

Providence College

Drug-Free Schools and Communities Act Regulations Biennial Review Fall 2024 - Spring 2026 (October 2026)

Introduction

The Department of Education's Drug-Free Schools and Communities Act Regulations (34 C.F.R. Part 86) require that institutions of higher education (IHEs) that receive federal funding must conduct a biennial review of its Alcohol & Other Drugs (AOD) programs and policies to determine program effectiveness and consistency of policy enforcement and to identify and implement any changes needed to either. The Department of Education recommends that IHEs conduct the biennial review in even-numbered years and focus their report on the two preceding academic years.

Statement of Alcohol and Drug Prevention Program Goals

Providence College is committed to educating our community members about the dangers associated with the overuse and misuse of alcohol and drugs, to developing campus programs and policies that help to reduce the risk associated with these behaviors, and to ensuring that we have the resources and procedures in place to address problems that may arise from the overuse or misuse of alcohol and/or drugs. Teams from Student Affairs, Academic Affairs, Athletics, the Chaplain's Office, Public Safety, Human Resources, and the General Counsel's Office all work collaboratively on the development of our programs and policies.

Description of Alcohol and Drug Prevention Program Elements

Skills Education and Training Programs for Students

- 2024-25 Vector Solutions AlcoholEdu and CannabisEDU online education program for first-year students and transfer students (alcohol, cannabis, e-cigarettes)
- 2025-26 Vector Solutions AlcoholEdu, CannabisEDU, and "Hazing Awareness and Prevention for Students" online education programs for first-year students and transfer students
- Friar Family: Step Up! Bystander Intervention Training for first-year and transfer students to encourage peer attention, support and intervention.
- Discussion guide shared with parents during First Year Student Orientation programming: A Parent Handbook for Talking with College Students About Alcohol and Drugs (also available in Spanish)

Residence Life Programs & Policies

- Residence Hall Environment Initiatives
- Class-year specific housing (freshmen residence halls, sophomore floors and junior/senior housing)
- All residence halls designated specifically for first-year students prohibit alcohol

- All forms of hard alcohol are prohibited in all residence halls, suites and apartment complexes
- Limiting the quantity of alcohol allowed in residence facilities per of-age student
- Limiting access to alcohol by underage students who are in the presence of students that are of legal age in the common areas of the suites and apartments
- Working partnership with Residence Life and the Office of Public Safety to include residence hall “liaison” assignments that perform surveillance during the evenings and early morning in concert with the building/area’s hall director to enforce policy and build community
- Hall Directors & Resident Assistants engage in nightly surveillance of the interior and exterior of the residence halls to enforce policy and uphold the safety and security of the residence community
- Regular hall and floor meeting where alcohol policies are reviewed and the community agreements among the residents are revisited

Off-Campus Life Collaborations & Programs

- Collaborative efforts between Providence College Public Safety, Providence Police, local area institutions and the Providence neighborhood to minimize alcohol abuse off campus
- Mandatory meeting conducted by Public Safety, Providence Police, Dean of Students Office, and the 02908 Club (off campus landlord organization) with juniors and seniors who live off campus to inform them of policies, state laws, local ordinances and other important information

Personal Counseling Center Ongoing Alcohol and Drug Initiatives

- The Personal Counseling Center (PCC) provides students with confidential services for a wide range of personal, developmental, and psychological concerns. In addition, the PCC offers confidential services for substance use issues, including alcohol and other drugs, as well as other addiction related concern.
- The initial stages of counseling and assessment assist students in identifying and acknowledging the emotional, behavioral, interpersonal, and physiological impact of substance use and other behavioral concerns such as problematic sports betting, gambling, excessive digital media use and online activities, to determine the most appropriate treatment options. Students seeking individual counseling to address these challenges may be experiencing a wide range of difficulties that affect various aspects of their lives. In addition to counseling provided by specialist substance use counselors, individual counseling is also available with all PCC staff for students who are concerned about a friend or family member’s alcohol or drug use.
- Students may initiate contact with the substance use counselor through self-referral to the PCC and can also be referred by a variety of campus offices such as the Office of Residence Life, Office of Community Standards, Office of Student Affairs, The Chaplain’s Office, and by any concerned parent, friend, or faculty member.
- Substance use counseling services includes but is not limited to: screening and assessment, intervention, treatment planning, ongoing individual counseling treatment, group therapy, alcohol and drug education that includes protective behavioral strategies and harm reduction methods, and connection to PC Alumni Peer Recovery Support Network
- Students are referred (as needed) to higher levels of care including: inpatient programs, partial hospital programs, intensive outpatient programs and detox. Additional referrals can include community-based peer recovery coach, groups such as: Alcoholics Anonymous, Narcotics

Anonymous, Smart Recovery, Catholic in Recovery, Al-Anon, Adult Children of Alcoholics, and Gambling Anonymous just to name a few.

