

**A Study of Fraternity and Sorority Advisors Regarding Alcohol Education Strategies used
on College Campuses**

by

“Bo” John Quentin Mantooth

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Approved by

Maria M. Witte, Chair, Associate Professor of Education Foundations,
Leadership and Technology

James E. Witte, Professor of Education Foundations,
Leadership and Technology

David DiRamio, Associate Professor of Education Foundations,
Leadership and Technology

Abstract

“There is no greater public health hazard on American college and university campuses than the abuse of alcohol” (Misch, 2010, p. 232). The purpose of this study was to examine alcohol education strategies presently used in fraternity and sorority life offices on college campuses. Specifically, this study compared the National Institute on Alcohol Abuse and Alcoholism (NIAAA) recommendations for alcohol education strategies and current campus practices for fraternity and sorority campus-based professionals. Comparisons were made through the use of an electronic survey of members of the Association of Fraternity/Sorority Advisors (AFA). Of the 545 members that were surveyed, 176 of the participants completed the survey.

A backwards elimination regression was used to determine the best predictors of the amount of alcohol education strategies being used with both individual demographic characteristics and the institutional profiles. Results from the tests indicated that the AFA members that use the most alcohol education strategies are typically male and have been advising fraternities and sororities for more than three years. The types of institution where the most alcohol education strategies are being used are typically public institutions, smaller than 10,000 students, the fraternity and sorority community was less the 20% of the undergraduate population, and the advisor was aware of the NIAAA Study, *A Call to Action: Changing the Culture of Drinking at U.S. Colleges* (2002).

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List of Abbreviations

- AFA Association of Fraternity and Sorority Advisors
NIAAA National Institute on Alcohol Abuse and Alcoholism

Chapter 1

Introduction

The tradition of drinking has developed into a culture, with beliefs and customs entrenched in every level of college, from students choosing to drink or not to drink to student deciding how much to drink. National headlines, allow us to see that “students continue to be seriously injured or die as a result of drinking” (National Institute on Alcohol Abuse and Alcoholism, 2007, p. 3). Some students who attend college have certain expectations that alcohol consumption is necessary for social success and acceptance from their peers. Moreover, with college sports arenas displaying advertisements from alcohol industry sponsors and other long-standing alcohol-related campus traditions, students are deriving much of their expectations of alcohol use from their environments (National Institute on Alcohol Abuse and Alcoholism, 2002). “Colleges and universities are the social institutions that help many youth make the transition from adolescence to adulthood, they often become the playing field on which the developmental problems of this life stage, including alcohol misuse, unfold” (High-Risk Drinking in College, 2002, p. vi).

After World War II teen drinking began to rise (Carmelli, Swan, Page, & Christian, 1995). Between 1941 and 1950, 29% of American teenagers drank alcohol; this percentage rose to 63% from 1951 to 1965 (An age old problem, 1992). The National Institute on Alcohol Abuse and Alcoholism (NIAAA) conducted a study in the early 1990s that revealed an overwhelming majority of college students, 88%, used alcohol, implying that use could become

abuse (National Institute of Alcohol Abuse and Alcoholism, 2002). “Drinking by college students aged 18 to 24 contributes to an estimated 1,825 student deaths, 599,000 injuries, and 97,000 cases of sexual assault or date rape each year” (Hingson, Heeren, Winter, & Wechsler, 2005). Additionally, according to the latest NIAAA report, the consequences of excessive drinking by college students are more significant, more destructive, and more costly than many parents realize. These consequences affect students whether or not they drink (National Institute on Alcohol Abuse and Alcoholism, 2002).

In 2002, the National Institute on Alcohol Abuse and Alcoholism (NIAAA) assembled a task force to address drinking on college campuses in the United States. In the task force report, *A Call to Action: Changing the Culture of Drinking at U.S. Colleges*, the authors suggested that “other than the damage and injuries that occur during spring break each year, the only consequences of college drinking that usually come to the public’s attention are occasional student deaths from alcohol overuse or other alcohol-related tragedies” (National Institute on Alcohol Abuse and Alcoholism, 2002, p. 1). The consequences of college drinking are much more than occasional, “at least 1,400 college student deaths a year are linked to alcohol” (National Institute on Alcohol Abuse and Alcoholism, 2002, p. 1).

The task force report describes four tiers for addressing alcohol on college campuses: what is effective among college students, what is effective with general populations, what is promising, and what has been shown to be ineffective. Under the four tiers, the report outlines 19 strategies for addressing alcohol use and abuse, and within those 19 strategies there are several sub-categories. This study evaluated what fraternity and sorority professionals were doing in terms of alcohol education strategies on their college campuses in comparison to the NIAAA recommended strategies.

The Harvard School of Public Health (1993) administered a 20-page questionnaire to 17,592 students at 140 colleges in 40 states and the District of Columbia. This study was unique in that it was the first study of college drinking that used a national representative sample of both colleges and individual students. This study was the first survey statistically representative of students at all four year colleges (Wechsler, Davenport, Dowdall, Moeykens, & Castillo, 1994). The results of the study confirmed that alcohol was the most serious substance abuse problem on campuses across the United States.

As a result of the Harvard study, Henry Wechsler published a 12-step program to address the drinking problem on campuses. In 2002, the NIAAA developed recommended strategies to address alcohol education being used on college campuses. NIAAA developed a list of 19 strategies, which fall under four tiers. They are outlined below and are described in depth in Chapter 2:

Tier 1: Evidence of Effectiveness among College Students

1. Combining cognitive-behavioral skills with norms clarification and motivational enhancement interventions
2. Offering brief motivational enhancement interventions
3. Challenging alcohol expectancies.

Tier 2: Evidence of Success with General Populations That Could Be Applied to College Environments

4. Increased enforcement of minimum drinking age laws
5. Implementation, increased publicity, and enforcement of other laws to reduce alcohol-impaired driving.
6. Restrictions on alcohol retail outlet density

7. Increased price and excise taxes on alcoholic beverages
8. Responsible beverage service policies in social and commercial settings
9. The formation of a campus and community coalition involving all major stakeholders may be critical to implement these strategies effectively.

Tier 3: Evidence of Logical and Theoretical Promise, but Require More Comprehensive Evaluation

10. Adopting campus-based policies and practices that appear to be capable of reducing high-risk alcohol use.
11. Increasing enforcement at campus-based events that promote excessive drinking
12. Increasing publicity about and enforcement of underage drinking laws on campus and eliminating “mixed messages.”
13. Consistently enforcing disciplinary actions associated with policy violations
14. Conducting marketing campaigns to correct student misperceptions about alcohol use
15. Provision of “safe rides” programs
16. Regulation of happy hours and sales
17. Informing new students and their parents about alcohol policies and penalties before arrival and during orientation periods

Tier 4: Evidence of Ineffectiveness

18. Informational, knowledge-based, or values clarification interventions about alcohol and the problems related to its excessive use, when used alone
19. Providing blood alcohol content feedback to students

Statement of the Problem

“There is no greater public health hazard on American college and university campuses than the abuse of alcohol” (Misch, 2010, p. 232). Huchting, Lac, Hummer, and LaBrie (2011) stated that “heavy drinking persists as a serious social, academic, and health concern among college students, with consequences ranging from missed classes and hangovers to damaged property, fights, sexual assaults, and even death (Hingson, Zha, & Weitzman, 2009; Hingson, et al, 2005; Wechsler, Dowdall, Maenner, Gledhill-Hoyt, & Lee, 1998; Wechsler, Lee, Kuo, & Lee, 2000).” Affiliation with fraternities and sororities is associated with heavier drinking (Meilman, Leichliter, & Presley, 1999). Research indicates that critical risk factors associated with heavy drinking on college campuses include male gender and being a member of a fraternity or sorority (Baer, 2002; Park, Sher, & Krull, 2008; Walters & Baer, 2006). Members of fraternities and sororities have been identified as high risk groups for alcohol consumption when compared to the general population (Huchting, et al, 2011; Meilman, et al, 1999).

Membership in a fraternity or sorority places students at greater risk for heavy alcohol consumption (Park, Sher, & Krull, 2008). “Students who drink excessively have higher rates of injuries, assaults, academic problems, arrests, vandalism, and other health and social problem, compared with their nondrinking counterparts. They disrupt the studies and threaten the health and safety of their peers” (National Institute on Alcohol Abuse and Alcoholism, 2002, p. 1). Studies comparing students in fraternities and sororities to students that are not affiliated find that the students in fraternities and sororities drink more heavily and more frequently (Cashin, Presley, & Meilman, 1998; Sher, Bartholow, & Nanda, 2001; Wescheler, et al, 1994), perceive alcohol more acceptable (Larimer, Irvine, Kilmer, & Marlatt, 1997), experience more frequent and severe alcohol-related consequences (Cashin et al, 1998; Engs, Diebold, & Hanson, 1996;

Larimer, Anderson, Baer, & Marlatt, 2000; Lo & Globetti, 1995), and are less likely to seek treatment or use campus resources for alcohol problems (Klein, 1989).

Alcohol abuse has a number of different consequences including drunk driving, unsafe sex, sexual assault, and death. The consequences of excessive and underage drinking affect virtually all college campuses, college communities, and college students, whether they choose to drink or not. Previous studies have revealed that college campuses are not doing enough to address the alcohol concerns (Wechsler, 1994, 1998, 2000; Werner, & Greene, 1992). A stereotype may be placed on fraternities and sorority members as the heavier drinkers than their unaffiliated peers (National Institute on Alcohol Abuse and Alcoholism, 2002). Colleges and universities where excessive alcohol use is more likely to occur include schools where fraternities and sororities systems dominate (Presley, Meilman, Cashin, & Leichliter, 1997). In spite of all of these studies, there are lacks of studies that examine alcohol education strategies used in fraternity and sorority life offices on college campuses.

Although the consequences of campus drinking are a major problem, “the majority of college students drinks moderately or abstains” (Wechsler, Lee, Kuo, & Lee, 2000, p. 202). For many students alcohol use is not a tradition, but for certain groups of students it is part of the tradition of being in college (Misch, 2010). There are several factors affecting students’ drinking; the type of college they attend, where they live, race, sex, and co-curricular activities. Wechsler, et al, (2000) reported that members of fraternities and sororities drink more than students who are not members.

Purpose of the Study

The purpose of this study was to examine alcohol education strategies presently used in fraternity and sorority life offices on college campuses. Specifically, this study compared

National Institute on Alcohol Abuse and Alcoholism (NIAAA) recommendations for alcohol education strategies and current campus practices for fraternity and sorority campus-based professionals. Comparisons were made through the use of a survey of members of the Association of Fraternity/Sorority Advisors (AFA). AFA is a professional organization and has five classes of membership; Professional, Graduate, Affiliate, Vendor, and Emeritus (AFA1976.org, 2010). The study focuses on the fraternity and sorority campus-based professionals.

An estimated 1,825 college students between the ages of 18 and 24 die annually from alcohol-related unintentional injuries, including motor vehicle crashes (Hingson, et al, 2005). In 1997, the average higher education institution spent \$13,330 annually to discourage alcohol abuse (Kalb & McCormick, 1998) and in 2007, one institution spent over a half million dollars, annually, on alcohol-related costs (College Drinking, 2007). This study examined the extent to which colleges and universities are addressing alcohol education in accordance with the NIAAA guidelines. Some colleges and universities are addressing alcohol education through different efforts; however, this study examined whether or not fraternity and sorority life offices were addressing alcohol use on these campuses using the NIAAA recommended strategies.

Research Questions

The following research questions were used in this study:

1. What are the alcohol education strategies, effective and ineffective, being used in fraternity and sorority offices on college campuses?
2. What are the individual characteristics of campus-based professionals working in fraternity and sorority offices?

3. What are the institutional profiles of campus-based professionals working in fraternity and sorority offices?
4. What is the relationship of alcohol education strategies and individual demographic characteristics for campus-based professionals working in fraternity and sorority offices on college campuses?
5. What is the relationship of alcohol education strategies and institutional profiles for campus-based professionals working in fraternity and sorority offices on college campuses?

Significance of the Study

After a death of a fraternity pledge at Massachusetts Institute of Technology in 1997, courts charged the fraternity for manslaughter for the hazing death of the pledge. This was the first time in the nation that a court system had charged a fraternity guilty, and not the individual members (Ellement, 1998, p. B01). Results of this study will provide awareness of fraternity and sorority advisors and identify various areas regarding alcohol misuse among fraternities and sororities. If fraternities and sororities are going to be held accountable in court systems, it is important that alcohol misuse be addressed by the fraternity and sorority professionals, which begins with the education that is being presented to their students.

In fall 1998, alcohol-related deaths occurred at colleges and universities across the country, including Massachusetts Institute of Technology, Louisiana State University, Virginia Commonwealth University, University of Virginia, and Radford University. A few years later the NIAAA report was released with hopes that the recommended strategies would allow for more education to be provided on college campuses. Since the report was written in 2002, the

number of deaths and injuries continues to rise (National Institute on Alcohol Abuse and Alcoholism, 2007; Misch, 2010; Huchting, et al, 2011).

It is important to identify alcohol education strategies on college campuses since alcohol abuse continues to be a persistent problem that needs to be addressed (Misch, 2010). “Alcohol abuse is the single greatest public health hazard on American college and university campuses, but the culture of abusive alcohol consumption continues to be highly resistant to change” (Misch, 2010, p. 232). With the release of NIAAA’s report in 2002, proven strategies were identified. Some methods used before the release of the report included education, strict enforcement, prohibiting alcohol use, and involving the community. This study provided results from members of AFA as to which of the strategies are being used on their campus.

This study allowed the author to identify the colleges and universities, where AFA members are employed, are using the recommended strategies from NIAAA. It is both descriptive and statistical in identifying solutions, actions, and assessments at the campus level. Results from this survey will be used to describe how fraternity and sorority professionals are addressing the issue of alcohol use and abuse.

Assumptions

The following assumptions were relevant to this study:

1. The participants involved were representative of the larger population (normal distribution and equal variances).
2. Participants in the study have prior knowledge of alcohol education strategies, which is an issue examined in the study.

3. Participants answered the survey honestly and consistently; they were able to identify with areas of the survey and what alcohol education strategies they had implemented on their campuses.
4. A majority of the fraternity and sorority professionals are doing at least one of the strategies that NIAAA found to be ineffective.

Limitations

This study was limited to fraternity and sorority professionals who were members of AFA, working at institutions of higher education within the continuous United States. Also, participants who were invited to be a part of the study voluntarily chose to participate in the study. Depending on the makeup of the sample, the results were generalized to professionals with similar characteristics.

The construct being examined was alcohol education strategies. Although steps to control for prior knowledge of the issue were taken, the possibility remained and expected that the professionals knew the alcohol education strategies that should be in place on their campus.

Definitions

For the purpose of this study, the following definitions apply:

1. The term “alcoholism refers to drinking of alcoholic beverages to such a degree that major aspects of an individual’s life, such as work, school, family relationships, or personal safety and health are seriously and repeatedly interfered with” (Rosta, 2004. p. 219). Alcoholism is a serious and progressive disease that can be fatal if not treated. College is a time during which many students establish norms and patterns that will perpetuate after graduation. Although a college student may not be an alcoholic, he or she may create patterns in college that could lead to the disease at a later time in life.

2. The Association of Fraternity/Sorority Advisors (AFA) is the professional association for fraternity and sorority professionals (AFA1976.org, 2010).
3. A drink is defined as a “12 ounce can or bottle of beer, a 12 ounce can or bottle of wine cooler, a four ounce glass of wine, or a 1 ounce shot of liquor” (Binge Drinking On American College Campuses, 1995, p. 3).
4. Fraternity and Sorority Advisor/s refers to a campus-based higher education professional who advises fraternities and sororities on an American college campus.
5. The National Institute on Alcohol Abuse and Alcoholism (NIAAA) is an organization that supports and conducts biomedical and behavioral research on the causes, consequences, treatment, and prevention of alcoholism and alcohol-related problems (NIAAA, 2007).

Organization of the Study

This study is organized into five chapters. Chapter 1 contains an introduction of the study, the statement of the problem, states the purpose of the study, delineates research questions, discusses the significance of the study, identifies limitations, assumptions, and provides definitions of terms used in the study. Chapter 2 is a review of the literature regarding general alcohol studies, college alcohol studies, and the NIAAA recommended alcohol education strategies. Chapter 3 provides information related to the population and sample, research design, data collection procedures, field testing of the survey instrument, and the procedures for the analysis of the data. Chapter 4 reports the findings in relation to the research questions. Finally, Chapter 5 provides conclusions and discussion based on the findings and recommendations for further study and practice.

