	0	0	0

In your opinion <u>drinking</u> : (Please check all that apply):	
<ul> <li>Helps loosen up socially/overcome social inhibitions</li> <li>Lets you have more fun</li> <li>Makes you look cool</li> <li>Helps make friends</li> <li>Makes you feel valued by friends</li> <li>Helps develop relationships</li> </ul>	<ul> <li>Helps alleviate boredom/something to do</li> <li>Relieves stress/helps deal with stress</li> <li>Helps escape from problems</li> <li>Destroys you</li> <li>Makes you look disgusting</li> </ul>
In your opinion <u>drugs</u> : (Please check all that apply): Helps loosen up socially/overcome social inhibitions Lets you have more fun Makes you look cool Helps make friends Makes you feel valued by friends Helps develop relationships	<ul> <li>Helps alleviate bor edom/something to do</li> <li>Relieves stress/helps deal with stress</li> <li>Helps escape from problems</li> <li>Destroys you</li> <li>Makes you look disgusting</li> </ul>
In your opinion <u>Smoking tobacco or using tobacco p</u> (Please check all that apply): Helps loosen up socially/overcome social inhibitions Lets you have more fun Makes you look cool Helps make friends Makes you feel valued by friends Helps develop relationships	roducts: Helps alleviate bor edom/something to do Relieves stress/helps deal with stress Helps escape from problems Destroys you Makes you look disgusting

Ple	ch activities on campus are you aware of that address drug use and abuse? ase check all that apply)
	Counseling & Resources
	Educational Materials (such as informational brochures & pamphlets)
	Online Screening for mental health
	Student Health 101*
	Special Presentations (such as how to cope with stress, relationships etc.)
	Special Exhibits (such as resource tables, screenings for depression, alcohol etc.)     Referral Information (such as community resources)
	I am not aware of any activities
nl	ine Health magazine sent to students monthly via cougarmail.
	The second s
ha	t can the college do to make students like you aware about the above activities?
_	
N	hich of the following activities on campus you have participated?
w le	ase check all that apply)
w	ase check all that apply) Counseling & Resources
w	ase check all that apply) Counseling & Resources Counseling Materials (such as informational brochures & pamphlets)
wle	ase check all that apply) Counseling & Resources
w	ase check all that apply) Counseling & Resources Counseling Materials (such as informational brochures & pamphlets)
w	ase check all that apply)  Counseling & Resources  Educational Materials (such as informational brochures & pamphlets)  Online Screening for mental health

\* Online Health magazine sent to students monthly via cougarmail.

Any other comments or suggestions?

#### Thanks for completing the survey!

Please click on the red submit button to send the survey.

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

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

