

[2022]

Nebraska Assessment of College Health Behaviors

[Wave 2 Survey: All Sites]



Nebraska Collegiate
Prevention Alliance



Provided By

MERC

Methodology & Evaluation
Research Core Facility

370 Prem S. Paul Research Center at Whittier School
2200 Vine St.
Lincoln, NE. 68583-0866
(402) 472-7670
merc@unl.edu



**Nebraska Assessment of College Health Behaviors Wave 2: All Sites
August 2022**

If you have any questions or concerns regarding the information reported within, please contact us at:

Methodology and Evaluation Research Core Facility
University of Nebraska – Lincoln
370 Prem S. Paul Research Center at Whittier School
2200 Vine Street
Lincoln, NE 68583-0866
402-472-7670
merc@unl.edu
merc.unl.edu

The mission of the Methodology and Evaluation Research Core Facility (MERC) is to provide state-of-the-art methodological support and services that promote and sustain excellence in the social and behavioral sciences through active collaborations with existing centers, initiatives, and units. The facility includes service units that support innovative approaches to sample design, data collection, analysis, and evaluation in a collaborative environment of transdisciplinary research.

Prepared by:

Alex Swanson, MEd

Project Evaluation Manager

Francine Goh

Graduate Intern

Taylor Gold

Graduate Intern

Alian Kasabian, PhD

Director of MERC

Prepared for:

Megan Hopkins

Project Director, Nebraska Collegiate Prevention Alliance (NECPA)

The image used on the cover comes from the NECPA website

The conduct of this study and the preparation of this report were sponsored by NECPA, and the Substance Abuse and Mental Health Services Administration (SAMHSA) funded Partnerships for Success grant through the Nebraska Department of Behavioral Health (DBH). Any opinions, findings, conclusions, or recommendations expressed in this publication are those of the authors and do not necessarily reflect the views of the NECPA, PFS, or SAMHSA.

The University of Nebraska does not discriminate based upon any protected status.

Contents

Contents	iii
Nebraska Assessment of College Health Behaviors Survey.....	1
Methodology.....	1
Overall Findings.....	2
Demographics	2
Alcohol Use and Related Behaviors	4
Sexual Experiences with Alcohol.....	30
Drug Use and Related Behaviors.....	36
Mental Health	44
Miscellaneous	54
Appendix A: NACHB Survey	60
Appendix B: Overall Frequencies	147

Nebraska Assessment of College Health Behaviors Survey

This report is an analysis of data from the 2022 administration of the Nebraska Assessment of College Health Behaviors (NACHB) survey to currently enrolled students at 19 member institutions of the Nebraska Collegiate Prevention Alliance (NECPA). The NACHB survey is designed to assess students' personal attitudes and behaviors related to alcohol, drugs, mental health issues, and personal violence (e.g., drinking and sexual behaviors). The survey also helps understand individuals' attitudes towards campus and community policies, other student's behavior, and bystander interventions. The data from the survey will make it possible to research trends of these behaviors on campus over time. This is the second administration of the NACHB, and it is scheduled to be administered every other year to college students at participating institutions across the state, focusing on students ages 18-24. The Methodology and Evaluation Research Core (MERC) Facility was contracted to conduct the survey and analyze/report the data collected from the survey.

MERC provides analytic information to help participating colleges and universities implement a variety of beneficial programs on their campus. For example, the data can be used as personalized feedback norms to students based on the input of their own drinking and self-reports of harms. Separate norms are provided for various demographic breakdowns, where available (e.g., men versus women, Greek versus non-Greek students). This enables participating NCC member institutions to generate a social norms message that provides students with peer group drinking and drug use behaviors and attitudinal norms to correct misperceptions related to alcohol and drug use. Because the NACHB survey is a population-level prevention tool, it contains a social norm message track for those students who do not drink or use drugs, reinforcing the abstinence choice.

Results from the NACHB survey provide estimates of the drinking and drug use patterns of currently enrolled students. Unlike the Y1CBP (Year One College Behavior Profile - previously the Year One College Alcohol Profile), which data reflect students' drinking and drug use before coming to campus, NACHB data are valid as a measure of campus-wide drinking and drug use. Therefore, NACHB data can be used as a substitute for a valid campus-level survey of students for obtaining general student drinking and drug use indicators such as ACHA or CORE. Participating NECPA member institutions can use NACHB data to create or update their social norm messages and prevention programming for their students. They can also use NACHB data over time to detect changes in the drinking and drug use patterns of enrolled students that might suggest a need for further prevention and intervention.

Methodology

The NACHB survey is a cross-sectional survey implemented on a web-based platform (Qualtrics). MERC programmed the survey into the Qualtrics online web platform and provided the anonymous survey link to 19 participating NECPA member institutions¹. Then, the participating NCC member schools emailed the survey link to their students. A total of 5,381 students provided sincere responses, 4,736 of whom were between 18-24 years of age and covered in this report. Student response data were stored on a secured shared drive/server at the University of Nebraska – Lincoln (UNL).

¹ Bellevue University, Bryan LGH College of Health Sciences, Clarkson College, Concordia University, Creighton University, Doane University, Hastings College, Metro Community College, Nebraska College of Technical Agriculture, Nebraska Methodist College, Nebraska Wesleyan University, Northeast Community College, Peru State College, Southeast Community College, University of Nebraska-Omaha, University of Nebraska-Lincoln, University of Nebraska-Kearney, Western Nebraska Community College, and Wayne State College

IBM SPSS V.28 was used for data analysis. For each question, individual responses were aggregated into averages and/or frequencies to provide summary statistics. Age groups were collapsed into two groups: underage (18-20) vs. of-age (21-24). Differences between demographic subgroups (men/women, non-Greek/Greek members, underage/of-age, and non-athlete/athlete) were compared. Group differences are only noted when statistically significant.

Overall Findings

Demographics

Table 1a: Descriptive Person Statistics				
	n	%/ave	min	max
Age				
	4,736	20	18	24
18	640	14%		
19	1,172	25%		
20	970	21%		
21	855	18%		
22	576	12%		
23	272	6%		
24	251	5%		
Sex				
Women	3,349	71%		
Men	1,381	29%		
Gender				
Woman	2,684	57%		
Man	1,079	23%		
Transgender	40	1%		
Gender Queer	57	1%		
Nonbinary	112	2%		
Self-Identity	24	1%		
Race/Ethnicity				
Hispanic/Latino	468	10%		
American Indian or Alaskan Native	95	2%		
Asian or Asian-American	361	8%		
Native Hawaiian or Pacific Islander	33	1%		
White, European-American, or Caucasian	4,000	85%		
Black, African-American, or Native African	151	3%		
Arab or Non-Arab North African/Middle-Eastern	40	1%		
Bi-racial or Multi-racial	163	3%		
Native Caribbean or Afro-Caribbean Islander	12	<1%		
Other	72	2%		
Relationship Status				
Single	2,166	59%		
Married/have a spouse and/or partner	183	5%		
Long-term relationship	1,298	36%		
Divorced or separated	1	<1%		

*= $p < .05$, **= $p < .01$ ***= $p < .001$

Table 1b: Descriptive Person Statistics				
	n	%/ave	min	max
Sexual Orientation				
Bisexual	466	10%		
Gay	65	1%		
Lesbian	75	2%		
Heterosexual	2,855	60%		
Queer	112	2%		
Questioning	136	3%		
Asexual	110	2%		
Pansexual	111	2%		
Other	60	1%		
Residency				
Non-resident	1,374	29%		
Nebraska (NE) resident	3,355	71%		
Member of US Armed Services	25	1%		

Additionally, participants were questioned about their characteristics as students (see Table 2a and Table 2b).

Table 2a: Descriptive Student Statistics				
	n	%/ave	min	max
Greek (fraternity/sorority)				
Greek	782	19%		
Non-Greek	3,290	81%		
Year in School				
1st (freshman)	1,507	32%		
2nd (sophomore)	1,055	22%		
3rd (junior)	966	21%		
4th (senior)	715	15%		
5 th or more	143	3%		
NA or graduate student	332	7%		
International Student				
International Student	80	2%		
Non-international Student	3,420	98%		
Athlete				
Athlete	407	11%		
Non-Athlete	3,370	89%		
GPA	3,569	3.49	0.00	4.00
Degree in Progress				
Associate degree	445	12%		
Bachelor's degree	2,917	77%		
Graduate degree	332	9%		
Student Enrollment				
Full-time student	3,493	92%		
Part-time student	215	6%		
Exclusively web-based	76	2%		

*= $p < .05$, **= $p < .01$ ***= $p < .001$

Table 2b: Descriptive Student Statistics				
	n	%/ave	min	max
Transfer Student				
2-year institution	211	48%		
4-year institution	229	52%		
Living situation				
On-campus housing	1,537	40%		
Fraternity/sorority housing	98	3%		
Off-campus w/o parents/family	1,467	38%		
Off-campus w/ parents/family	710	18%		
Other	41	1%		

The most commonly reported majors were Health Sciences/Veterinary Science (22%), Social Sciences (15%), and Business (14%), which is similar to 2020. About one in four students (23%) indicated that they were eligible to receive a Pell Grant. When asked if they graduated from a high school in Nebraska, the majority of students (63%, down from 74% in 2020) indicated that they had. Of these students (N=2,169), representation was highest from Douglas (31%, down from 39% in 2020), Lancaster (14%, up from 6% in 2020), and Sarpy (11%, down from 15% in 2020).

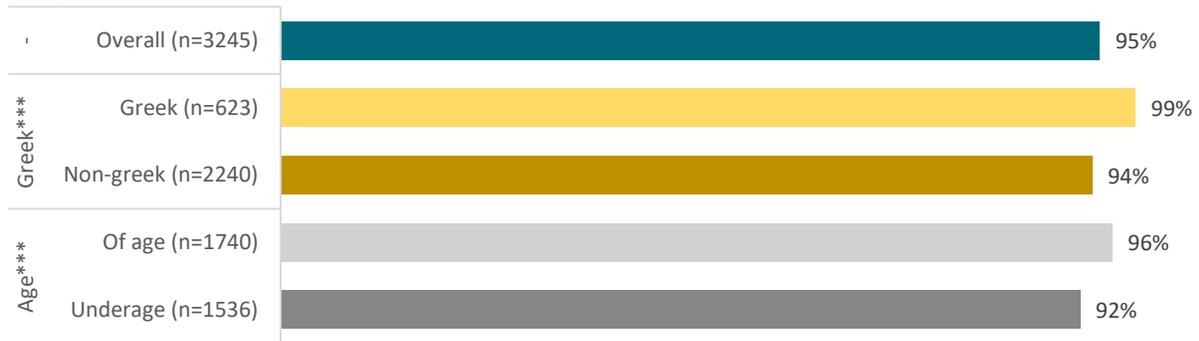
Alcohol Use and Related Behaviors

Consistent with Y1CBP, calculations were conducted to create measures for drinking behaviors (e.g., average drinks, drinks per week) prior to data analysis. All drinking behaviors were computed from the daily drinking diary in the NACHB survey. The diary asked students to report their typical drinking for the past month on a one-week calendar by recording the number of drinks and the number of hours drinking each day of the week. The standard definition for binge drinking is having five (5) or more drinks for men and four (4) or more drinks for women in a single setting. Abstainers were defined as students who reported never drinking or not drinking within the past year. The number of days drinking per month was computed by taking the number of days on which drinking was reported in the one-week diary and multiplying by 4.2. Average drinks per occasion were computed by dividing the total number of drinks reported for the week by the number of days on which drinking is indicated.

When asked about their personal behaviors regarding alcohol consumption, the mean age at which students indicated they first started drinking alcohol was 17.5 years old (the median age was 18, same as 2020). The average age that underage and Greek students reported first consuming alcohol was 17 years old compared to of-age and non-Greek students who said they were 18 years old (both $p < 0.001$). Almost three-quarters of students (70%, the same portion as in 2020, $n = 3,256$) indicated that they had ever consumed alcohol; among them, 95% (same as 2020) reported doing so in the past year. More of-age and Greek students reported consuming alcohol in the past year than their counterparts (Figure 1).

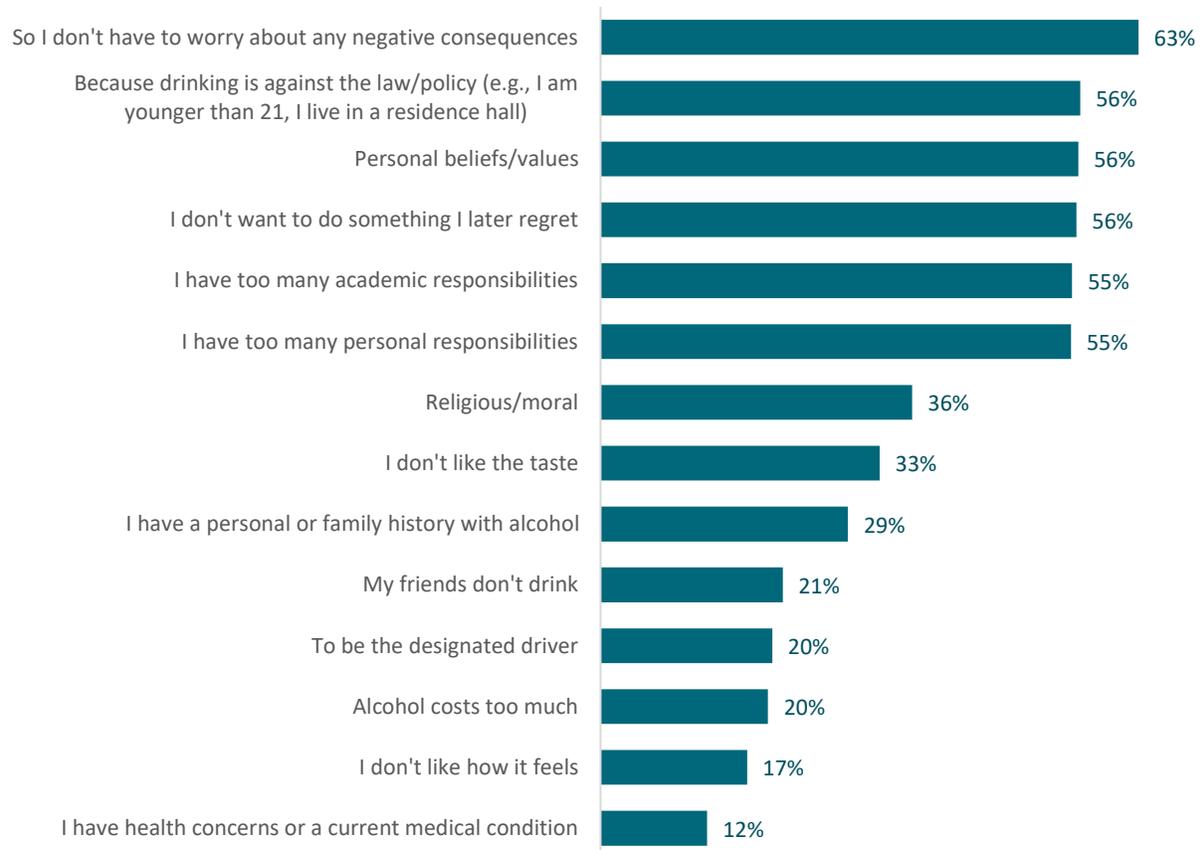
*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 1: Group differences in alcohol consumption in the past year



Students who reported having never consumed alcohol (30% of all students, as in 2020) were asked to identify reasons why they choose not to drink alcohol (Figure 2). The most common reasons were so that they didn't have to worry about any negative consequences (63%, up from 56%), because drinking was against the law/policy (56%, up from 50%), personal beliefs/values (56%, up from 54%), not wanting to do something that they will later regret (56%, up from 43%), and having too many academic or personal responsibilities (both 55%, up from 42%).

Figure 2: Reasons for choosing not to drink alcohol



*= $p < .05$, **= $p < .01$ ***= $p < .001$

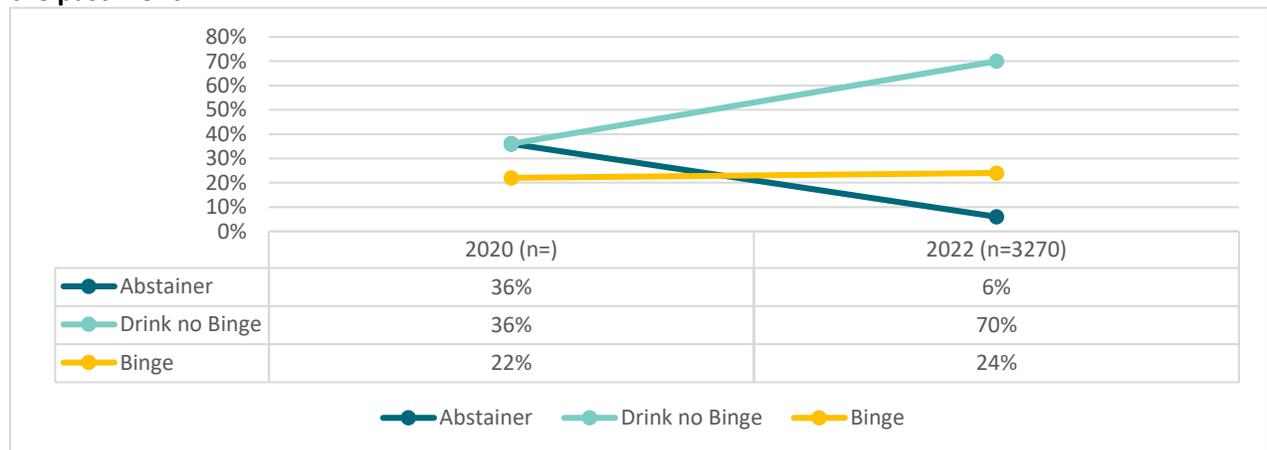
Table 3 presents significant demographic group differences in reasons for choosing not to drink. There were minimal differences by sex, Greek system students, and athletes, but many differences by age: 10 of the 15 reasons were significantly different between younger (underage) and older (of-age) students.

Table 3: Group differences in reasons for choosing not to drink alcohol

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
It's hard to access alcohol							12%	2%	***			
I have health concerns or a current medical condition							11%	19%	*			
I don't like how it feels							16%	23%	*			
Alcohol costs too much	18%	23%	*									
My friends don't drink										23%	13%	**
I have a personal or family history with alcohol							28%	36%	*			
I don't like the taste				31%	42%	*	31%	42%	**			
Religious/moral							34%	50%	***			
I have too many personal responsibilities							56%	47%	*	55%	65%	*
I have too many academic responsibilities	6%	5%	***	54%	64%	*	57%	43%	***			
I don't want to do something I later regret							58%	38%	***			
Personal beliefs/values										56%	65%	*
Because drinking is against the law/policy (e.g., I am younger than 21, I live in a residence hall)							64%	4%	***			

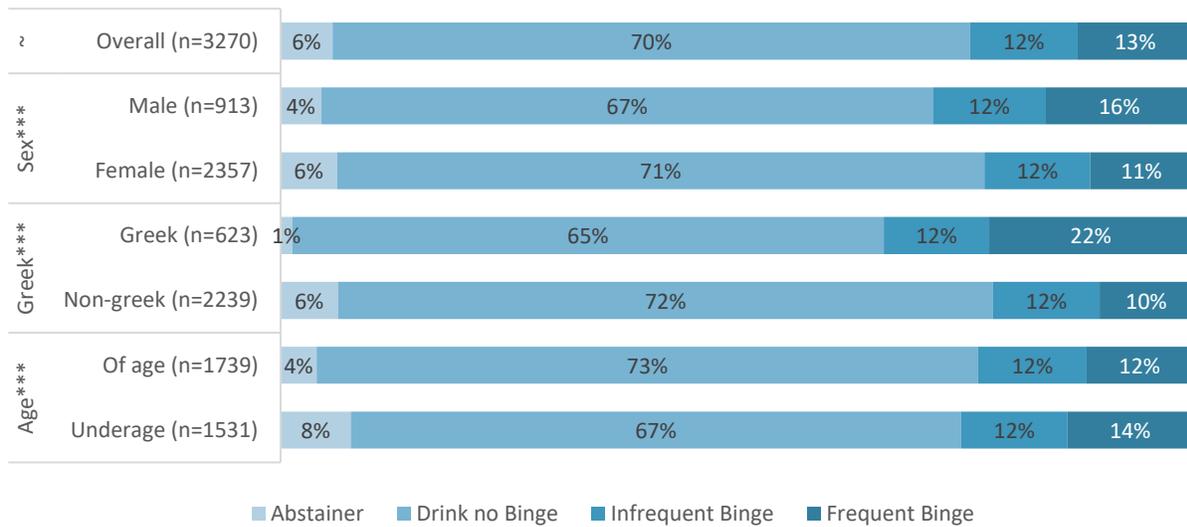
Overall, 6% of students (down from 36% in 2020) abstained from drinking, with 25% (comparable to 21% in 2020) reporting binge-drinking behavior at some point in the past month (Figure 3). Women, non-Greek, and underage students were more likely to abstain from drinking. On the other hand, men and Greek students were more likely to engage in binge-drinking behavior, as presented in Figure 4.

Figure 3: Percentage of total respondents who drank in the past year, or who abstained or binged in the past month



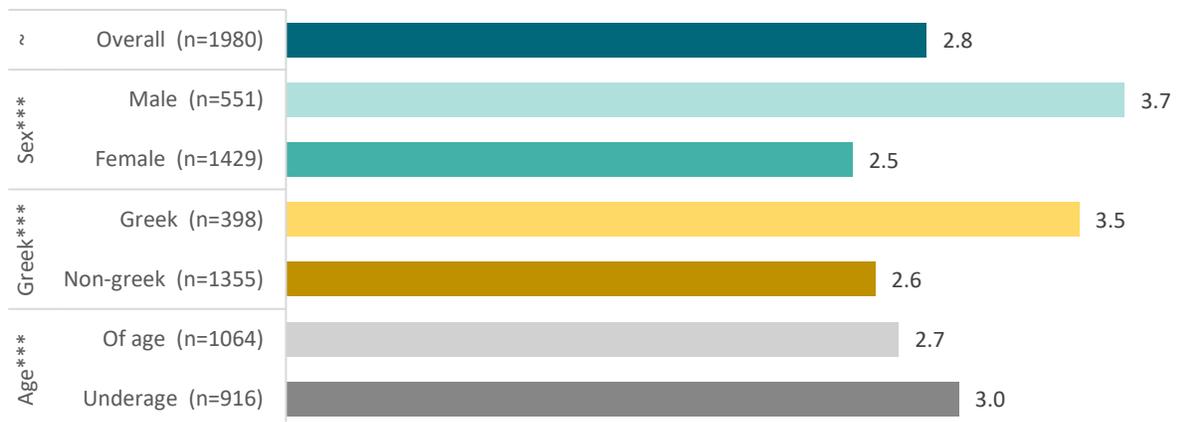
*= $p < .05$, **= $p < .01$, ***= $p < .001$

Figure 4: Drinking categories



Overall, students (n=1,980 drinkers) reported drinking about 2.8 drinks per occasion (similar to 2.7 drinks in 2020). Men, Greek students, and underage students reported significantly more drinks than their counterparts, as shown in Figure 5. Overall, students reported drinking about 6.5 drinks per week (similar to 6.7 drinks in 2020). Greek students reported drinking more drinks per week than their counterparts (3.5 vs. 2.6).

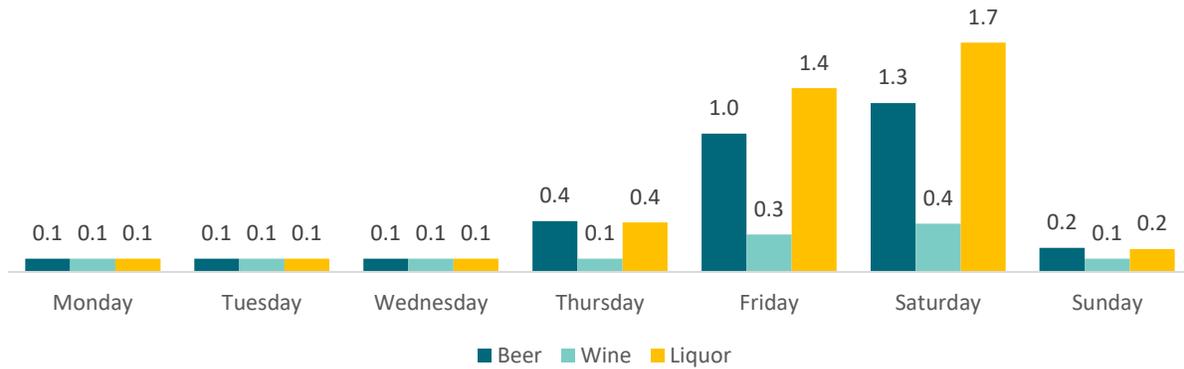
Figure 5: Average drinks per occasion



Students who had consumed alcohol in the past year were asked to describe a typical drinking week by indicating the number of standard drinks they had each day and the number of hours they drank on each day. Figure 6 displays the number of alcoholic drinks consumed in a day by students who chose to consume alcohol. Students reported consuming more drinks on Friday and Saturday. Accordingly, the days that students reported drinking for the longest amount of time were also Friday and Saturday. During the week, students who drank typically did so for less than half an hour, whereas on Friday and Saturday they typically drank for two hours. On average, students reported drinking and 1.2 days a week.

*= p<.05, **= p<.01 ***= p<.001

Figure 6: Alcoholic drinks consumed each day (n=2,061-2,333)



The overall number of drinks had each day varied based on sex and Greek status. Each day of the week, male students were more likely than female students to drink, as much as twice as likely Monday-Wednesday (Figure 7). Greek students were more likely than non-Greek students Thursday-Saturday (Figure 8). However, non-Greek students reported drinking twice as much as Greek on Sundays and Mondays.

Figure 7: Number of drinks per day, by sex

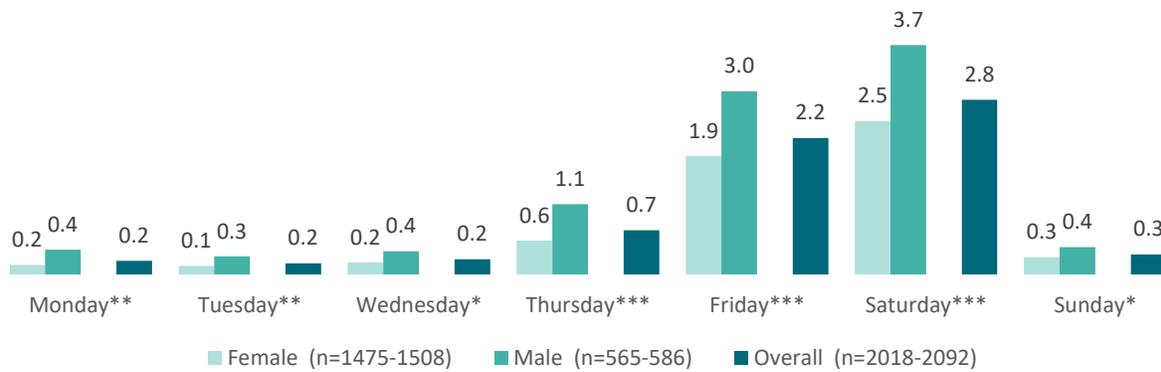
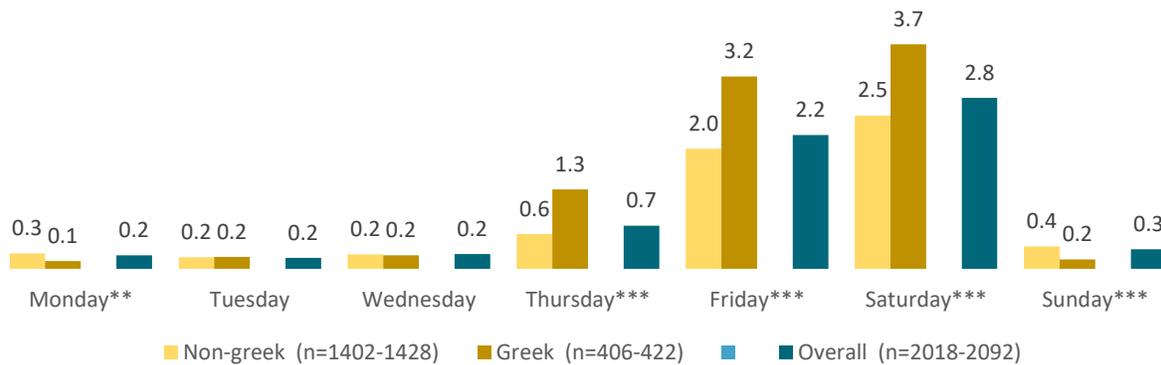


Figure 8: Number of drinks per day, by Greek status



Based on the questions about weekly drinking, monthly averages were calculated. Students reported drinking an average of 5.0 times per month (down from 7.7 times in 2020). Greek, older students, and non-athletes drank more times per month than their counterparts, as presented in Figure 9.