Chapter 2

Literature Review

This chapter reviews the literature on alcohol studies, dealing with colleges and universities and not. This chapter also provides an overview of the National Institute on Alcohol Abuse and Alcoholism (NIAAA) recommended strategies. The purpose of this study was to investigate the alcohol education strategies presently used in fraternity and sorority life offices on college campuses in order to make recommendations to improve the way these offices are addressing alcohol education. This study evaluated which strategies are being used and by which community on their respective campuses. Specific comparisons will be made between the demographics frequencies of the participant's institution and the strategies they are using.

Research Questions

The following research questions were used in this study:

1. What are the alcohol education strategies, effective and ineffective, being used in fraternity and sorority offices on college campuses?
2. What are the individual characteristics of campus-based professionals working in fraternity and sorority offices?
3. What are the institutional profiles of campus-based professionals working in fraternity and sorority offices?

4. What is the relationship of alcohol education strategies and individual demographic characteristics for campus-based professionals working in fraternity and sorority offices on college campuses?
5. What is the relationship of alcohol education strategies and institutional profiles for campus-based professionals working in fraternity and sorority offices on college campuses?

General Alcohol Studies

Reporting the data on the prevalence of alcohol abuse in colleges and universities is important. Reviewing the literature to garner a better understanding of the alcohol misuse in general, not just in colleges and universities is imperative to see that alcohol misuse does not just exist for 18 – 24 years olds. Equally important is reviewing the literature that discusses factors as to why students drink in college. Results from alcohol studies and college students reveal diverse factors associated with heavy drinking (Doumas, Turrisi, & Wright, 2006).

Past studies have linked family patterns to alcohol abuse (Haugland & Havik, 1998; Coyle, Nochajski, Maguin, Safyer, DeWit, & Macdonald, 2009). There is considerable empirical support for assertions that parental alcoholism adversely affects family functioning including low cohesion and expressiveness, high conflict, disturbed boundaries and interaction patterns, role distortions, role rehearsals, and negative family environments (Sheridan, 1995; Coyle, et al, 2009) Children of alcoholics are considered as an “at-risk” population (Birke, 1990). This group is at a higher risk for a variety of negative behavior outcomes such as self-identity and self-esteem problems, becoming an alcoholic or marrying an alcoholic, and difficulties with interpersonal relationships. In 1990, the United States Department of Health and Human Services reported that stated “There is a wealth of evidence that one of the greatest

risk factors for becoming an alcoholic is to be the son, daughter, or sibling of one” (Hunnicut, 1996, p. 184).

Some researchers have used social learning theory in trying to understand family, educational, and peer influences on alcohol use (Bahr, Marcos, & Maughan, 1995; Borsari & Carey, 2006). A central idea of this theory was that “deviant behavior is influenced by the associations one has with attitudes or behavior patterns that either promote (reinforce) or proscribe (punish) such behavior” (Bahr, et al, 1995, p. 457). The study described that relationships that are built with primary groups, then those people learn attitudes and behavior patterns. Adolescents viewed primary groups as the family, peer group, and the educational system (Bahr, et al, 1995). Bahr, Marcos, & Maughan (1993) administered a questionnaire to 27,000 adolescent these relationships. The study found a strong association between family bonds and alcohol use, and was contingent upon family attachment. Low family bonding resulted in adolescents becoming more likely to become involved with drug and alcohol abuse. Adolescents with high family bonding experienced opposite results. The adolescents with high family bonding were more likely to have friends who did not use drugs and had a positive commitment to education and schooling.

Belliveau and Stoppard (1995) studied personality traits and the use or nonuse of alcohol in the home. Five hundred and fourteen students who had enrolled in introductory psychology courses volunteered to complete a variety of surveys. The researchers found that depression and general maladjustment was higher in adult children of alcoholics. Based on this research, there was justification for increased counseling services for adult children of alcoholics in university settings. No findings of evidence of gender-related differences with adult children of alcoholics were reported.

Bradley, Carmen, and Petree (1992) looked at variables associated with drinking behavior. Undergraduate students from the University of Montana and the University of Wyoming participated in the study. There was a high correlation between participants' levels of exposure to family members' trouble-involved drinking and the number of incidents the participants experienced with drinking-related incidences. The conclusions suggested that drinking motives were learned early on and, to some extent, in the family.

One factor that may influence cognitive performance, both before and after the onset of heavy drinking, is genetic predisposition to alcoholism (Underwood, Mann, Yung-Yu, & Arango, 2008). Besides being associated with a greater risk for becoming an alcoholic with more physiological abnormalities, a positive family history for alcoholism links to the severity of cognitive dysfunction observed in alcoholics. Drake et al. (1995) focused on the relationships between family history and abstinence following treatment. They examined the relationship between a family history of alcoholism and relapse drinking on a cognitive functioning in chronic alcoholics. The college student participants completed a 28-day Alcohol Treatment Program after doctors diagnosed them as alcoholics according to the Diagnostic and Statistical Manual of Mental Disorders (American Psychiatric Association Staff, 1995). The researchers found that alcoholics who completed the treatment and remained abstinent until a three to four month follow-up visit showed improvement in cognitive functioning. Alcoholics who resumed drinking showed a decline in performance. Results from this study found positive family history for alcoholism contributes to the cognitive deterioration observed with continued drinking. "These results also indicate that familial alcoholism may represent a distinct sub-category of alcoholism, which should be considered when interpreting the results from investigations of cognitive functioning of chronic alcoholics" (p. 108). The findings in the study by Drake, et al.,

(1995) emphasized the importance of assessing family history when examining chronic alcoholic populations.

In contrast to the studies cited above, some researchers have also found that family history had no influence on the research participants. Hunnicutt, et al., (1996) found that use of alcohol was common across all ages and the average age was 27 at a Midwestern urban commuter campus. The study defined a “family history of alcohol” as a person having a biological parent or grandparent with alcoholism. Of the 470 students completing a questionnaire, 40% of males and 32% of females under 21 reported a family history of alcoholism. Additionally, 28% of males and 51% of females between 21 and 30 reported a family history of alcoholism. The researchers found that 57% of males and 40% of females under 21 who reported a family history of alcoholism also reported consuming five or more drinks in a row at least once a month. About 48% of males and 43% of females between 21 and 30 who reported a family history of alcoholism also reported engaging in this behavior at least once within the previous two weeks.

The Hunnicutt (1996) study revealed that there are other reasons why students drink. While other studies: Haugland & Havik, 1998; Doumas, Turrisi, & Wright, 2006; Coyle, Nochajski, Maguin, Safyer, DeWit, & Macdonald, 2009 revealed that drinking alcohol could be related to family experiences or family genetics, there were other areas to explore in the relationship as to why people drink. The next section will explore alcohol studies related to college students in the United States.

College Alcohol Studies

The Journal of Studies on Alcohol published articles and research related to alcohol and the college community in the mid-1990s. One such study dealt with the continuation and

initiation of alcohol use from the first to the second year of college (Wechsler, Isaac, Grodstein, & Sellers, 1994). The study surveyed 611 college students during their first and second years of college to examine the development of the behaviors of alcohol use in college. Questions on the survey covered a range of alcohol issues including recent use, attitudes, locations of drinking, and consequences of drinking. Results of this study found that almost every student who used alcohol during his or her first year continued to do so during the second year. Similarly, those who were binge drinkers their freshman year continued this behavior pattern. Students who drank in high amounts were more likely to become binge drinkers in college.

There are many factors associated with alcohol use and college students. The findings of one study identified the kinds of individuals, due to characteristics and environments, which are at risk for developing patterns of problem drinking (Schall, Kemeny, & Maltzman, 1992). Results of their study showed that among college students, extroversion and sensation seeking were the personality characteristics that dispose a person towards drinking alcohol.

By July 1987, every state in the United States has adopted laws making it illegal for individuals under the age of 21 to buy or consume alcoholic beverages. The laws were to decrease the number of negative outcomes resulting from irresponsible alcohol use through limiting consumption by younger individuals (Allen, Sprenkel, & Vitale, 1994).

After the drinking age was changed in 1987, several studies were conducted on alcohol misuse. A sample of 2,142 college students from 10 Midwestern universities responded to the Alcohol and Other Drug Use Needs Assessment Survey in spring of 1990. Engs and Hanson (1989) developed the term psychological resistance to define the reduction of a person's behavioral freedoms. The researchers postulated that if this occurs, such as an increase in the drinking age, then a person will become motivationally aroused. Researchers from this study found that if

students were denied the opportunity to make choices, it resulted in the students' feeling limited in their behavioral freedom. Engs and Hanson also found that more underage students consumed alcohol than did their legal age peers. Alcohol consumption of underage students has increased since the law changed the legal drinking age to 21 (Brown, Matousek, & Radue, 2009; Lipperman-Kreda, Grube, & Paschall, 2010; Paek, & Hove, 2012). This study attributed the increase of alcohol consumption to psychological resistance among underage consumers.

In studying the environmental contributions to student drinking, Baer, Stacy, and Larimer (1993) have revealed the importance of peer influence on quantity and frequency of consumption, as well as the initiation and continuity of abuse patterns. The researchers used two fraternities and sororities at a large public university in the western United States and looked at the biases in the perceptions of the consequences of alcohol use among college students. Participants were asked to estimate the frequency of occurrence of 12 problem behaviors for themselves, their best friend, a typical member of their residence, and their university. Results of this study showed that students rated others drinking more and having more alcohol-related problems than themselves.

Research about sociability and alcohol consumption has resulted in inconsistent findings. One study (Nezlek, Pilkington, & Bilbro, 1994) sought to provide a perspective on the consumption-sociability relationship by looking at social interaction and binge drinking. Ninety college students from the College of William and Mary used a social interaction diary to provide measures of social activity, alcohol consumption, and the frequency of binge drinking. The researchers focused on associations with binge drinking and certain patterns of social behaviors. Results from the diaries showed that the frequency of binge drinking related to some aspects of social interaction. Because binge drinking was considered a normal behavior in college and

desirable among college students, students who binge drank felt more fully connected to the college community.

A study published by the Harvard School of Public Health (1993) distributed a 20-page questionnaire to 17,592 students at 140 colleges in 40 states and the District of Columbia. This study was unique in that it was the first study of college drinking that used a national representative sample of both colleges and individual students. The researchers claimed that their study was the first survey statistically representative of student at all four-year colleges (Wechsler, Davenport, Dowdall, Moeykens, & Castillo, 1994). The results of the study confirmed that alcohol was the most serious substance problem on campuses across the United States.

Dew (2003), Foster & Marriott (2006), White, Kraus, & Swartzwelder (2006), and Esser, Kanny, Brewer, & Naimi (2012) defined binge drinking men as those who consumed five drinks, one after the other, at least once in the previous two weeks. Binge-drinking for women was defined as those who consumed four drinks, one after the other, at least once in the previous two weeks. Forty-four percent of the students surveyed were binge drinkers; 50% of the college men and 39% of the college women were binge drinkers (Binge Drinking on American College Campuses, 1995).

According to Wechsler, et al., (1994), although the majority of college students drank, fraternity members were much more likely than nonmembers to abuse alcohol. Having fraternity or sorority membership and living in a fraternity or sorority residence was the strongest predictor for binge drinking. This study reported that 86% of those who lived in fraternity houses were binge drinkers, compared with 45% of nonmembers. This study also reported on the large number of sorority women who became binge drinkers in college. After they entered college,

80% of the residents of sorority houses reported binge drinking, although only 35% said they binged in high school.

The study reported that colleges in the Northeast and those with fraternities, sororities, and big sports programs were the most likely to attract binge drinkers and turn non-drinking freshmen into alcohol abusers. Forty-six percent of non-binging freshman became binge drinkers when exposed to a high-risk environment campus. Binge drinking rates were lowest with schools in the West, women's colleges, historically black colleges and universities, and commuter institutions (Wechsler, et al., 1994).

The Harvard School of Public Health College Alcohol Study released its 1997 results in September 1998 as a follow-up to the 1993 study. Results were similar to the initial student study conducted by Henry Wechsler (1993). The reason for the study was to determine any changes that occurred in the rates of binge drinking and related problems (Wechsler, et al., 1998). Higher binge drinking rates in 1997 and 1993 had the same student characteristics: male, White, aged 23 years or younger, never been married, belonging to fraternity, living in a fraternity house, and binging in high school. In 1997, 19% were abstainers, while 43% were binge drinkers.

There were many differences in the results of the 1993 and 1997 Harvard study (Wechsler, et al., 1998). Compared to the 1993, the 1997 results reported that one third more drinkers "drank to get drunk," increasing from the 39% in 1993 to 52% in 1997. Students who were Asian and African American reported higher drinking rates in 1997. However, binge drinking in the northeast United States decreased to 11%. There was an increase in alcohol abstainers from 16% in 1993 to 19% in 1997. Fraternity and sorority members were still causes of concern in the area of binge drinking. The results of the 1997 study revealed that two of three

fraternity or sorority members were binge drinkers. Those who lived in Greek housing have even higher rates of binge drinkers, four out of five students (National College Alcohol Study, 1998). In 1993, two out of every five college students were binge drinkers, and this statistic remained the same in 1997. Although more students were abstaining, the students who were drinking were doing so more intensely.

H. Wesley Perkins, a sociologist at Hobart and William Smith College, analyzed data from the 1993 Harvard study, looking at student perceptions and binge drinking (Student Perceptions, 1996). In previous studies, Perkins found that students had perceptions that their peers drink more than they truly were consuming. Perkins found that if their peers expect binge drinking, students will drink more heavily than they normally would.

The Center for Alcohol and Other Drug Studies from the Core Institute conducted a study during 1995 and 1996 using data derived from the Core Alcohol Drug Survey completed by 89,874 students at 171 institutions (Presley, Meilman, Cashin, & Leichliter, 1997). The study found that 83% of the students reported using alcohol in the past year. At the time of the survey, 70% reported drinking an average of 5.1 drinks a week. For this study, researchers used the definition from the Harvard Study to define binge drinking: five or more drinks in a row in one sitting. The results of this study revealed that 42% of the students reported binge drinking at least one time in the two weeks prior to taking the survey, while 28% reported binge drinking more than once in the previous two weeks, and almost 6% reported more than five binge drinking episodes during the previous two weeks.

In June 1994, the Commission on Substance Abuse at College and Universities published a report titled “Rethinking Rites of Passage: Substance Abuse on American’s Campus.” Results were similar to the results of the 1993 Harvard Study. The evidence from the study showed that

binge drinking is the number one substance abuse problem in American college life. This study found that students living in fraternities and sororities reported drinking an average of 15 drinks per week, compared to only five drinks per week by other students. Nine out of 10 fraternity or sorority hazing accidents that resulted in death involved alcohol use. Students living on campus reported drinking more than those students off campus. Binge drinking occurred more frequently in four-year colleges than two-year colleges. Institutions located in the northeast and north central sections of the United States had dramatically higher drinking rates.

Despite the many studies that reported the high level of drinking patterns with United States college students, other studies suggested that students' drinking patterns varied with their ages and their years in college. Wechsler completed a study that found that traditional age college students, ages 17 to 23, drank much more than students over the age of 23 (Wechsler, et al., 1994). Another study found that students under age 21 have more alcohol-related issues and binge drink at a higher rate than students over 21 (Presley, Meilman, & Lysterla, 1995). The following studies discussed below focus on the Greek population in relationship to drinking.

One study dealing with drinking norms of sorority and fraternity members concluded that fraternity men were particularly heavy consumers, followed by sorority women, men who were not affiliated with a fraternity, and women who were not affiliated with a sorority. One unanticipated result of this study was that consumption by women in sororities was not significantly different from men not affiliated with a fraternity (Tampke, 1990).

Previous findings about alcohol showed that drinking increases sociability and decreased stress for students. Additionally, peers influence consumption, and drinking was enhanced by off-campus living (Goodwin, 1989). Fraternity and sorority houses are usually off campus and filled with social activities and peers. An analysis of alcohol consumption and related

experiences among fraternity and sorority members found that the heaviest drinkers in the study were fraternity men. A sizable minority of women and men in this study reported concern about excessive drinking in Greek housing. In this study, Goodwin argued that the minority of the Greek students concerned about excessive drinking comprised the nucleus of people who could lower alcohol consumption. Goodwin concluded that because alcohol is so deeply embedded in the culture of fraternities and sororities, it would take peer influence to change the culture.

Kuh and Arnold (1993) completed a study researching alcohol, the alcohol culture, and membership in a fraternity or sorority. They argued, “The differences between what a group says it believes and what its members actually do are a function of the group’s culture” (p. 327). If a group sustained and reinforced a healthy culture, students would have the opportunity to adapt to this culture. The researchers expected that the cultures that existed within fraternities and sororities contained unhealthy norms with no regard to drinking. Kuh and Arnold looked at the cultural context, in addition to the patterns, norms, practices, values, and assumptions, to understand drinking patterns of fraternity members. This qualitative study used the guiding research question of “How does the pledgship experience, as a socialization process, influence alcohol use?” (p. 327). Most pledges and new members of a fraternity adapted and learned the culture.

Fraternities at two types of institutions, a large, state-supported university and a small, private, liberal arts college participated in this study. Data collection came from observations, institutional documents, and interviews. Results showed that the members of fraternities perpetuated and reproduced the alcohol related cultural elements of fraternity membership. “Alcohol is a key element in a complicated system of rewards and sanctions used by fraternities to socialize newcomers” (Kuh & Arnold, 1993, p.332). Through the socialization process,

newcomers learned the values and customs of the fraternity, including the alcohol culture. Usually, as a pledge or new member received education on a culture of a fraternity that was not in agreement with his values and norms, the pledge of new member left the organizations rather than trying to change the culture or have it adapt to his values. Kuh and Arnold called for a culture change in fraternities. To be effective in the process, they recommended using symbols and rituals to educate the new members of the purposes and values at the founding of their respective fraternity. Fraternities were a product of their culture, institutional and societal attitudes, and values. Before a change in drinking norms occurred, the fraternity culture must change.

In a similar study, O’Conner, Cooper, and Thiel (1996) examined the relationships of prior alcohol use of 121 freshmen and their fraternity pledging decisions. “The most common correlation between fraternity members and drinking is that joining a fraternity causes the college male to drink more heavily and less responsibly” (p. 669). They found a significant relationship between pre-college levels of alcohol consumptions and the likelihood that a first-year student would pledge a fraternity. From this study, researchers generalized that the students who enjoyed drinking felt attraction to the fraternity culture associated with alcohol. Fraternities were attracting those individuals who are likely to become heavy drinkers if they are not already.

Huchting, et al., (2011) stated that “heavy drinking persists as a serious social, academic, and health concern among college students, with consequences ranging from missed classes and hangovers to damaged property, fights, sexual assaults, and even death (Hingson, et al., 2009; Hingson, et al., 2005; Wechsler, et al., 1998; Wechsler, et al., 2000).” The study goes onto compare drinking in fraternities and sororities to student athletes. Affiliation with fraternities and sororities is associated with heavier drinking (Meilman, et al., 1999). Research indicates that

critical risk factors associated with heavy drinking on college campuses include being male and being a member of a fraternity or sorority (Baer, 2002; Park, et al., 2008; Walters & Baer, 2006). Members of fraternities and sororities have been identified as high risk groups for alcohol consumption when compared to the general population (Huchting, et al., 2011; Meilman, et al., 1999).

Membership in a fraternity or sorority places students at greater risk for heavy alcohol consumption (Park, et al., 2008). Studies comparing students in fraternities and sororities to students that are not affiliated find that the students in fraternities and sororities drink more heavily and more frequently (Cashin, et al., 1998; Sher, et al., 2001; Wescheler, et al., 1995), perceive alcohol more acceptable (Larimer, et al., 1997), experience more frequent and severe alcohol-related consequences (Cashin et al., 1998; Engs, et al., 1996; Larimer, et al., 2000; Lo & Globetti, 1995), and are less likely to seek treatment or use campus resources for alcohol problems (Klein, 1989).

NIAAA Recommended Strategies

Over the past 20 years, alcohol consumption among college students has attracted a great deal of interest on the part of the mass media, college administrators, students, and prevention-focused funding agencies and researchers. In 2002, a special Task Force convened by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) responded to the persistent and pervasive problem of excessive drinking by students on US college campuses by publishing *A Call to Action* with recommendation for *Changing the Culture of Drinking at US Colleges* (Caudill, Crosse, Campbell, Howard, Luckey, & Blane 2006; National Institute on Alcohol Abuse and Alcoholism, 2002).

With the release of *A Call to Action*, NIAAA challenged campus-based professionals and other stakeholders in higher education institutions with 19 strategies, 17 effective and two ineffective, that can help combat the issue of alcohol on college campuses. Evidence supporting the substance abuse prevention strategies from research varies, which does not mean that one strategy is better than another, they just reflect that some strategies have been studied more than others. The “Task Force members placed prevention strategies in descending tiers on the basis of the evidence available to support or refute them” (National Institute on Alcohol Abuse and Alcoholism, 2002, p. 16). The strategies are broken down into four tiers, with the final tier outlining two strategies that have been shown not to work.

The first tier targets individual problems, at-risk, or alcohol-dependent drinkers. The first strategy is: Combining cognitive-behavioral skills with norms clarification and motivational enhancement interventions.” Cognitive-behavioral skills training strives to change an individual’s dysfunctional beliefs and thinking about the use of alcohol through activities such as altering expectancies about alcohol’s effects, documenting daily alcohol consumption, and learning to manage stress (National Institute on Alcohol Abuse and Alcoholism, 2002). Norms or values clarification examines students’ perceptions about the acceptability of abusive drinking behavior on campus and uses data to disprove beliefs about the tolerance for this behavior as well as beliefs about the number of students who drink excessively and the amounts of alcohol they consume. Motivational enhancement is designed to stimulate students’ intrinsic desire or motivation to change their behavior. Motivational enhancement strategies are based on the theory that individuals alone are responsible for changing their drinking behavior and complying with that decision (Miller, et al., 1992). In motivational enhancement interventions, interviewers assess student alcohol consumption using a formal screening instrument. Results are scored and

students receive nonjudgmental feedback on their personal drinking behavior in comparison with that of others and its negative consequences. Research indicates that combining the three strategies can be effective in reducing alcohol consumption among college students (Larimer & Cronce, 2002).

One proven way to address the issue is by having students complete the Alcohol Skills Training Program (ASTP). “ASTP is a cognitive-behavioral alcohol prevention program that teaches students basic principles of moderate drinking and how to cope with high-risk situations for excessive alcohol consumption” (Fromme, et al., 1994, p. 147). The ASTP is designed for group administration and includes an alcohol expectancy challenge component. Controlled outcome studies show that the ASTP significantly reduces drinking rates and associated problems for both 1-year (Kivlahan, Marlatt, Fromme, Coppel, & Williams, 1990) and 2-year follow-up periods (Baer, Marlatt, Kivlahan, Fromme, Larimer, & Williams, 1992).

Another strategy is for students to receive a brief, personalized motivational enhancement session, whether delivered individually or in small groups, to reduce alcohol consumption. This strategy can also reduce negative consequences such as excessive drinking, driving after drinking, and riding with an intoxicated driver, citations for traffic violations, and injuries (Larimer & Cronce, 2002).

The last strategy in the first tier is to challenge alcohol expectancies. This strategy has been shown to work by a combination of information and experiential learning to alter students’ expectations about the effects of alcohol, so they understand that drinking does not necessarily produce many of the effects they anticipate such as sociability and sexual attractiveness (Darkes & Goldman, 1998).

Tier 2 is entitled *Evidence of Success with General Populations That Could Be Applied to*

College Environments, here the Task Force recommends that college presidents, campus alcohol program planners, and student and community leaders explore the following strategies, because they have been successful with similar populations, although they have not yet been comprehensively evaluated with college students (Hingson, Heeren, & Winter, 1996; Holder, Gruenewald, Ponicki, Treno, Grube, Saltz, Voas, Reynolds, Davis, Sanchez, Gaumont, & Roeper, 2000; Saltz & Stangetta, 1997; Voas, Holder, & Gruenewald, 1997). These environmental strategies are not guaranteed to alter the behavior of every college student, but they can help change those aspects of the campus and community culture that support excessive and underage alcohol use.

The first strategy in tier 2 is to increase the enforcement of the minimum drinking age laws. “The minimum legal drinking age law is the most well-studied alcohol control policy” (National Institute on Alcohol Abuse and Alcoholism, 2002, p. 18). Compared to other programs aimed at youth in general, increasing the legal age for purchase and consumption of alcohol had been the most successful effort to date in reducing underage drinking and alcohol-related problems. Most studies suggested that higher legal drinking ages reduce alcohol consumption, and over half found that a higher legal drinking age is associated with decreased rates of traffic crashes (Wagenaar & Toomey, 2002; Fell, Fisher, Voas, Blackman, & Tippetts, 2009; Hingson, Edwards, Heeren, & Rosenbloom, 2009; McCartt, Hellinga, & Kirley, 2010; Saylor, 2011). Studies also indicate that policies are less effective if they are not consistently enforced (Fell, et al, 2009; Hingson, et al, 2009; McCartt, et al, 2010; Saylor, 2011). Efforts to reduce the use of false age identification may also help enhance the effectiveness of this law (Wagenaar & Toomey, 2002).

The next strategy is to increase the implementation, publicity, and enforcement of other laws to reduce alcohol-impaired driving. Injury and deaths caused by alcohol-impaired driving and related injuries and deaths can be reduced by lowering legal blood alcohol limits to .08 percent for adult drivers (Voas, Tippetts, & Fell, 2000); setting legal blood alcohol content (BAC) for drivers under age 21 at .02 percent or lower (Wagenaar, O'Malley, & LaFond, 2001); use of sobriety check points (Schultz, Elder, Sleet, Nichols, Alas, Grande-Kulis, Zaza, Sosin, & Thompson, 2001); server training intervention (Schultz, et al., 2001); and administrative license revocation laws (Dee, 2001). Safety belt laws, particularly primary enforcement belt laws, have been shown to reduce traffic deaths and injuries (Dinh-Zaar, Sleet, & Shultz, 2001). Comprehensive community interventions have also shown that increased enforcement and publicity of laws to reduce alcohol-impaired driving have produced significant reductions in the types of motor vehicle crashes most likely to involve alcohol (Holder, et al., 2002) and alcohol-related traffic deaths (Hingson, et al., 1996; National Institute on Alcohol Abuse and Alcoholism, 2002).

The third strategy in tier 2 is to place restrictions on alcohol retail outlet density. Studies of the number of alcohol licenses or outlets per population size have found a relationship between the density of alcohol outlets, consumption, and related problems such as violence, other crime, and health problems (Chaloupka & Wechsler, 1996; Toomey & Wagenaar, 2002; Scribner, Mason, Theall, Simonsen, Schneider, Towvim, & DeJong, 2008). One study, targeting college students specifically, found higher levels of drinking and binge drinking among underage and older college students when a larger number of businesses sold alcohol within one mile of campus (Chaloupka & Wechsler, 1996). Numbers of outlets may be restricted directly or

indirectly through policies that make licenses more difficult to obtain such as increasing the cost of a license.

Increasing the price and excise taxes on alcohol beverages has also resulted in positive results. The effect of price on consumption has been studied extensively. All types of drinkers appear to be affected by price. One study showed that when the price of alcohol increases, many alcohol-related problems, including motor vehicle fatalities, robberies, rapes, and liver cirrhosis mortality, decrease (Cook & Moore, 1993). Although older heavy drinkers seem to be less affected by variations in price than other consumers, price still appears to have a substantial impact on young, heavy drinkers. For this reason, efforts to increase price or to prevent reductions in price likely would affect the behavior of the full spectrum of drinkers on campus.

Another strategy in tier 2 is for responsible beverage service policies in social and commercial settings to be handled in the correct manner. Studies suggest that bartenders, waiters, and others in the hospitality industry would welcome written policies about responsible service of alcohol and training in how to implement them appropriately. Policies could include serving alcohol in standard sizes, limiting sales of pitchers, cutting off service of alcohol to intoxicated patrons, promoting alcohol-free drinks and food, and eliminating last-call announcements. Servers and other staff could receive training in skills such as slowing alcohol service, refusing service to intoxicated patrons, checking age identification, and detecting false identification. To prevent sales to underage patrons, it is important to back identification policies with penalties for noncompliance (Wolfson & Toomey, 1996; Treno & Holder, 1997).

The final strategy in tier 2 is to create a campus and community coalition involving all major stakeholders, which may be critical to implement the other strategies outlined in the report. A number of comprehensive community efforts have been designed to reduce alcohol and other

substance use and related negative consequences among underage youth, including college students, and among adults (Wagenaar, Murray, Gehan, Wolfson, Forster, Toomey, Perry, & Jones-Webb, 2000); and their outcomes demonstrate the potential effectiveness of this approach in college communities. This approach reframes the issue as a community problem, not simply a college problem, brings together the range of players needed to address it, and sets the stage for cooperative action. In addition to college presidents and campus administrators, stakeholders in campus-community coalitions include student groups, faculty, staff, community leaders, law enforcement, and representatives from hospitality and alcohol beverage industries (Hingson & Howland, 2002). Promoting community ownership of programs enhances success (Holder & Reynolds, 1997). On that basis, active campus and community coalitions can be expected to build support for addressing underage and excessive college drinking; help assure that strategies used respond to genuine community needs; maintain and, ultimately, institutionalize effective strategies; and evaluate and disseminate the results of the coalition's activities to other college communities (Hingson & Howland, 2002; National Institute on Alcohol Abuse and Alcoholism, 2002).

Tier 3 has eight different strategies and is titled *Evidence of Logical and Theoretical Promise, But Require More Comprehensive Evaluation*. The Task Force recognizes that a number of popular strategies and policy suggestions make sense intuitively or have strong theoretical support. Many also raise researchable questions that may be crucial in reducing the consequences of college student drinking. The Task Force recommends that schools considering any of these strategies incorporate a strong evaluation component to test their viability in actual practice. Each of the following targets the student population as a whole (National Institute on Alcohol Abuse and Alcoholism, 2002).

Attempting to adopt the following campus-based policies and practices that appear to be capable of reducing high-risk alcohol use can assist in the positive alcohol education on a campus. These activities are particularly appealing because straightforward and relatively brief evaluations should indicate whether they would be successful in reducing high-risk drinking on a particular campus:

- Reinstating Friday classes and exams to reduce Thursday night partying; possibly scheduling Saturday morning classes;
- Implementing alcohol-free, expanded late-night student activities;
- Eliminating keg parties on campus where underage drinking is prevalent;
- Establishing alcohol-free dormitories;
- Employing older, salaried resident assistants or hiring adults to fulfill that role;
- Further controlling or eliminating alcohol at sports events and prohibiting tailgating parties that model heavy alcohol use;
- Refusing sponsorship gifts from the alcohol industry to avoid any perception that underage drinking is acceptable; and
- Banning alcohol on campus, including at faculty and alumni events (National Institute on Alcohol Abuse and Alcoholism, 2002, p. 20).

The next strategy in tier 3 talks about increasing enforcement at campus-based events that promotes excessive drinking. Campus police can conduct random spot checks at events and parties on campus to ensure that alcohol service is monitored and that age identification is checked. It may be important for non-students to enforce these campus policies. Resident assistants and others charged with developing close supportive relationships with students might

find it difficult to enforce alcohol-related rules and regulations consistently and uniformly (DeJong, 1998).

The next two strategies address increasing the publicity and enforcement of the underage drinking laws on campus and eliminating mixed messages, as well as consistently enforcing disciplinary actions associated with policy violations. Together these two outline the importance of enforcing the rules and not sending mixed messages so that students think there are some rules they can get away with.

Conducting marketing campaigns to correct student misperceptions about alcohol use is the next strategy outlined in the study. On the basis of the premise that students overestimate the amount of drinking that occurs among their peers and then fashion their own behavior to meet this perceived norm, many schools are now actively conducting social norming campaigns to correct many of these misperceptions (National Institute on Alcohol Abuse and Alcoholism, 2002; Perkins, 2002).

Safe rides attempt to prevent drinking and driving by providing either free or low-cost transportation such as taxis or van shuttles from popular student venues or events to residence halls and other safe destinations. Safe rides are usually restricted to students, faculty, staff, and a limited number of guests. Safe rides sponsors often include student government, Greek Councils, student health centers, campus police, Mothers Against Drunk Driving chapters, and other local community organizations, agencies, and businesses. They have been criticized as potentially encouraging high-risk drinking, and this possibly should be considered in design, promotion, and monitoring (DeJong, 1995).

Happy hours and price promotions, such as two drinks for the price of one or women drink for free, are associated with higher consumption among both light and heavy drinkers.

Research shows that as the price of alcohol goes up, consumption rates go down, especially among younger drinkers. “Because many bars surrounding campuses attract students by promoting drink specials, restrictions on happy hours have the potential to reduce excessive consumption off campus” (National Institute on Alcohol Abuse and Alcoholism, 2002, p. 22). If colleges and universities have a licensed establishment on campus, drink specials could be prohibited or promotion of alcohol-free drinks and food specials could be encouraged. In non-licensed settings on campus that serve alcohol, event planners could opt to limit the amount of free alcohol that is available and eliminate all self-service. “Schools could also limit alcohol use to weekends or after regular class hours in an effort to separate drinking from activities more closely aligned with the core academic mission” (National Institute on Alcohol Abuse and Alcoholism, 2002, p. 22).

The final strategy in tier 3 is to inform new students and their parents about alcohol policies and penalties before arrival and during orientation programs. There is some anecdotal evidence that experiences during the first 6 weeks of enrollment affect subsequent success during the freshman year. Because many students begin drinking heavily during this time, they are unable to adapt appropriately to campus life. Alerting parents and students to this possibility early on (e.g., through preadmission letters to parents and inclusion of information in orientation sessions and in presidents’ and student leaders’ welcoming speeches) may help prevent the development of problems during this critical, high-risk period (DeJong & Langford, 2002).