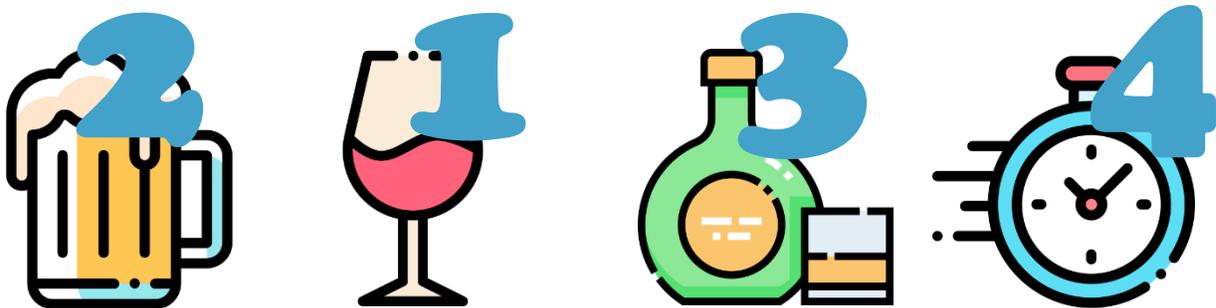
*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 9: Times drinking per month



Students were asked to think of an occasion during the past month when they drank the most and indicate the number and type of alcoholic drinks they consumed in addition to the number of hours they drank that day. Figure 10 displays the average number of beer, wine, and liquor consumed in addition to the average number of hours students spent drinking. The average number of drinks consumed was 2.1 for beer, 0.7 for wine, and 3.2 for liquor with an average of 3.5 hours spent drinking. Compared to women, men averaged more beer (1 vs. 4 drinks, $p < 0.001$) and spent more time drinking (3 vs. 4 hours, $p < 0.05$). However, women averaged more wine drinks compared to men (0 vs. 1 drink, $p < 0.001$). Greek students consumed more liquor (4 vs. 3 drinks, $p < 0.001$) and spent more time drinking (4 vs. 3 hours, $p < 0.001$) than non-Greek students. Of-age students spent more time drinking compared to their underage counterparts (3 vs. 4 hours, $p < 0.05$) and athletes consumed more beer than non-athletes (3 vs. 2 drinks, $p < 0.01$).

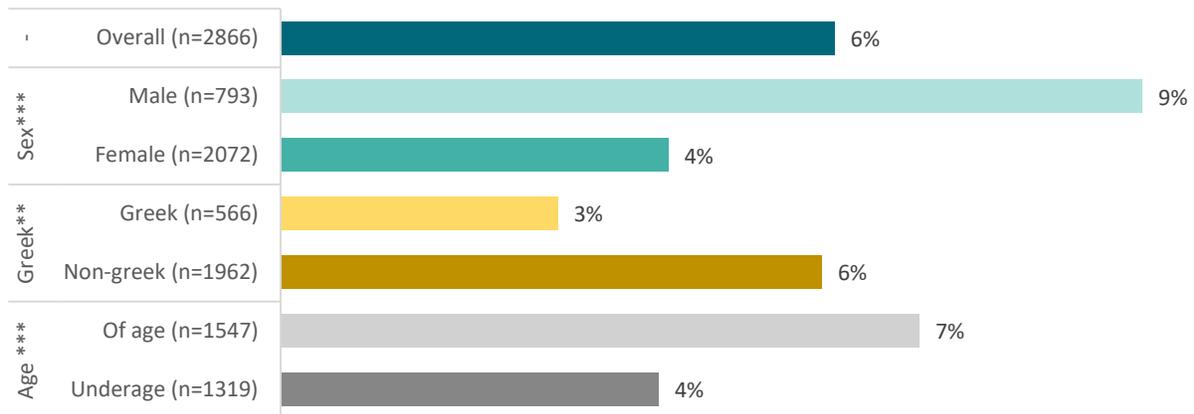
Figure 10: Most drinks consumed and time spent drinking in one occasion (n=2,380-2,569)



Overall, approximately 6% of students (n=2,866 drinkers, comparable to 4% in 2020) reported drinking and driving in the past 30 days (Figure 11). More men, non-Greek, and of-age students reported drinking and driving in the last month. When asked how days they drove a vehicle shortly after having three or more drinks, the average was 0.12 days (with a range of 0-15). Males reported this behavior at a frequency three times higher than for females (0.24 vs. 0.08, $p < 0.001$), and non-athletes were twice as likely to do it than athletes (0.12 vs. 0.06, $p < 0.05$). Meanwhile, 7% of all students (same as 2020) reported riding with a drunk driver in the past 30 days. Older students were twice as likely to ride with a drunk driver than younger students (10% vs. 5%, $p < 0.001$).

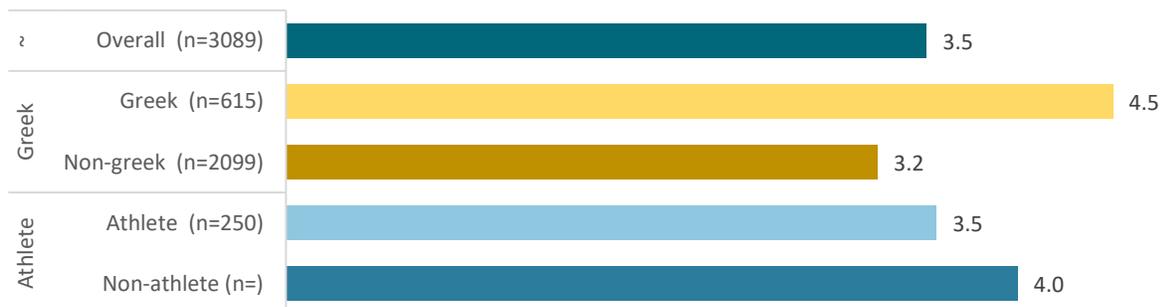
*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 11: Drinking and driving



The Rutgers Alcohol Problem Index (RAPI) was developed as a 23-item self-administered screening tool for assessing drinking-related harms in students; 22 drinking-related problems were adapted into the NACHB survey. Students (n=3,089 drinkers) averaged 3.5 reported problems/harms on the RAPI (down from 4.1 in 2020). Greek members reported having experienced more problems/harms while they were drinking or because of their drinking, as did non-athletes, as presented in Figure 12.

Figure 12: Rutgers Alcohol Problem Index (RAPI) – the number of problems experienced



Meanwhile, 31% (down slightly from 36% in 2020) of drinkers reported five (5) or more problems, which is considered an important cut-off for negative drinking outcomes. More Greek students reported having experienced 5 or more problems/harms than non-Greek students, as shown in Figure 13.

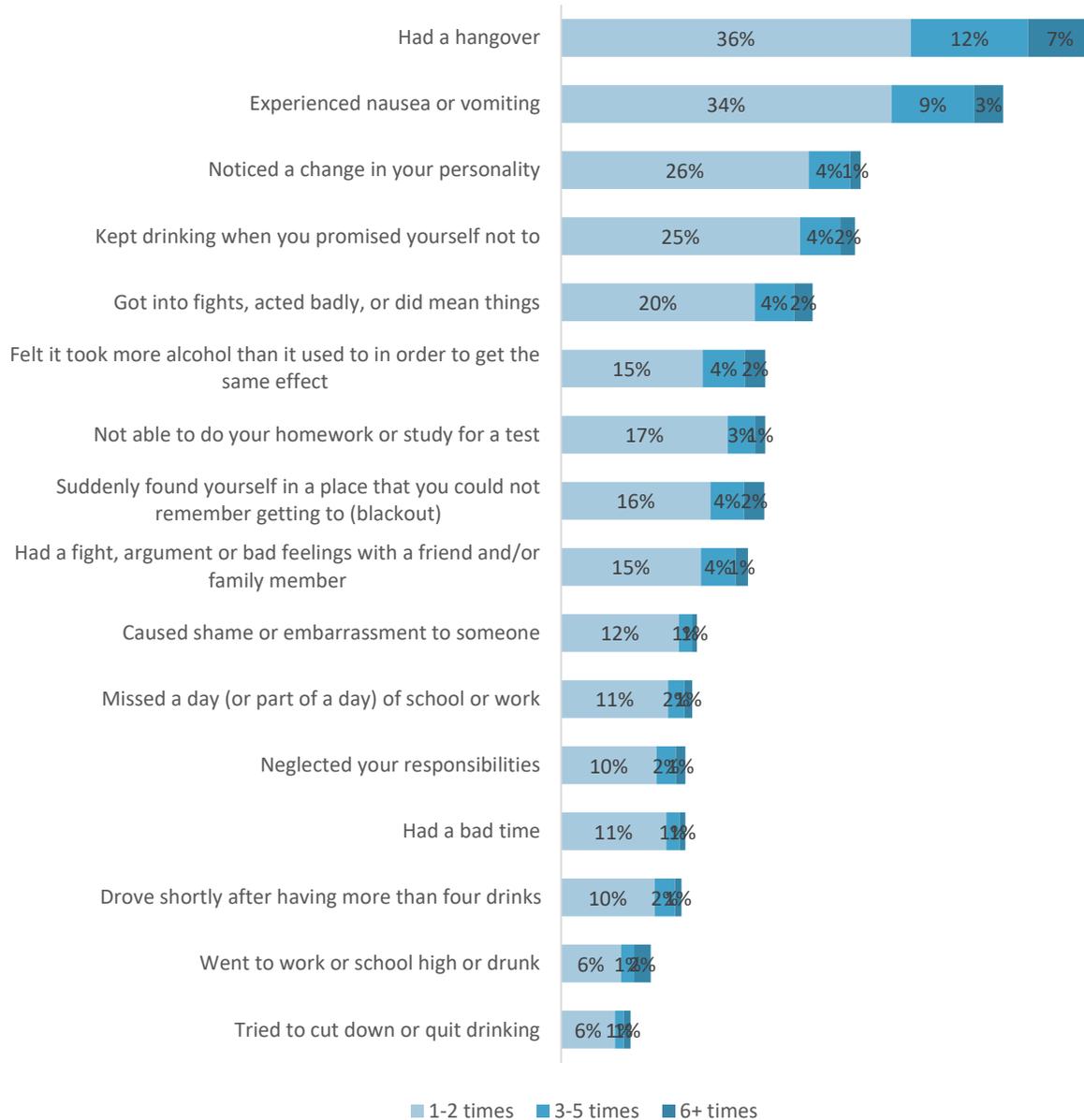
Figure 13: RAPI - Rutgers Alcohol Problem Index (RAPI) – the proportion of five or more problems



Figure 13 shows how they often experienced those problems/harms while they were drinking or because of their drinking in the past six months. Overall, 55% of students (comparable to 56% in 2020) reported having had a hangover, and 46% (same as 2020) experienced nausea or vomiting.

*= $p < .05$, **= $p < .01$ ***= $p < .001$

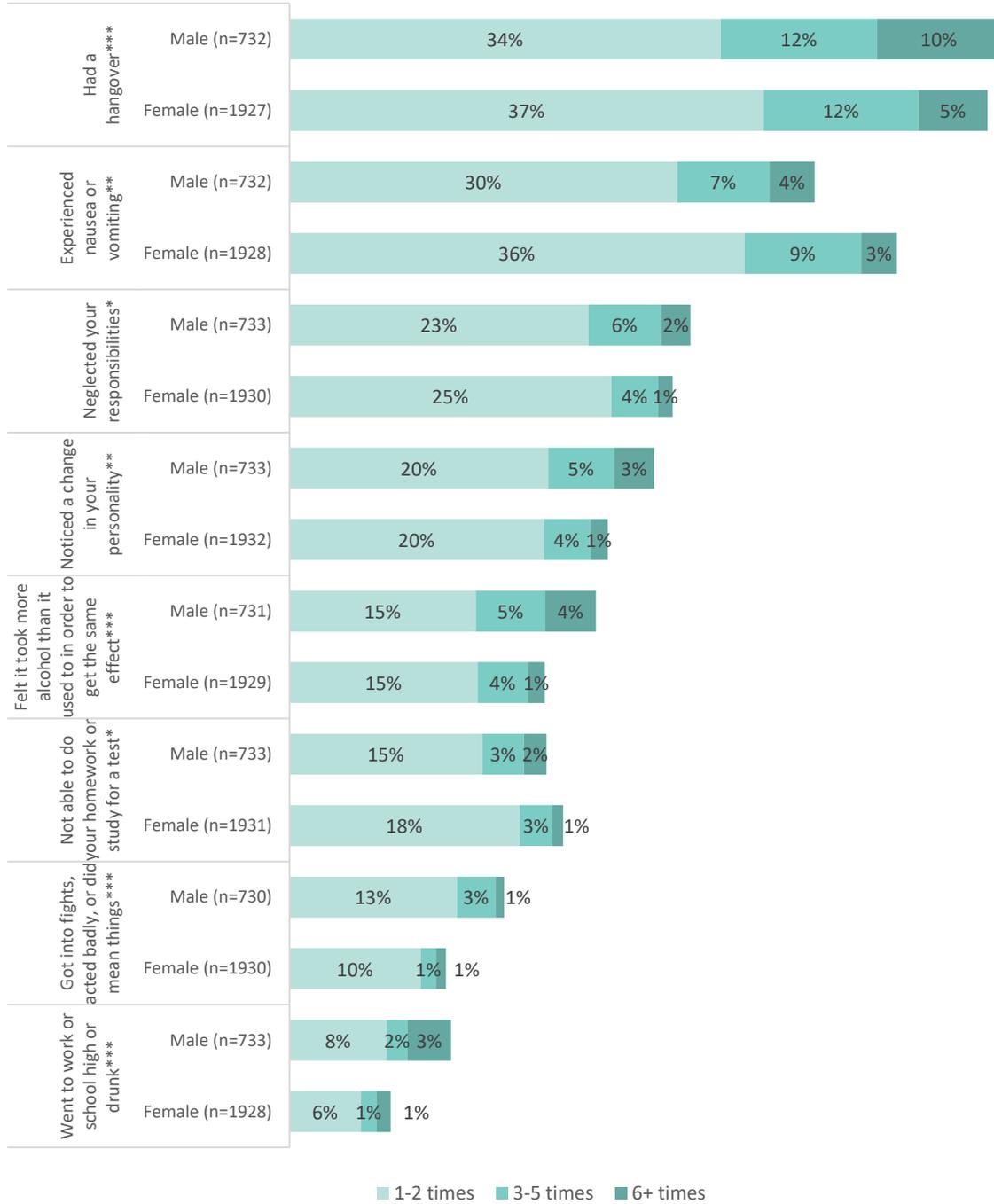
Figure 14: Harms/problems experienced during or as a result of drinking (n=2,658-2,665)



There were significant differences between some groups in experiencing/having individual problem/harm items. Eight of the 16 items were significantly different between men and women (Figure 14) and nine the items were significantly different between Greek and non-Greek students (Figure 15). In addition to these groups, there were also significant differences based on age for two harms: building up a tolerance and had a bad time. One in four underage students (24%) reported feeling like it took more alcohol than it used to get the same effect, compared to 19% of older students, and younger students reported experiencing it more frequently (3% saying 6+ times, vs. 1% of older students, $p < 0.001$). Younger students were more also more likely to say they had a bad time (34% vs. 29%, $p < 0.05$). Athletes were less likely than non-athletes to say that they tried to cut down or quit drinking (16% vs. 22%, $p < 0.05$).

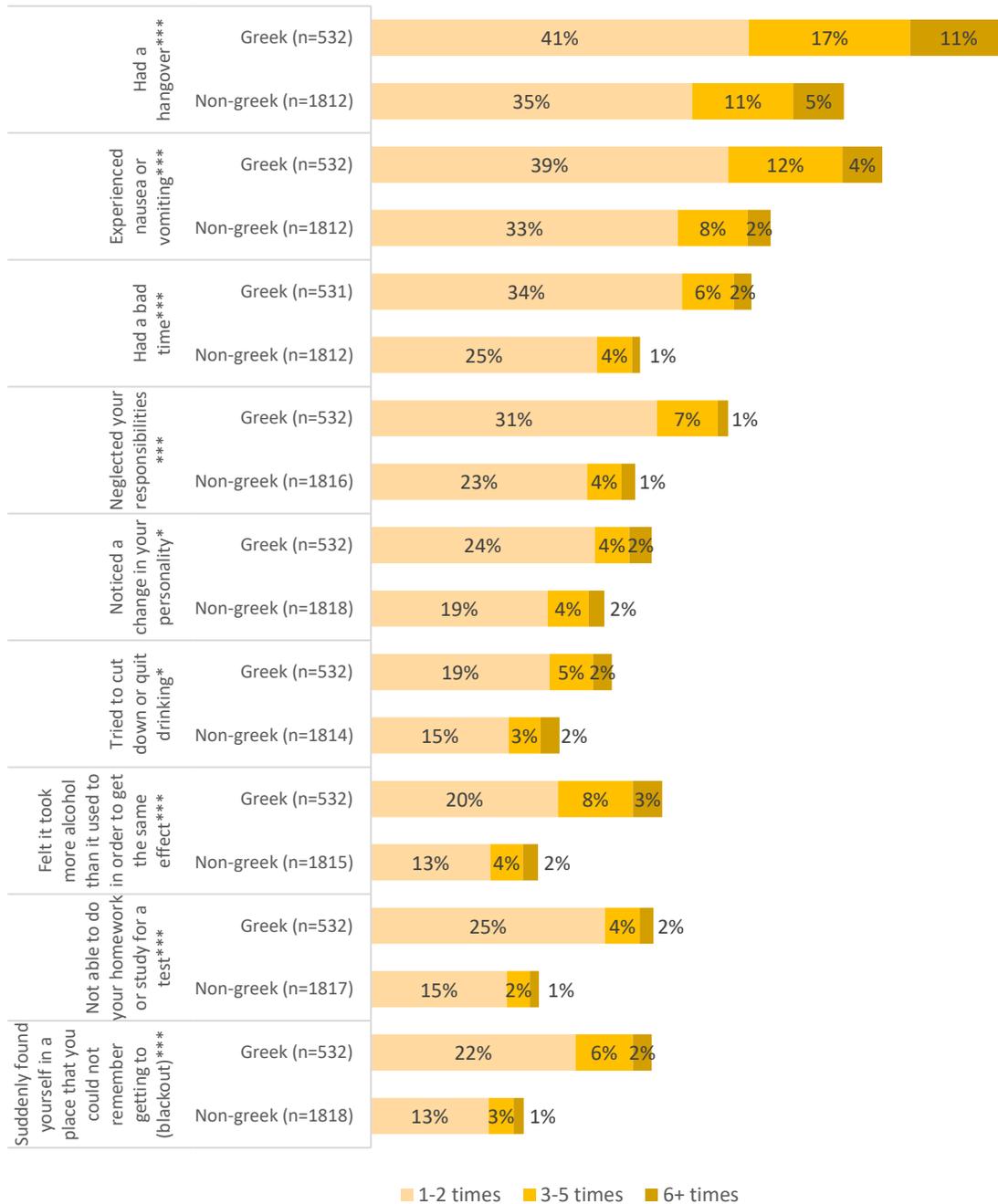
*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 14: Group differences in harms/problems experienced, by sex



*= $p < .05$, **= $p < .01$ ***= $p < .001$

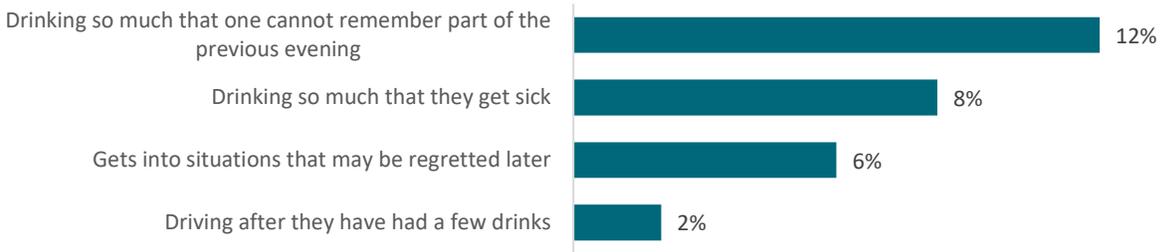
Figure 15: Group differences in harms/problems experienced, by Greek status



Students were asked if they approved of four drinking behaviors (refer to Figure 16 for the question items). Twelve percent of students (slightly more than the 10% in 2020) approved of students drinking so much that one couldn't remember part of the previous evening. The approval levels for the remaining questions was the same as it was in the 2020 NACHB, with the exception of getting into situations they regret, which was 7% in 2020.

*= $p < .05$, **= $p < .01$, ***= $p < .001$

Figure 16: Approval of drinking behaviors (n=4,002-4011)



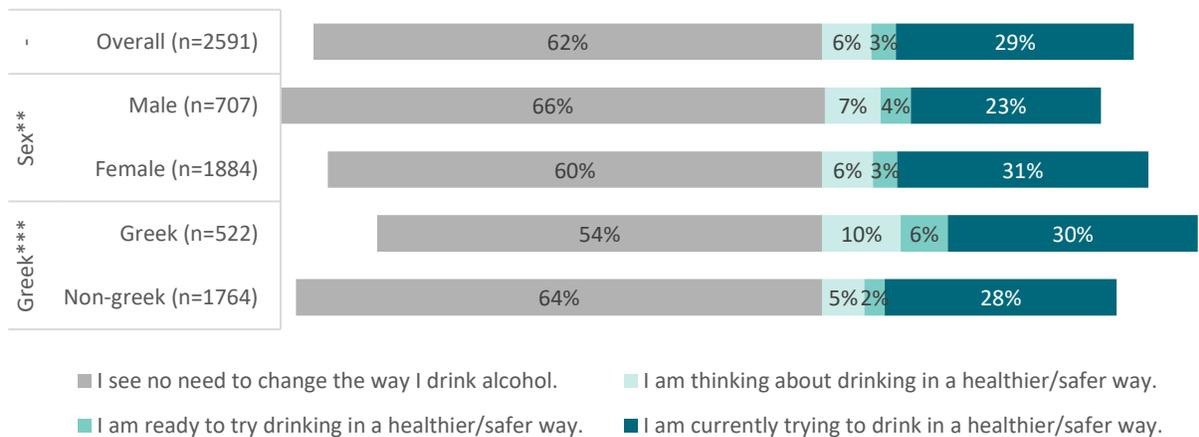
Significant differences were found by sex and age for all four questions, with men and older students reporting more approval (Table 4). Greek students approved more of drinking to sickness than non-Greeks, and athletes were more approving towards getting into regretful situations.

Table 4: Group differences in approval of drinking behaviors

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
Drinking so much that they get sick	6%	14%	***	12%	16%	**	7%	10%	***			
Drinking so much that one cannot remember part of the previous evening	10%	18%	***				11%	14%	**			
Gets into situations that may be regretted later	4%	12%	***				5%	8%	**	6%	9%	*
Driving after they have had a few drinks	1%	3%	***				1%	3%	***			

The majority of student drinkers did not see a need to change the way they drank alcohol, while nearly three in ten (29%) were trying to drink in a healthier/safer way (Figure 17). Women and were more likely to intend to change their drinking behaviors.

Figure 17: Intentions to change the way you drink alcohol

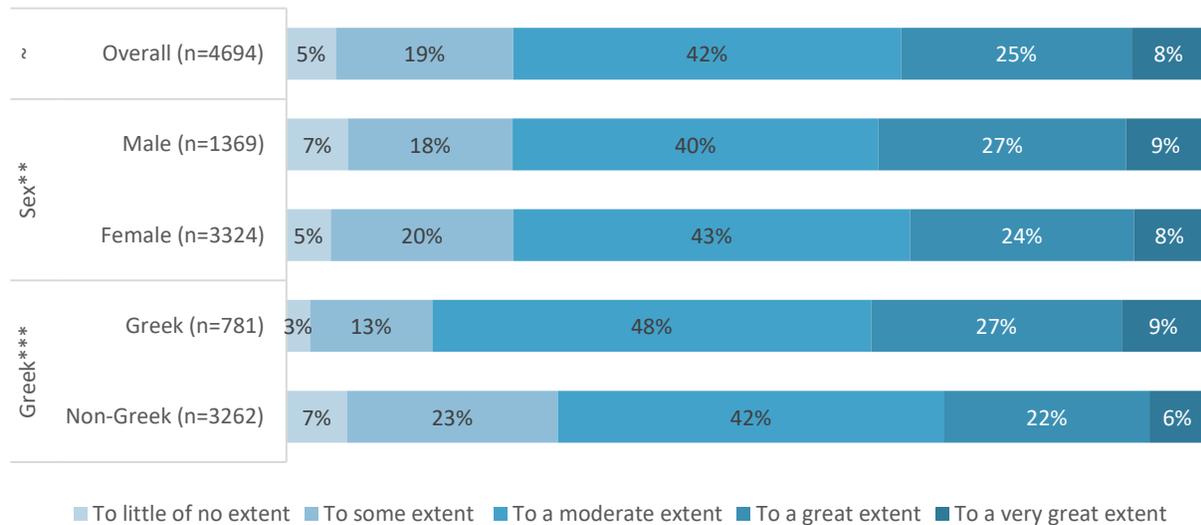


*= p<.05, **= p<.01 ***= p<.001

Over half of all students (54%, down from 58% in 2020) said that their campus provided information about alcohol and drug prevention. More than three-quarters of students (78%, down from 87%) believed that their campus was concerned about the prevention of alcohol and drug use. When asked if they believe their campus alcohol policies were consistently enforced, 62% (down from 73% in 2020) of students reported believing so.

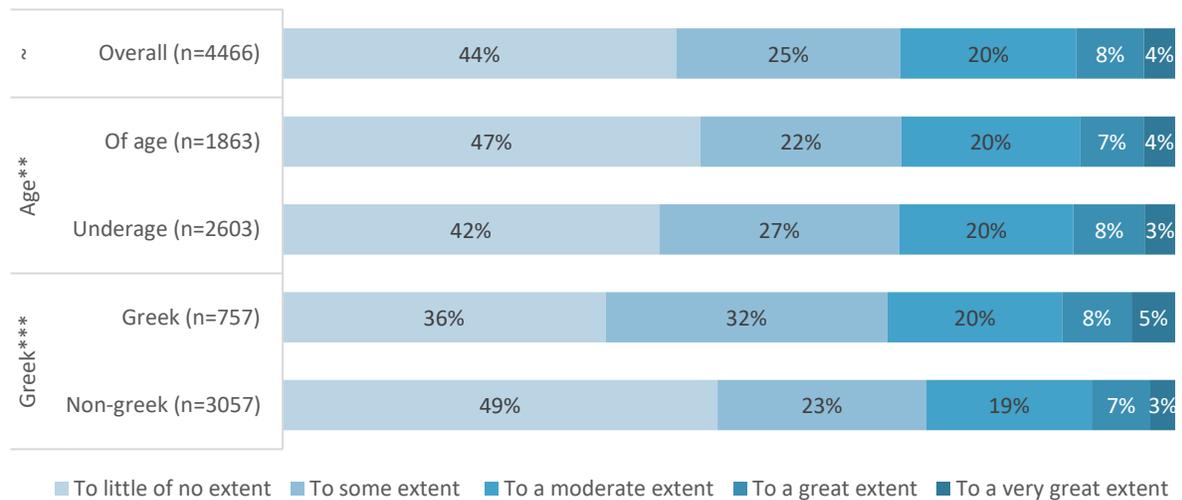
When asked to mark the degree to which they believed the alcohol policy was enforced on campus, 33% of students (down from about 40% in 2020) marked “to a great extent” or “to a very great extent”. Males and Greek students reported a stronger extent than their counterparts, as presented in Figure 18.

Figure 18: The extent to which alcohol policy was enforced on campus



When asked about the degree to which they believed the alcohol policy was enforced off campus, overall 12% (down slightly from 15% in 2020) marked “to a great extent” or “to a very great extent”, while 44% (similar to 40% in 2020) reported “to little or no extent”, which contrasted against on-campus rates (Figure 19). Greek and underage students reported a stronger extent relative to their counterparts.

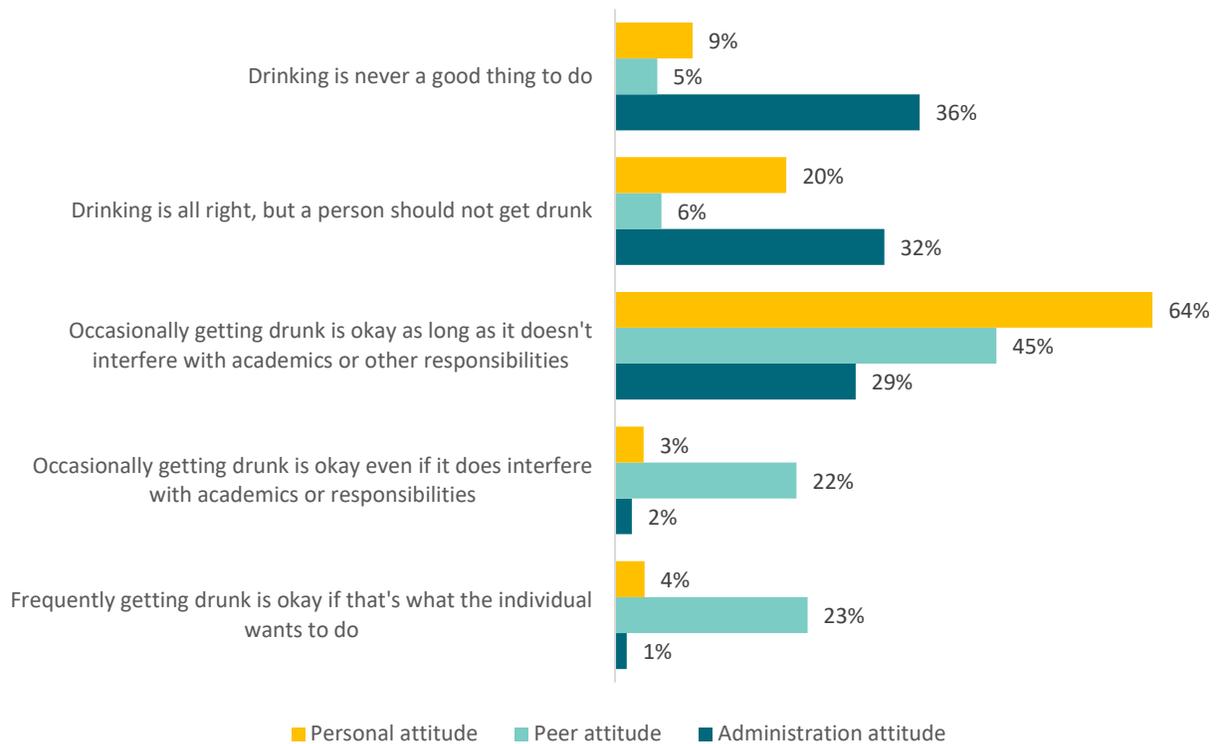
Figure 19: The extent to which alcohol policy was enforced off campus



*= p<.05, **= p<.01 ***= p<.001

Students were asked to choose a statement from a list of options that best represented their attitude about drinking alcoholic beverages, their peers' attitude, and campus administration's attitude (Figure 20). In the most common answers for self and peers, nearly two-thirds of students (64%, up from 61% in 2020) marked the statement of "Occasionally getting drunk is okay as long as it doesn't interfere with academics or other responsibilities" as their own attitude and 45% (similar to 47% in 2020) as their peers' attitude. "Drinking is never a good thing to do" received the highest mark as campus administration's attitude (36%, down from 42% in 2020), as shown in Figure 20. Students considered their peers to be more permissive about alcohol consumption while considering campus administration to be more restrictive.

Figure 20: Alcohol consumption attitudes (n=4,077-4,078)



As far as personal attitudes about alcohol consumption was concerned, female, Greek, and older students were more likely than their counterparts to mark relatively more permissive statements, as presented in Figure 21. When it came to perceptions of peers' attitudes, Greek and older students thought their peers were more permissive than non-Greek and younger students (Figure 22). Differences by sex and athlete status were driven by a larger proportion of females and athletes perceiving their peers to have the most permissive attitudes. Finally, administrator perceptions (Figure 23) were perceived to be more permissive among male, Greek, and of age students.

*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 21: Personal attitude about alcohol consumption

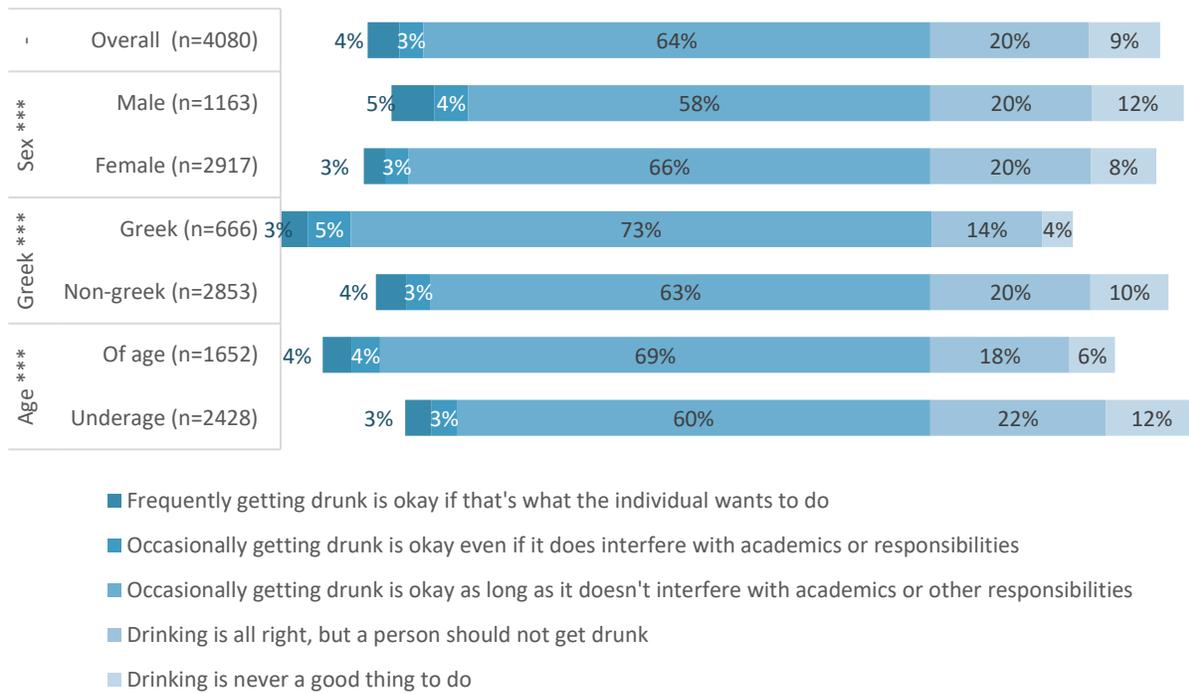
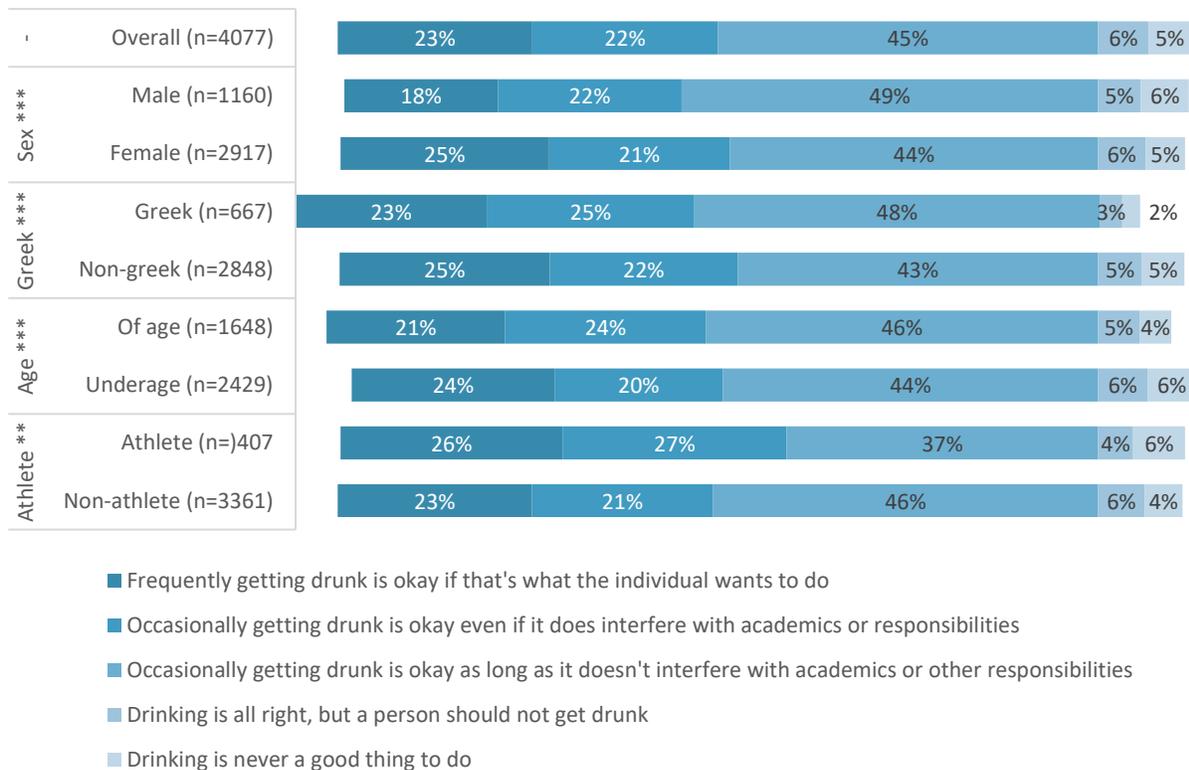
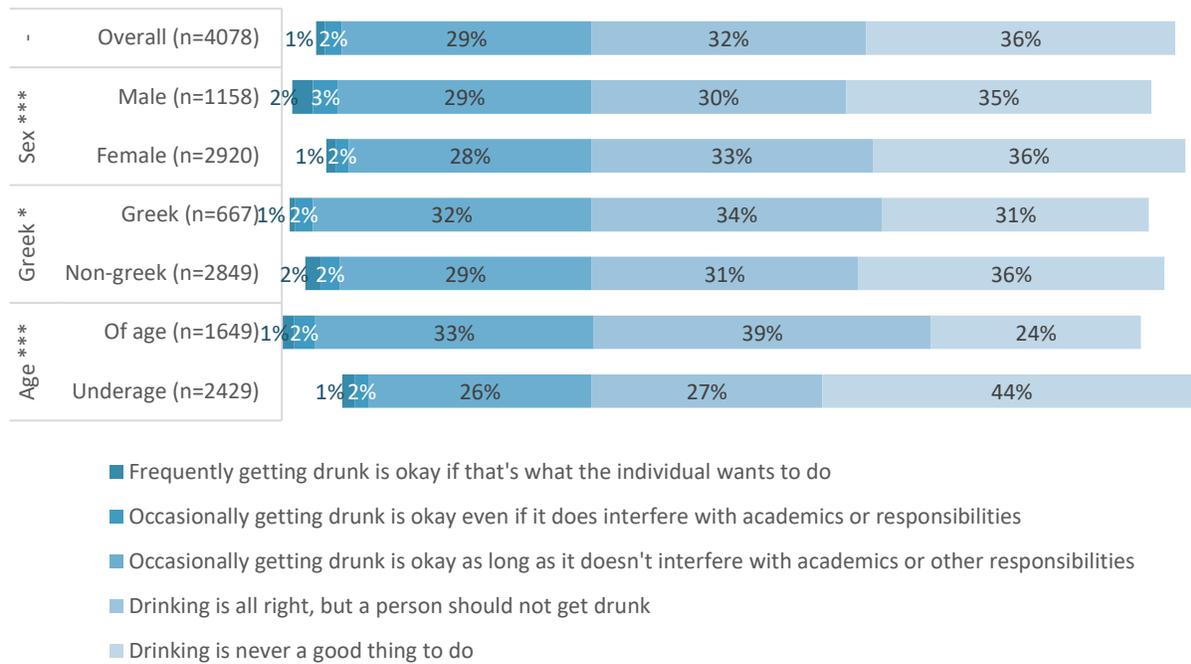


Figure 22: Perceived peer attitude about alcohol consumption



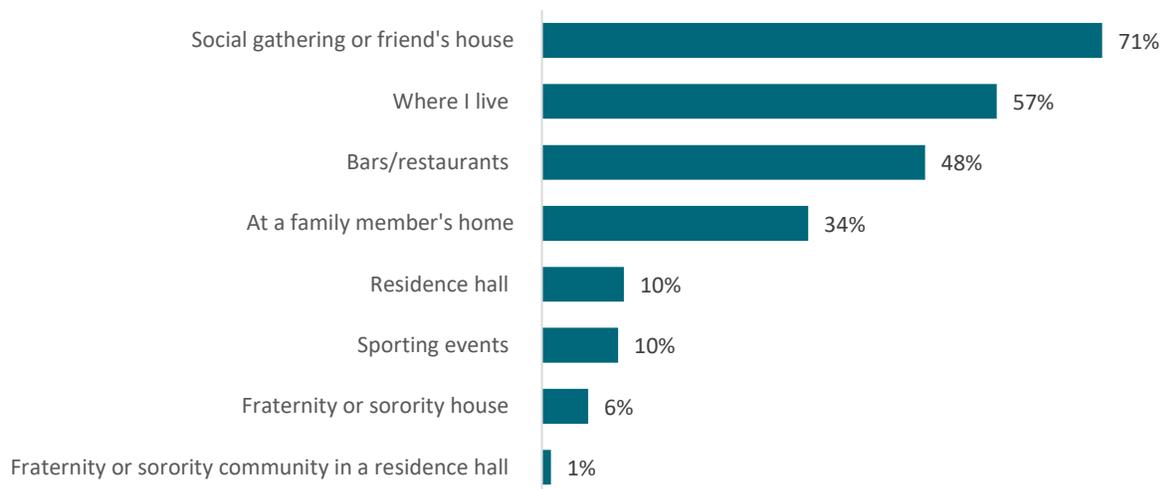
*= p<.05, **= p<.01 ***= p<.001

Figure 23: Perceived administration attitude about alcohol consumption



Students were asked to report where they typically consume alcohol (Figure 24). A social gathering or friend’s house was reported to be the most common place students consumed alcohol (71%, same as 2020), followed by where they live (57%, down slightly from 61% in 2020), and bars/restaurants (48%, same as 2020). Table 5 shows the group differences in where alcohol was consumed. Greek status and age were associated with the greatest number of differences.

Figure 24: Location of alcohol consumption (n=2,847)



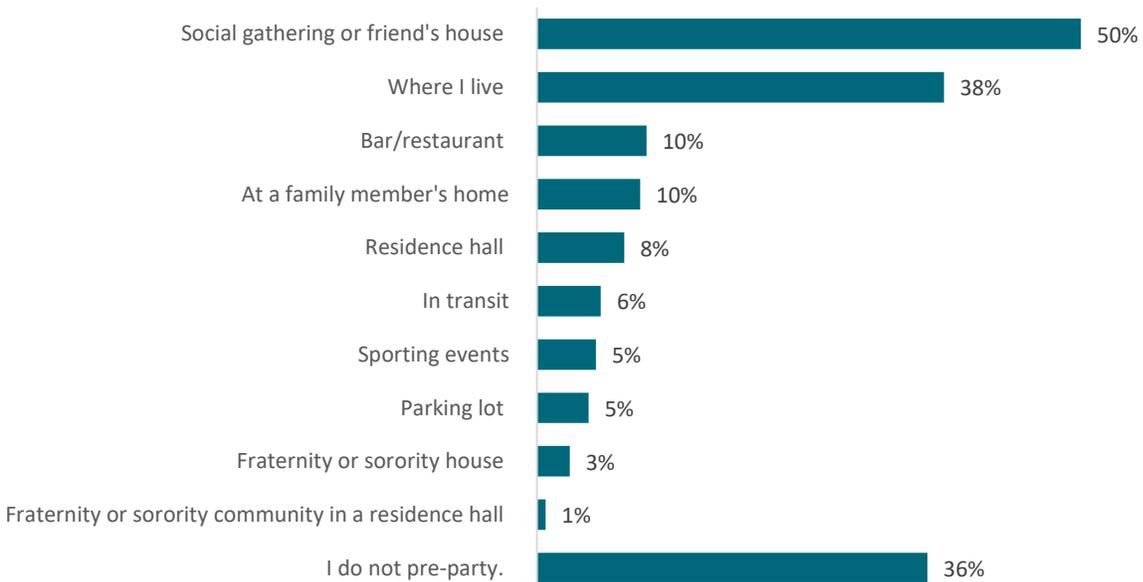
*= $p < .05$, **= $p < .01$ ***= $p < .001$

Table 5: Group differences in location of alcohol consumption

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
Social gathering or friend's house				68%	82%	***	73%	69%	***			
Where I live				59%	50%	***	44%	69%	***	58%	48%	**
Bars/restaurants				46%	59%	***	17%	75%	**			
At a family member's home	36%	28%	***	34%	24%	***						
Residence hall	10%	12%	*	9%	20%	***	19%	3%	***			
Sporting events	9%	12%	*	7%	20%	***	6%	12%	***			
Fraternity or sorority house				4%	15%	***	10%	3%	***			
Fraternity or sorority community in a residence hall				1%	3%	**	2%	0%	***			

Additionally, they were asked to indicate where they typically pre-party/pre-game. Over a third of students said they did not pre-game (Figure 25). The most common locations for pre-party/pre-game turned out to be at social gatherings or friends' houses (50%, same as 2020) followed by where they live (38% vs. 40% in 2020). The least common locations were fraternity or sorority houses (3% vs. 4% in 2020), and fraternity or sorority communities in residence halls (1% vs. 2% in 2020).

Figure 25: Location of pre-party/pre-game (n=2,832)



There were group differences in where students drank before an event (Table 6). The greatest differences were based on Greek status and age, with eight of the 11 locations showing significantly different populations. Sex was associated with two differences in pre-game location, and athletic status associated with only one: athletes were more likely to pre-game in residence halls than non-athletes.

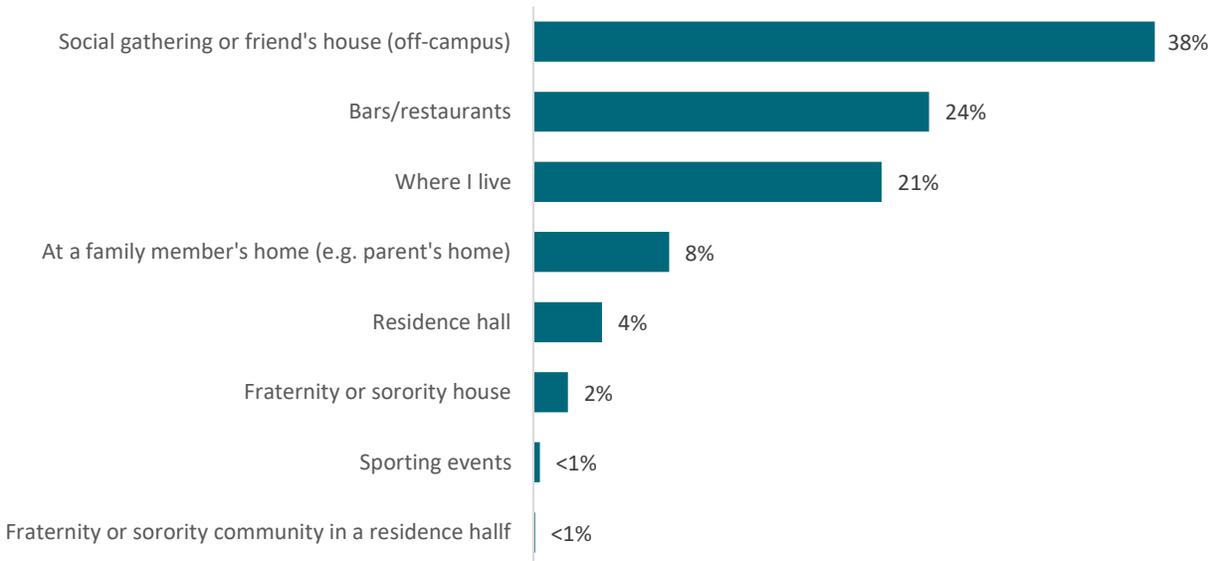
*= $p < .05$, **= $p < .01$, ***= $p < .001$

Table 6: Group differences in pre-game locations

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
Social gathering or friend's house	52%	44%	***	45%	71%	***	47%	53%	***			
Where I live				36%	43%	**	29%	45%	***			
Bar/restaurant				9%	13%	*	3%	16%	***			
Residence hall				6%	18%	***	16%	2%	***	8%	12%	*
In transit	5%	7%	*	5%	8%	*	7%	5%	*			
Sporting events				4%	10%	***	4%	6%	*			
Fraternity or sorority house				2%	9%	***	5%	2%	***			
Fraternity or sorority community in a residence hall				1%	2%	**	2%	0%	***			

Students were asked to think back to the last time they consumed the most alcohol and indicate where that took place (Figure 26). A social gathering at a friend's house was reported to be the most common place students last consumed the most alcohol (38% vs. 43% in 2020), followed by bars/restaurants (24% vs. 22% in 2020), and where students live (21% vs. 26% in 2020).

Figure 26: Locations of greatest alcohol consumption



Students who had consumed alcohol in the past year were asked what contributed to their decision to drink alcohol (Figure 27). Overall, the most common factors reported were to have fun with friends (87% vs. 84% in 2020), to relax (41% vs. 46% in 2020), and to get drunk (30% vs. 28% in 2020). "To get drunk" replaced liking the taste of alcohol (29%) as the third most common factor in 2020. Table 7 shows the significant group differences, which are greatest by sex, where males were most likely to choose 12 of the 14 factors listed.

*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 27: Factors contributing to alcohol consumption (n=2,793)

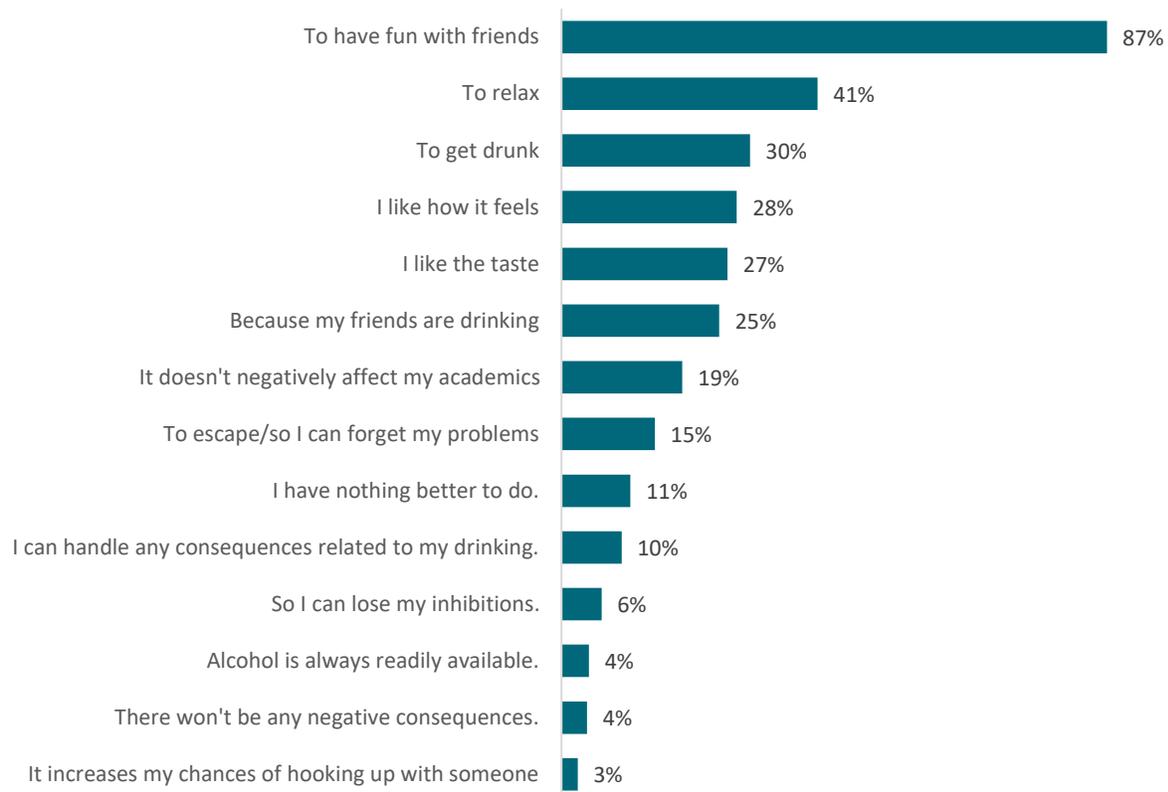


Table 7: Group differences in factors contributing to alcohol consumption

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
To have fun with friends				86%	94%	***						
To relax	36%	53%	***	43%	33%	***	38%	43%	**	42%	34%	**
To get drunk	28%	35%	***	30%	35%	*	33%	28%	**			
I like how it feels	26%	34%	***				31%	26%	**			
I like the taste	24%	32%	***	27%	22%	*	22%	30%	***			
Because my friends are drinking	24%	29%	**	24%	29%	*						
It doesn't negatively affect my academics	18%	23%	**				23%	16%	***			
To escape/so I can forget my problems	14%	17%	*							16%	9%	**
I have nothing better to do	9%	17%	***				13%	9%	***			
I can handle any consequences related to my drinking	9%	12%	**									
Alcohol is always readily available										5%	1%	***
There won't be any negative consequences	3%	6%	***	5%	3%	*						
It increases my chances of hooking up with someone	2%	5%	***	2%	4%	*						

*= $p < .05$, **= $p < .01$ ***= $p < .001$

In contrast, students were asked what factors contribute to their decision to drink less or to not drink alcohol at all (Figure 28). Having academic obligations the following day was the most common factor (60% vs. 62% in 2020), followed by not being in the mood (58% vs. 60% in 2020) and the high cost of drinks/alcohol (57% vs. 58% in 2020). Parents finding out (4% vs. 6% in 2020) and being in recovery from alcohol or other drug addiction (2% vs. 1% in 2020) were the least commonly selected factors for drinking less or not drinking alcohol.

Figure 28: Factors contributing to drinking less or not drinking alcohol (n=2,785)

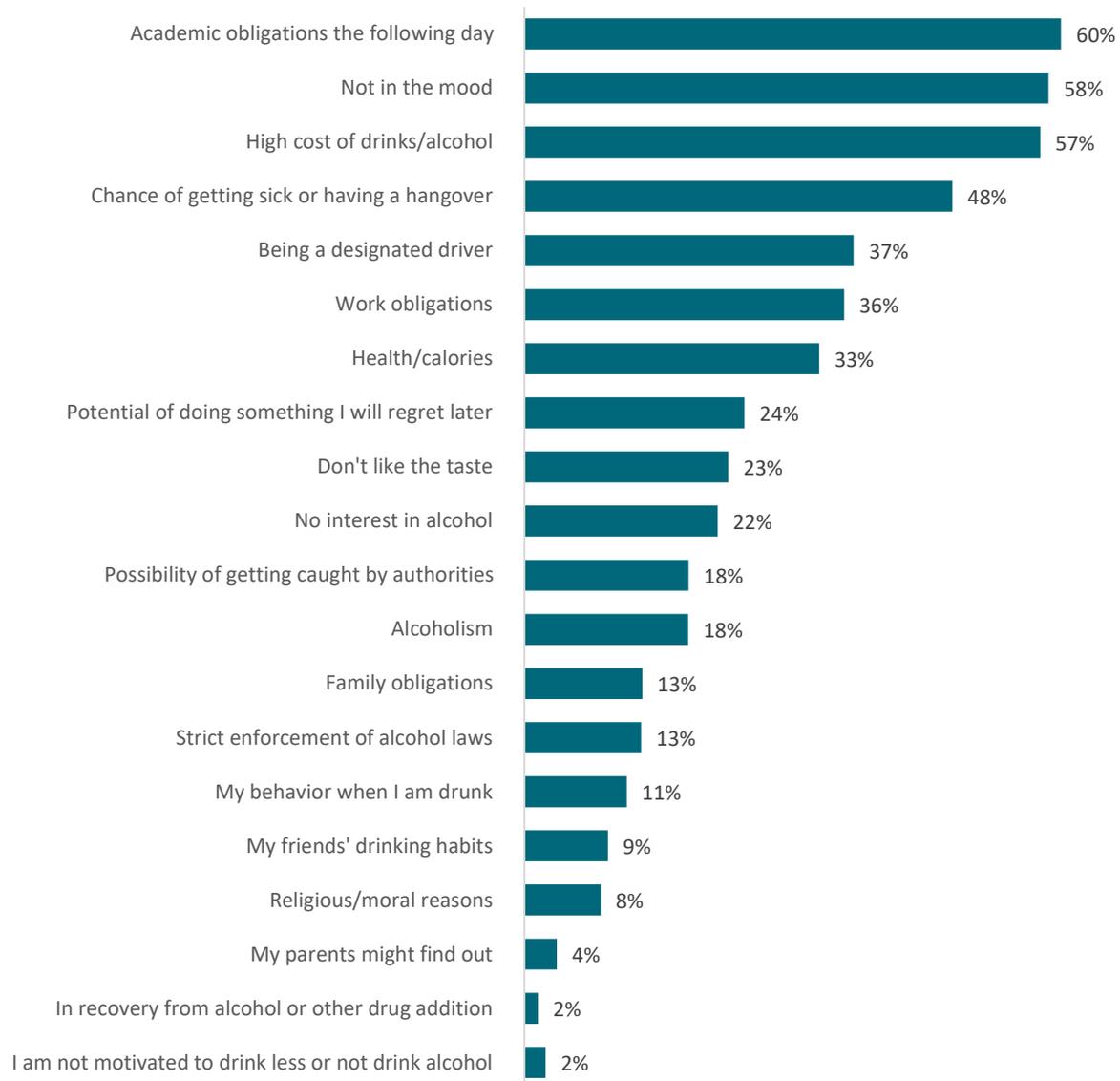


Table 8 shows the group differences in factors related to drinking less alcohol. Age was associated with the greatest number of differences, with younger students more likely to cite eight of the 12 differences. Sex was also associated with a high number differences, and in a nearly complete opposite of the factors associated with drinking, female students were most likely to attribute drinking less to six of the seven reasons provided.