The fourth and final tier shows the evidence of ineffectiveness. The Task Force recognizes that it is difficult or impossible to prove that a specific intervention approach is universally ineffective. Nevertheless, when there are consistent findings across a wide variety of well-designed studies, it is possible to conclude that an approach is not likely to be effective and

that limited resources should be used in other ways. Additionally, if there is strong evidence that an intervention approach is actually harmful or counterproductive, recommendations not to use it can be made based on fewer studies. The Task Force also notes that some interventions may be ineffective when used in isolation, but might make an important contribution as part of a multi-component integrated set of programs and activities. However, until there is evidence of a complementary or synergistic effects resulting from inclusion with other strategies, college administrators are cautioned against making assumptions of effectiveness without scientific evidence (National Institute on Alcohol Abuse and Alcoholism, 2002).

The Task Force only identifies two strategies that have proved ineffective: Informational, knowledge-based, or values clarification interventions about alcohol and the problems related to its excessive use, when used alone and providing blood alcohol content feedback to students. The first strategy is based on the assumption that college students excessively use alcohol because they lack knowledge or awareness of health risks and that an increase in knowledge would lead to a decrease in use. Although educational components are integral to some successful interventions, they do not appear to be effective in isolation. Despite this evidence, informational/educational strategies are the most commonly utilized techniques for individually focused prevention on college campuses (DeJong & Langford, 2002).

The other strategy uses breath analysis tests to provide students accurate information on their Blood Alcohol Content (BAC). It could be used as part of a research evaluation or to dissuade students from driving while under the influence or continuing to drink past intoxication. Providing this information to students who are drinking must be approached with caution. Some researchers have found that the presence of immediate breath analysis feedback can actually encourage excessive drinking when students make a contest of achieving high BACs (National

Institute on Alcohol Abuse and Alcoholism, 2002). The 19 strategies outlined through the four tiers in NIAAA’s A Call to Action can become a little bit lengthy, so they are listed in Table 1.

Table 1: *NIAAA Recommended Strategies for Alcohol Education on College Campuses*

<p>Tier 1: Evidence of Effectiveness among College Students</p>	<p>1. Combining cognitive-behavioral skills with norms clarification and motivational enhancement interventions</p>
<p>Tier 2: Evidence of Success with General Populations That Could Be Applied to College Environments</p>	<p>2. Offering brief motivational enhancement interventions</p> <p>3. Challenging alcohol expectancies.</p> <p>4. Increased enforcement of minimum drinking age laws</p> <p>5. Implementation, increased publicity, and enforcement of other laws to reduce alcohol-impaired driving.</p> <p>6. Restrictions on alcohol retail outlet density</p> <p>7. Increased price and excise taxes on alcoholic beverages</p> <p>8. Responsible beverage service policies in social and commercial settings</p> <p>9. The formation of a campus and community coalition involving all major stakeholders may be critical to implement these strategies effectively.</p>
<p>Tier 3: Evidence of Logical and Theoretical Promise, But Require More Comprehensive Evaluation</p>	<p>10. Adopting the following campus-based policies and practices that appear to be capable of reducing high-risk alcohol use.</p> <p>11. Increasing enforcement at campus-based events that promote excessive drinking</p> <p>12. Increasing publicity about and enforcement of underage drinking laws on campus and eliminating “mixed messages.”</p>

Table 1: *NIAAA Recommended Strategies for Alcohol Education on College Campuses*
(continued)

Tier 4: Evidence of Ineffectiveness	<ul style="list-style-type: none"> 13. Consistently enforcing disciplinary actions associated with policy violations 14. Conducting marketing campaigns to correct student misperceptions about alcohol use 15. Provision of “safe rides” programs Regulation of happy hours and sales 16. Informing new students and their parents about alcohol policies and penalties before arrival and during orientation periods 17. Informational, knowledge-based, or values clarification interventions about alcohol and the problems related to its excessive use, when used alone 18. Providing blood alcohol content feedback to students
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Summary

The review of literature confirmed that researchers and administrators have addressed the issues surrounding alcohol misuse and abuse from a variety of perspectives and in a variety of settings. Moreover, colleges and universities and national and international fraternities and sororities have implemented alcohol initiatives verifying that the need for more alcohol education strategies, specifically the ones outlined in the NIAAA study. Research has identified that these types of programs are needed to educate our students that are members of fraternities and sororities and it falls on the shoulders of the fraternity and sorority life offices. The following chapter will outline the study’s research methods and will include the collection of the

proposed analysis of data from campus-based professionals who work with fraternities and sororities through the United States.

Chapter 3

Methods

The purpose of this study was to investigate the alcohol education strategies presently used in fraternity and sorority life offices on college campuses in order to make recommendations to improve the way these offices are addressing alcohol education. This study evaluated which strategies are being used and by which community on their respective campuses. Specific comparisons will be made between the demographics frequencies of the participant's institution and the strategies they are using.

Chapter 1 contains an introduction to the study, discusses the statement of the problem, states the purpose of the study, delineates research questions, discusses the significance of the study, identifies limitations, assumptions, and provides definitions of terms used in the study. Chapter 2 is a review of the literature regarding alcohol education strategies. To demonstrate the need for alcohol education strategies to be implemented on college campuses, specifically in fraternity and sorority life offices, the review of literature provided a review of past alcohol studies, past alcohol studies on college campuses, and a review of the National Institute on Alcohol Abuse and Alcoholism (NIAAA) recommended alcohol strategies. Chapter 3 will discuss the design of the study, sources of data, data collection procedures, instrumentation, data analysis, and methods used to ensure participant confidentiality.

Purpose of the Study

The purpose of this study was to examine alcohol education strategies presently used in fraternity and sorority life offices on college campuses. Specifically, this study compared NIAAA recommendations for alcohol education strategies and current campus practices for fraternity and sorority professionals. Comparisons were made through the use of a survey of members of the Association of Fraternity/Sorority Advisors (AFA), a professional organization for fraternity and sorority campus-based professionals.

An estimated 1,825 college students between the ages of 18 and 24 die annually from alcohol-related unintentional injuries, including motor vehicle crashes (Hingson, et al., 2005). In 1997, the average higher education institution spent \$13,330 annually to discourage alcohol abuse (Kalb & McCormick, 1998) and in 2007, one institution spent over a half million dollars, annually, on alcohol-related costs (College Drinking, 2007). This study examined the extent to which colleges and universities are addressing alcohol education in accordance with the NIAAA guidelines. Some colleges and universities are addressing alcohol education through different efforts; however, this study examined whether or not fraternity and sorority life offices were addressing alcohol use on these campuses using the NIAAA recommended strategies.

A study published by the Harvard School of Public Health gathered data by distributing a 20-page questionnaire to 17,592 students at 140 colleges in 40 states and the District of Columbia in 1993. This study was unique in that it was the first study of college drinking that used a national representative sample of both colleges and individual students. The researchers claimed that their study was the first survey statistically representative of students at all four year colleges (Wechsler & Davenport, 1994). The results of the study confirmed that alcohol was the most serious substance abuse problem on campuses across the United States.

As a result of the Harvard study, Henry Wechsler published a 12-step program to address the drinking problem on campuses. Then in 2002, the NIAAA developed their recommended strategies to address alcohol education being utilized on college campuses. There are a variety of ways to address alcohol education. NIAAA developed a list of 19 strategies, which fall under four tiers. They are described in depth in Chapter 2.

Research Questions

The following research questions were used in this study:

1. What are the alcohol education strategies, effective and ineffective, being used in fraternity and sorority offices on college campuses?
2. What are the individual characteristics of campus-based professionals working in fraternity and sorority offices?
3. What are the institutional profiles of campus-based professionals working in fraternity and sorority offices?
4. What is the relationship of alcohol education strategies and individual demographic characteristics for campus-based professionals working in fraternity and sorority offices on college campuses?
5. What is the relationship of alcohol education strategies and institutional profiles for campus-based professionals working in fraternity and sorority offices on college campuses?

Methods

In order to determine the alcohol education strategies being used in fraternity and sorority life offices on college campuses, a survey was created outlining the recommended strategies from National Institute on Alcohol Abuse and Alcoholism (NIAAA). Through the literature

review, it was found that a study requesting Association of Fraternity and Sorority Advisors (AFA) members to evaluate alcohol education strategies has not been accomplished, so a new survey was created. Once the survey was created, it was sent to an expert panel, made-up of campus-based professionals who work in fraternity and sorority life offices in the Southeast. They were asked to evaluate the survey for content, ease of the questions, flow, and length.

Feedback from the expert panel led to the survey being altered to fit all the questions on one screen, without having to scroll down, it allowed the researcher to alter two questions to make them easier to understand, and to put some information at the beginning of the survey about the study. During a meeting with the dissertation committee, the researcher was encouraged to change two more of the questions to fill-in-the-blank, rather than a multiple choice question to allow for more continuous data.

Data was then collected from campus-based professionals who work or have worked in fraternity and sorority life offices in the United States and are members of the professional association, Association of Fraternity/Sorority Advisors (AFA). The participants were selected by the AFA General Office and provided to the researcher, because they had indicated on their membership form that they would be willing to be contacted by researchers and other professionals conducting research.

This study used a survey with fill-in-the-blank, multiple choice, and multiple choice questions where more than once choice could be selected. Based on this design, a one-way ANOVA and multiple regression tests were selected. According to Ross and Shannon (2008), “the ANOVA can be used to compare more than two groups or levels to the independent variable. The one-way ANOVA allows you to determine whether or not statistically significant differences exist across groups or levels, which indicated whether or not there is a main effect for

the independent variable” (p. 75). They further stated that, “post hoc analysis is necessary to identify the specific nature of the effect and determine which groups differ” (p. 75). According to Ross and Shannon (2008), “multiple regression is a method of predicting a dependent variable with two or more independent variables” (p. 167). They further stated that, “multiple regressions are an extension of simple regression in that, instead of using one independent variable, multiple independent variables are used.” Additional analyses were conducted to determine differences in demographic data as it applied to the individual participants. Along with running multiple regression tests, a chi-square will be used in determining different institutional demographics and frequencies and means while addressing all demographics.

Sample

People who are members of the Association of Fraternity/Sorority Advisors (AFA) are typically employees of universities and colleges who directly advise fraternities and/or sororities on the campus. In surveying this population, questions were geared toward the fraternity and sorority community and the alcohol education strategies that are being implemented on their campus. Additionally, colleges and universities employ most fraternity and sorority advisors at the campus level, so this population should have knowledge or resources to respond to the survey.

According to the historical timeline from the Association of Fraternity/Sorority Advisors website:

The Association of Fraternity/Sorority Advisors (AFA), founded in 1976, has provided individuals concerned with the fraternity/sorority movement an avenue for professional growth and development. As the advocate for and representative voice of our profession, the Association of Fraternity/Sorority Advisors exists to support the professional

development of our members, foster partnerships across higher education, and offer innovative resources and services to persons involved in the advisement of fraternities and sororities. (afa1976.org, 2010)

From the original 35 members the organization has grown to over 1,600 total members, including 1470 campus-based members in 2011. Campus-based members include student affairs professionals and graduate students at higher education institutions. Other members of AFA include international and national fraternity and sorority staff members, inter/national, regional, and local fraternity and sorority alumni volunteers, and others interested in the enhancement of the advisement of fraternities and sororities (afa1976.org, 2010). Since there are a wide variety of membership classifications in AFA, for the purpose of this study, the entire population of campus-based members was surveyed. A total of 545 members were asked to participate in the study.

Instrumentation

The initial questions of the survey established demographics on the respondents in the categories of sex, level of current position, highest education level, length of tenure, percentage of fraternity and/or sorority advising responsibilities, and racial or ethnic group. Questions related to institution and the campus fraternity/sorority system identified at the type of institution related to private or public, total population, percentage of students in fraternities and sororities, the number of fraternal organizations on the campus, and to see if the participant had knowledge of the NIAAA study, *A Call to Action: Changing the Culture of Drinking at U.S. Colleges* (2002).

The remaining questions of the survey were related to the recommended strategies created by the NIAAA study. The questions covered several areas surrounding alcohol

education strategies. Some of the areas that the questions addressed included combining cognitive-behavioral skills, offering brief motivational enhancement interventions, and challenging alcohol expectancies. Another area that the questions covered to see if the campuses were using these strategies was increased enforcement of minimum drinking age laws, ways to reduce alcohol-impaired driving, restrictions on alcohol retail outlet density, and increased price and excise taxes on alcoholic beverages.

Responsible beverage service policies and the formation of a campus and community coalition were two more areas that the questions addressed in order to see what alcohol education strategies were being used. The next several questions addressed adopting campus-based policies and practices that appear to be capable of reducing high-risk alcohol use, increasing enforcement at campus-based events, increasing publicity about and enforcement of underage drinking laws, and consistently enforcing disciplinary actions associated with policy violations.

Conducting marketing campaigns to correct student misperceptions about alcohol use is an area that can really help when addressing alcohol education, so this question was posed to the respondents. The last few questions addressed these areas: provision of “safe rides” programs, regulation of happy hours and sales, education about alcohol policies and penalties, interventions about alcohol and the problems related to its excessive use, and providing blood alcohol content feedback to students to see if any of these strategies were being used. All of the strategies were built into bipolar multiple-choice questions giving the participant the opportunity to select one or more of the five choices: campus community, city community, fraternity and sorority community, no community implements this strategy, or unknown.

Data Collection

The survey was designed so that each question of the survey was either related to the 19 recommended strategies created by National Institute on Alcohol Abuse and Alcoholism (NIAAA), in their task force report *A Call to Action: Changing the Culture of Drinking at U.S. Colleges*, or to the demographics of the participant and institution. Assuming the 19 strategies provide a pattern of change that could occur on college campuses, specifically within fraternities and sororities, the questions were designed to evaluate the strategies being used in fraternity and sorority life offices.

Participants were contacted via electronic mail and provided with an invitation to participate, a description of the study, a link to the online survey, and a statement of the Auburn University Institutional Review Board (IRB) certification (see Appendix D). Participation was voluntary and a participant could withdraw from the study at any time without completing the survey. Participants were provided with the informed consent form electronically. Once participants consented to participate and began the survey, they could only advance forward and could not return to previous pages.

The online survey was open for 14 days between June 18, 2012 and July 2, 2012. An online survey with less than 1000 invitees has an expected median response rate of 26 percent (Super Survey, 2011). In addition, the study further indicates that 50 percent of online survey responses arrive within the first day and 96 percent of survey responses arrive within two weeks (Hamilton, 2009). Based on this expected rate of return, this study was sent to all eligible campus-based professionals that advise fraternities and/or sororities (N = 545). On the morning of the seventh day that the survey was open, a reminder was sent to encourage participants to complete the survey and thanked the participants who had completed the survey.

Data Analysis

Based on the literature, a study surveying fraternity and sorority advisors or AFA members in relation to alcohol education strategies being implemented on their campus did not previously exist. The survey, developed for this study, collected descriptive results in the “About You” sections from the AFA members. In addition, from the results of the survey, means were established and compared to the means of the questions related to the university or college. Results were analyzed by groups calculated from the “About Your Campus” section. The means for those categories were calculated based on public or private, total population of the institutions, percentage of the fraternity and sorority community, the number of fraternity organizations, and the previous knowledge of the *A Call to Action: Changing the Culture of Drinking at U.S. Colleges* (2002).

The data were analyzed using quantitative methods. Descriptive statistics including means and frequencies for each individual and institutions were compared. In attempt to determine the relationship of alcohol education strategies, individual characteristics, and institutional profiles for campus-based professionals working in fraternity and sorority offices on college campuses, one-way ANOVA tests and multiple regressions tests were used.

Table 2 outlines the research questions addressed in this study. Each question used in the survey instrument relates to a research question, while all 17 survey questions related to the final two research questions. The table shows how each research question relates to the data being collected and how that data will be analyzed.

Table 2: Research Questions

Research Questions	Survey Instrument Used to Address Question	Analysis of the Data
1. What are the alcohol education strategies, effective and ineffective, being used in fraternity and sorority offices on college campuses?	Questions #13 – 17	Descriptive results, frequencies
2. What are the individual characteristics of campus-based professionals working in fraternity and sorority offices?	Questions #1 – 6	Descriptive results, frequencies
3. What are the institutional profiles of campus-based professionals working in fraternity and sorority offices?	Questions #7 – 12	Descriptive results, frequencies
4. What is the relationship of alcohol education strategies and individual demographic characteristics for campus-based professionals working in fraternity and sorority offices on college campuses?	All Questions (1 – 17)	One-way ANOVAs, Multiple Regressions
5. What is the relationship of alcohol education strategies and institutional profiles for campus-based professionals working in fraternity and sorority offices on college campuses?	All Questions (1 – 17)	One-way ANOVAs, Multiple Regressions

Summary

This chapter detailed the methods that were used throughout the study. The chapter reviewed reasons why the survey was designed the way it was and why it was important for a professional association to be queried about alcohol education strategies. An examination of the criteria surrounding the sample population, a description of the instrumentation and data collection procedures, and an accounting of the data analyses used in the study were discussed. The next chapter presents the findings based on the preceding methods.

Chapter 4

Findings

The purpose of this study was to investigate the alcohol education strategies presently used in fraternity and sorority life offices on college campuses in order to make recommendations to improve the way these offices are addressing alcohol education. This study evaluated which strategies are being used and by which community on their respective campuses. Specific comparisons will be made between the demographics frequencies of the participant's institution and the strategies they are using. The chapter will address the sample used for the study, the demographic description and the institutional profile of the respondent, and will outline how many alcohol education strategies are being used in each fraternity or sorority life office.

Through the literature review, it was found that a study using Association of Fraternity and Sorority Advisors (AFA) members to evaluate alcohol education strategies had not been accomplished before, so a new survey was created. Once the survey was created, it was sent to an expert panel, made-up of campus-based professionals who work in fraternity and sorority life offices in the Southeast. They were asked to evaluate the survey for content, ease of the questions, flow, and length.

Research Questions

The following research questions were used in this study:

1. What are the alcohol education strategies, effective and ineffective, being used in fraternity and sorority offices on college campuses?
2. What are the individual characteristics of campus-based professionals working in fraternity and sorority offices?
3. What are the institutional profiles of campus-based professionals working in fraternity and sorority offices?
4. What is the relationship of alcohol education strategies and individual demographic characteristics for campus-based professionals working in fraternity and sorority offices on college campuses?
5. What is the relationship of alcohol education strategies and institutional profiles for campus-based professionals working in fraternity and sorority offices on college campuses?

Sample

The original sample for this study consisted of 545 campus-based professional who were members of the professional association, Association of Fraternity/Sorority Advisors (AFA), and had agreed to be contacted for research purposes. Of the 545 participants, 189 started the survey, 176 finished the survey, three chose to opt out of the survey, and 353 never responded. Therefore, the total number of participants used in the study was $N = 176$. The response rate was 32.3% with 176 out of the 545 participants completing the survey.

Alcohol Education Strategies

Research Question 1:

What are the alcohol education strategies, effective and ineffective, being used in fraternity and sorority offices on college campuses?

Table 3 presents data related to the NIAAA Recommended effective alcohol education strategies that are being used in fraternity and sorority offices and by other entities on or near campus. For all of these questions, the respondents could choose that more than one community was implementing this alcohol education strategy.

From the three communities (campus, city, and fraternity and sorority) the respondents could select, the campus community had the highest percentage of strategies being used on each campus, only reporting a low percentage with placed restrictions on alcohol retail outlet density, increased price and excise taxes on alcoholic beverages, and the regulation of happy hours.

Within the city community there were the following strategies being used: increased enforcement of minimum drinking age laws (101), implementation of programs to reduce alcohol-impaired driving (68), responsible beverage service policies in social and commercial settings (53), and increased publicity about and enforcement of underage drinking laws (67). As for the fraternity and sorority life community, this community was using two strategies: challenging alcohol expectancies (72) and consistently enforcing disciplinary actions associated with policy violations (96).

Table 3 – Where are the Effective Alcohol Education Strategies Being Used?

Strategy	Campus <i>N</i> (%)	City <i>N</i> (%)	Fraternity & Sorority <i>N</i> (%)	None <i>N</i> (%)	Don't Know <i>N</i> (%)
Alcohol Skills Training Program (ASTP)	54 (27%)	2 (1%)	35 (17%)	46 (23%)	65 (32%)
Brief Alcohol Screening and Intervention for College Students (BASICS)	76 (40%)	2 (1%)	16 (8%)	45 (23%)	54(28%)
Challenging alcohol expectancies	96 (40%)	9 (4%)	72 (30%)	25 (10%)	37 (16%)
Increased enforcement of minimum drinking age laws	93 (32%)	101 (35%)	56 (19%)	15 (5%)	25 (9%)
Implementation of programs to reduce alcohol-impaired driving	61 (26%)	68 (30%)	32 (14%)	27 (12%)	41 (18%)
Placed restrictions on alcohol retail outlet density	7 (4%)	27 (15%)	4 (2%)	62 (36%)	76 (43%)

Table 3 – *Where are the Effective Alcohol Education Strategies Being Used? (continued)*

Strategy	Campus	City	Fraternity & Sorority	None	Don't Know
	<i>N</i> (%)	<i>N</i> (%)	<i>N</i> (%)	<i>N</i> (%)	<i>N</i> (%)
Increased price and excise taxes on alcoholic beverages	2 (1%)	19 (11%)	1 (0%)	68 (40%)	82 (48%)
Responsible beverage service policies in social and commercial settings	31 (15%)	53 (25%)	44 (21%)	34 (16%)	50 (23%)
The formation of a campus and community coalition	97 (37%)	59 (23%)	38 (14%)	34 (13%)	33 (13%)
Increased enforcement at campus-based events that promote excessive drinking	93 (37%)	41 (16%)	57 (23%)	44 (18%)	16 (6%)
Increased publicity about and enforcement of underage drinking laws	91 (34%)	67 (25%)	57 (21%)	38 (14%)	17 (6%)
Consistently enforcing disciplinary actions associated with policy violations	132 (45%)	42 (14%)	96 (32%)	11 (4%)	15 (5%)
Conduct marketing campaigns	120 (50%)	25 (10%)	52 (22%)	26 (11%)	18 (7%)
Safe-ride programs	92 (43%)	26 (12%)	45 (21%)	40 (19%)	10 (5%)
Regulation of happy hours	5 (3%)	25 (14%)	3 (2%)	83 (48%)	58 (33%)
Informing new students and their parents about alcohol policies and penalties during orientation	146 (68%)	10 (5%)	40 (18%)	9 (4%)	11 (5%)

Table 4 presents data related to a list of alcohol education strategies that are campus-based policy or procedures. Implementing alcohol-free, expanded late-night student activities resulted in the largest frequency from the respondents, 125 participants (74%). Of all the policies and procedures listed, additional policies have been adopted by half of the participants selecting that their campus used this strategy: Eliminating keg parties on campus (109, 65%) and establishing alcohol-free residence halls (84, 50%).

Table 4 presents data related to a list of campus-based policies or procedures that have been used to reduce high-risk alcohol use on campuses within the last ten years. The most frequently cited ($N = 125$) was implementing alcohol-free, expanded late-night student activities (74%). Additional policies have been adopted by half of the participants as they indicated that

their campus used the following two procedures: eliminating keg parties on campus (109, 65%) and establishing alcohol-free residence halls (84, 50%).

Table 4: *Campus-based Policy or Procedure*

	Frequency	Percent
Implementing alcohol-free, expanded late-night student activities	125	74%
Eliminating keg parties on campus where underage drinking is prevalent	109	65%
Establishing alcohol-free residence halls	84	50%
Further controlling or eliminating alcohol at sports events and prohibiting tailgating parties that model heavy alcohol use	56	33%
Refusing sponsorship gifts from the alcohol industry to avoid any perception that underage drinking is acceptable	50	30%
Reinstate Friday classes and exams to reduce Thursday night partying	32	19%
Employing older, salaried resident assistants or hiring adults to fulfill that role	22	14%
I am unsure if any of this is implemented	11	7%
Banning alcohol on campus, including at faculty and alumni events	9	5%
None of the above policies have been implemented on my campus	8	5%
Scheduling Saturday morning classes	7	4%

Table 5 presents data related to the NIAAA Recommended ineffective alcohol education strategies that are being used in fraternity and sorority offices and by other entities on or near campus. For all of these questions, the respondents could choose that more than one community

was implementing this alcohol education strategy. The table below outlines that both the campus community and the fraternity and sorority community were using both of the proven ineffective alcohol strategies on their campuses. The data shows that 42 respondents for the campus and 52 for the fraternity and sorority community are using educational components, with no other education. There were also a number of campuses where neither of the strategies was being used. The data shows that 75 respondents were not just using educational components to implement alcohol education strategies on their campus and 64 respondents were not providing blood alcohol content to their students.

Table 5 – Where are the Ineffective Alcohol Education Strategies Being Used?

Strategy	Campus	City	Fraternity & Sorority	None	Don't Know
Educational components, with no other education	42 (21%)	3 (2%)	52 (26%)	75 (38%)	26 (13%)
Provide blood alcohol content feedback to students	40 (21%)	10 (5%)	17 (9%)	64 (34%)	58(31%)

Demographics Results

Research Question 2:

What are the individual characteristics of campus-based professionals working in fraternity and sorority offices?

The primary purpose of this study was to investigate the alcohol education strategies presently used in fraternity and sorority life offices on college campuses in order to make recommendations to improve the way these offices are addressing alcohol education. Another purpose of the study was to determine if demographic information, both individual and institutional, affected the strategies being used on campus. In order to address these questions, both individual and institutional demographic information was needed.

Data in Table 6 outlines the individual demographic information for the respondents. Of the 176 AFA members that started the survey 74 (42%) of them were males and 102 (58%) of them were female. Due to the low response rate of participants identifying an ethnicity other than Caucasian, the following ethnicity choice variables were grouped as Non-Caucasian: Native American/Indian, African American, not of Hispanic origin, Asian/Pacific Islander, Hispanic, Multiracial. Of the 176 respondents that answered the question, 151 (86%) of them were Caucasian, while 25 (14%) were non-Caucasian. Some additional characteristics include 150 (85%) of the respondents hold a Master's Degree, 113 (64%) supervise fraternities and sororities 66 – 100% of the time, and in terms of years of experience, 59 (35%) have been in the field for one to three years.

Table 6: *Individual Demographic Characteristics*

Demographic Variable	N (%)
<i>Gender</i>	
Male	74 (42%)
Female	102 (58%)
<i>Ethnicity</i>	
Caucasian	151 (86%)
Non-Caucasian	25 (14%)
<i>Degree Level</i>	
Ph.D	13 (7.5%)
Masters	150 (85%)
Bachelors	13 (7.5%)
<i>Percentage of Responsibilities</i>	
Supervise the person that works directly with fraternities and sororities	11 (6%)
1 – 33%	22 (13%)
33 – 66%	30 (17%)
67 – 100%	113 (64%)
<i>Length of Service a current position</i>	
Less than 1 year	38 (21%)
1 – 3 years	59 (35%)
3 – 5 years	28 (15%)
5 – 10 years	27 (15%)
More than 10 years	24 (14%)

Institutional Profile Results

Research Question 3:

What are the institutional profiles of campus-based professionals working in fraternity and sorority offices?

Just as the demographic information of the respondents is important, the institutional profile of the respondents is equally as important. All of the respondents work at 4-year institutions; however, there were some differences in the type of institutions where they worked. Table 7 presents data related to the institutional profile of each respondent. Of the 176 respondents, 115 (65%) work at a public institution. The size of the undergraduate population reported included the two highest categories 5,001 to 10,000 students and more than 20,000 students were reported by 26% of the respondents. For the percentage of the fraternity and sorority members on each 42% of the respondents indicated their campus has one to 10 percent of their undergraduate students were involved in the fraternity and sorority community. For the number of the fraternity and sorority organizations on campus, the largest two groups were 11 to 20 (24%) and more than 40 fraternities and sororities (23%). The final category for the institutional profile was related to the percentage of institutions that have used *A Call to Action: Changing the Culture of Drinking at U.S. Colleges* (2002) to implement alcohol education strategies, 141 (80%) of the institutional do not use the NIAAA study to implement alcohol education strategies.

Table 7: *Institutional Profile*

Demographic Variable	N (%)
<i>Public or Private</i>	
Public	115 (65%)
Private	61 (35%)
<i>Number of Undergraduates</i>	
1,000 – 5,000 students	37 (21%)
5,001 – 10,000 students	45 (26%)
10,001 – 15,000 students	26 (15%)
15,001 – 20,000 students	22 (12%)
More than 20,000 students	46 (26%)
<i>Percentage of the Fraternity & Sorority Community</i>	
1 – 10%	74 (42%)
11 – 20%	46 (26%)
21 – 30%	32 (18%)
31 – 40%	16 (9%)
More than 40%	8 (5%)
<i>Number of Fraternities and Sororities on campus</i>	
1 – 10	29 (17%)
11 – 20	42 (24%)
21 – 30	32 (18%)
31 – 40	32 (18%)
More than 40	41 (23%)
<i>The Campus used A Call to Action: Changing the Culture of Drinking at U.S. Colleges (2002) to implement alcohol education strategies</i>	
Yes	35 (20%)
No	141 (80%)

Data Analysis

The number of alcohol education strategies being used on campus served as the dependent variable. In order to determine the internal reliability of the alcohol education strategies being used as the dependent variable, a Cronbach's alpha was used and reported at .663. According to Shannon and Davenport (2001),

Internal consistency estimates reliability in terms of how consistent the actual items are within the instrument. ...if an evaluation instrument is designed to measure some content

area, then the items that comprise the overall instrument should all be consistent with each other; they should be measuring the same content and therefore be highly correlated.

(p. 120)

The alcohol education strategies were recorded to reflect respondent's input. For the effective strategies, the researcher coded a one for yes and a zero for no and for the ineffective strategies, the researcher coded a zero for yes and a one for no. The two categories were totaled for a maximum score of 19, if a campus was doing all 17 effective strategies and neither of the two ineffective strategies.

Research Question 4:

What is the relationship of alcohol education strategies and individual demographic characteristics for campus-based professionals working in fraternity and sorority offices on college campuses?

A backwards elimination regression was used to determine the best predictors of the amount of alcohol education strategies being used depending on the individual demographic characteristics of each respondent: sex, position, level of education, length of service at current positions, percentage of responsibility for the fraternity and sorority community, and ethnicity. Using six predictors, an overall R^2 of .095 was reached. While this model was statistically significant ($F = 2.942, p < .001$), a simpler model retaining just two predictors emerged. The final restricted model contained the variables of length of service and sex and achieved an R^2 of .081 ($F = 3.615, p < .001$). The R^2 difference of .014 between these two models was not statistically significant ($F \text{ Change} = .648, p = < .05$). Therefore, the more restricted model containing two predictors, length of service and sex, was preferred. The more restricted model includes length of service and sex of the respondent. Therefore, males who have been advising

fraternities and sororities for more than three years are using more alcohol education strategies that the other types of respondents.

Table 8: *Regression Findings Pertaining to Alcohol Education Strategies and Individual Demographic Characteristics*

Factor	R ²	S.E Estimate			
			t	Semi-partial	Beta
Full Model	.095	3.630			
1 sex			-3.057	-.229	-.224
2 position			-.027	-.002	-.003
3 education			-.980	-.075	-.074
4 length of service			2.470	.187	.186
5 Percentage of Responsibility			-.549	-.042	-.059
6 Ethnicity			.736	.057	.055
Restricted Model	.070	3.615			
1 sex				-.228	-.225
2 length of service				.187	.183

Research Question 5:

What is the relationship of alcohol education strategies and institutional profiles for campus-based professionals working in fraternity and sorority offices on college campuses?

A backwards elimination regression was used to determine the best predictors of the

amount of alcohol education strategies being used depending on the institutional profiles for each campus-based professional: type of institution, number of undergraduate students, percentage of fraternity and sorority community, number of fraternities and sororities, and if the campus had used the NIAAA Study *A Call to Action: Changing the Culture of Drinking at U.S. Colleges* (2002). Using the five predictors, an overall R^2 of .197 was reached. While this model was statistically significant ($F = 8.312, p < .001$), a simpler model retaining four predictors emerged. The final restricted model contained the variables of type of institution (public or private), percentage of the fraternity and sorority community, number of undergraduate students, and if the campus used the NIAAA Study, *A Call to Action: Changing the Culture of Drinking at U.S. Colleges* (2002) and achieved an R^2 of .177 ($F = 10.381, p < .001$). The R^2 difference of 2.069 between these two models was not statistically significant ($F \text{ Change} = .235, p = <.05$). Therefore, the more restricted model containing all, but one, predictors, type of institution (public or private), percentage of the fraternity and sorority community, number of undergraduate students, and if the campus used the NIAAA Study, *A Call to Action: Changing the Culture of Drinking at U.S. Colleges* (2002), was preferred. The data shows that the only institutional profile characteristic that does not impact the amount of alcohol education strategies being used is the amount of fraternities and sororities on campus.