*= $p < .05$, **= $p < .01$ ***= $p < .001$

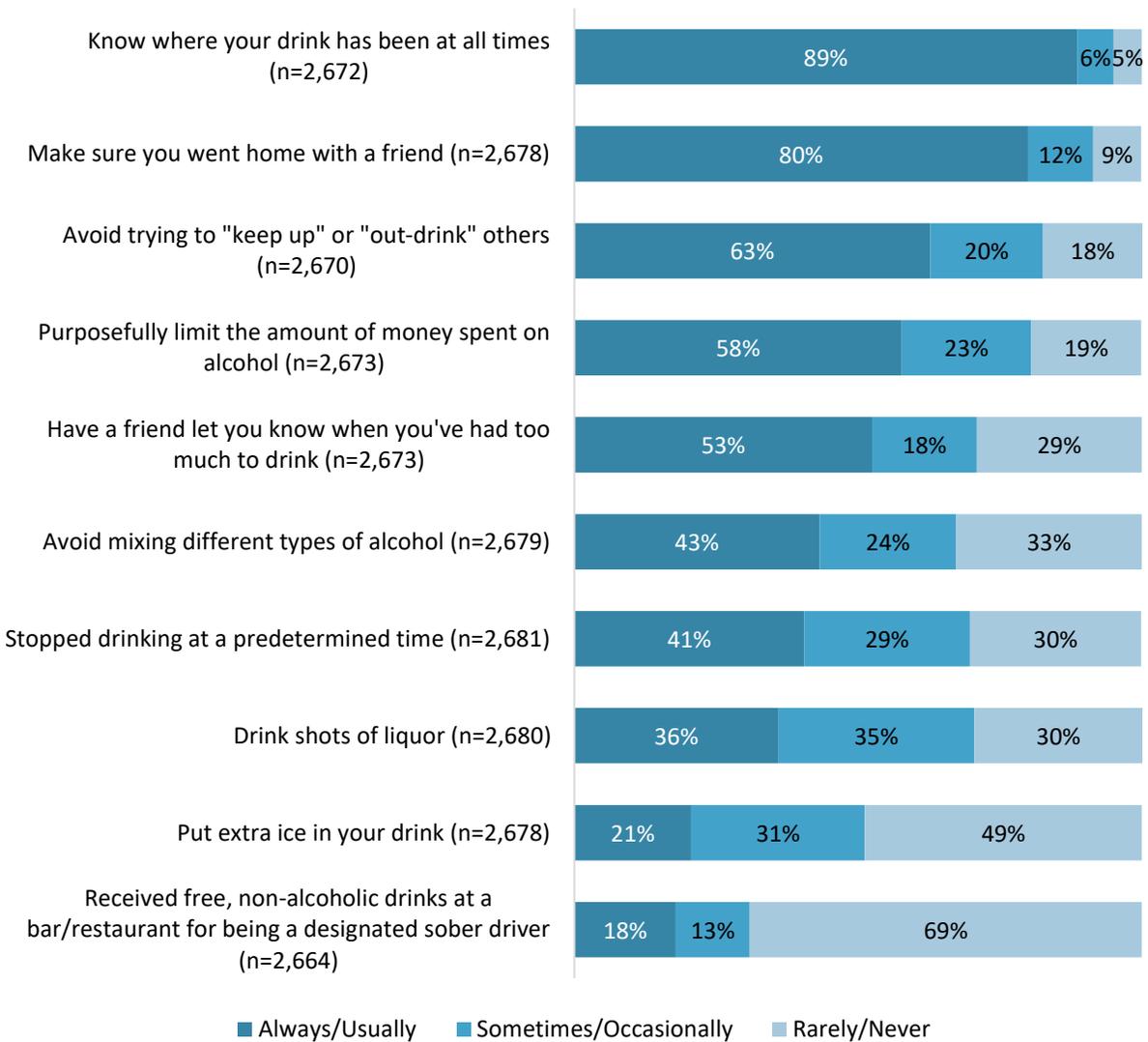
Table 8: Group differences in factors related to drinking less alcohol

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
Academic obligations the following day				57%	71%	***				60%	69%	**
Not in the mood	60%	54%	**									
High cost of drinks/alcohol				55%	67%	***	48%	65%	***			
Chance of getting sick or having a hangover	52%	37%	**				43%	51%	***	49%	41%	**
Being a designated driver	38%	32%	**	35%	42%	**						
Work obligations	37%	31%	**				33%	38%	*			
Health/calories							28%	37%	***			
Potential of doing something I will regret later							27%	22%	**			
Don't like the taste	24%	19%	**				25%	21%	**	24%	19%	*
No interest in alcohol				23%	15%	***	23%	20%	*			
Possibility of getting caught by authorities	20%	15%	**				35%	5%	***			
Alcoholism	17%	21%	*				22%	15%	***	19%	14%	*
Family obligations												
Strict enforcement of alcohol laws							22%	6%	***			
My friends' drinking habits				10%	6%	**						
My parents might find out							7%	1%	***			
I am not motivated to drink less or not drink alcohol				3%	1%	**						
In recovery from alcohol or other drug addiction							2%	1%	*			

Students were asked how often they engaged in certain behaviors at parties or social gatherings where alcohol was available in the past year (Figure 29). Overall, nine in ten students (89%, same as 2020) indicated that they always or usually knew where their drink had been at all times, and eight in ten students (80% vs. 79% in 2020) reported always or usually making sure they went home with a friend.

*= $p < .05$, **= $p < .01$ ***= $p < .001$

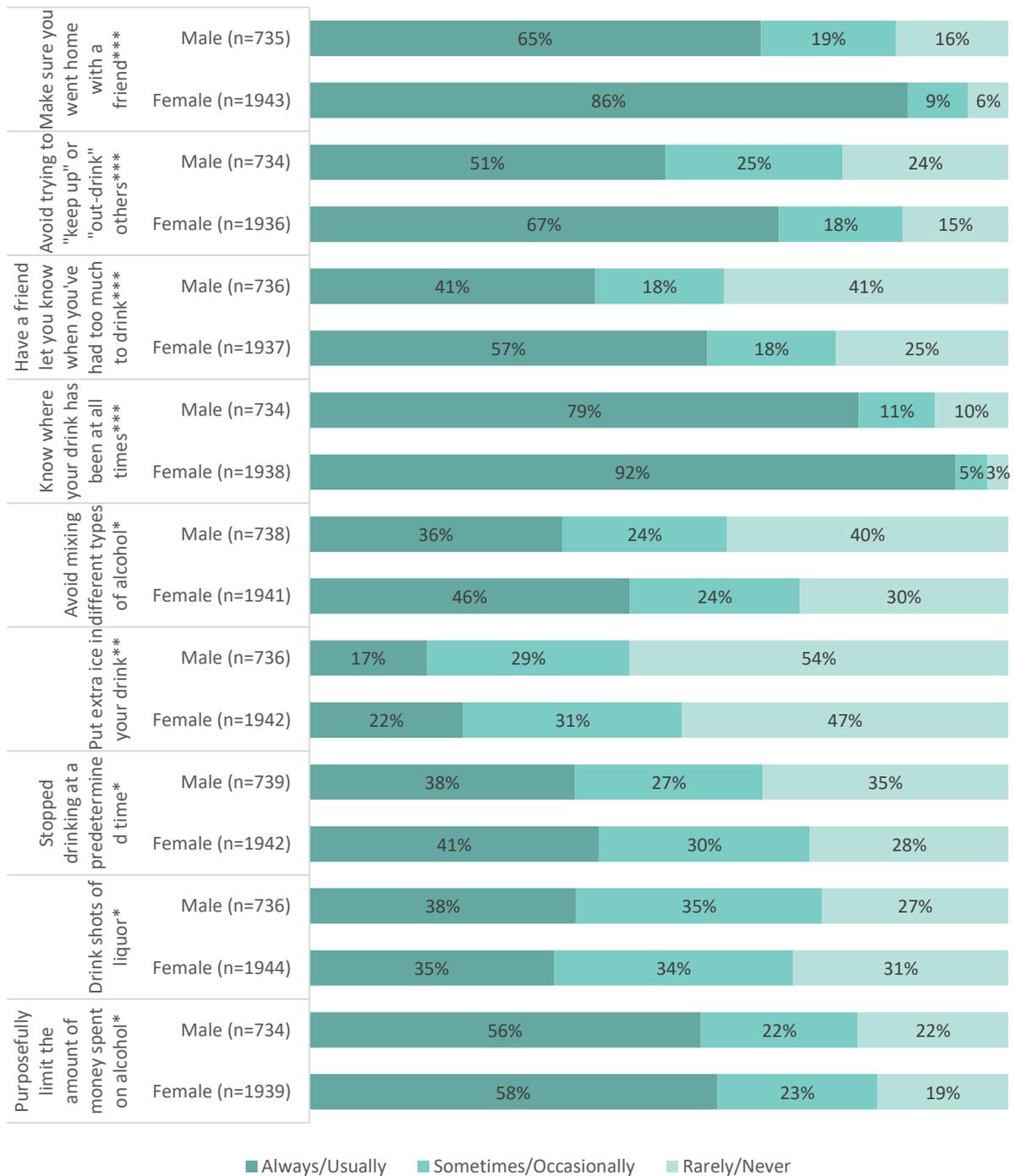
Figure 29: Actions taken when alcohol was available



Figures 30-33 show the significant groups differences in actions taken when alcohol was available, organized by the size of the group difference for the most common actions (always/usually). Women and men differed on nine of the ten statements (Figure 30), Greeks and non-Greeks differed on nine statements (Figure 31), underage and of-age students differed on four statements (Figure 32), and athletes and non-athletes differed on two statements (Figure 33). The biggest differences by sex and Greek status were making sure they went home with a friend (higher for women and Greeks), while having a friend tell them when they had too much to drink was the greatest difference by age (more likely for students under the age of 21), and avoiding mixing different alcohols was more common for athletes than non-athletes.

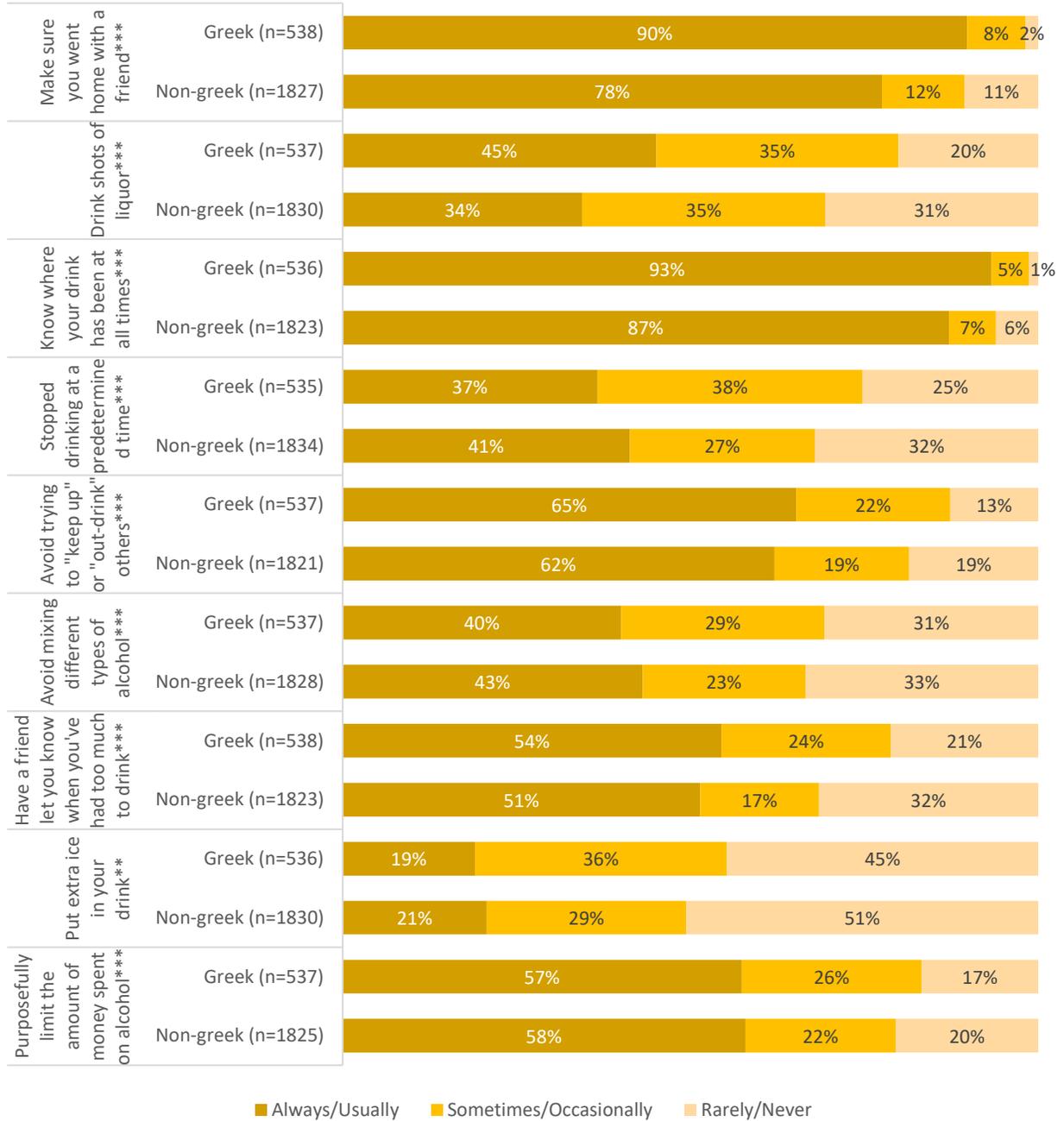
*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 30: Actions taken when alcohol was available by sex



*= p<.05, **= p<.01 ***= p<.001

Figure 31: Actions taken when alcohol was available by Greek status



*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 32: Actions taken when alcohol was available by age

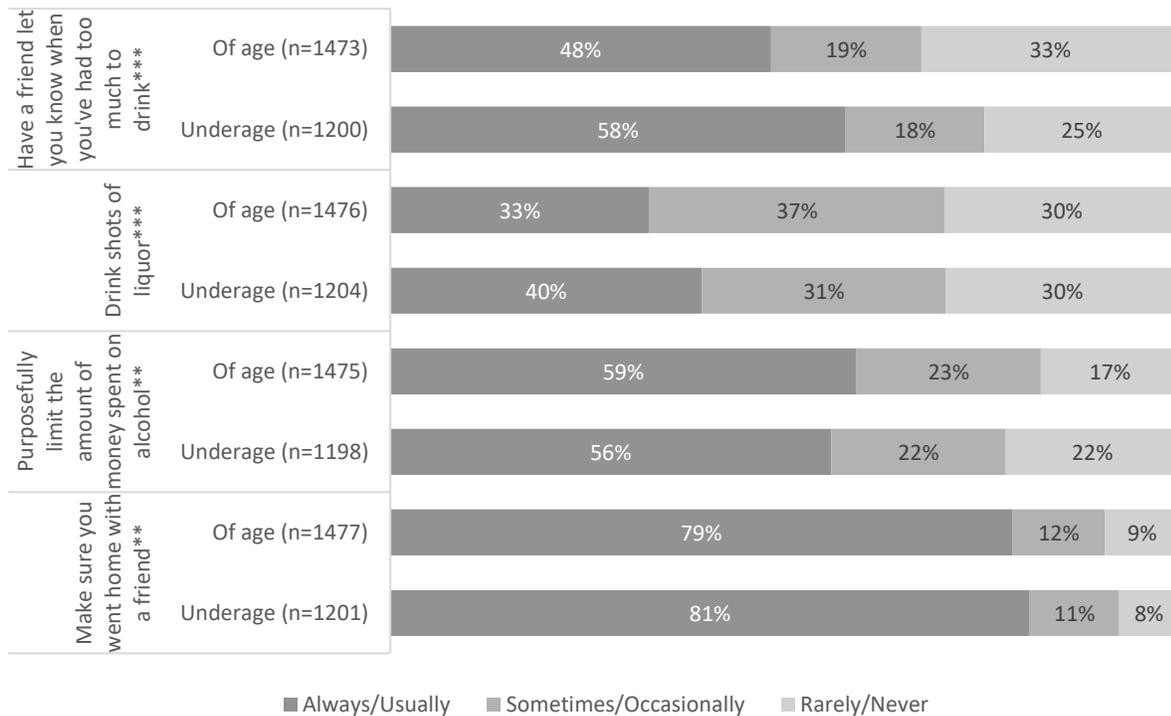
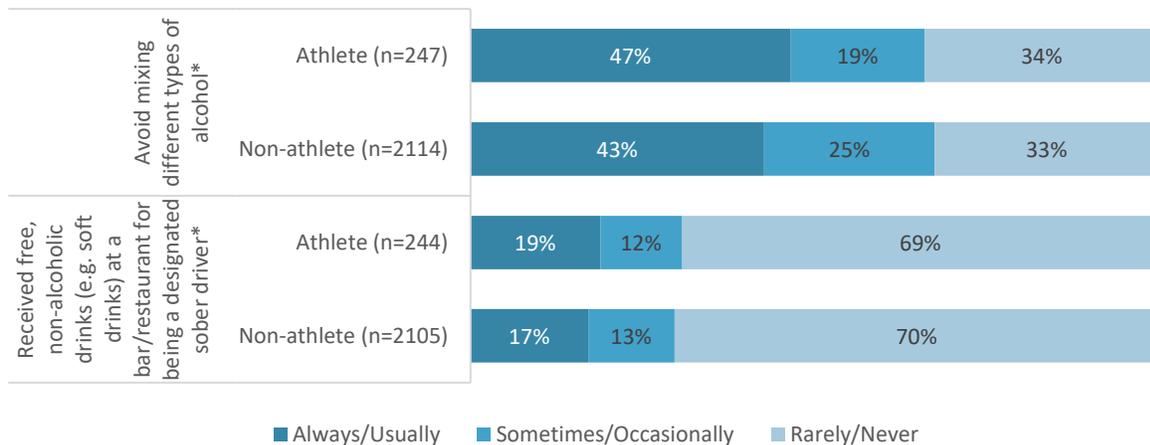


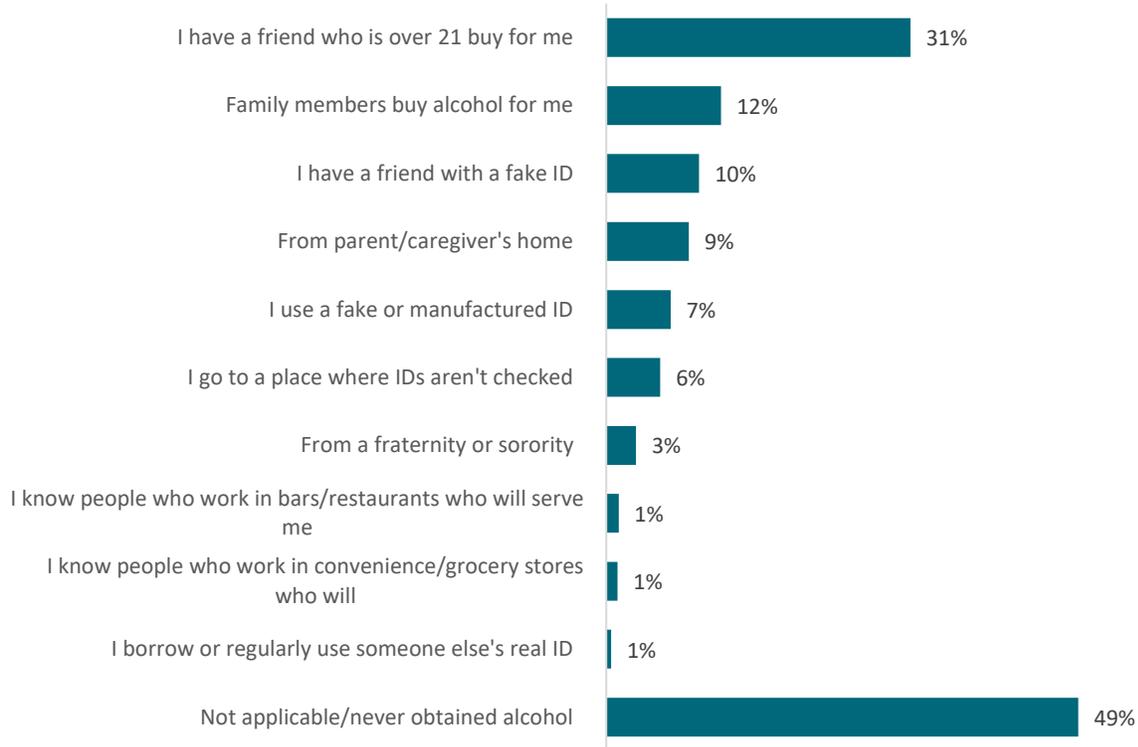
Figure 33: Actions taken when alcohol was available by athlete status



Underage drinkers were asked how they obtained alcohol (Figure 34). Almost a third of students (31%, down from 54% in 2020) reported that they had a friend who was over 21 buy alcohol for them. Family members were the second most common means of underage students obtaining alcohol (12%, down from 23%). Nearly half of minors had not obtained alcohol (which is a large increase from the 5% reported in 2020). For the 173 students who had said they use a fake or borrowed ID, they were asked if they were ever denied access, and 31% said yes (down slightly from the 35% in 2020). Greek students were more likely to report being denied than non-Greeks (40% vs. 25%, $p < 0.05$).

*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 34: Underage student's means of obtaining alcohol (n=2,560)



Students were asked who their designated driver was. The highest percentage was a friend, family, or acquaintance (69%); followed by ridesharing services (e.g., Uber, Lyft; 36%), and a taxi service (9%). Fraternity or sorority designated driver (5%), and other university DD program (1%) were the lowest in reported usage. Eighteen percent of drinking students said they did not use a designated driver. Table 9 shows the group differences in use of designated drivers. At least one in five men, non-Greeks, and underage drinkers did not use a designated driver.

Table 9: Group differences in use of designated drivers

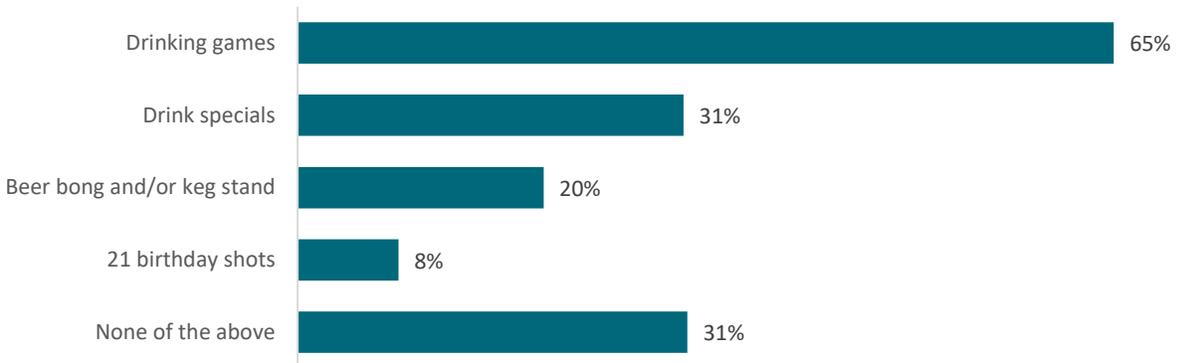
	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
Uber, Lyft etc.	37%	33%	*	30%	62%	***	32%	40%	***	36%	24%	***
Friend, family, or acquaintance	71%	62%	***							69%	76%	**
Fraternity or sorority designated driver				3%	28%	***	10%	5%	***			
I did not use a designated driver	15%	27%	***	22%	7%	***	20%	17%	***			

Respondents were given a list of four alcohol-related activities and were asked which, if any, of the activities they had participated in during the past academic year (Figure 35). Overall, the most common activity students engaged in was drinking games (65% vs. 62% in 2020), followed by drink specials (31% vs. 33% in 2020), and beer bong and/or keg stand (20%, same as 2020). Twenty-one birthday shots was

*= $p < .05$, **= $p < .01$, ***= $p < .001$

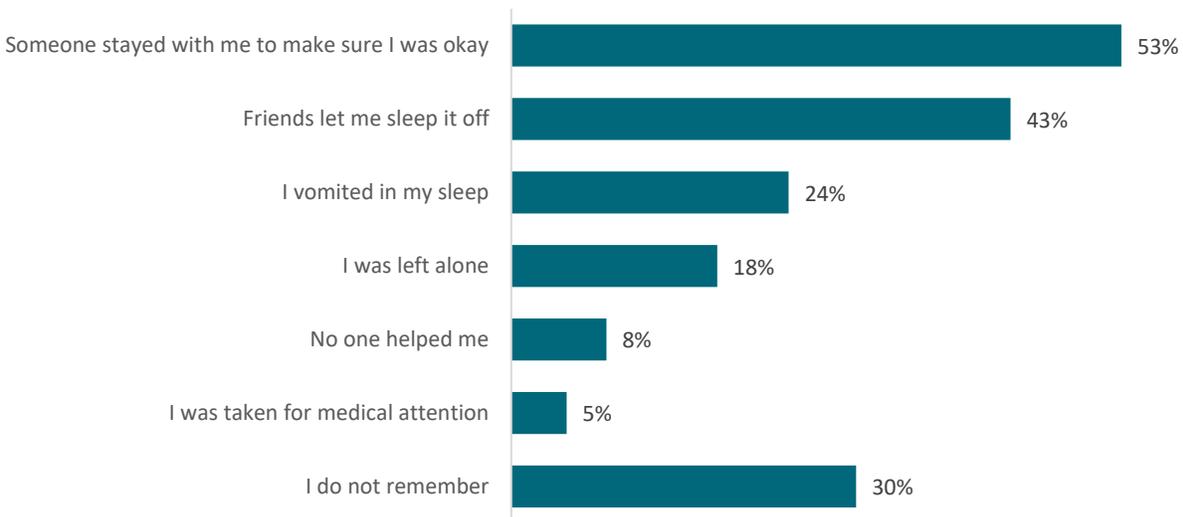
the least common activity reported (same as in 2020). Thirty-one percent (vs. 30% in 2020) said they had not engaged in any of the listed activities.

Figure 35: Drinking activities engaged in (n=2,703)



Students were asked if they had experienced alcohol poisoning in the last year, and overall 6% (n=2,686 drinkers; same percentage as 2020) indicated that they had experienced alcohol poisoning. Among students who experienced alcohol poisoning (n=145), just over half (53%, down from 59% in 2020) reported that someone stayed with them to make sure they were okay (Figure 33). Three out of ten did not remember what happened to them.

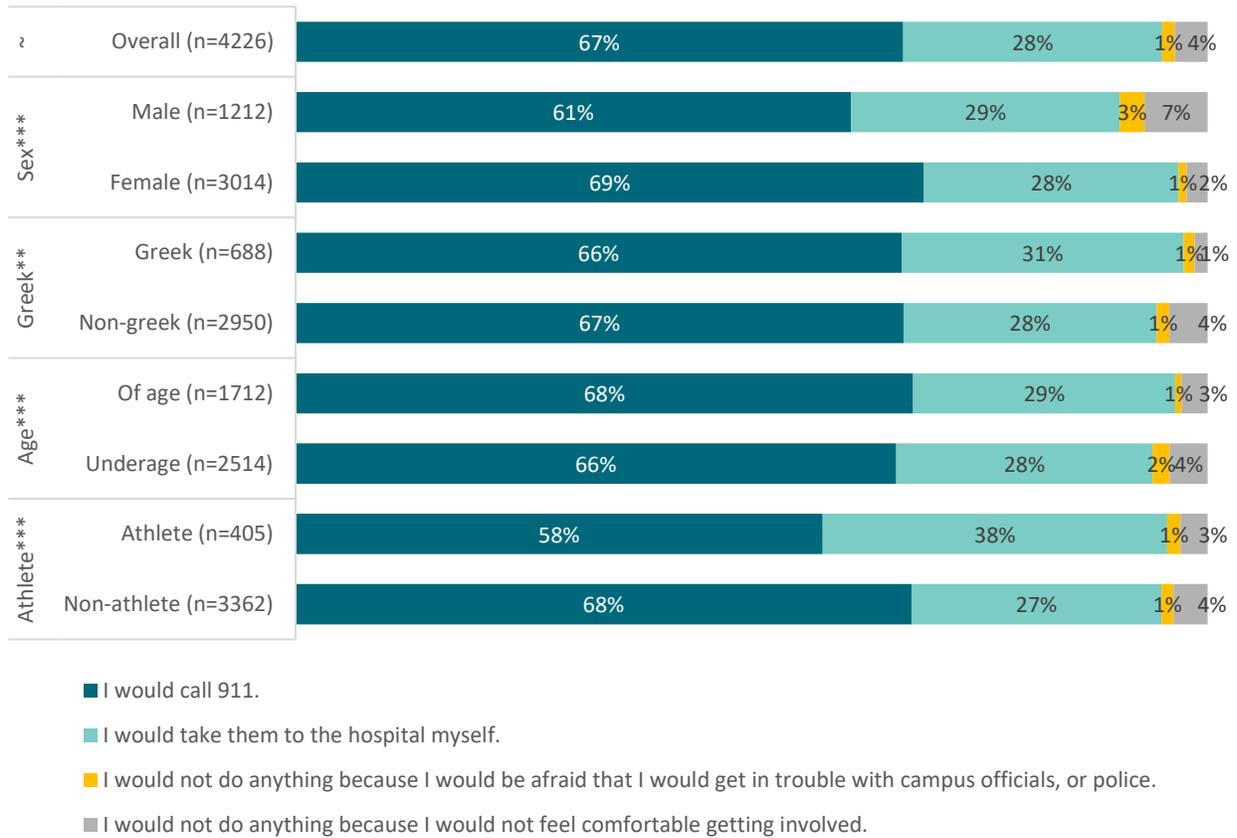
Figure 36: Results of alcohol poisoning (n=145)



Respondents were asked what they would do if in the presence of a student they suspected had alcohol poisoning (Figure 37). Two thirds of students (67% vs. 68% in 2020) indicated that they would call 9-1-1 and over a quarter (28% in both years) said they would take the student to the hospital themselves, leaving 5% who would not get involved. More women, Greeks, and students 21 and over said they would take action. Non-athletes were more likely to call 911 than their counterparts.

*= $p < .05$, **= $p < .01$ ***= $p < .001$

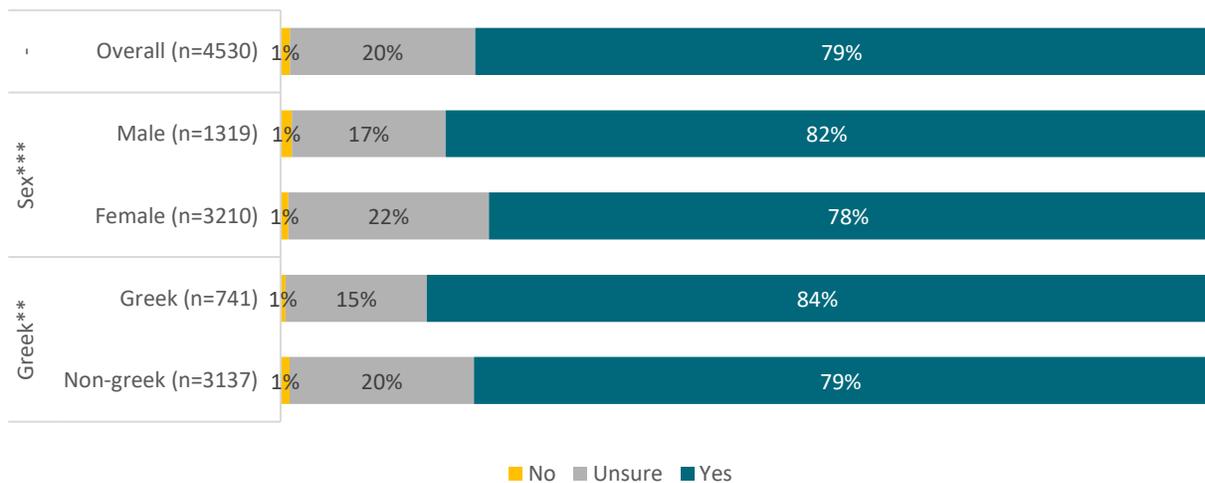
Figure 37: Actions to take in the presence of a peer students suspected had alcohol poisoning



Sexual Experiences with Alcohol

The majority of students reported that their campus had a sexual violence policy (79% vs. 73% in 2020). Men, and Greek students were more likely to say there was a campus policy (Figure 38).

Figure 38: Awareness of a campus policy on sexual violence



*= $p < .05$, **= $p < .01$ ***= $p < .001$

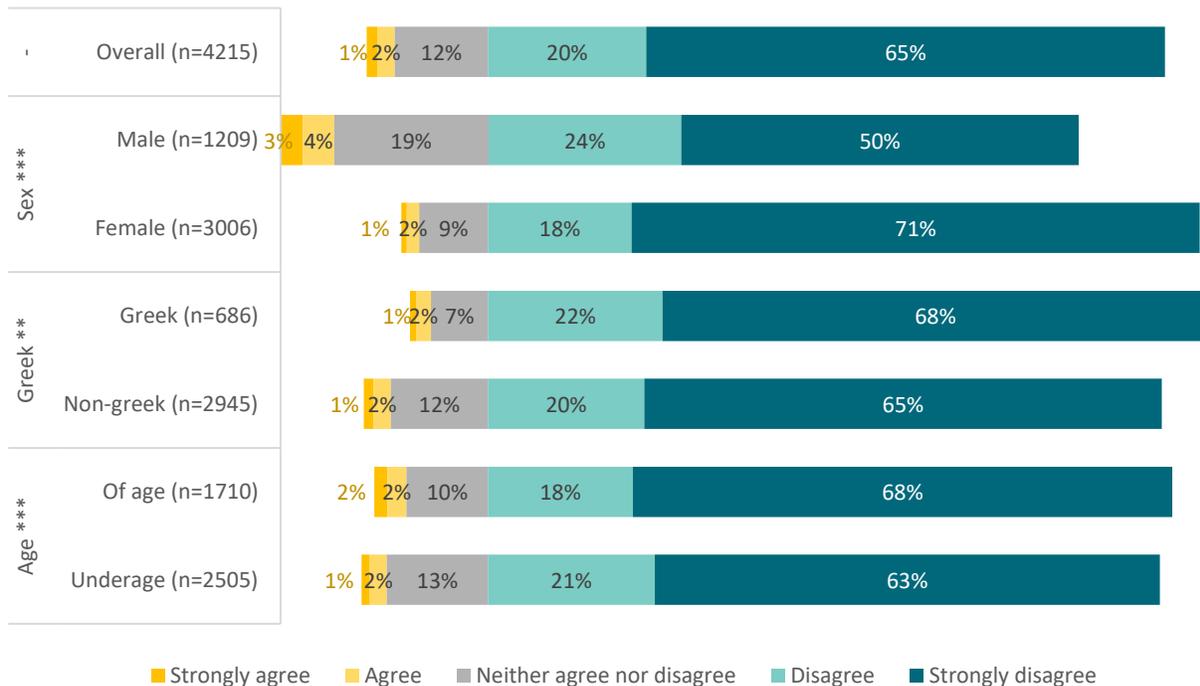
When asked if they believed their campus was concerned about sexual violence, the four out of every five students said yes (down from 90% in 2020; Figure 39). The rate was higher for men and athletes compared to their counterparts.

Figure 39: Thought campus was concerned about sexual violence



When asked how they agreed or disagreed with the statement “If both people are drunk, it can’t be rape”, 85% students (vs. 82% in 2020) indicated that they disagreed or strongly disagreed with the statement. Women, Greek students, and older students were more likely than their counterparts to disagree or strongly disagree with the statement, as presented in Figure 40.

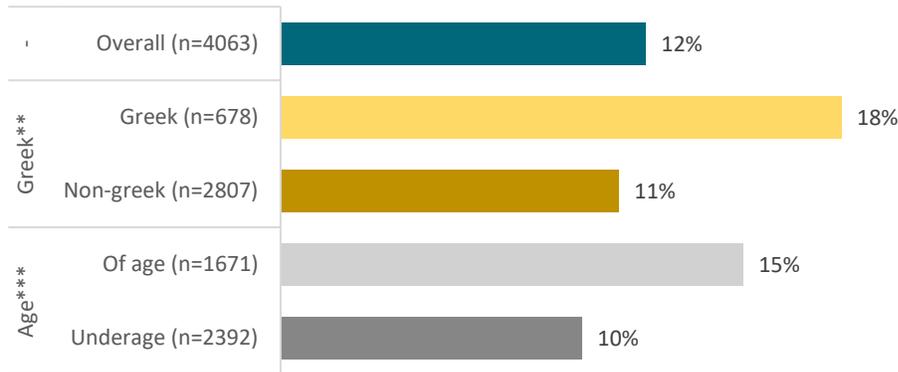
Figure 40: Level of agreement with rape scenario



Twelve percent of students (vs. 10% in 2020) said they had used alcohol or drugs to help them feel more comfortable with a sexual partner in the past year (Figure 41). The rate was higher for Greek students and those ages 21 and older.

*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 41: Used alcohol or drugs to help feel more comfortable with a sexual partner



Fifteen percent of students (15% vs. 13% in 2020) indicated that they had done more sexually than they had originally planned due to drinking alcohol or using drugs (Figure 42). The rate was higher for Greek and of-age students. About three in ten (31%) students reported having no sexual partners in the past year.

Figure 42: Done more sexually than had originally planned due to drinking alcohol or using drugs

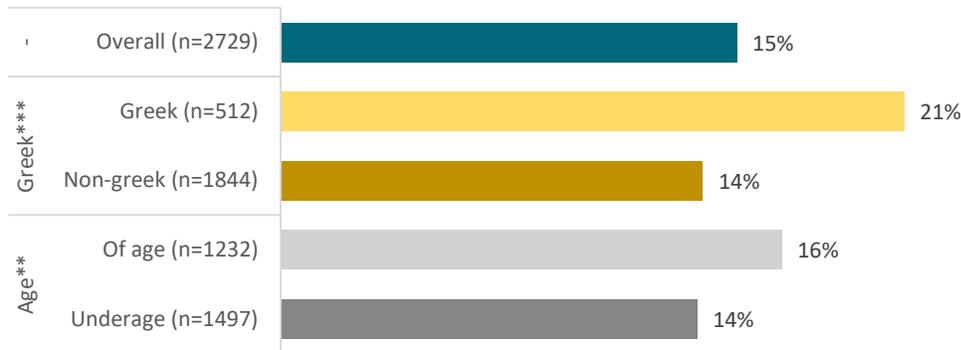
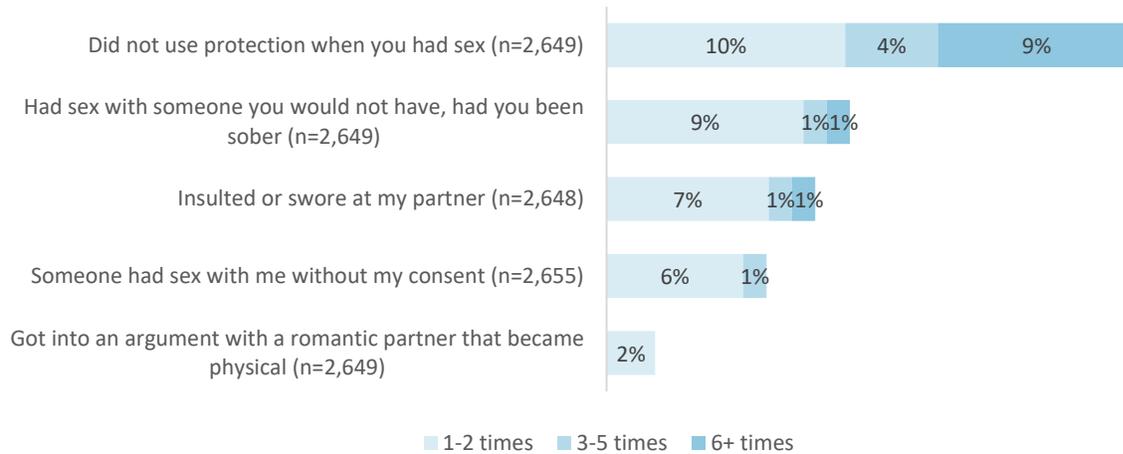


Figure 43 presents how often students experienced sexual harms while they were drinking or because of their drinking in the past year. Overall, more students reported not using protection when they had sex as a result of drinking (23%, up from 19% in 2020), having sex with someone they would not have had they been sober (11%, same as 2020), and insulting or swearing at their partner (9%, down from 11% in 2020) as major sexual harms caused by drinking. While very rare, nine students (similar to 10 students in 2020) reported having sex with someone without their consent.

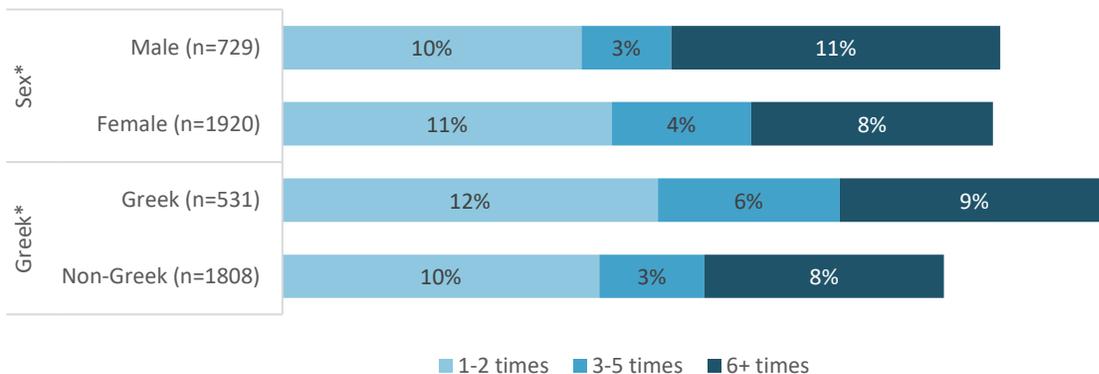
*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 43: Sexual harms experienced during or as a result of drinking



There were group differences in the sexual harms experienced by surveyed students. Figure 44 shows the differences in not using protection while having sex, which was more frequent for men than women. Greek students were more likely to report this behavior in each frequency category, compared to non-Greek students. Underage students were more likely than older students to say they had sex with someone they would not have sober (13% overall, vs. 8% overall for of age students, $p < 0.001$). Women were more likely than men to report insulting or swearing at their partner (8% reporting 1-2 times in the past year, vs. 4% of men).

Figure 44: group differences in not using protection



Students were asked if they approved of statements regarding sexual assault (Figure 41). The majority (94%) of students approved of someone intervening if they saw someone taking advantage of another person (compared to 96% in 2020) and if they saw someone being taken advantage of sexually (96% in both years). Additional questions were asked regarding bystander intervention and help seeking behaviors (Figure 45). Students were most likely to intervene if they heard a friend talking about coercing someone to have sex. The scenario in which students were least likely to intervene was if they heard what sounded like yelling or fighting through their residence hall/apartment walls. These two scenarios also had the similar responses in 2020.

*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 45: Likelihood to intervene as bystander

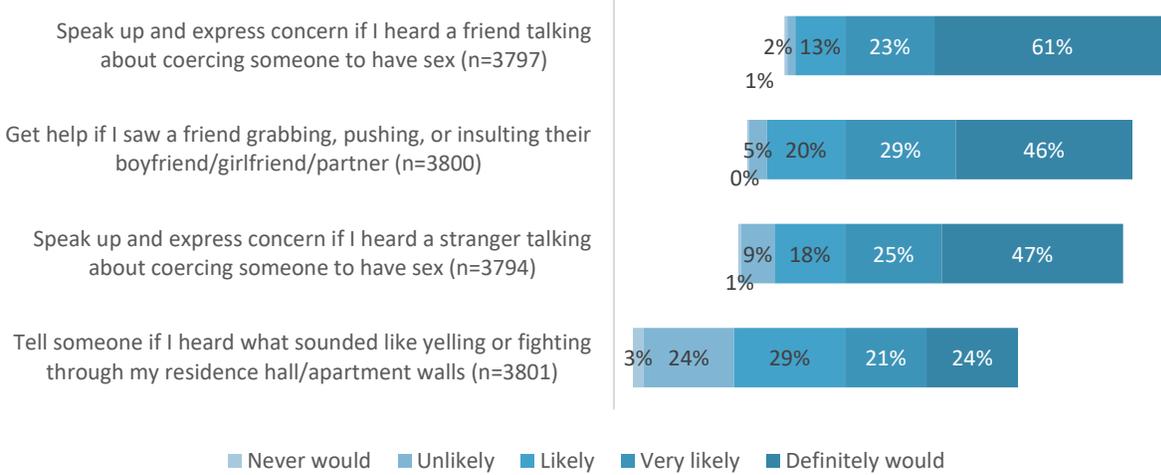


Table 10 shows significant demographic group differences in likelihood to intervene as a bystander. Women and of-age students were more likely than their counterparts to intervene in the listed scenarios.

Table 10: Group differences in likelihood (very likely or definitely) to intervene as bystander

	Sex			Age		
	Women	Men	sig	Underage	Of-age	sig
Tell someone if I heard what sounded like yelling or fighting through my residence hall/apartment walls	47%	41%	***	42%	49%	***
Speak up and express concern if I heard a stranger talking about coercing someone to have sex	75%	66%	***			
Speak up and express concern if I heard a friend talking about coercing someone to have sex	86%	80%	***	84%	85%	*

Respondents who indicated they would never or be unlikely to intervene in the above scenarios were asked to select reasons that would prevent them from intervening from a list of statements (Figure 46). Almost half of the students (47% vs. 44% in 2020) said that their personality traits would make it difficult, and close to a third (31% vs. 27% in 2020) were afraid to look stupid if they made a big deal out of nothing or if they did it wrong. Table 11 shows the group differences for those who were unlikely to intervene. Six of the 11 statements had significant differences by sex, with men more likely to claim four of the conditions, and both Greek status and age were associated with two each. In both conditions, one group was higher than the other.

*= $p < .05$, **= $p < .01$, ***= $p < .001$

Figure 46: Reasons for not intervening (n=1,123)

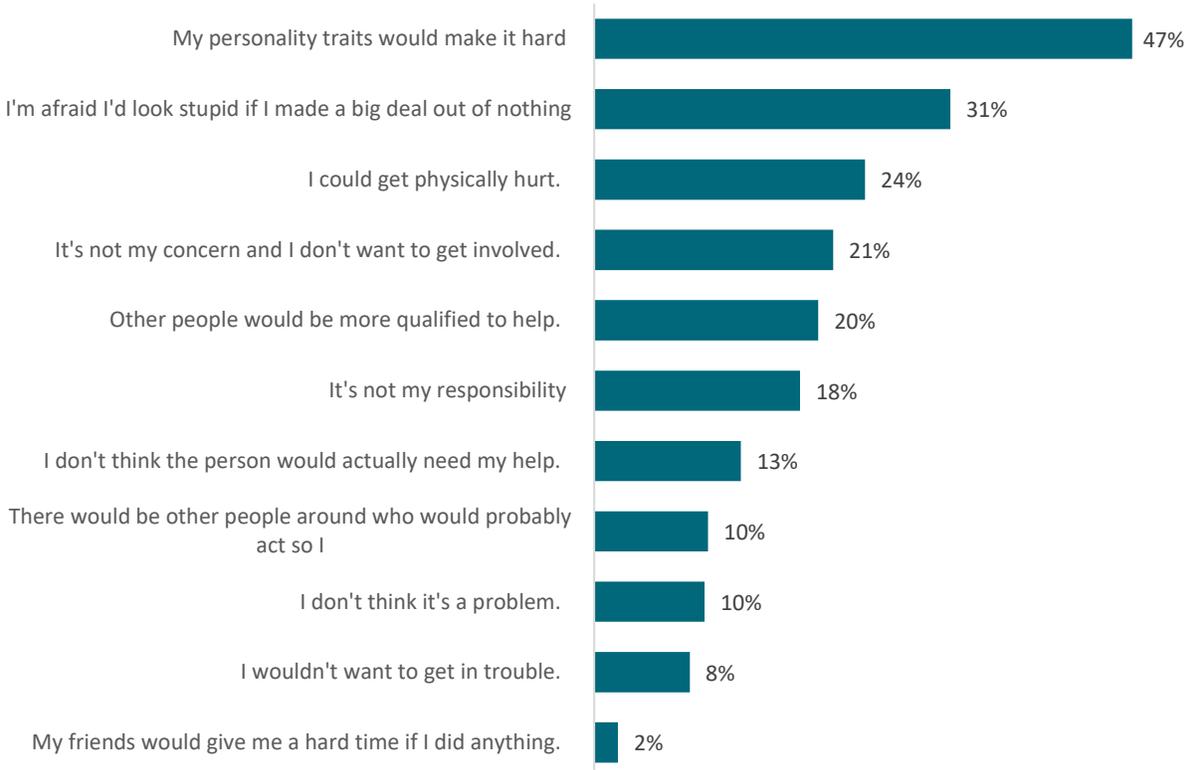


Table 11: Group differences in reasons for not intervening

	Sex			Greek			Age		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig
My personality traits would make it hard	51%	39%	***	52%	36%	***			
I'm afraid I'd look stupid if I made a big deal out of nothing	14%	34%	*				34%	27%	*
I could get physically hurt.	27%	16%	***						
It's not my concern and I don't want to get involved.	18%	28%	***						
It's not my responsibility	15%	24%	***	18%	12%	*			
I don't think it's a problem.	8%	14%	**						
I wouldn't want to get in trouble.							10%	6%	*

Students were asked where they would go for help after these situations occurred (Figure 47). Nearly three quarters of students (73%, up from 66% in 2020) indicated that they would get help from friends/peers, and 45% indicated residence life staff (RA/CA, vs. 41% in 2020), and/or police (vs. 51% in 2020) marked police. The least common response option chosen was help from the campus health center (15%, same as in 2020).

*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 47: Help seeking (n=3,790)

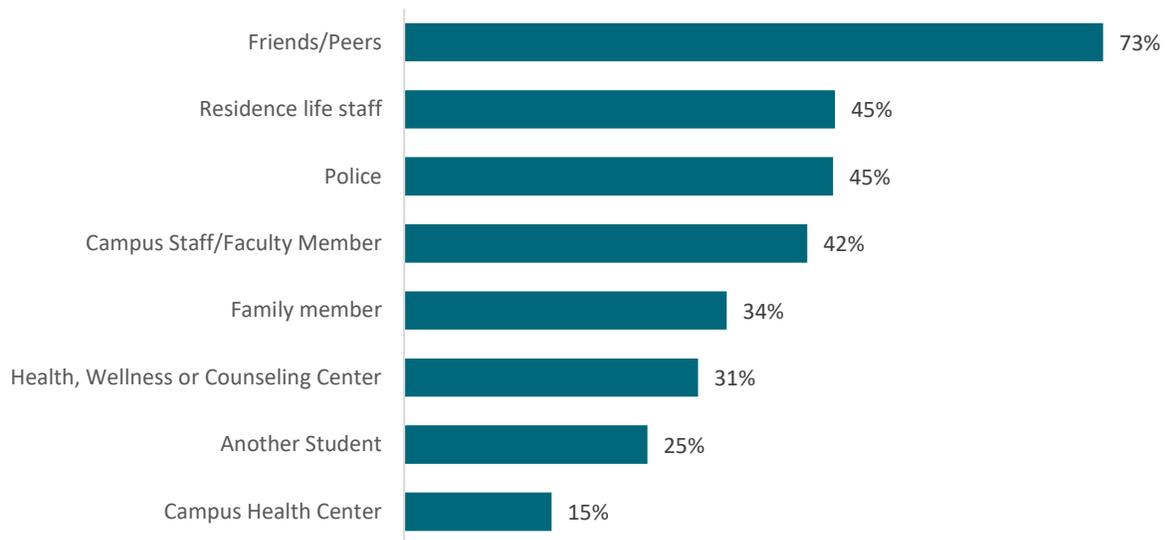


Table 12 shows the significant group differences in help-seeking after witnessing concerning events. All eight of the listed potential supports were associated more or less with difference groups.

Table 12: Group differences in help seeking

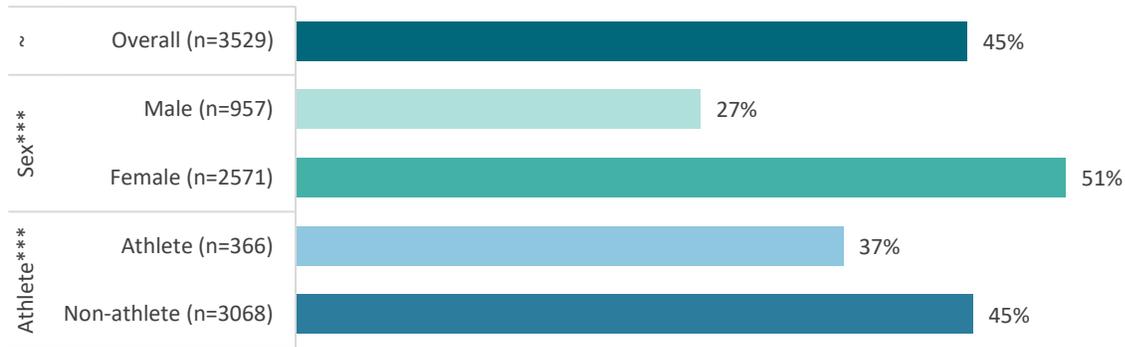
	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
Friends/Peers				72%	82%	***						
Residence life staff	46%	42%	*				52%	35%	***			
Police				46%	35%	***	42%	50%	***	46%	33%	***
Campus Staff/Faculty Member	44%	38%	**	43%	36%	***						
Family member	36%	27%	***									
Health, Wellness or Counseling Center	32%	27%	***							31%	26%	*
Another Student	24%	29%	***	25%	30%	*						
Campus Health Center				16%	13%	*						

Drug Use and Related Behaviors

Overall, 45% of students (vs. 43% in 2020) indicated that they currently took any prescription medication or over-the-counter drugs (Figure 48). The rates were significantly higher for women and non-athlete students.

*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 48: Current taking of prescription medication or over-the-counter drugs



Respondents indicated that they had used pain medication/opiates (6% vs. 5% in 2020), stimulants (4%, same as in 2020), sleeping medication (3%, similar to 2% in 2020), or benzodiazepines/sedatives (1%, similar to 2% in 2020) without a doctor’s prescription in the past year, as presented in Figure 49.

Figure 49: Prescription drug(s) used without a doctor's prescription (n=4,736)

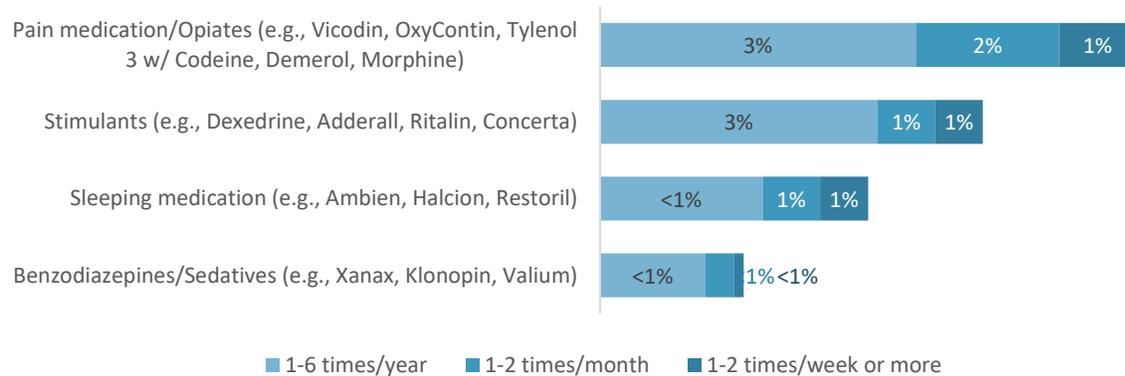


Table 13 shows significant demographic group differences in using prescription drug(s) without a doctor's prescription. For stimulants, the rates were higher for men and Greek students. For pain medication/opiates, underage students were twice as likely as of-age students to report use. Benzodiazepine/sedative use was slightly higher among Greeks than non-Greeks.

Table 13: Group differences in prescription drug(s) used without a doctor's prescription

	Sex			Age		
	Women	Men	Sig.	Underage	Of-age	Sig.
Stimulants	3%	5%	**			
Pain medication/opiates				7%	4%	***

Six percent of respondents (same as 2020) said they had consumed alcohol while taking prescription drugs in a manner other than prescribed in the past year. Greek students were more likely than non-Greek students to drink alcohol while taking prescription drugs (8% vs. 5%, $p < 0.01$). Overall, 7% (comparable to 5% in 2020) said they had driven a vehicle after using prescription drugs in the past year.