Table 9: *Regression Findings Pertaining to Alcohol Education Strategies and Institutional Profile*

Factor	R ²	S.E Estimate			
			t	Semi-partial	Beta
Full Model	.197	3.418			
1 type of institution			-3.816	-.282	-.376
2 number of undergraduate students			-2.049	-.156	-.196
3 Percentage of fraternity and sorority community			2.668	.201	.221
4 number of fraternities and sororities			.474	.036	.039
5 NIAAA Study			-4.642	-.336	-.322
Restricted Model	.196	3.410			
1 type of institution				-.284	-.379
2 number of undergraduate students				-.155	-.177
3 Percentage of fraternity and sorority community				.210	.228
4 NIAAA Study				-.338	-.324

Summary

This chapter reported the findings of the research study. Descriptive statistics showed that of the 176 respondents that answered the question, 151 (86%) of them were Caucasian, while 25 (14%) were non-Caucasian. Some additional characteristics include 150 (85%) of the respondents hold a Master's Degree, 113 (64%) supervise fraternities and sororities 66 – 100% of the time, and in terms of years of experience, 59 (35%) have been in the field for one to three years. The tests that were conducted, both the ANOVAs and the multiple regressions, were proven to show that there was significance in the individual demographic characteristics with sex and length of service. The only significance with the institutional profile and the number of alcohol education strategies, both effective and ineffective, which were being used on each college campus was that the number of fraternities and sororities at each campus played no significant role. Detailed summarization and discussion of the findings are reported in the next chapter.

Chapter 5

Conclusions, Implications, Recommendations, & Summary

The purpose of this study was to investigate the alcohol education strategies presently used in fraternity and sorority life offices on college campuses in order to make recommendations to improve the way these offices are addressing alcohol education. This study evaluated which strategies are being used and by which community on their respective campuses. Specific comparisons will be made between the demographics frequencies of the participant's institution and the strategies they are using. The chapter will address the sample used for the study, the demographic description and the institutional profile of the respondent, will outline how many alcohol education strategies are being used in each fraternity or sorority life office, will address the conclusions of the study, and will discuss recommendations for future research.

Alcohol reports and studies have captured the attention of media, higher education professionals, researchers, parents, and those who work with fraternity and sororities. The primary purpose of this study was to examine alcohol education strategies presently used in fraternity and sorority life offices on college campuses. Specifically, this study compared National Institute on Alcohol Abuse and Alcoholism (NIAAA) recommendations for alcohol education strategies and current campus practices for fraternity and sorority professionals. Comparisons were made through the use of a survey of members of the Association of Fraternity/Sorority Advisors (AFA), a professional organization for fraternity and sorority

campus-based professionals. The results of this study provide descriptive information about the participants and what alcohol strategies they are using on their college campus. The results tell us that more work is needed. The implications of these findings are that fraternity and sorority life offices need to take action in all of the areas covered by the NIAAA report.

Research Questions

The following research questions were used in this study:

1. What are the alcohol education strategies, effective and ineffective, being used in fraternity and sorority offices on college campuses?
2. What are the individual characteristics of campus-based professionals working in fraternity and sorority offices?
3. What are the institutional profiles of campus-based professionals working in fraternity and sorority offices?
4. What is the relationship of alcohol education strategies and individual demographic characteristics for campus-based professionals working in fraternity and sorority offices on college campuses?
5. What is the relationship of alcohol education strategies and institutional profiles for campus-based professionals working in fraternity and sorority offices on college campuses?

Conclusions

This study found several instances where the individual demographics and the institutional profile of the individual were significant in determining the amount of alcohol education strategies being implemented by the fraternity and sorority life office. The study found that males and respondents who have held their campus-based position for more than three years

used more alcohol education strategies. For the institutional profile, each of the categories, except for the number of fraternal organizations on campus, showed significance. Respondents at public institutions, institutions that were smaller than 10,000 students, institutions that where less than 20% of the student population was part of the fraternity and sorority community, and the institutions that were aware of and using the NIAAA Study *A Call to Action: Changing the Culture of Drinking at U.S. Colleges* (2002) were using more alcohol education strategies.

Furthermore, the study revealed that the amount of effective alcohol education strategies being used on college campuses and being supported by the fraternity and sorority life offices is very low, only consistently enforcing disciplinary actions associated with policy violations (32%) was being used on more than 30 percent of the campuses. Yet, the amount of ineffective strategies being used is also low, with only 26% of the respondents using only education to educate their students and only nine percent providing blood alcohol content feedback to students.

Once the overall analysis was conducted to determine the significance between the individual's demographic characteristics and their institutional profile and the amount of alcohol education strategies being used, other analyses were performed in order to determine if certain demographic characteristics of participants could suggest that more alcohol education strategies were being used. The first characteristic observed was related to the sex of the respondent. When disaggregating the data by sex, it appeared that males ($N = 74$) used more alcohol education strategies than females ($N = 102$). Thus, the findings suggest that female fraternity and sorority life advisors would benefit from using more alcohol education strategies on their campuses.

The next demographic variable compared was the position of the respondent. When disaggregating the data by the position the respondent currently held, it showed no significant difference in the amount of alcohol education strategies being used. Thus, the findings suggested that all positions of the respondents would benefit from using more alcohol education strategies on their campuses.

The next demographic variable compared was the highest education level achieved by the respondent. When disaggregating the data by the highest education level the respondent had achieved, again it showed no significance in the amount of alcohol education strategies being used. Thus, the findings suggest that the amount of education does not affect the amount of strategies being used and that all fraternity and sorority life campus-based professional would benefit from using more alcohol education strategies on their campuses.

The next demographic variable compared was the length of the service of the respondent at their current position. When disaggregating the data by the length of the service, it showed significance in the amount of alcohol education strategies being used. Campus-based professionals that have been in their current position for longer than three years used more alcohol education strategies than their counterparts. Thus, the findings suggested that respondents who have been at their current position less than three years would benefit from using more alcohol education strategies on their campuses.

The next demographic variable compared was the percentage of responsibilities associated with advising fraternities and sororities. When disaggregating the data by the percentage of responsibilities of the respondent, again it showed no significance in the amount of alcohol education strategies being used. Thus, the findings suggested that all respondents,

regardless of the percentage of responsibilities associated with advising fraternities and sororities would benefit from using more alcohol education strategies on their campuses.

The final individual demographic variable compared was ethnicity. However, upon collecting and analyzing the data it was apparent that a lack of diversity would make this comparison statistically problematic. Overall, 84% of the participants were reported as “White, Not of Hispanic Origin”. Thus a chi-square analysis was conducted and further demonstrated that a lack of diversity would make analysis of this variable ineffective. Therefore, no further analysis on ethnicity was conducted.

The first institutional profile characteristic the researcher compared was the type of institution, either public or private. When disaggregating the data by the type of institution, it showed significance in the amount of alcohol education strategies being used. The findings suggested that public institutions were using more alcohol education strategies than private institutions counterparts; therefore, private institutions could benefit by implementing more alcohol education strategies on their respective campuses.

The next three institutional profile characteristics the researcher compared were the total undergraduate student population, the percentage of the fraternity and sorority community, and the number of fraternal organizations (fraternities and sororities). After disaggregating the data by the total undergraduate student population, the percentage of the fraternity and sorority community, and the number of fraternal organizations, all of the characteristics showed significance in the amount of alcohol education strategies being used, except for the number of fraternal organizations. The findings suggested that institutions smaller than 10,000 undergraduate students were using more alcohol education strategies than the larger institutions. The findings also suggested that institutions with less than 20% of their undergraduate

population involved in the fraternity and sorority community were using more alcohol education strategies. Finally, the findings suggested that the number of fraternity organizations at each institution had no significance to the amount of alcohol education strategies.

The final institutional profile characteristic the researcher compared was whether or not the campus used *A Call to Action: Changing the Culture of Drinking at U.S. Colleges* (2002) to implement alcohol education strategies. Only 20% of the respondents used the study to implement the alcohol education strategies, yet in further analysis of the data there was significance in the amount of alcohol education strategies being used. The number of respondents that indicated they were using the study to help implement alcohol education strategies was higher than the institutions not using the Call to Action study.

Implications

Although the results of this study show that the amount of alcohol education strategies being used in fraternity and sorority life offices on college campuses may be dependent on the demographic characteristics or institutional profile of the respondent, it is once again important to note the limitations of this study. The study focused on the knowledge of the campus-based professional that advises fraternities and sororities and is a member of AFA and who agreed to participate in research studies. Additionally, the study focused only on the list of recommended strategies from the NIAAA report and did not investigate whether or not other alcohol education strategies were being used on each campus. Although, the study revealed some significance through the tests that were administered, it also showed that fraternity and sorority life professionals could be doing more alcohol education with their students.

From the Wechsler studies in 1993 and 1997 to the NIAAA study in 2002 to the results of this study in 2012, the common theme is that alcohol misuse for college students is a major

issue. It appears that fraternity and sorority life offices are not doing enough to educate their students. While some college and universities have alcohol misuse plans in place, they do not seem to be working. Constant revision and evaluation and more resources are needed. Completion of this study resulted in an increased awareness that universities and college, specifically fraternity and sorority life offices, need to take action if they are going to address the issue of lack of alcohol education strategies. One easy way to help with the issue would be to develop alcohol education modules and curriculum that could be used easily by higher education institutions.

The NIAAA study provided a framework for universities and colleges to use in order to address alcohol misuse on campus, by implementing any or all of the 17 positive strategies and avoiding the other two strategies. The effective strategies used a four-tier system to educate students on alcohol. Depending on the campus, community, and the fraternity and sorority system, certain strategies can be addressed to combat alcohol misuse.

Studies have shown that drinking among college students is a major issue; however, it is not just the responsibility of the fraternity and sorority life offices to address this issue (Nezlek, et al, 1994; Wechsler & McFadden, 1979; Winston, Nettles, & Opper, 1987). It is also the responsibility of the entire university or college to be part of the solution, including students, fraternity and sorority life offices, campus community, and the city community.

Recommendations for Future Research

This study presents a number of possibilities for future research that could help better understand the impact of these alcohol education strategies being used on college campuses. The following research topics are a few that could be considered as follow-up studies related to this project:

1. This study was conducted during the summer months, when some professionals may have been out of the office due to professional or personal travel. Therefore, future research may find a larger data set if the survey was administered during the fall or spring semesters.
2. This study focused on the knowledge of the fraternity and sorority life campus-based professional, when some of the alcohol education strategies could have been implemented on campus, without the knowledge of this professional. Therefore, future studies could include the health and wellness, alcohol and other drugs, or another related office.
3. This study focused on members of AFA, while effective, the use of a select sample from specific regions of the United States could serve as a better sample.
4. Another possible topic for future research would be to assess the use of the recommended alcohol education strategies to see if there are comparisons to be made between large schools compared to smaller schools or larger athletic programs compared to smaller programs.
5. It has been 10 years since the NIAAA study which was the foundation for this study and five years since they released their follow-up report. Another follow-up report should be released soon, using a matrix, a summary of what is and is not working on college campuses, and outlining the cost involved with implementing the recommended strategies.
6. Another recommendation would be to rank the effective strategies by sorting them with a different weight, depending on how effective the strategy has proven to be effective.

7. In this study, the area of alcohol education strategies was explored. A similar survey studying drug education strategies and the perceptions of higher educational professionals could be beneficial.
8. Another possible topic for future research would be to assess colleges and universities where presidents and other high level university officials have been significantly involved in implementing alcohol education strategies. It would be interesting to assess if involvement of top administrators has enhanced the alcohol education strategies being used.
9. The design of this study used one dependent variable (number of alcohol education strategies being used) and multiple independent variables (individual demographic information and institutional profile). It is possible that some of the demographic variables could be covariate variables. Improper recognition of covariates can lead to a misinterpreted conclusion (Meyers, Gamst, & Guarino, 2006). Therefore, future studies may consider designing a study to test the possibility of various demographic variables serving as a covariate rather than an independent variable.

Summary

This chapter presents a summary of the completed research, review of the research findings, conclusions, and discussion of the significant findings. Implications of the research and recommendations for future research are also included at the end of this chapter.

The population in this study consisted of campus-based higher educational professional that advise fraternities and sororities on college campuses. The participants were all members of the Association of Fraternity/Sorority Advisors (AFA), a professional organization for fraternity

and sorority campus-based professionals. Surveys were sent to every member that advises fraternities and sororities that agreed to participate in research studies.

Since the review of literature showed that a survey querying fraternity and sorority life professionals on the type and amount of alcohol education strategies they were using in their office did not exist, the researcher designed a survey to ask such questions. The instrument used for the study was developed by the researcher and sent out to an expert panel for review and feedback. The final instrument was sent electronically to 545 members of AFA (see Appendix A).

Data were collected and analyzed during the summer of 2012. The researcher acquired approval from the AFA General Office in order to conduct the participants (see Appendix B) and approval from the Office of Human Subjects, IRB (see Appendix D). Upon receiving permission, the researcher sent the final survey instrument to 545 members to gather the necessary data. Overall, 189 participants took part in the study. Of those participants, 13 were omitted from the analysis due to not completing the entire survey; therefore a total of 176 were used for this study.

Descriptive statistics, ANOVAs, and multiple regressions were used to determine which alcohol education strategies were being used in fraternity and sorority life offices and to determine if there was any significance based on their individual demographic characteristics or their institutional profile. The study's findings were drawn from the collected data and were analyzed as they related to the five research questions.

The findings of this study suggest that fraternity and sorority life offices on college campuses are not using the alcohol education strategies that are suggested by the NIAAA study, *A Call to Action: Changing the Culture of Drinking at U.S. Colleges* (2002). The study found

that there is some significance in the individual demographic characteristics, the institutional profile, and the amount of alcohol education strategies being used. The study did show that the ineffective strategies are being used sparingly.

Universities and colleges must address the issue of alcohol misuse that is specific to their campus, specifically by implementing alcohol education strategies. Each culture, fraternity and sorority community, and student body are different from campus to campus. Therefore, it is important to utilize the current study and other resources for implementing a larger amount of alcohol education strategies.

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Appendices

Appendix A: Survey Instrument

Mantooth: Dissertation Survey

Default Question Block

Please click on the link below to read the consent letter:

[Informed Consent Letter](#)

- Yes, continue to the survey
- No, I wish not to participate

If No, I wish not to participate is Selected, Then Skip To End of Survey

Alcohol Education Strategies Survey

The purpose of this study is to investigate and describe the alcohol education strategies presently used on college campuses in order to make recommendations to improve the way colleges are addressing alcohol education. Specifically, this study will compare what the National Institute on Alcohol Abuse and Alcoholism (NIAAA) recommends for alcohol initiatives and what fraternity and sorority professionals are actually doing at their campuses.

Thank you for taking the time to complete this survey!

ABOUT YOU:

1.) What is your sex?

- Male
- Female

2.) What best reflects the position you currently hold?

- Chief Student Affairs Officer
- Mid-Manager
- Greek Advisor
- Greek advising is only a portion of my job
- Other

3.) What is your highest education level?

- Ph.D., Ed.D., or other terminal degree
- Master's Degree
- Bachelor's Degree

4.) What is your length of service at current position?

5.) What percentage of your responsibilities is directly related to working with sororities and fraternities?

- Supervise professional/s who directly works with Greeks
- 1% - 33%
- 34% - 66%
- 67% - 100%
- Not applicable

6.) Which racial or ethnic group best describes you?

- Native American/Indian
- African American, not of Hispanic origin
- Asian/Pacific Islander
- Hispanic
- Multiracial
- White, not of Hispanic origin
- Other

ABOUT YOUR CAMPUS:

7.) Which type of institution best represents where you are currently employed?

- 2-year
- 4-year

8.) Which type of institution best represents where you are currently employed?

- Public
- Private

9.) What is the approximate number of undergraduates students at your institution?

10.) What is the percentage of the fraternity & sorority community at your institution?

11.) How many fraternal organizations are at your institution?

12.) Has your campus used *A Call to Action: Changing the Culture of Drinking at U.S. Colleges* (2002) to implement alcohol education strategies?

- Yes
- No

13.) From the list below, please indicate which alcohol education strategies each community has implemented on your campus within the last 10 years (you may select all that apply):

	Campus Community	City/Community	Fraternity & Sorority Community	No Community implements this strategy
Alcohol Skills Training Program (ASTP): A cognitive-behavioral alcohol prevention program that teaches students basic principles of moderate drinking and how to cope with high-risk situations for excessive alcohol consumption.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brief Alcohol Screening and Intervention for College Students (BASICS): Administered in the form of two individual sessions in which students are provided feedback about their drinking behavior and given the opportunity to negotiate a plan for change based on the principles of motivational interviewing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Challenging alcohol expectancies: Use a combination of information and experiential learning to alter students' expectations about the effects of alcohol.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14.) From the list below, please indicate which alcohol education strategies each community has implemented on your campus within the last 10 years (you may select all that apply):

	Campus Community	City/Community	Fraternity & Sorority Community	No Community implements this strategy
Increased enforcement of minimum drinking age laws.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Implementation of programs to reduce alcohol-impaired driving: lowering legal blood alcohol limits to .08 percent for adult drivers, setting legal blood alcohol content (BAC) for drivers under age 21 at .02 percent or lower, use of sobriety check points, server training intervention, administrative license revocation laws, and safety belt laws.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Placed restrictions on alcohol retail outlet density: Numbers of outlets may be restricted directly or indirectly through policies that make licenses more difficult to obtain such as increasing the cost of a license.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Increased price and excise taxes on alcoholic beverages: All types of drinkers appear to be affected by price. Studies show that when the price of alcohol increases, many alcohol-related problems, including motor vehicle fatalities, robberies, and sexual assault, decrease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsible beverage service policies in social and commercial settings: Policies could include serving alcohol in standard sizes, limiting sales of pitchers, cutting off service of alcohol to intoxicated patrons, promoting alcohol-free drinks and food, and eliminating last-call announcements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The formation of a campus and community coalition: This approach reframes the issue as a community problem, not simply a college problem, brings together the range of players needed to address it, and sets the stage for cooperative action. In addition to college presidents and campus administrators, stakeholders in campus-community coalitions include student groups, faculty, staff, community leaders, law enforcement, and representatives from hospitality and alcohol beverage industries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15.) From the list below, please indicate which alcohol education strategies each community has implemented on your campus within the last 10 years (you may select all that apply):

	Campus Community	City/Community	Fraternity & Sorority Community	No Community implements this strategy
Increased enforcement at campus-based events that promote excessive drinking: Campus and/or City police can conduct random spot checks at events and parties on campus to ensure that alcohol service is monitored and that age identification is checked.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Increased publicity about and enforcement of underage drinking laws	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consistently enforcing disciplinary actions associated with policy violations: Inconsistent enforcement of alcohol related rules may suggest to students that "rules are made to be broken."	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conduct marketing campaigns: Students tend to overestimate the amount of drinking that occurs among their peers and then fashion their own behavior to meet this perceived norm.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16.) From the list below, please indicate which alcohol education strategies each community has implemented on your campus within the last 10 years (you may select all that apply):

	Campus Community	City/Community	Fraternity & Sorority Community	No Community implements this strategy
Safe-ride programs: These attempt to prevent drinking and driving by providing either free or low-cost transportation such as taxis or van shuttles from popular student venues or events to residence halls and other safe destinations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Regulation of happy hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Informing new students and their parents about alcohol policies and penalties during orientation: Alerting parents and students to this possibility early on (e.g., during orientation sessions) may help prevent the development of problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Educational components, with no other education: For example: your alcohol education strategies include only an educational speaker, with no other efforts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide blood alcohol content feedback to students: Using breath analysis tests to provide students accurate information on their BAC.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17.) From the list below, please indicate which (if any) campus-based policies and practices are being or have been used to reduce high-risk alcohol use on your campus within the last 10 years (you may select all that apply):

- Reinstate Friday classes and exams to reduce Thursday night partying
- Scheduling Saturday morning classes
- Implementing alcohol-free, expanded late-night student activities
- Eliminating keg parties on campus where underage drinking is prevalent
- Establishing alcohol-free residence halls
- Employing older, salaried resident assistants or hiring adults to fulfill that role
- Further controlling or eliminating alcohol at sports events and prohibiting tailgating parties that model heavy alcohol use
- Refusing sponsorship gifts from the alcohol industry to avoid any perception that underage drinking is acceptable
- Banning alcohol on campus, including at faculty and alumni events.
- None of the above policies have been implemented on my campus
- I am unsure if any of this is implemented

Appendix B: AFA General Office Permission Letter



ASSOCIATION OF
FRATERNITY | SORORITY
ADVISORS

May 10, 2012

Institutional Review Board
c/o Office of Human Subjects Research
115 Ramsay Hall
Auburn University, AL 36839

To Whom it May Concern;

I am aware that Bo Mantooh, a graduate student at Auburn University, is conducting a research study tentatively entitled: "A study of campus fraternity and sorority advisors regarding alcohol education strategies used on American college campuses," and he has shared with me the details of the study. Based on my communication with Mr. Mantooh, I understand the study and feel comfortable that the participants in this study will be adequately protected, and I give Mr. Mantooh permission to recruit participants using our association's membership list.

Our association's only involvement in the study is to grant Mr. Mantooh permission to contact our members via email and invite them to participate.

The Association of Fraternity/Sorority Advisors requests that the Association's name and identifiers of its members be kept confidential in the research results. Mr. Mantooh has agreed to provide my office a copy of the Auburn IRB approval document before beginning recruitment.

If there are any questions, please contact my office.

Sincerely,

A handwritten signature in black ink that reads "Sue Kraft Fussell". The signature is written in a cursive style with a long horizontal line extending to the right.

Sue Kraft Fussell
Interim Executive Director
Association of Fraternity/Sorority Advisors

9640 N. Augusta Drive, Suite 433 | Carmel, IN 46032 | P 317.876.1632 | F 317.876.3981
www.afa1976.org

Appendix C: Sample Invitation E-mail

Dear [name of colleague],

I am a graduate student in the Department of Educational Foundations, Leadership and Technology at Auburn University. I am inviting you to participate in my research study to explore what alcohol education strategies, both effective and ineffective, are being used in fraternity and sorority offices on college campuses.

As a participant, you will be asked to indicate what alcohol education strategies are currently being implemented on your campus or the previous campus you worked on, if have changed fields, and by which community; campus, city, and/or fraternity & sorority. Statements will include strategies such as: “Regulation of happy hours” and “safe-ride programs.” Your total time commitment will be approximately 7-10 minutes.

Your answers will be confidential and your participation in the survey will be anonymous. Taking the survey is voluntary. There is no risk or cost associated with taking the survey. The web server hosting the survey does not record e-mail or IP addresses.

If you would like to know more information about this study, an informed consent letter is attached. If you decide to participate after reading the letter, you can access the survey from the link below.

If you have questions about this study, please contact me by phone (334) 750-0399 or email at bo@auburn.edu or my advisor, Dr. Maria Witte by phone (334) 844-3078 or email at wittemm@auburn.edu.

If you do not want to participate or be contacted regarding this study, please click the link below.

Follow this link to the Survey:

Or copy and paste the URL below into your internet browser:

Informed consent letter:

Informed consent letter

Follow the link to opt out of future emails:

Click here to unsubscribe

Thank you,
Bo Mantooth
Principal Investigator

Appendix D: Institutional Review Board (IRB) Documents



(NOTE: DO NOT AGREE TO PARTICIPATE UNLESS IRB APPROVAL INFORMATION WITH CURRENT DATES HAS BEEN ADDED TO THIS DOCUMENT.)

**INFORMATION LETTER
for a Research Study entitled
"A study of campus fraternity and sorority advisors regarding alcohol education strategies used on American college campuses"**

You are invited to participate in a research study to explore what alcohol education strategies, both effective and ineffective, are being used in fraternity and sorority offices on college campuses. The study is being conducted by Bo Mantooth, a graduate student, under the direction of Maria Witte, Associate Professor in the Auburn University Department of Educational Foundations, Leadership and Technology. You were selected as a possible participant because you are a full-time, campus-based professional who does or has worked in an office that advises fraternity and sorority life.

If you decide to participate in this research study, you will be asked to indicate what alcohol education strategies are currently being implemented on your campus and by which community; campus, city, and/or fraternity & sorority. Statements will include strategies such as: "Regulation of happy hours" and "safe-ride programs." Your total time commitment will be approximately 10 minutes.

Your answers will be confidential and your participation in the survey will be anonymous. Taking the survey is voluntary. There is no risk or cost associated with taking the survey. The web server hosting the survey does not record e-mail or IP addresses. Your decision to participate, not participate, or quit taking the survey will not influence your relationship with Auburn University or your host institution.

Information gathered in the anonymous survey will be used in fulfillment of an academic requirement, presented at a conference or published in an academic journal.

If you have questions about this study, please contact Bo Mantooth by phone (334) 750-0399 or email at bo@auburn.edu or Maria Witte by phone (334) 844-3078 or email at wittenm@auburn.edu.

If you have questions about your rights as a research participant, you may contact the Auburn University Office of Human Subjects Research or the Institutional Review Board by phone (334) 844-5966 or e-mail at hsubjec@auburn.edu or IRBChair@auburn.edu.

HAVING READ THE INFORMATION ABOVE, YOU MUST DECIDE IF YOU WANT TO PARTICIPATE IN THIS RESEARCH PROJECT. IF YOU DECIDE TO PARTICIPATE, PLEASE CLICK ON THE LINK BELOW. YOU MAY PRINT A COPY OF THIS LETTER TO KEEP.


Investigator Date

"Bo" John Q. Mantooth
Printed Name

"The Auburn University Institutional Review Board has approved this document for use from June 7, 2012 to June 6, 2013. Protocol #12-213 EX 1206 "

**AUBURN UNIVERSITY INSTITUTIONAL REVIEW BOARD for RESEARCH INVOLVING HUMAN SUBJECTS
RESEARCH PROTOCOL REVIEW FORM**

For Information or help contact **THE OFFICE OF RESEARCH COMPLIANCE**, 115 Ramsay Hall, Auburn University
Phone: 334-844-5966 **e-mail:** hsubjec@auburn.edu **Web Address:** http://www.auburn.edu/research/vpr/ohs/

Revised 03.26.11 – DO NOT STAPLE, CLIP TOGETHER ONLY.

Save a Copy

1. **PROPOSED START DATE of STUDY:** Jun 14, 2012

PROPOSED REVIEW CATEGORY (Check one): FULL BOARD EXPEDITED EXEMPT

2. **PROJECT TITLE:** A study of campus fraternity and sorority advisors regarding alcohol education strategies used on American college campuses

3. "Bo" John Q. Mantooth Assoc Dir, Greek Life Student Affairs 334-844-1989 jqm0002@auburn.edu
PRINCIPAL INVESTIGATOR TITLE DEPT PHONE AU E-MAIL

255 Heisman Drive; Suite 3130, Room 3142, Auburn Univ, AL 36849 334-844-4347 bomantooth@hotmail.com
MAILING ADDRESS FAX ALTERNATE E-MAIL

4. **SOURCE OF FUNDING SUPPORT:** Not Applicable Internal External Agency: _____ Pending Received

5. **LIST ANY CONTRACTORS, SUB-CONTRACTORS, OTHER ENTITIES OR IRBs ASSOCIATED WITH THIS PROJECT:**

Association of Fraternity/Sorority Advisors

6. **GENERAL RESEARCH PROJECT CHARACTERISTICS**

6A. Mandatory CITI Training	6B. Research Methodology								
<p>Names of key personnel who have completed CITI: Bo Mantooth <input checked="" type="checkbox"/> Maria Witte <input checked="" type="checkbox"/></p> <p>CITI group completed for this study: <input checked="" type="checkbox"/> Social/Behavioral <input type="checkbox"/> Biomedical</p> <p align="center">PLEASE ATTACH TO HARD COPY ALL CITI CERTIFICATES FOR EACH KEY PERSONNEL</p>	<p>Please check all descriptors that best apply to the research methodology</p> <p>Data Source(s): <input checked="" type="checkbox"/> New Data <input type="checkbox"/> Existing Data Will recorded data directly or indirectly identify participants? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Data collection will involve the use of: <input type="checkbox"/> Educational Tests (cognitive diagnostic, aptitude, etc.) <input type="checkbox"/> Interview / Observation <input type="checkbox"/> Physical / Physiological Measures or Specimens (see Section 6) <input checked="" type="checkbox"/> Surveys / Questionnaires <input checked="" type="checkbox"/> Internet / Electronic <input type="checkbox"/> Audio / Video / Photos <input type="checkbox"/> Private records or files</p>								
6C. Participant Information	6D. Risks to Participants								
<p>Please check all descriptors that apply to the participant population. <input checked="" type="checkbox"/> Males <input checked="" type="checkbox"/> Females <input type="checkbox"/> AU students Vulnerable Populations <input type="checkbox"/> Pregnant Women/Fetuses <input type="checkbox"/> Prisoners <input type="checkbox"/> Children and/or Adolescents (under age 19 in AL)</p> <p>Persons with: <input type="checkbox"/> Economic Disadvantages <input type="checkbox"/> Physical Disabilities <input type="checkbox"/> Educational Disadvantages <input type="checkbox"/> Intellectual Disabilities</p> <p>Do you plan to compensate your participants? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Please identify all risks that participants might encounter in this research.</p> <table border="0"> <tr> <td><input type="checkbox"/> Breach of Confidentiality*</td> <td><input type="checkbox"/> Coercion</td> </tr> <tr> <td><input type="checkbox"/> Deception</td> <td><input type="checkbox"/> Physical</td> </tr> <tr> <td><input type="checkbox"/> Psychological</td> <td><input checked="" type="checkbox"/> Social</td> </tr> <tr> <td><input type="checkbox"/> None</td> <td><input type="checkbox"/> Other:</td> </tr> </table> <p align="right">MAY 29 2012 Research Compliance</p> <p><small>*Note that if the investigator is using or accessing confidential or identifiable data, breach of confidentiality is always a risk.</small></p>	<input type="checkbox"/> Breach of Confidentiality*	<input type="checkbox"/> Coercion	<input type="checkbox"/> Deception	<input type="checkbox"/> Physical	<input type="checkbox"/> Psychological	<input checked="" type="checkbox"/> Social	<input type="checkbox"/> None	<input type="checkbox"/> Other:
<input type="checkbox"/> Breach of Confidentiality*	<input type="checkbox"/> Coercion								
<input type="checkbox"/> Deception	<input type="checkbox"/> Physical								
<input type="checkbox"/> Psychological	<input checked="" type="checkbox"/> Social								
<input type="checkbox"/> None	<input type="checkbox"/> Other:								
<p>Do you need IBC Approval for this study? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes - BUA # _____ Expiration date _____</p>									

FOR OHSR OFFICE USE ONLY

DATE RECEIVED IN OHSR: 5/29/12 by GB	PROTOCOL # 12-213 EX 1204
DATE OF IRB REVIEW: 6/7/12 by Kje	APPROVAL CATEGORY: 45 CFR 46.101(b)(2)
DATE OF IRB APPROVAL: _____ by _____	INTERVAL FOR CONTINUING REVIEW: 1 year
COMMENTS:	

7. PROJECT ASSURANCES

PROJECT TITLE: A study of campus fraternity and sorority advisors regarding alcohol education strategies used on American college campuses

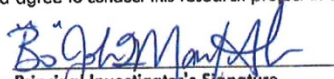
A. PRINCIPAL INVESTIGATOR'S ASSURANCES

1. I certify that all information provided in this application is complete and correct.
2. I understand that, as Principal Investigator, I have ultimate responsibility for the conduct of this study, the ethical performance this project, the protection of the rights and welfare of human subjects, and strict adherence to any stipulations imposed by the Auburn University IRB.
3. I certify that all individuals involved with the conduct of this project are qualified to carry out their specified roles and responsibilities and are in compliance with Auburn University policies regarding the collection and analysis of the research data.
4. I agree to comply with all Auburn policies and procedures, as well as with all applicable federal, state, and local laws regarding the protection of human subjects, including, but not limited to the following:
 - a. Conducting the project by qualified personnel according to the approved protocol
 - b. Implementing no changes in the approved protocol or consent form without prior approval from the Office of Human Subjects Research
 - c. Obtaining the legally effective informed consent from each participant or their legally responsible representative prior to their participation in this project using only the currently approved, stamped consent form
 - d. Promptly reporting significant adverse events and/or effects to the Office of Human Subjects Research in writing within 5 working days of the occurrence.
5. If I will be unavailable to direct this research personally, I will arrange for a co-investigator to assume direct responsibility in my absence. This person has been named as co-investigator in this application, or I will advise OHSR, by letter, in advance of such arrangements.
6. I agree to conduct this study only during the period approved by the Auburn University IRB.
7. I will prepare and submit a renewal request and supply all supporting documents to the Office of Human Subjects Research before the approval period has expired if it is necessary to continue the research project beyond the time period approved by the Auburn University IRB.
8. I will prepare and submit a final report upon completion of this research project.

My signature indicates that I have read, understand and agree to conduct this research project in accordance with the assurances listed above.

"Bo" John Q. Mantooth

Printed name of Principal Investigator


Principal Investigator's Signature
(SIGN IN BLUE INK ONLY)

5/29/12
Date

B. FACULTY ADVISOR/SPONSOR'S ASSURANCES

1. By my signature as faculty advisor/sponsor on this research application, I certify that the student or guest investigator is knowledgeable about the regulations and policies governing research with human subjects and has sufficient training and experience to conduct this particular study in accord with the approved protocol.
2. I certify that the project will be performed by qualified personnel according to the approved protocol using conventional or experimental methodology.
3. I agree to meet with the investigator on a regular basis to monitor study progress.
4. Should problems arise during the course of the study, I agree to be available, personally, to supervise the investigator in solving them.
5. I assure that the investigator will promptly report significant adverse events and/or effects to the OHSR in writing within 5 working days of the occurrence.
6. If I will be unavailable, I will arrange for an alternate faculty sponsor to assume responsibility during my absence, and I will advise the OHSR by letter of such arrangements. If the investigator is unable to fulfill requirements for submission of renewals, modifications or the final report, I will assume that responsibility.
7. I have read the protocol submitted for this project for content, clarity, and methodology

Maria Witte

Printed name of Faculty Advisor / Sponsor


Signature (SIGN IN BLUE INK ONLY)

5/29/2012
Date

C. DEPARTMENT HEAD'S ASSURANCE

By my signature as department head, I certify that I will cooperate with the administration in the application and enforcement of all Auburn University policies and procedures, as well as all applicable federal, state, and local laws regarding the protection and ethical treatment of human participants by researchers in my department.