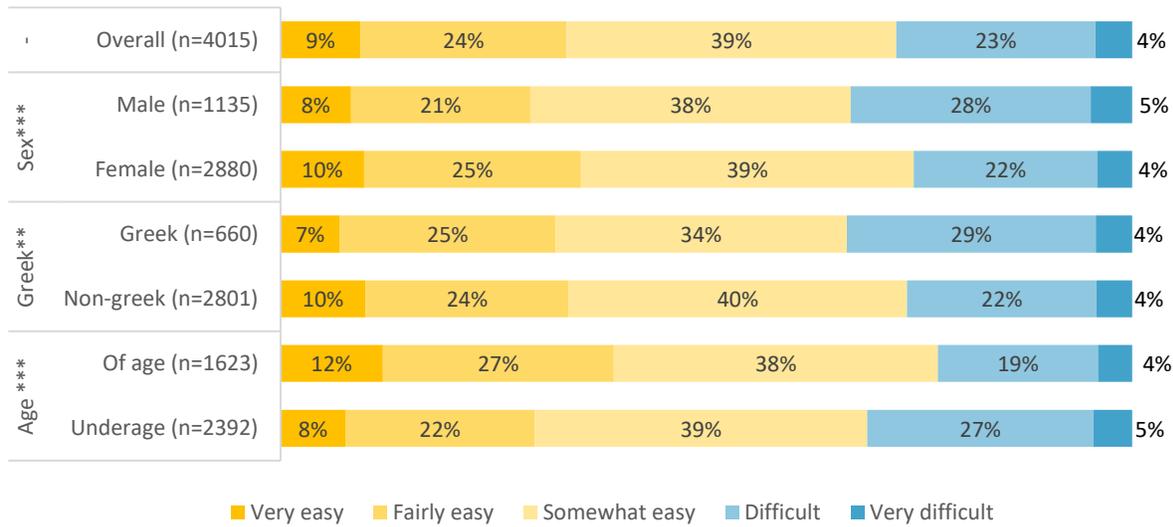
When asked how they obtained prescription drugs without a doctor’s prescription, 4% of students reported that they were given them, and 2% indicated that they purchased them from other people. Ninety-four percent of respondents said they had not obtained prescription drugs without a

*= $p < .05$, **= $p < .01$ ***= $p < .001$

prescription. Compared to their counterparts, men were more likely to purchase them (3% vs. 2%, $p < 0.05$), as were Greeks (4% vs. 1%, $p < 0.001$), and older students (3% vs. 1%, $p < 0.05$). Students were asked from whom they accessed their prescription drugs without a doctor's prescription. Four percent of students said that they obtained their prescription drugs from friends, while 2% obtained from a family member. Greeks were twice as likely as non-Greeks to get them from friends (6% vs. 3%, $p < 0.01$).

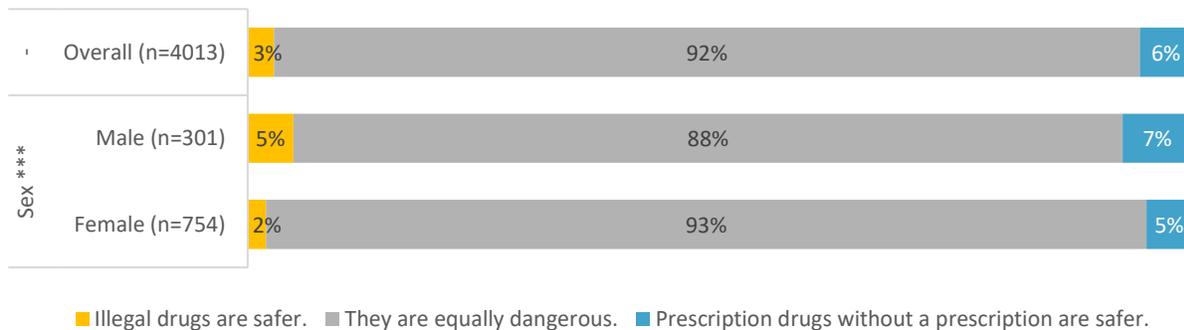
Students were asked to indicate how easy they thought it was for the typical student to obtain prescription drugs without a doctor's prescription. About 33% of students (down from 39% in 2020) marked "fairly easy" or "very easy", while 27% (higher than the 24% of 2020) marked "difficult" or "very difficult" (Figure 50). Women, non-Greeks, and older students thought it was easier for the typical student to obtain prescription drugs without a doctor's prescription.

Figure 50: Perceived ease of obtaining prescription drugs



The majority of students (92% in both years) thought using prescription drugs without a prescription, or using prescription drugs other than as directed, was equally dangerous as using illegal drugs. Women were more likely than men to say they were equally dangerous.

Figure 51: Comparison between "using prescription drugs without a prescription, or using prescription drugs other than as directed" and "using illegal drugs" (n=4,736)



A quarter of respondents (25% vs. 25% in 2020) said they had used marijuana in the past year (Figure 52). The same percentage of respondents said they had used marijuana edibles (vs. 19% in 2020) and fewer said they had used marijuana derivatives (17% vs. 14% in 2020).

*= $p < 0.05$, **= $p < 0.01$ ***= $p < 0.001$

Figure 52: Marijuana use in the past year (n=4,736)

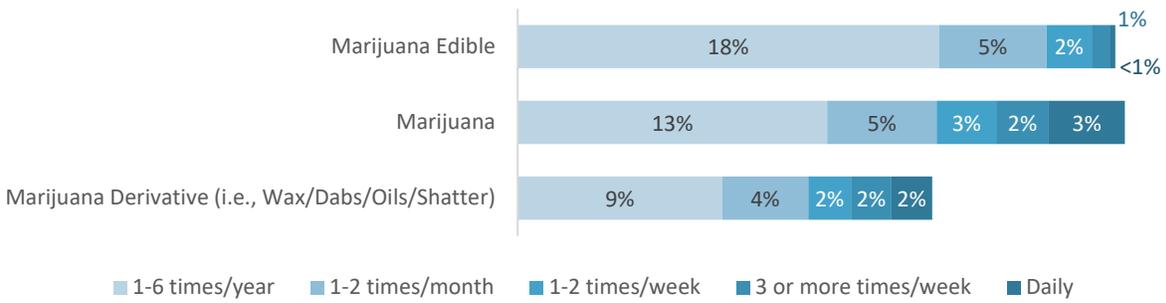


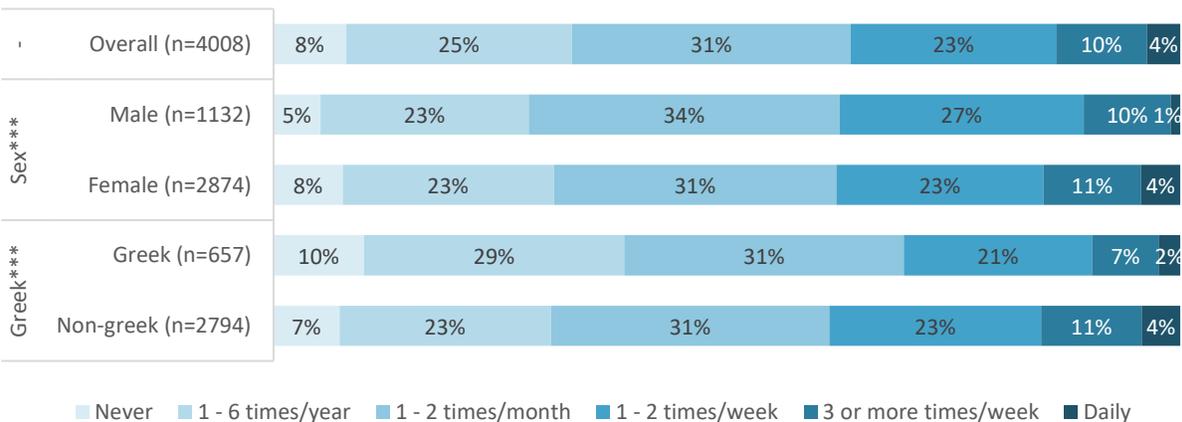
Table 14 shows significant demographic group differences in marijuana use. Men were more likely than women to use marijuana and marijuana derivatives, and Greek, of-age student and non-athletes were more likely to use marijuana than their counterparts.

Table 14: Group differences in marijuana use

	Sex			Greek			Age			Athlete		
	Women	Men	Sig.	Non-Greek	Greek	Sig.	Underage	Of-age	Sig.	Athlete	Non-athlete	Sig.
Marijuana	24%	28%	**	25%	31%	**	23%	29%	***	20%	26%	*
Marijuana derivative	16%	20%	***									

Meanwhile, when asked how often they thought the typical student on their campus used marijuana, 36% (same as in 2020) said that students used marijuana at least 1-2 times a week. Women were more likely than men to think students used marijuana at both the highest and lowest frequencies, as shown in Figure 53. Greek students thought typical peers used marijuana less often than their non-Greek counterparts, similar to the results in 2020.

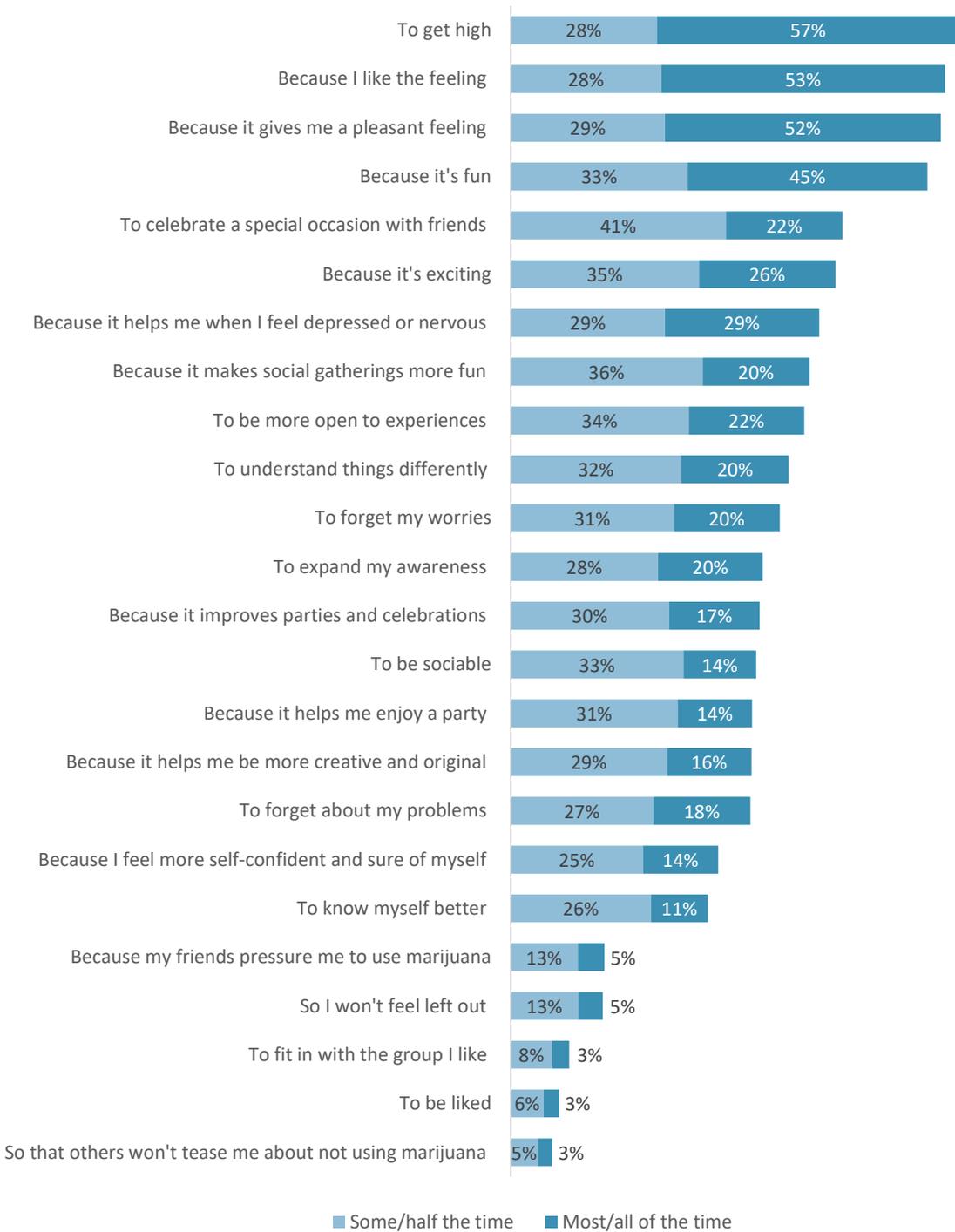
Figure 53: Perception of typical student use of marijuana



Reasons for using marijuana were new questions in 2022 (see Figure 54). To get high was both the most likely reason and the reason with the greatest frequency.

*= $p < .05$, **= $p < .01$, ***= $p < .001$

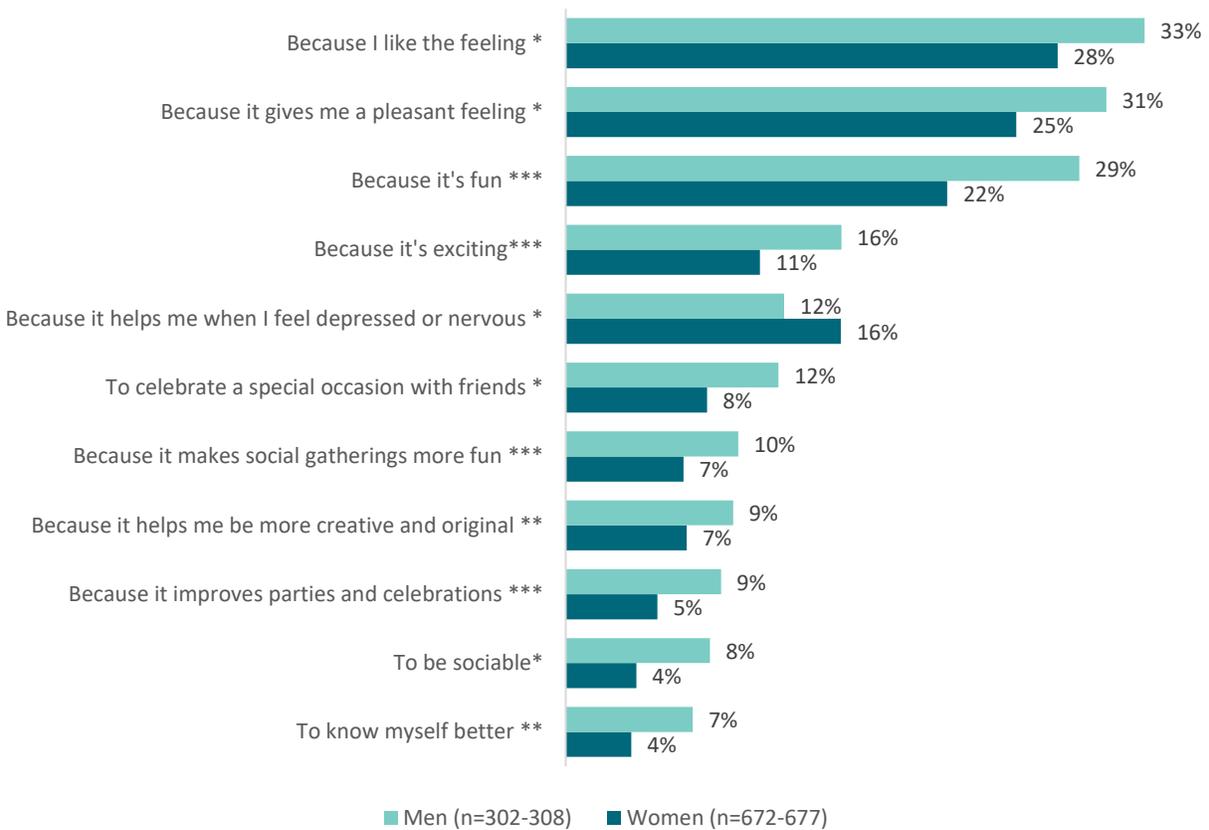
Figure 54: Reasons for using marijuana (n=977-985)



Men were more likely than women to have reported almost always/always using marijuana for some reasons (see Figure 55). Greeks were more likely than non-Greeks to say they use marijuana to expand their awareness ($p < 0.05$), older students were more likely than younger students to say they use to get high ($p < 0.05$), and non-athletes were more likely than athletes to report almost always/always using marijuana to cheer them up when they are in a bad mood ($p < 0.05$).

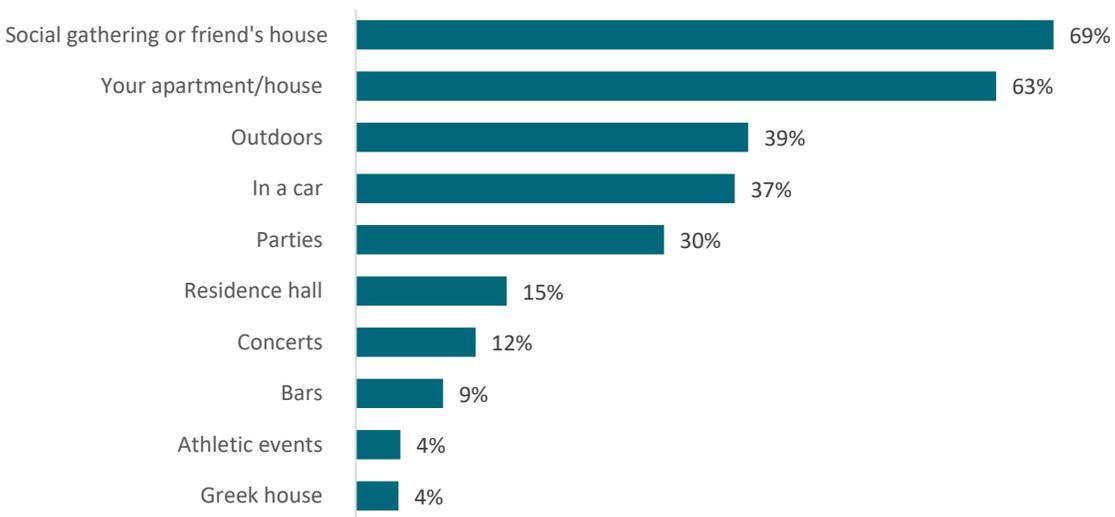
* = $p < .05$, ** = $p < .01$ *** = $p < .001$

Figure 55: Almost always/always use marijuana for reason



Of the students who indicated using marijuana in the past year, two in three (69% in both years) used it at a gathering or friend’s house off-campus, and three in five (63% vs. 49% in 2020) used at their apartment or house, as presented in Figure 56. Less than 5% of students used marijuana at athletic events or Greek houses.

Figure 56: Location of marijuana use (n=977)



*= $p < .05$, **= $p < .01$ ***= $p < .001$

Table 15 shows the significant group differences in where students used marijuana. Men were more likely than women to use in six of the ten listed locations, and Greek students were more likely to use at two locations, while there was not a clear pattern by age, and only concerts were significantly different by athletic status.

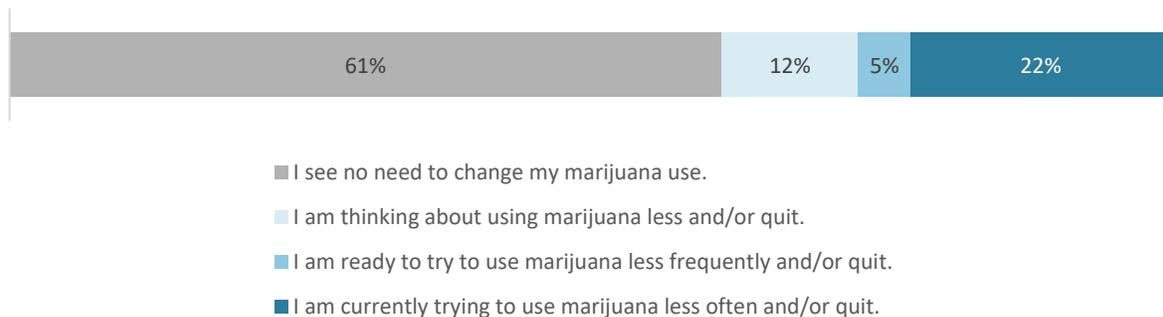
Table 15: Group differences in the location of marijuana use

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
Your apartment/house							55%	72%	***			
Outdoors	35%	46%	***									
In a car							42%	32%	**			
Parties	3%	37%	**	28%	38%	**						
Residence hall	13%	19%	*				23%	6%	***			
Concerts	10%	16%	*							13%	5%	**
Bars	7%	13%	**				5%	13%	***			
Athletic events	2%	9%	***									
Greek house				2%	12%	***	6%	3%	*			

Forty percent of marijuana users said they drove a vehicle in the past year after using marijuana, with 16% overall reporting more than five occasions. Of the students that reported using in a car, they were asked the usual status of the car. Three quarters of student who had used marijuana in a car (compared to 72% in 2020) said that the car was parked off-campus. About one-fifth (19% vs. 22% in 2020) used marijuana while the car was being driven, and 6% said while parked on campus.

When asked what their intentions were regarding changing their marijuana use, about three-fifths of respondents (61%, down slightly from 65% in 2020) said they saw no need to change their marijuana use, and over one fifth (22%, similar to 23% in 2020) were trying to use less/quit (Figure 57).

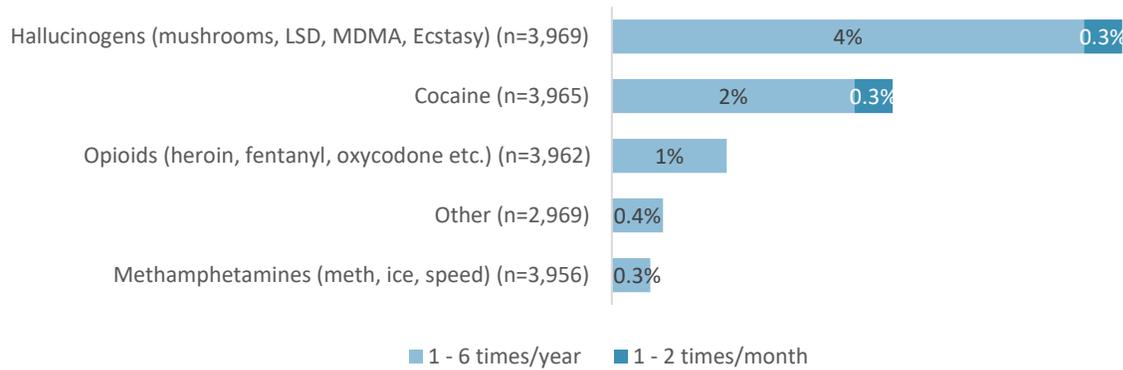
Figure 57: Intentions to change the way you use marijuana (n=981)



Students were asked about their use of other drugs and tobacco. Student use of hallucinogens (4%), cocaine (2%), and opioids (1%) in the past year was low (Figure 58).

*= $p < .05$, **= $p < .01$, ***= $p < .001$

Figure 58: Use of cocaine, hallucinogens, and opioids



Among tobacco-using students, e-cigarettes were the most commonly used product in the past year, with 16% of respondents using (Figure 59), in place of JUUL with 23% in 2020. JUUL was the next most commonly used tobacco product in the past year with 14% using. Tobacco pipes were the least used product (same as 2020). Daily use of e-cigarettes was similar in this wave to 2020 (6% vs. 5%).

Figure 59: Use of tobacco products (n=3,943-3,967)

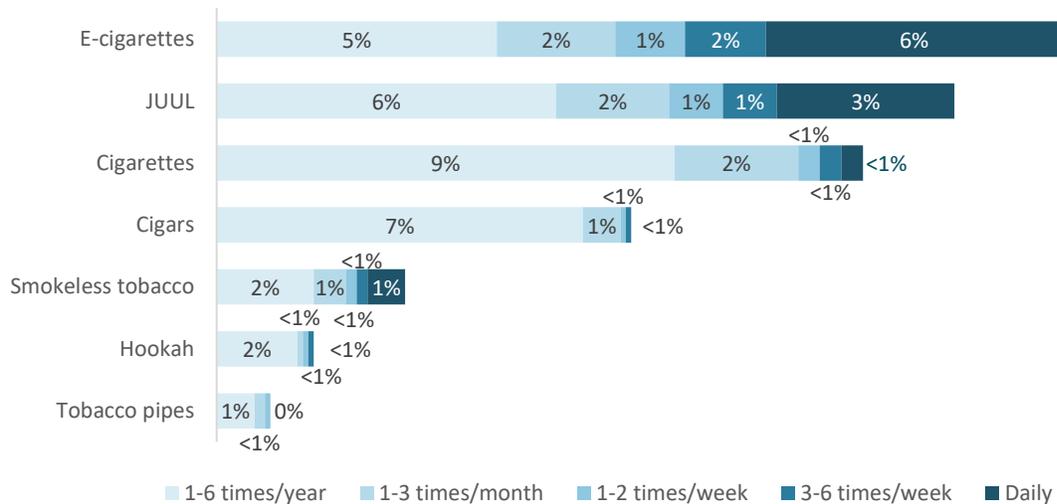


Table 16 presents significant demographic group differences in using tobacco products. E-cigarettes had the most differences, with greater use by men, Greeks, and students ages 21 and over. Compared to 2020, JUUL use among Greek students was greatly decreased (20% vs. 35% in 2020).

Table 16: Group differences in use of tobacco products

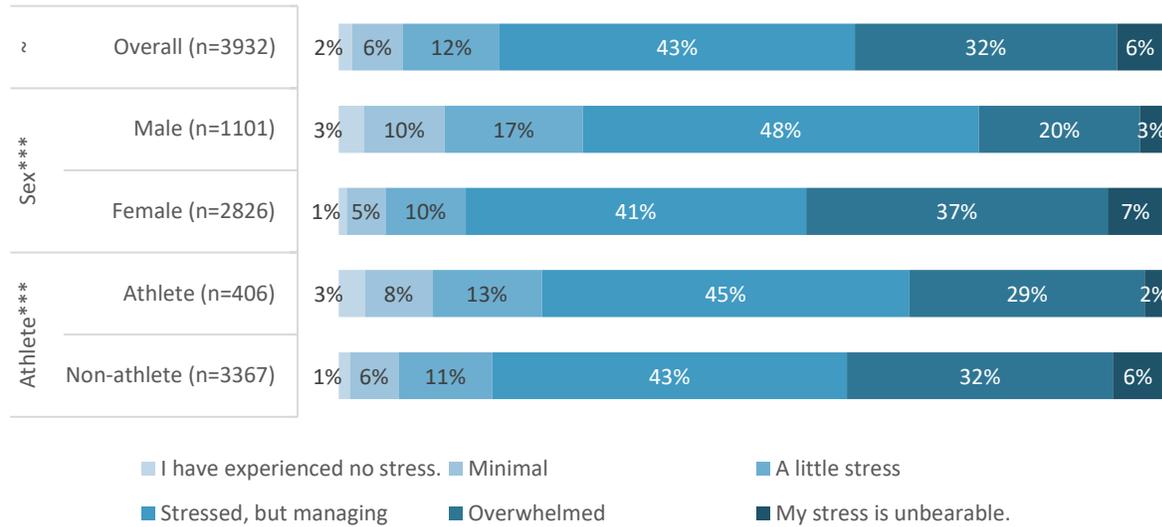
	Sex			Greek			Age		
	Women	Men	Sig.	Non-Greek	Greek	Sig.	Underage	Of-age	Sig.
Cigarettes							10%	15%	***
E-cigarettes	15%	19%	***	15%	20%	**	14%	18%	***
JUUL				12%	20%	***			

*= $p < .05$, **= $p < .01$ ***= $p < .001$

Mental Health

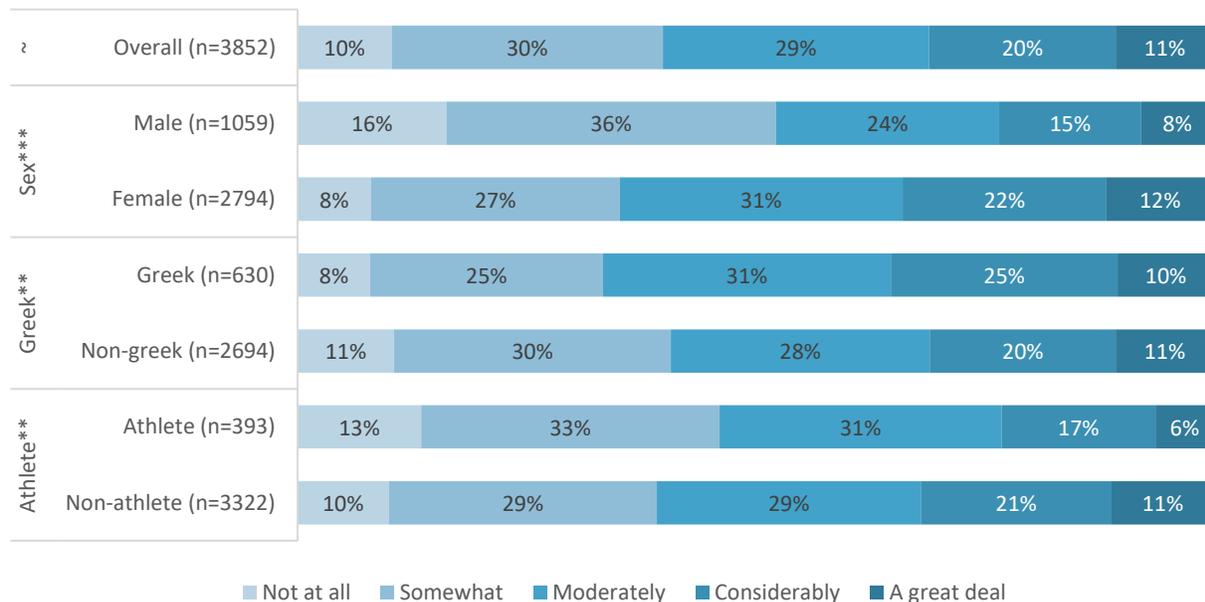
Students were asked a series of questions pertaining to mental health. When queried about how stressed they felt in the past two weeks, 38% (up slightly from 35% in 2020) said they were overwhelmed by their stress or that their level of stress was unbearable. Women and non-athlete students were more likely to suffer from more severe stress, as shown in Figure 60.

Figure 60: Level of stress in the past two weeks



Students were also asked to report the degree to which stress impacted or interfered with their academic life and personal life. The percentage of students who said that stress impacted or interfered considerably or a great deal with their academic life was 32% (vs. 32% in 2020). Women, Greek students, and non-athletes reported greater impact or interference with academic life from stress (Figure 61).

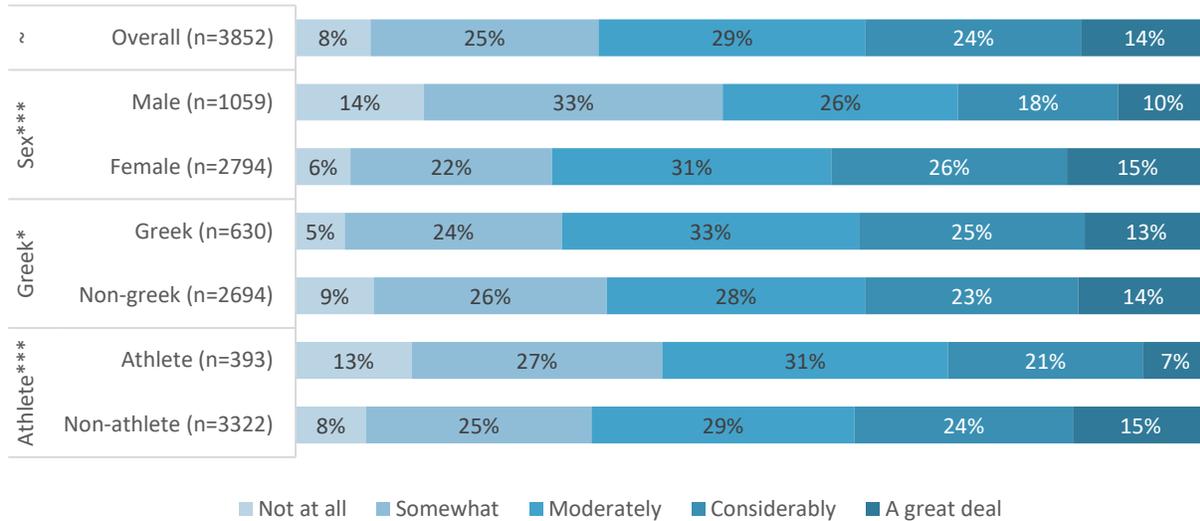
Figure 61: The degree to which stress impacted/interfered with academic life



*= $p < .05$, **= $p < .01$ ***= $p < .001$

Meanwhile, 36% of students (compared to 37% in 2020) said that stress impacted or interfered considerably or a great deal with their personal life. Women, Greek students, and non-athletes reported greater impact or interference with personal life from stress (Figure 62).

Figure 62: The degree to which stress impacted/interfered with personal life



Ninety-three percent of students (similar to 90% in 2020) said school/academics was their main stressor, while about half of respondents said future plans (55% vs. 57% in 2020), time management (53% vs. 49% in 2020), or financial concerns (50% vs. 53% in 2020; Figure 63).

Figure 63: Main stressors (n=3,842)

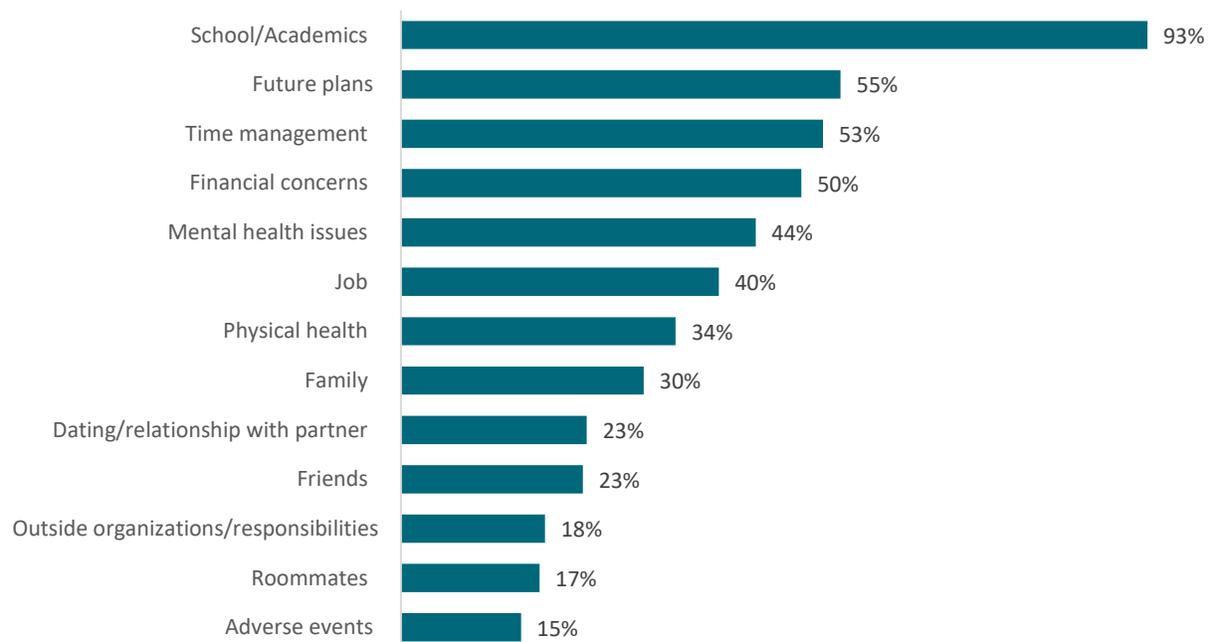


Table 17 shows the significant group differences in 12 of the 13 stressors listed. Women were more likely than men to select nine of the stressors suggested, and non-athletes were more likely than athletes to

*= $p < .05$, **= $p < .01$, ***= $p < .001$

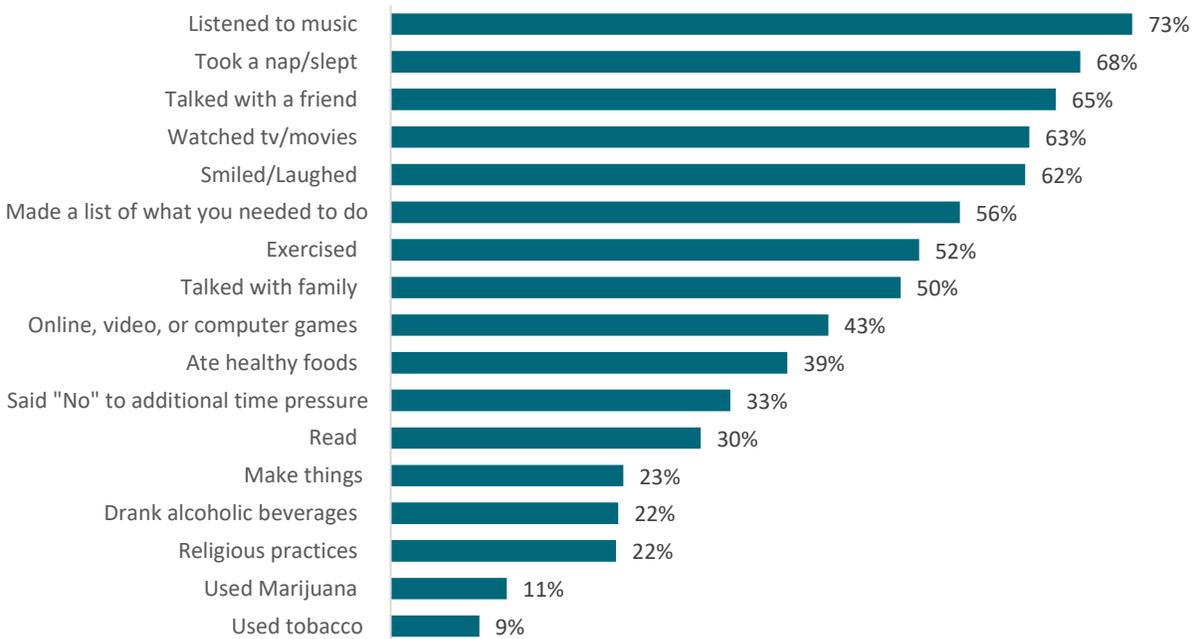
select eight of the stressors – the only exception was outside organizations (such as athletics) that was 2.6 times higher for athletes. Outside organizations was the greatest difference by Greek status, which was 2.7 times higher for students in Greek organizations than those that were not.

Table 17: Group differences in main stressors

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
School/Academics	94%	90%	***	93%	97%	***						
Future plans				56%	50%	**	52%	59%	***	56%	48%	**
Time management							55%	49%	***	54%	47%	*
Financial concerns				50%	44%	**	46%	56%	***	51%	40%	***
Mental health issues	49%	31%	***							46%	30%	***
Job	42%	34%	***	40%	34%	*	38%	43%	***	41%	27%	***
Physical health	37%	28%	***							35%	30%	*
Family	33%	23%	***	31%	25%	**				31%	23%	***
Friends	25%	18%	***	22%	29%	***	25%	20%	***			
Outside organizations/ responsibilities	19%	15%	**	14%	38%	***	20%	15%	***	16%	42%	***
Roommates	19%	13%	***	17%	24%	***	20%	14%	***			
Adverse events	16%	13%	**				13%	18%	***	16%	9%	***

Students were asked what they did in the past two weeks to relieve stress (Figure 64). Listening to music (73% vs. 73% in 2020), taking a nap/sleeping (68% vs. 71% in 2020), and talking with a friend (65% vs. 66% in 2020) were the most common methods selected. Respondents were less likely to report using substances (alcohol, marijuana, or tobacco) as stress relievers.

Figure 64: Methods to relieve stress (n=3,710)



*= $p < .05$, **= $p < .01$, ***= $p < .001$

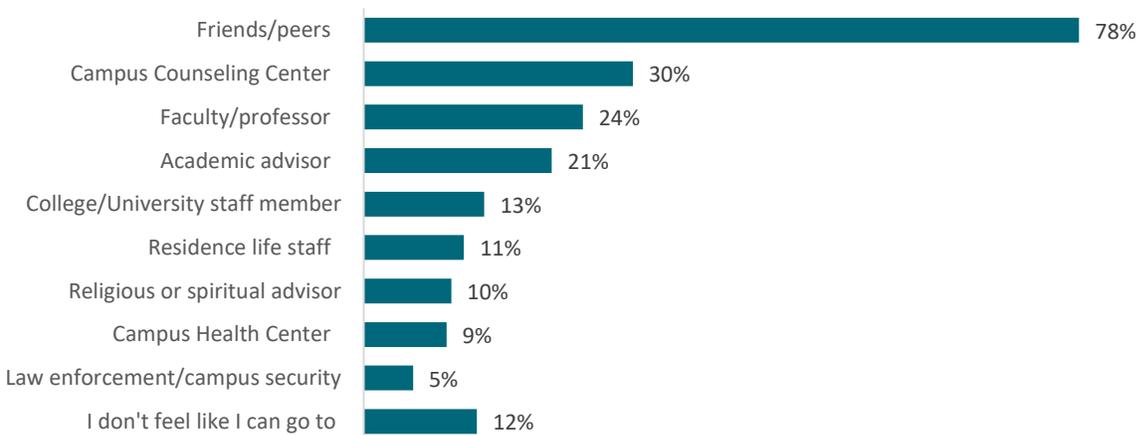
Table 17 shows the significant group differences in the 17 methods of stress relief that were listed in the NACHB. Each was associated with at least two group differences, with exercise, drinking alcohol, and using tobacco reported differently for all hour groups examined.

Table 18: Group differences in methods to relieve stress

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
Listened to music				74%	67%	***	74%	71%	*			
Took a nap/slept	71%	58%	***									
Talked with a friend	69%	56%	***	65%	73%	***						
Watched tv/movies	65%	57%	***							63%	57%	*
Smiled/Laughed	65%	56%	***	62%	66%	*						
Made a list of what you needed to do	63%	37%	***	56%	61%	*						
Exercised	50%	56%	***	49%	60%	***	50%	54%	*	49%	77%	***
Talked with family	54%	40%	***				48%	52%	*			
Online, video, or computer games	35%	64%	***	46%	31%	***						
Ate healthy foods							35%	45%	***	38%	45%	**
Said "No" to more time pressure				33%	40%	***	32%	35%	*			
Read	33%	24%	***	32%	26%	**	29%	33%	*			
Make things	25%	16%	***	23%	19%	*				24%	18%	**
Drank alcoholic beverages	21%	25%	*	21%	32%	***	16%	32%	***	23%	17%	**
Religious practices										21%	28%	**
Used Marijuana	11%	14%	**				10%	13%	*	12%	7%	***
Used tobacco	8%	11%	**	8%	11%	*	8%	10%	*	9%	5%	**

The majority of students (78%, similar to 80% in 2020) felt like they could reach out to friends/peers for support on campus due to personal concerns (Figure 65). Thirty percent (vs. 32% in 2020) reported feeling like they could go to the campus counseling center for support. Twelve percent of students felt there wasn't anyone they can go to on-campus for personal concerns.

Figure 65: On-campus support (n=3,888)



*= $p < .05$, **= $p < .01$, ***= $p < .001$

Table 19 shows the differences in sources of support for personal concerns on-campus for the four groups. Of the ten supports listed, only friends/peers was different for all four groups. Athlete status was the only group examined that showed consistent differences: athletes were more likely than non-athletes to use four supports.

Table 19: Group differences in on-campus support

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
Friends/peers	79%	76%	*	76%	91%	***	80%	77%	*	78%	83%	**
Campus Counseling Center				28%	33%	*						
Faculty/professor							21%	28%	***			
Academic advisor							20%	22%	*			
College/University staff member										12%	20%	***
Residence life staff	10%	13%	**				14%	6%	***	11%	15%	*
Religious or spiritual advisor	9%	12%	***	8%	13%	**				9%	13%	*
Law enforcement/campus security	5%	7%	***				6%	4%	**			
I don't feel like I can go to anyone				14%	5%	***						

When asked where students felt they could go to for support off campus, friends/peers (79%, up from 76% in 2020) and parents (72%, up from 69% in 2020) were the most common responses as shown in Figure 66. Five percent of respondents felt they did not have any off-campus supports.

Figure 66: Off-campus support (n=3,834)

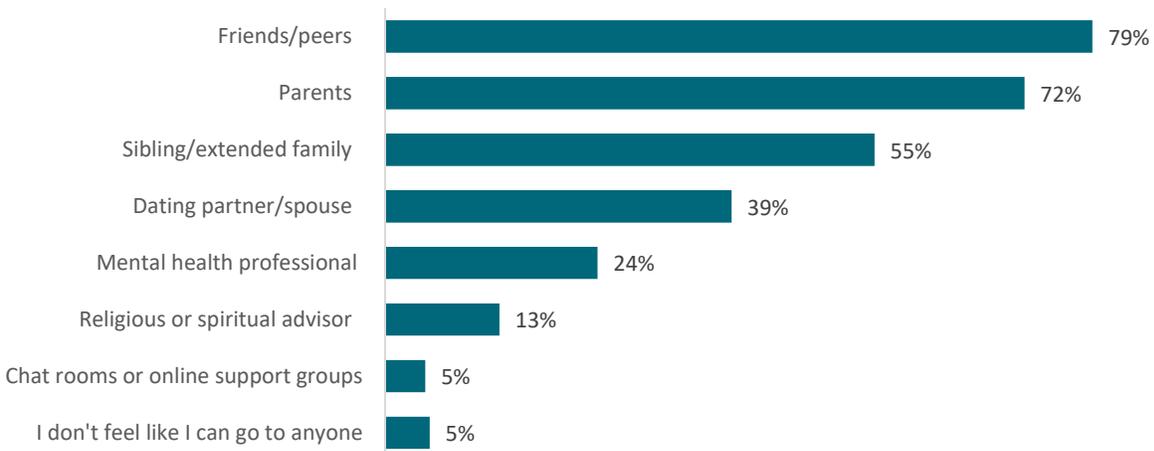


Table 20 shows the group differences in eight perceived off-campus supports. The greatest differences were based on sex and Greek-status, but did not follow a distinct pattern. Male and non-Greek students were more likely to say they didn't have supports off-campus than their counterparts.

*= $p < .05$, **= $p < .01$, ***= $p < .001$

Table 20: Group differences in off-campus supports

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
Friends/peers				78%	84%	***	77%	82%	***			
Parents				70%	79%	***				71%	77%	**
Sibling/extended family	56%	51%	**	53%	61%	***						
Dating partner/ spouse	41%	32%	**				36%	44%	***			
Mental health professional	26%	19%	***	78%	84%	**				25%	18%	**
Religious or spiritual advisor	12%	16%								12%	18%	**
Chat rooms or online support groups	3%	7%	***	5%	2%	***						
I don't feel like I can go to anyone	3%	6%	**	4%	1%	***						

Students were asked to report mental health issues they had experienced in the past year. Anxiety (69%, up from 59% in 2020), depression (54%, up from 30% for major depression in 2020), and panic attacks (33%, up from 29% in 2020) were the most common issues, as presented in Figure 67. Experiencing an abusive relationship (4%, down from 5% in 2020), and alcohol abuse/dependency (3% in both years) were the least commonly reported issues. Twenty-two percent of respondents had not experienced any of these.

Figure 67: Mental health issues (n=3,822)

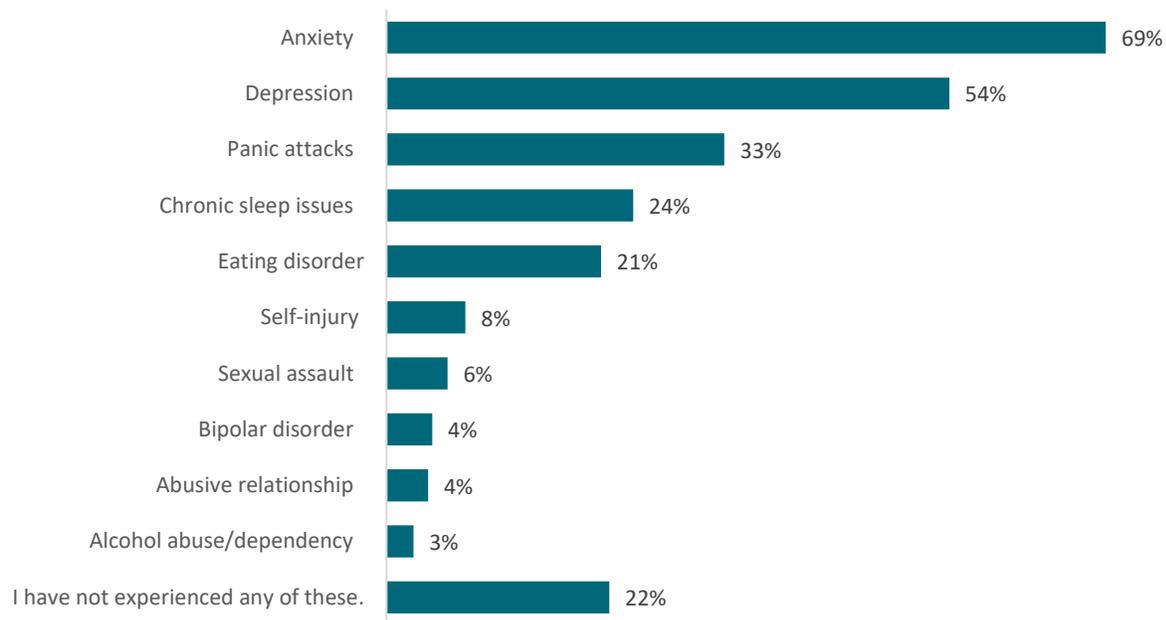


Table 21 shows the group differences in the reported mental health issues. Of the 10 issues listed, nine had significant group differences, and there were also significant differences in who had not experienced these: male students were almost twice as likely as female to say they had not experienced them. This aligns with the rest of the differences, which were more likely to be selected by women.

*= $p < .05$, **= $p < .01$ ***= $p < .001$

Table 21: Group differences in mental health issues

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
Anxiety	75%	54%	***							70%	60%	***
Depression	57%	46%	***	55%	50%	*				56%	44%	***
Panic attacks	38%	17%	***							34%	26%	***
Chronic sleep issues	25%	21%	*				22%	26%	*	25%	19%	**
Eating disorder	25%	10%	***	20%	24%	*	22%	18%	***	21%	17%	*
Self-injury	9%	4%	***	8%	6%	*	8%	6%	*			
Sexual assault	7%	2%	***	5%	8%	*						
Bipolar disorder				4%	3%	*						
Abusive relationship	5%	3%	**									
I have not experienced any of these.	17%	33%	***							21%	29%	***

Of the students who experienced a mental health condition in the past year, 36% (similar to 35% in 2020) did not seek assistance. More than half of the students (54% vs. 55% in 2020) initially sought assistance from friends and family, and 19% (similar to 18% in 2020) went to an off-campus mental health professional (Figure 68). Less than 5% of respondents sought help from a religious or spiritual advisor (4% vs. 5% in 2020), the campus health center (3% vs. 2% in 2020), the hospital emergency room (1% vs. 2% in 2020), or an in-patient psychiatric facility (1%, same as 2020).

Figure 68: Help seeking (n=2,992)

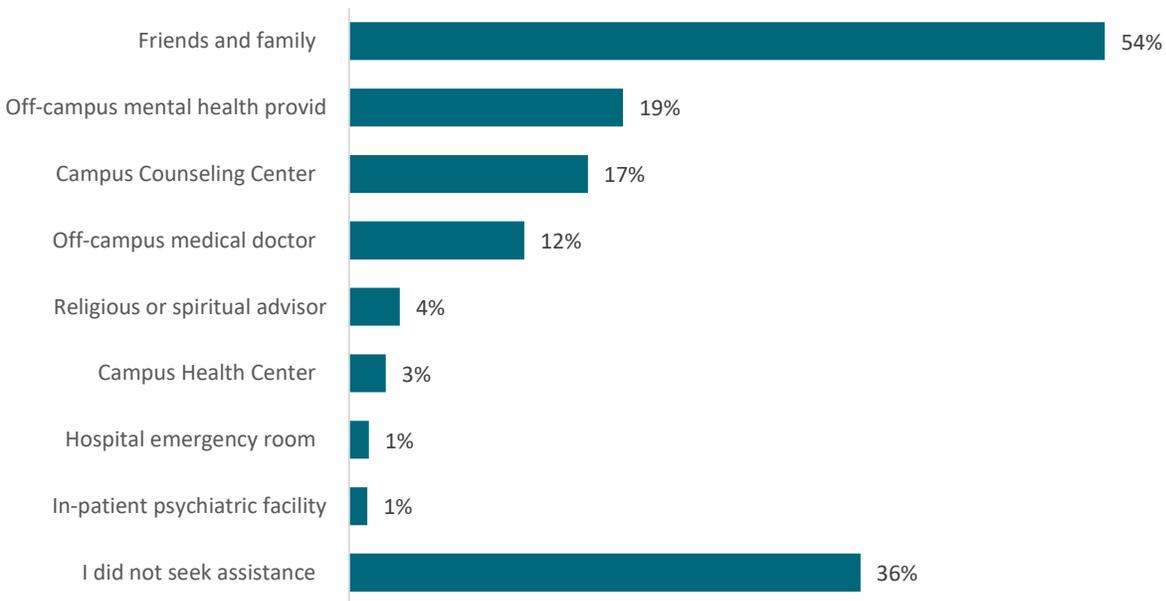


Table 22 shows the group differences in four of the eight sources of help initially after the issues identified in Figure 67. Women were more likely than men to seek help from all four supports, but were more than twice as likely to have visited an off-campus mental health provider.

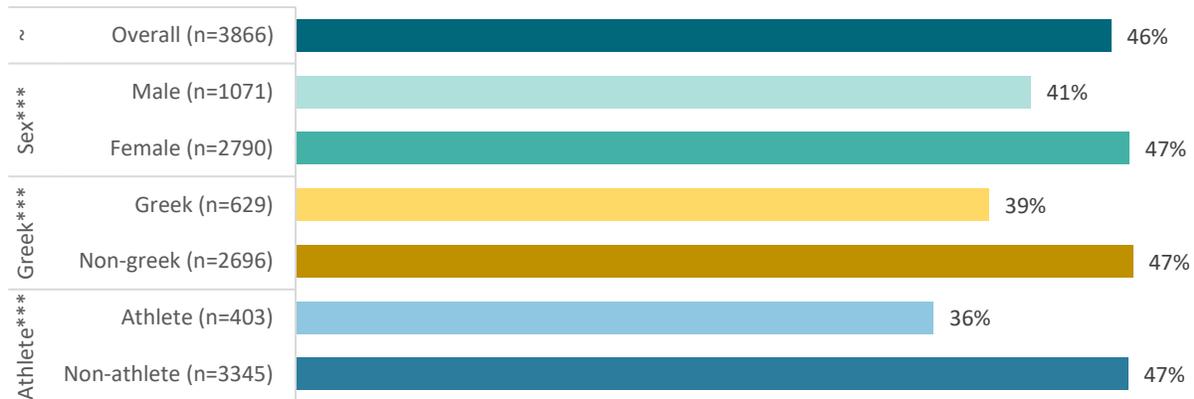
*= $p < .05$, **= $p < .01$ ***= $p < .001$

Table 22: Group differences in help seeking

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
Friends and family	56%	45%	***									
Off-campus mental health provider	22%	10%	***							20%	12%	***
Campus Counseling Center	18%	13%	**	17%	23%	**						
Off-campus medical doctor	14%	8%	***				11%	14%	*	13%	9%	*

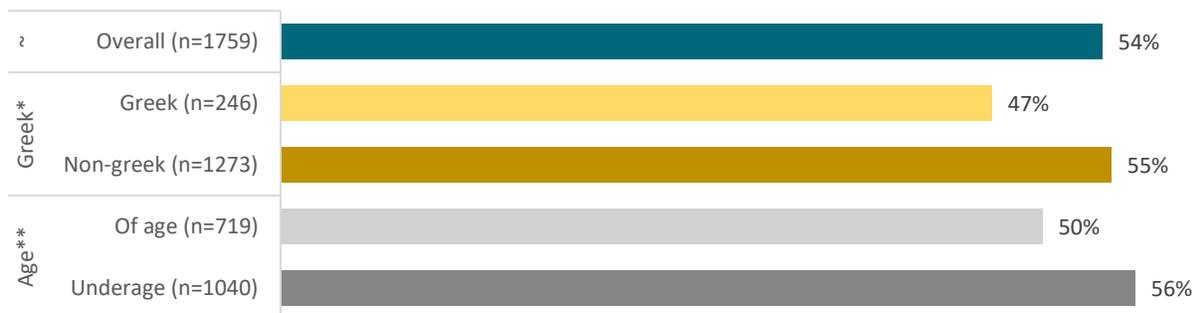
Forty-six percent of respondents (up slightly from 43% in 2020) indicated that they had suicidal thoughts at some point in their lives (Figure 69). Women, non-Greek students, and non-athlete students were more vulnerable to suicidal thoughts over their lifetime.

Figure 69: Suicidal thoughts - lifetime



Slightly over half (54% vs. 52% in 2020) of those who reported ever having had suicidal thoughts at some point in their life (n=1,759) said they had suicidal thoughts in the past year. Non-Greek and underage students were more vulnerable to suicidal thoughts in the past year, as presented in Figure 70.

Figure 70: Suicidal thoughts in the past year



Overall, 4% of the students who had suicidal thoughts reported attempting suicide in the previous year (same as 2020). Slightly more underage than of-age students reported attempting suicide in the past

*= $p < .05$, **= $p < .01$, ***= $p < .001$

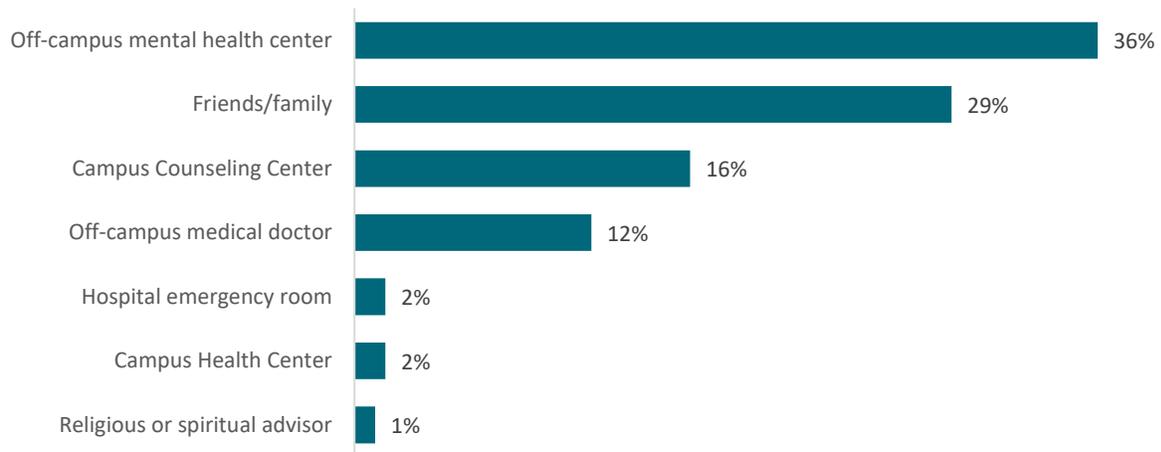
year (4% vs. 3%, $p < 0.05$). Less than half of students (43%, down slightly from 47% in 2020) who experienced suicidal thoughts in the past year sought assistance for their suicidal thoughts or attempts (Figure 71). Women were more likely than men to seek assistance (46% vs. 33%, both a decrease from 2020 – 52% vs. 36%).