Sherida Downer

Printed name of Department Head


Signature (SIGN IN BLUE INK ONLY)

5/29/2012
Date

8. PROJECT OVERVIEW: Prepare an abstract that includes:
(400 word maximum, in language understandable to someone who is not familiar with your area of study):

I.) A summary of relevant research findings leading to this research proposal:

(Cite sources; include a "Reference List" as Appendix A.)

II.) A brief description of the methodology,

III.) Expected and/or possible outcomes, and,

IV.) A statement regarding the potential significance of this research project.

I.) The tradition of drinking has developed into a culture, with beliefs and customs entrenched in every level of college, from students choosing to drink or not to drink or from student deciding how much to drink. National headlines, allow us to see that "students continue to be seriously injured or die as a result of drinking" (National Institute on Alcohol Abuse and Alcoholism, 2007, p. 3). Students who attend college have certain expectations that alcohol consumption is necessary for social success, including acceptance from their peers. Moreover, with college sports arenas displaying advertisements from alcohol industry sponsors and other long-standing alcohol-related campus traditions, students are deriving much of their expectations of alcohol use from their environments (National Institute on Alcohol Abuse and Alcoholism, 2002, p. 1). "Colleges and universities are the social institutions that help many youth make the transition from adolescence to adulthood, they often become the playing field on which the developmental problems of this life stage, including alcohol misuse, unfold" (High-Risk Drinking in College, 2002, p. vi)

In 2002, the National Institute on Alcohol Abuse and Alcoholism (NIAAA) assembled a task force to address drinking on college campuses in the United States. In the task force report, A Call to Action: Changing the Culture of Drinking at U.S. Colleges, the authors suggested that "other than the damage and injuries that occur during spring break each year, the only consequences of college drinking that usually come to the public's attention are occasional student deaths from alcohol overuse or other alcohol-related tragedies" (National Institute on Alcohol Abuse and Alcoholism, 2002, p. 1). In fact, the consequences of college drinking are much more than occasional, "at least 1,400 college student deaths a year are linked to alcohol" (National Institute on Alcohol Abuse and Alcoholism, 2002, p. 1).

The task force report describes four tiers for addressing alcohol on college campuses: what is effective among college students, what is effective with general populations, what is promising, and what has been shown to be ineffective. Under the four tiers, the report outlines 19 strategies for addressing alcohol use and abuse, and within those 19 strategies there are several sub-headings.

II.) Using an Internet survey that the investigator created and had validated, this study will examine the alcohol education strategies using in fraternity and sorority offices on college campuses.

III.) Possible outcomes include: assessing which effective and ineffective alcohol education strategies are being used on college campuses will allow us to work with alcohol education programmers and speakers to address areas for improvement for fraternity and sorority offices. Differences exist between the demographically different groups in regards to what alcohol education strategies are being used.

IV.) This study will add to the alcohol education literature. The findings may also improve the training of campus-based professionals and influence curriculum and program development.

9. PURPOSE.

a. Clearly state all of the objectives, goals, or aims of this project.

Four research questions were posed as aims for this project:

1. What are the alcohol education strategies, effective and ineffective, being used in fraternity and sorority offices on college campuses?
2. What are the individual characteristics of campus-based professionals working in fraternity and sorority offices?
3. What are the institutional profiles of campus-based professionals working in fraternity and sorority offices?
4. What is the relationship of alcohol education strategies, individual characteristics, and institutional profiles for campus-based professionals working in fraternity and sorority offices on college campuses?

b. How will the results of this project be used? (e.g., Presentation? Publication? Thesis? Dissertation?)

Results of this project will be used for a doctoral dissertation, conference presentations, and future publications.

10a. **KEY PERSONNEL.** Describe responsibilities. Include information on research training or certifications related to this project. **CITI is required.** Be as specific as possible. (Attach extra page if needed.) *All non AU-affiliated key personnel must attach **CITI certificates of completion.***

Bo Mantooth _____ Doctoral Candidate _____ jqm0002@auburn.edu
 Principle Investigator _____ Title: _____ E-mail address _____
 Dept / Affiliation: EFLT _____

Roles / Responsibilities:
 Construct assessment instruments (web based survey, treatment texts)
 Recruit and consent participants
 Data collection and analysis

Individual: Maria Witte _____ Title: Assoc. Professor _____ E-mail address wittemm@auburn.edu _____
 Dept / Affiliation: EFLT _____

Roles / Responsibilities:
 Oversee the development and execution of the study
 Ensure that the study complies with acceptable standards for social science research

Individual: _____ Title: _____ E-mail address _____
 Dept / Affiliation: _____

Roles / Responsibilities:

Individual: _____ Title: _____ E-mail address _____
 Dept / Affiliation: _____

Roles / Responsibilities:

Individual: _____ Title: _____ E-mail address _____
 Dept / Affiliation: _____

Roles / Responsibilities:

Individual: _____ Title: _____ E-mail address _____
 Dept / Affiliation: _____

Roles / Responsibilities:

11. **LOCATION OF RESEARCH.** List all locations where data collection will take place. (School systems, organizations, businesses, buildings and room numbers, servers for web surveys, etc.) Be as specific as possible. Attach permission letters in Appendix E.

(See sample letters at <http://www.auburn.edu/research/vpr/ohs/sample.htm>)

All data will be collected via a web based survey software, Qualtrics.com. Participants are campus-based professionals who are members of the Association of the Fraternity/Sorority Advisors, Carmel, Indiana are invited to complete the survey.

12. PARTICIPANTS.

a. Describe the participant population you have chosen for this project.

Check here if there is existing data; describe the population from whom data was collected & include the # of data files.

Full-time campus-based professional who advise fraternities and/or sororities on American college campuses.

543 participants who are all members of the professional association, AFA (Association of Fraternity/Sorority Advisors).

The AFA General Office was asked to provide a list of all campus-based professionals who did not opt out of surveys and they provided me the list of 543 participants.

b. Describe why is this participant population is appropriate for inclusion in this research project. (Include criteria for selection.)

The participant population represents a cross-section of professionals from across the United States. This study will examine what alcohol education strategies, both effective and ineffective, are being used in fraternity and sorority offices on college campuses. This study will scrutinize whether or not there is a difference in strategies being uses based on demographic variable: sex, ethnicity, and years of service. The results will be able to be generalizable to fraternity and sorority advisors, but it is necessary to have a homogenous sample in order to control of extraneous factors.

c. Describe, step-by-step, all procedures you will use to recruit participants. Include in *Appendix B* a copy of all e-mails, flyers, advertisements, recruiting scripts, invitations, etc., that will be used to invite people to participate. (See sample documents at <http://www.auburn.edu/research/vpri/ohs/sample.htm>.)

1. The Association of Fraternity/Sorority Advisors headquarters will provide 543 electronic mail (e-mail) addresses to the investigator. The e-mail addresses will be used twice during the recruitment of participants: 1) initial invitation to participate and 2) a reminder/thank you message sent on the sixth day of survey administration. All e-mail addresses will be safeguarded in electronic format on a password protected computer and destroyed following the administration of the survey.

3. Participants will be contacted through electronic mail (e-mail) with a prepared introductory message. The e-mail will include an Internet link to the survey. The introductory e-mail message will be generated through the web-based survey software so that the investigator and participants do not communicate directly.

4. Participants will click on the link and be directed to an Informed Consent page (attached). If the participant agrees to participate, he or she will click the link and begin answering the 14 question survey.

What is the minimum number of participants you need to validate the study? ¹⁴⁰ _____

Is there a limit on the number of participants you will recruit? No Yes – the number is ⁵⁴³ _____

Is there a limit on the number of participants you will include in the study? No Yes – the number is _____

d. Describe the type, amount and method of compensation and/or incentives for participants.

(If no compensation will be given, check here .)

Select the type of compensation: Monetary Incentives
 Raffle or Drawing incentive (Include the chances of winning.)
 Extra Credit (State the value)
 Other

Description:

13. PROJECT DESIGN & METHODS.

a. Describe, step-by-step, all procedures and methods that will be used to consent participants.

(Check here if this is "not applicable"; you are using existing data.)

Participants will be provided a copy of the Informed Consent letter as an attachments in the invitation e-mail

Participants will indicate their willingness to participate by clicking on the survey link

The Informed Consent letter text will appear on the first page of the online survey

Participants will indicate their acknowledgement of the Informed Consent letter

Participants will indicate their willingness to participate by completing the survey and submitting the survey

b. Describe the procedures you will use in order to address your purpose. Provide a step-by-step description of how you will carry out this research project. Include specific information about the participants' time and effort commitment. (*NOTE: Use language that would be understandable to someone who is not familiar with your area of study. Without a complete description of all procedures, the Auburn University IRB will not be able to review this protocol. If additional space is needed for this section, save the information as a .PDF file and insert after page 6 of this form.*)

Electronic mail (e-mail) addresses will be provided to the investigator from the professional association, Association of Fraternity/Sorority Advisors (AFA).

AFA will certify that the list consists of full-time campus-based professional that advise fraternities and/or sororities on a college campus.

Participants will be contacted through e-mail with the prescribed invitation to participate text.

The invitation to participate e-mail will contain an attachment of the Informed Consent letter and a link to the web based survey.

If the participant does not want to participate or be contacted further, instructions for their removal from the invite pool will be included in the invitation to participate e-mail

The online collector will be open for 14 days

A reminder/thank you e-mail will be sent to all participants on day 6

The collector will automatically close at 11:59 PM CST on day 14

- 13c. List all data collection instruments used in this project, in the order they appear in Appendix C.
(e.g., surveys and questionnaires in the format that will be presented to participants, educational tests, data collection sheets, interview questions, audio/video taping methods etc.)

Alcohol Education Strategies Survey ✓

- d. Data analysis: Explain how the data will be analyzed.

The data will be analyzed using quantitative methods by entering information into IBM SPSS Statistics 20. The researcher will use SPSS to evaluate data and present descriptive data in addition to analysis of the variables using ANOVA.

14. RISKS & DISCOMFORTS: List and describe all of the risks that participants might encounter in this research. *If you are using deception in this study, please justify the use of deception and be sure to attach a copy of the debriefing form you plan to use in Appendix D.* (Examples of possible risks are in section #6D on page 1.)

There is no identifiable risk to the participants.

15. **PRECAUTIONS.** Identify and describe all precautions you have taken to eliminate or reduce risks as listed in #14. If the participants can be classified as a "vulnerable" population, please describe additional safeguards that you will use to assure the ethical treatment of these individuals. Provide a copy of any emergency plans/procedures and medical referral lists in Appendix D.

The risk of breach of confidentiality will be eliminated by using anonymous data. No identifiable information will be collected on the surveys. No vulnerable populations will be included in the study.

If using the Internet to collect data, what confidentiality or security precautions are in place to protect (or not collect) identifiable data? Include protections used during both the collection and transfer of data.

(These are likely listed on the server's website.)

No individual participant identifying data is collected in this survey.
The survey will be accessed through Qualtrics.com, a web based survey company. Qualtrics.com offers the following security measures for collecting and storing participant data:
Participants will access the survey through a custom link developed by the principal researcher
Survey will be Section 508 compliant and accessible
IP address collection will be turned 'off' on the survey collection site
Qualtrics.com uses SSL for secure collection and transmission of data
The responses of participants are transmitted over a secure, encrypted connection
All data are stored on servers located in the United States
Backups occur hourly internally, and daily to centralized backup system for off site storage
Backups are encrypted

16. **BENEFITS.**

- a. List all realistic direct benefits participants can expect by participating in this specific study.

(Do not include "compensation" listed in #12d.) Check here if there are no direct benefits to participants. ✓

- b. List all realistic benefits for the general population that may be generated from this study.

The results of this study will aid in the design of alcohol education strategies. The intended outcome is to assess the alcohol education strategies currently being used on the campus that is being reported on. In addition, as each fraternity and sorority professional gains more information on alcohol education strategies the lower risk of alcohol related injuries and deaths should occur on college campuses.

17. PROTECTION OF DATA.

- a. Will data be collected as anonymous? Yes No *If "YES", skip to part "g".*
(*"Anonymous" means that you will not collect any identifiable data.*)
- b. Will data be collected as confidential? Yes No
(*"Confidential" means that you will collect and protect identifiable data.*)
- c. If data are collected as confidential, will the participants' data be coded or linked to identifying information?
 Yes (If so, describe how linked.) No

d. Justify your need to code participants' data or link the data with identifying information.

e. Where will code lists be stored? (Building, room number?)

f. Will data collected as "confidential" be recorded and analyzed as "anonymous"? Yes No
(If you will maintain identifiable data, protections should have been described in #15.)

g. Describe how and where the data will be stored (e.g., hard copy, audio cassette, electronic data, etc.), and how the location where data is stored will be secured in your absence. For electronic data, describe security. If applicable, state specifically where any IRB-approved and participant-signed consent documents will be kept on campus for 3 years after the study ends.

Data will be stored on the investigator's computer. This computer is password protected and kept in a secure campus office, within a locked office suite.

All IRB-approved documents will be maintained in a locked file cabinet within the investigator's campus office.

Data to be destroyed within one year of the conclusion of this study.

h. Who will have access to participants' data?

(*The faculty advisor should have full access and be able to produce the data in the case of a federal or institutional audit.*)

Bo Mantooth, investigator

Maria Witte, dissertation chair

James Witte, dissertation committee

David DiRamio, dissertation committee

i. When is the latest date that confidential data will be retained? (Check here if only anonymous data will be retained. ✓)
n/a

j. How will the confidential data be destroyed? (NOTE: Data recorded and analyzed as "anonymous" may be retained indefinitely.)
n/a

Type in this information below

The Auburn University Institutional Review Board has approved this document for use from	
6/7/12	to 6/6/13
Protocol # 12-213 EX 1206	

+ then forward (with live link) to us.

(NOTE: DO NOT AGREE TO PARTICIPATE UNLESS IRB APPROVAL INFORMATION WITH CURRENT DATES HAS BEEN ADDED TO THIS DOCUMENT.)

**INFORMATION LETTER
for a Research Study entitled
"Assessing the efficacy of analytical definitions in hazing education"**

You are invited to participate in a research study to explore what alcohol education strategies, both effective and ineffective, are being used in fraternity and sorority offices on college campuses. The study is being conducted by Bo Mantooth, a graduate student, under the direction of Maria Witte, Associate Professor in the Auburn University Department of Educational Foundations, Leadership and Technology. You were selected as a possible participant because you are a full-time, campus-based professional who does or has worked in an office that advises fraternity and sorority life.

If you decide to participate in this research study, you will be asked to indicate what alcohol education strategies are currently being implemented on your campus and by which community; campus, city, and/or fraternity & sorority. Statements will include strategies such as: "Regulation of happy hours" and "safe-ride programs." Your total time commitment will be approximately 10 minutes.

Your answers will be confidential and your participation in the survey will be anonymous. Taking the survey is voluntary. There is no risk or cost associated with taking the survey. The web server hosting the survey does not record e-mail or IP addresses. Your decision to participate, not participate, or quit taking the survey will not influence your relationship with Auburn University or your host institution.

Information gathered in the anonymous survey will be used in fulfillment of an academic requirement, presented at a conference or published in an academic journal.

If you have questions about this study, please contact Paul Kittle by phone (334) 750-0399 or email at bo@auburn.edu or Maria Witte by phone (334) 844-3078 or email at witemm@auburn.edu .

If you have questions about your rights as a research participant, you may contact the Auburn University Office of Human Subjects Research or the Institutional Review Board by phone (334) 844-5966 or e-mail at hsubjec@auburn.edu or IRBChair@auburn.edu.

HAVING READ THE INFORMATION ABOVE, YOU MUST DECIDE IF YOU WANT TO PARTICIPATE IN THIS RESEARCH PROJECT. IF YOU DECIDE TO PARTICIPATE, PLEASE CLICK ON THE LINK BELOW. YOU MAY PRINT A COPY OF THIS LETTER TO KEEP.

Investigator _____ Date _____

Printed Name _____

The Auburn University Institutional Review Board has approved this document for use from _____ to _____.

9/6/13 Protocol # 12-213 EX 1206 LINK

6/7/12