Figure 71: Seeking assistance for suicide attempt/thoughts in the past year



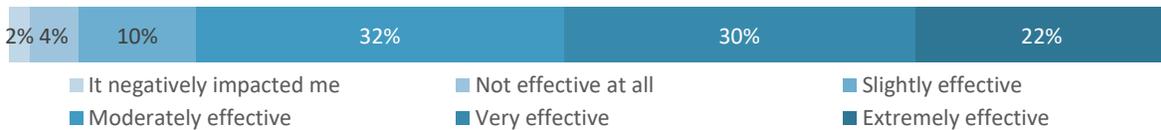
Thirty-six percent of these students (down slightly from 41% in 2020) sought assistance at an off-campus mental health center, and 29% sought assistance from friends or family (Figure 73).

Figure 72: Primary places to go for assistance for suicidal attempt/thought (n=410)



More than half of students who sought help (52%, similar to 50% in 2020) said that the assistance they were provided with was very or extremely effective, as presented in Figure 73.

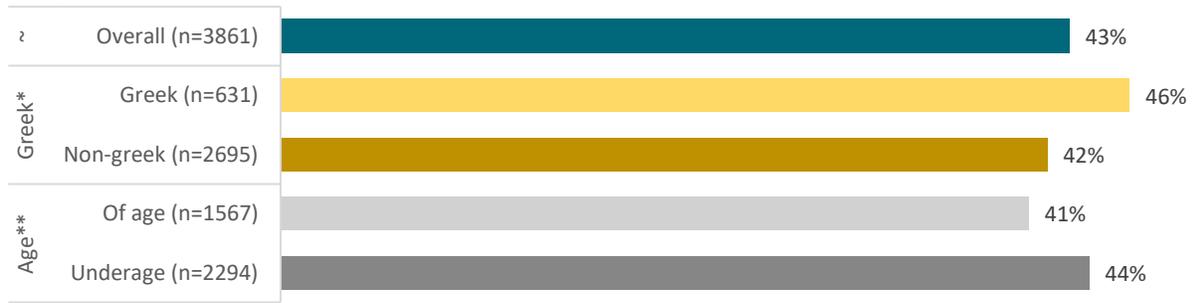
Figure 73: Effectiveness of the assistance (n=286)



Forty-two percent of students (vs. 45% in 2020) were concerned about a friend having suicidal thoughts or behaviors in the past year (Figure 74). Greek and younger students were more likely to have been concerned.

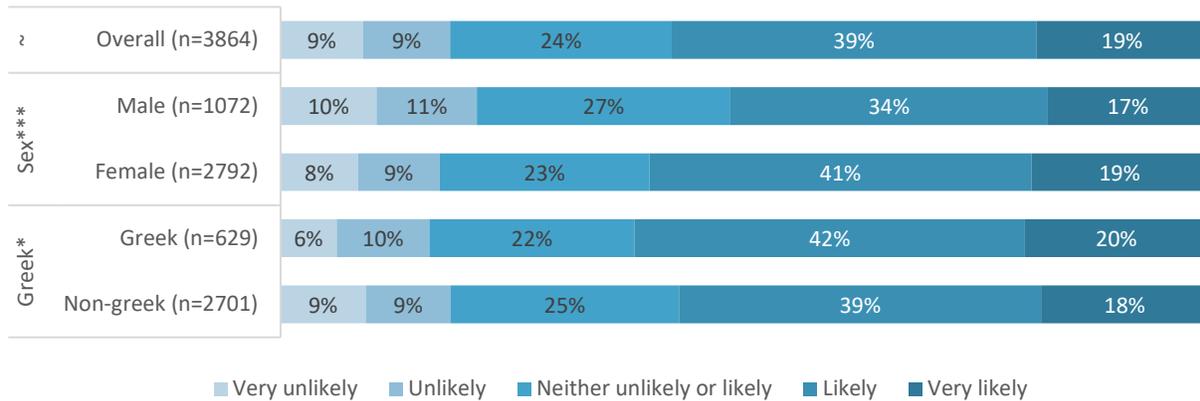
*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 74: Concern about a friend having suicidal thoughts or behaviors in the past year



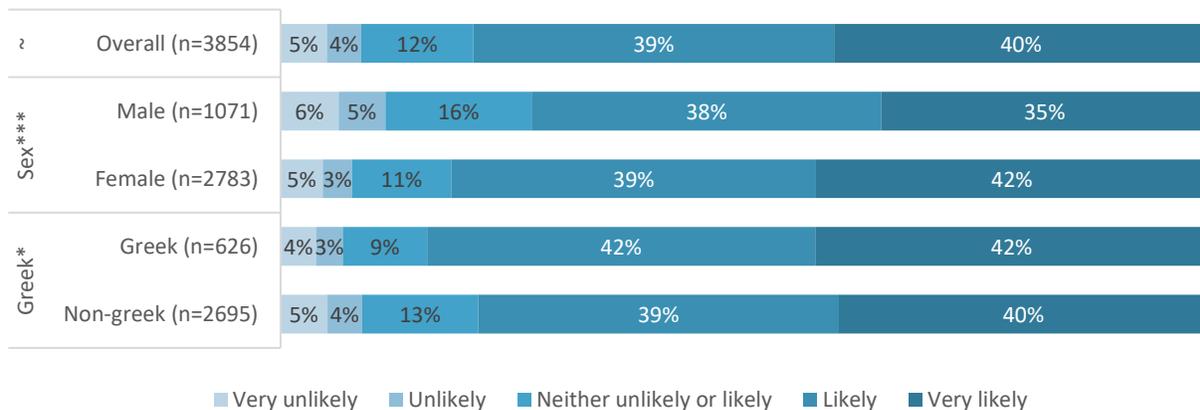
Nearly three in five students (58%, down from 62% in 2020) said they were likely or very likely to bring up the topic of suicide with someone whom they think is at risk (Figure 75). Women and Greek students were more likely than their counterparts to bring up the topic.

Figure 75: Likelihood to bring up the topic of suicide with someone at risk



About four out of five students (79%, down from 81% in 2020) said they were likely or very likely to refer someone who tells them they are thinking about suicide to a local resource (Figure 76). Once again, women and Greek students were more likely than their counterparts to refer someone.

Figure 76: Likelihood to refer someone thinking about suicide to a local resource

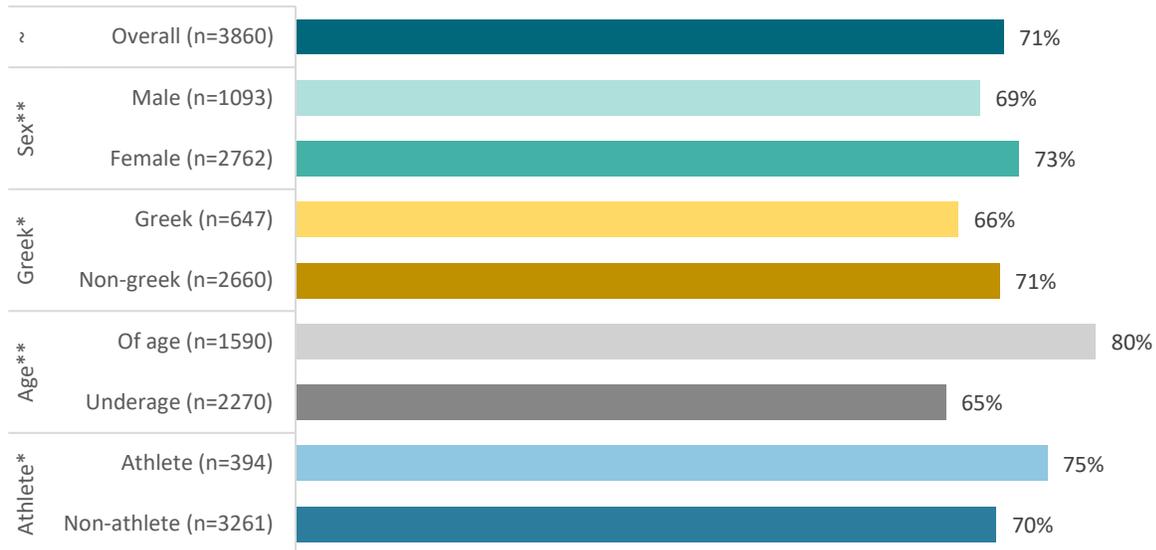


*= $p < .05$, **= $p < .01$ ***= $p < .001$

Miscellaneous

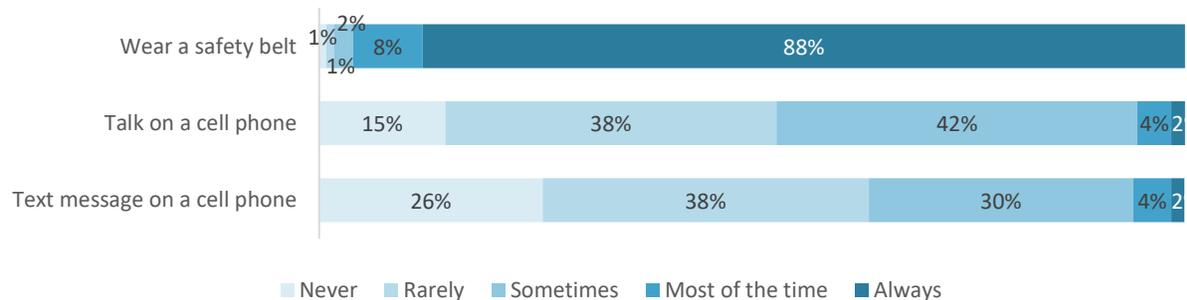
Seven in ten students (71%, down from 76% in 2020) indicated that they drove a vehicle while attending classes. The percentages were higher for women, non-Greek students, of-age students, and athletes (as shown in Figure 76).

Figure 77: Driving a vehicle while attending classes



Almost all students indicated that they wore a safety belt most of the time or always when they were driving (96%, similar to 97% in 2020; Figure 44). Meanwhile, 64% of students (comparable to 66% in 2020) indicated that they never or rarely text while driving, and 53% (similar to 52% in 2020) said they never or rarely talk on a cell phone while driving.

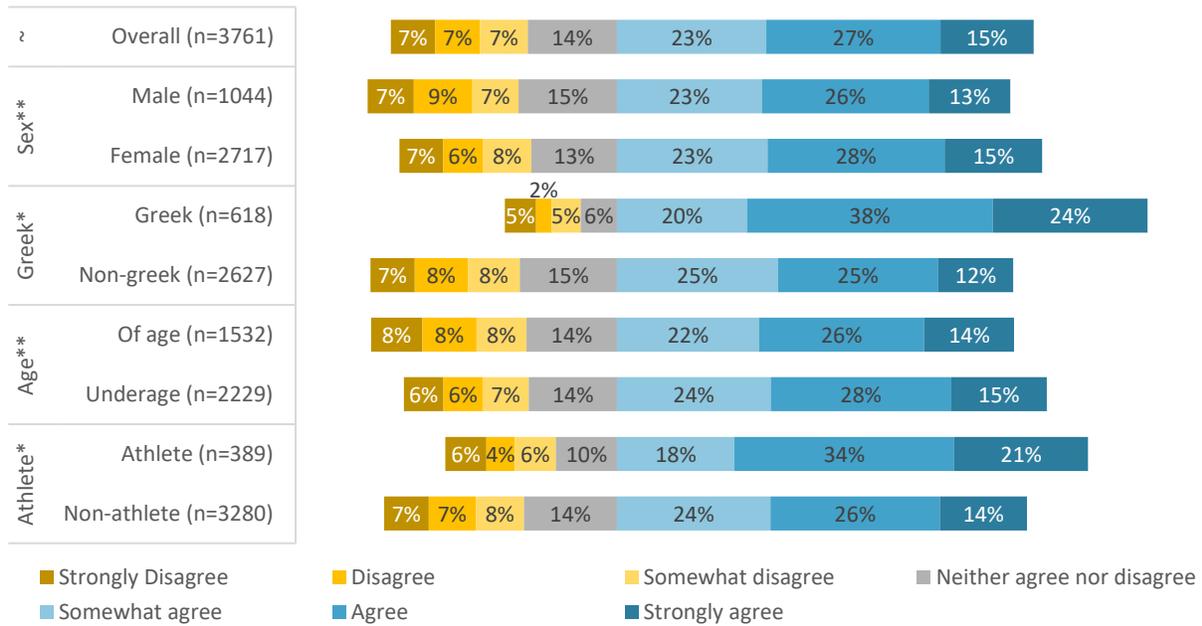
Figure 79: Driving behaviors (n=2,756)



Students were asked about whether they felt a sense of belonging to the campus, and 64% (down from 66% in 2020) agreed. The percentage of students who felt a sense of belonging was higher for women, Greek students, underage students, and athletes, as shown in Figure 80.

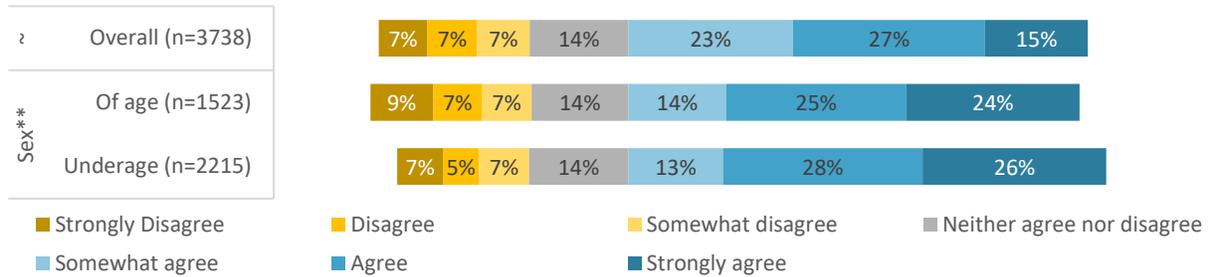
*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 80: Sense of belong to the campus community



When asked whether they would still attend the same institution if they were to start college over again, 65% (down from 70% in 2020) of students agreed. The agreement was higher for underage students, as shown in Figure 81.

Figure 81: Willingness to go to the same institution if they started college again



Just over a fifth of students (27% in both years) considered transferring in the past year. The percentage was higher for underage students and student-athletes, as presented in Figure 82.

Figure 82: Considered transferring in the past year



*= p<.05, **= p<.01 ***= p<.001

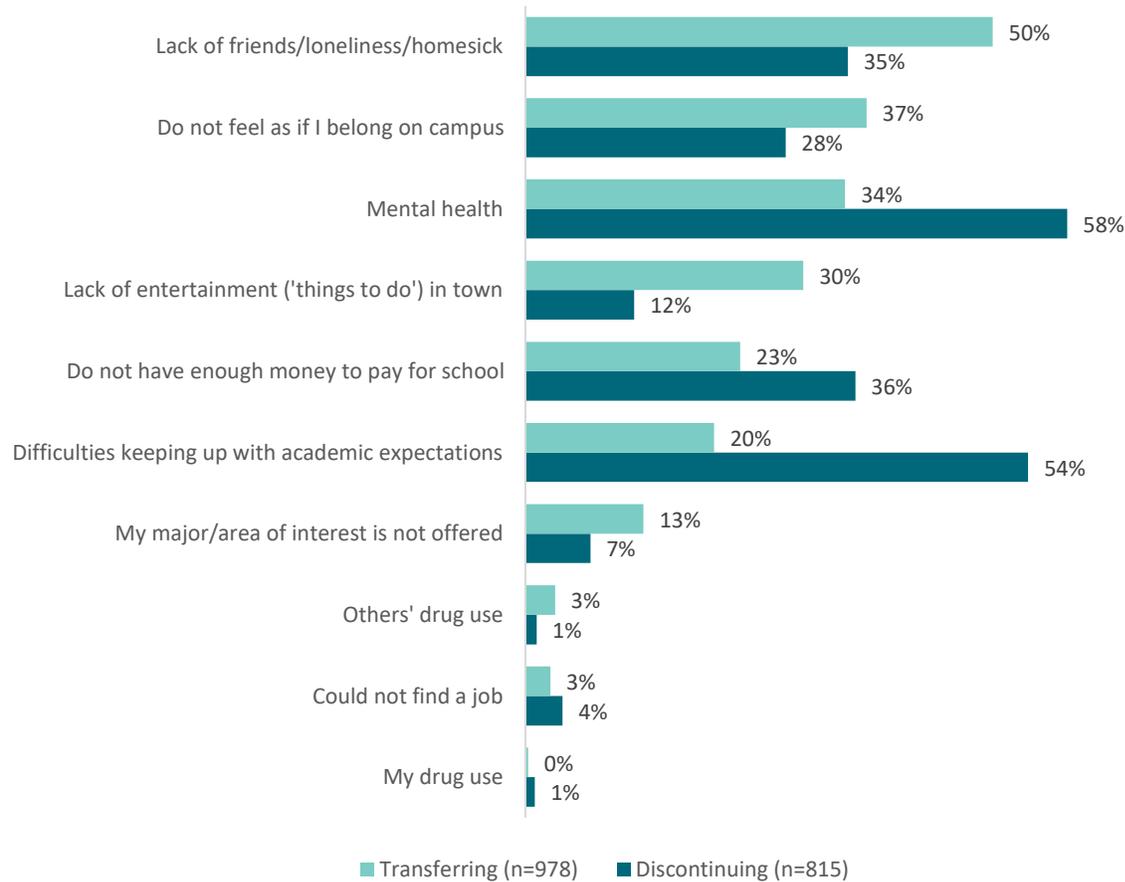
About one in five students (22% vs. 20% in 2020) considered discontinuing their college education in the past year. Non-Greek and non-athlete students were more likely than their counterparts to consider discontinuing their college education, as presented in Figure 83.

Figure 83: Considered discontinuing their college education



Half of all students who considered transferring from their current institution said it was because of a lack of friends/loneliness/homesickness (Figure 84). Students who considered discontinuing their education (dropping out), mental health was the most common reasons, followed by difficulties keeping up with academic expectations.

Figure 84: Reasons for transferring or discontinuing their education



*= $p < .05$, **= $p < .01$ ***= $p < .001$

Tables 23 and 24 show the group differences in reasons for transferring (Table 23) and discontinuing their education (Table 24). Few reasons overlapped between the two groups (although respondents could be in both groups): mental health by sex, and lack of friends AND others' drinking partying by age.

Table 23: Group differences in reasons for considering transferring schools

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
Lack of friends/loneliness/homesick	54%	41%	***	49%	65%	***	53%	44%	**			
Difficulties keeping up with academic expectations										21%	13%	*
My drinking/partying				30%	39%	*						
Others' drinking/partying							6%	3%	*			
Do not feel as if I belong on campus	40%	28%	***							38%	25%	**
Mental health	39%	23%	***									

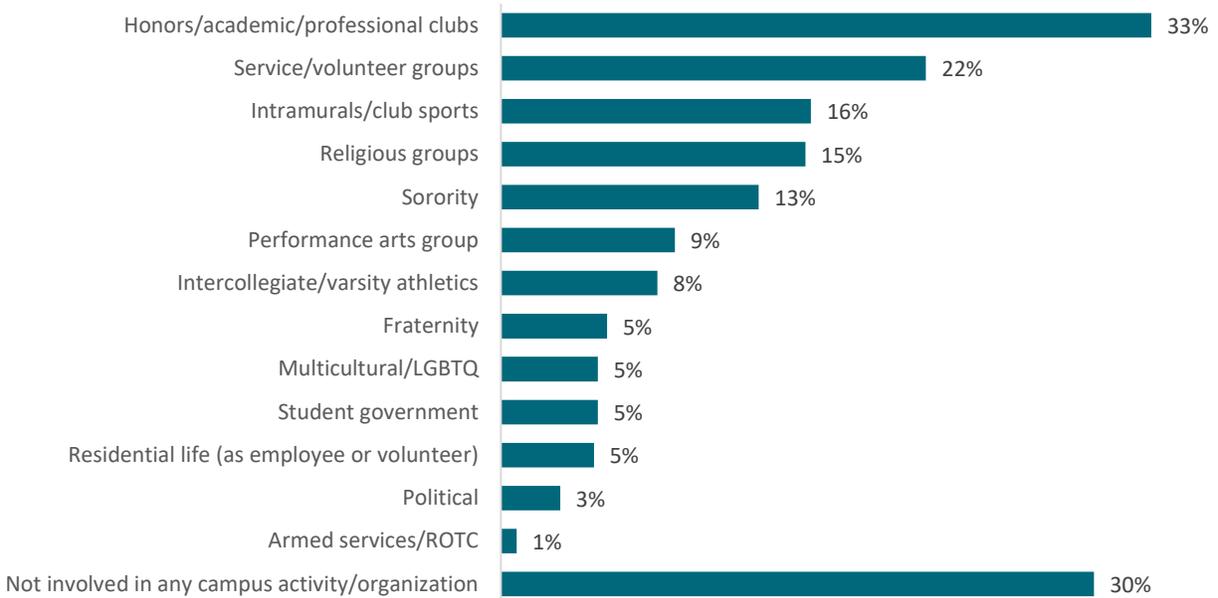
Table 24: Group differences in reasons for considering discontinuing their education

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
Lack of friends/loneliness/homesick							40%	28%	***			
Do not have enough money to pay for school				37%	26%	*						
Others' drinking/partying							3%	1%	*			
Others' drug use							2%	0%	*			
My major/area of interest is not offered							9%	5%	*			
Mental health	65%	42%	***							60%	42%	**

Three out of 10 students (30%, down from 41% in 2020) said they were not involved in any campus activity or organization (Figure 85). The most common campus activities and organizations in which students were involved were honors/academic/professional clubs (33% vs. 24% in 2020) and service/volunteer groups (22% vs. 18% in 2020).

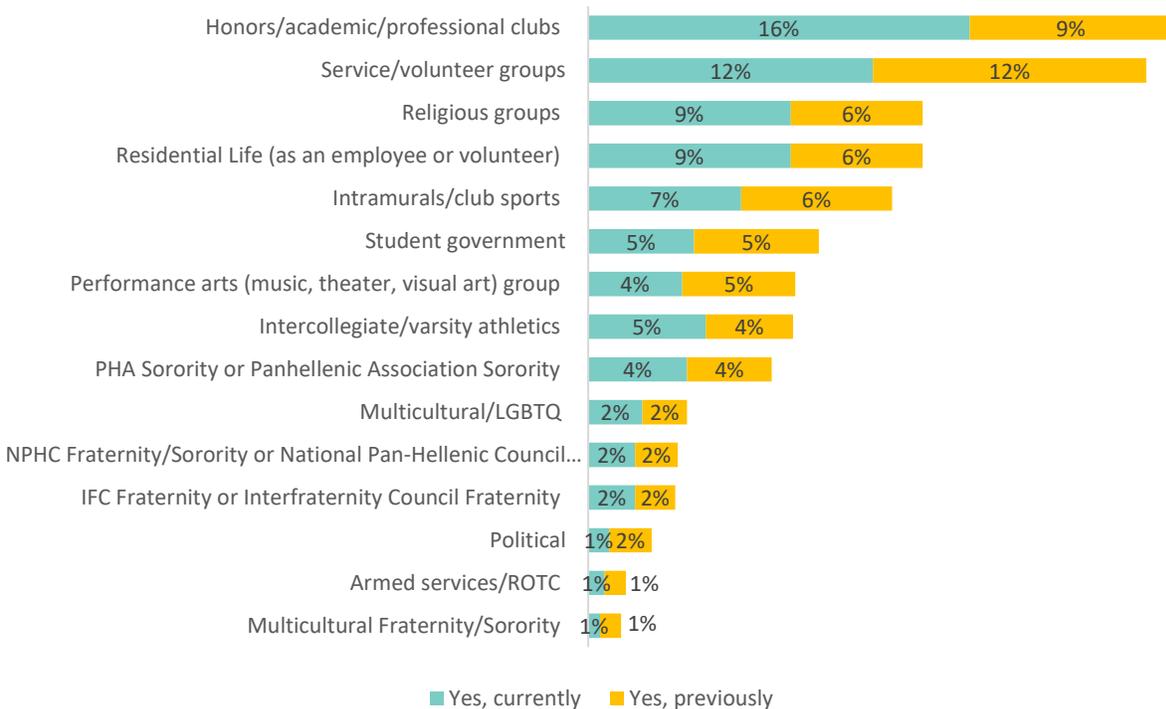
*= $p < .05$, **= $p < .01$ ***= $p < .001$

Figure 85: Campus activities and organization involvement (n=3,622)



Sixteen percent of students (similar to 15% in 2020) involved in these activities or organizations reported holding a current leadership position in an honors organization, while 9% (up from 7%) said they had held one in the past. The next common leadership marked was for service/volunteer groups (12% at the time of survey, same as 2020, and 12% in the past, up from 10% in 2020), as presented in Figure 86.

Figure 86: Activities or organizations in which students had a leadership position



*= $p < .05$, **= $p < .01$ ***= $p < .001$

If students participated in an organization, they were asked whether there were any activities expected of someone joining or participating in the group. Ninety-one percent of respondents said none of the above to the list show in Figure 87. The most common activities were participating in a drinking game (4% vs. 3% in 2020) and singing or chanting by themselves or with select others of groups in public (not related to an event, game, or practice) (3% vs. 2% in 2020). Table 25 shows the group differences in expected activities, which were more common for men, Greek students, older students, and athletes.

Figure 90: Activities expected of someone joining or participating in the group (n=2,336)

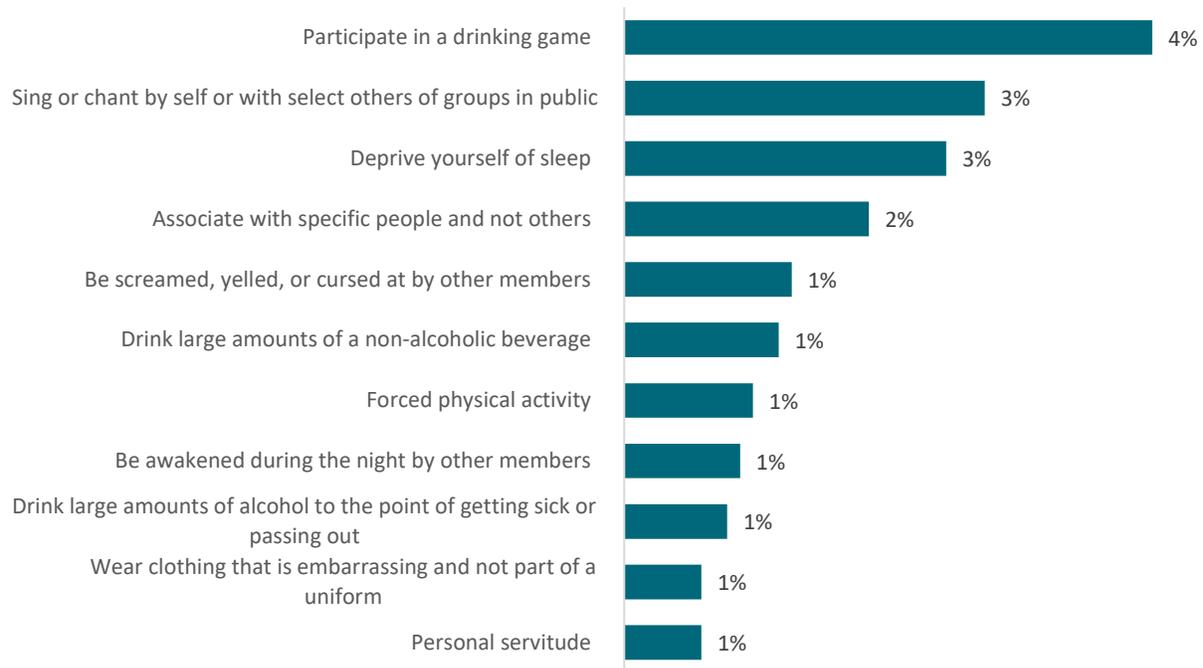


Table 25: Group differences in expected activities

	Sex			Greek			Age			Athletes		
	Women	Men	sig	Non-Greek	Greek	sig	Underage	Of-age	sig	Non-athlete	Athlete	sig
Participate in a drinking game	3%	6%	*									
Sing or chant by self or with select others of groups in public				2%	6%	***	2%	4%	**			
Be screamed, yelled, or cursed at by other members										1%	3%	*
Forced physical activity	0%	2%	*							1%	4%	**
Personal servitude							0%	1%	*			
None of the above	92%	89%	*	93%	87%	***	93%	89%	**	92%	86%	**

Thirty-seven percent of respondents who participated in the above activities said they thought any of the activities were to humiliate, degrade, abuse, or endanger someone regardless of a person's willingness to participate (vs. 35% in 2020). Women were more likely to say yes (38%) than men (30%).

*= $p < .05$, **= $p < .01$, ***= $p < .001$