- Students' treatment plans and recommendations will vary per individual depending on such factors as substance use or behavioral history, mental health history, family history, psychological and physiological effects of usage, and the impact of usage on the student's functioning.
- The PCC provides access to student self-assessment tools and self-screening on its webpage. Screenings include the e-Chug an alcohol checkup to go and the e-Toke a marijuana checkup to go.
- The PCC provides outreach and prevention programming. Activities and educational workshops throughout the year that highlight substance use and harm reduction. Outreach includes but is not limited to: First Year Orientation, Health Fairs, and other student and student athlete programming. Psycho-educational materials on display at the PCC are shared with students and Club and Organization Leadership to distribute to their members. Materials include but are not limited to: Booklets/pamphlets on topics such as: Rethinking Drinking-Alcohol and your Health, Overcoming Alcohol, Booze n' Bull a lethal mix, Cocaine fantasy and nightmare, Club Drugs, Ecstasy, Marijuana, Prescription Drug Abuse when help turns to harm, Over the Counter Drug Abuse more dangerous than you think, Salvia don't be a guinea pig, GHB, Rohypnol and Ketamine knockout punch; Binge Drinking; Helping a Friend with a Drinking Problem.
- The PCC supports the Providence College Compass Collegiate Recovery Program (CRP) which offers on-campus peer recovery support, programming, and sober activities and events, as well as opportunities for students to connect with Recovery Allies. Compass also provides professional recovery support services, including access to a Certified Peer Recovery Specialist. In addition, Compass partners with Herren Wellness to provide an off-campus Recovery House that offers substance-free living, a 24/7 live-in house manager, recovery-focused support, and sober social activities and events.

Campus Events & Social Space

- Cross-departmental collaborative late-night weekend programming with clubs/orgs and Student Engagement and Leadership ("SEAL") event staff to provide healthy alternatives to students
- SEAL, Recreational Sports, and the Board of Programmers provides a significant number of late-night activities and programs on weeknights and daytime weekend events
- Access to 24-hour co-educational study and social space in the Aquinas Lounge, Phillips Memorial Library, Raymond Dining Hall, and Slavin Center for all students
- Alcohol policy at events as per the student handbook and protocol implemented by SEAL/clubs and organizations for events that do not take place in McPhail's
- The Clubs and Organizations Handbook notes the following: advertising must not offer profanity, nudity, or other content not suitable for general audiences. Alcohol must never be the main focus of advertisements. Advertising for any event featuring alcohol must include the phrase "with proper ID." Students may not solicit bars, liquor stores, strip clubs, or other similar establishments for raffle prizes, giveaways, location or sponsorship of their fundraising efforts.
- Discussion about alcohol and hazing at Executive Board Training. Zero tolerance policy for club sports events/social gatherings
- All non-student events with alcohol follow college procedures via the Office of College Event Management & Planning

Athletics Training and Friar Edge Initiatives

- Fall and Spring 2024 & 2025 - Posters displayed through Athletic facilities and locker rooms "Did you know?" Campaign with education on alcohol, cannabis, hazing, nicotine, and cocaine
- Fall 2024, Fall 2025 & Fall 2026 – Vector Solution - Alcohol & Substance Misuse modules for all first-year student-athletes
- Fall 2024 – Susan Ellingwood and Peter Gray from Personal Counseling Center ran harm reduction sessions for Men’s Lacrosse, Men’s Ice Hockey and Volleyball Program
- February 2026 – Taylor Hootan Foundation presented to all student-athletes on appearance and performance enhancing substances including anabolic steroids, human growth hormone, energy drinks and dietary supplements
- February 2026 – Elaine Pasqua presented to all freshmen student-athletes on the consequences of high-risk behaviors, partying safely, bystander intervention and strategies to step back, assess and walk away

Staff Training and Development Initiatives

- Training of professional staff in Motivational Interviewing techniques and Brief Alcohol Intervention strategies by Dr. George Parks, Associate Director of Addictive Behaviors Research Center at the University of Washington
- Training facilitated by the Personal Counseling Center for residence life professional staff
- Beginning in Fall 2025, in accordance with Rhode Island’s opioid overdose prevention requirements for college and university housing, Residence Life staff, including resident assistants, receive training in the administration of opioid antagonists. Opioid antagonists are maintained in College-owned or operated housing units and are accessible to trained Residence Life staff for emergency use.
- TIPS training (Training for Intervention Procedures) for all McPhail’s (on campus pub) staff
- Certified bartenders only serve alcohol at McPhail’s

Evidence-Based Alcohol Interventions for Both Judicially Mandated and Self-Identified At-Risk Students include but are not limited to:

- Brief Alcohol Screening and Intervention for College Students (B.A.S.I.C.S.) – A two session alcohol assessment and feedback program designed to assist students in exploring their alcohol use
- Vector Solutions “Alcohol and Other Drugs – Sanctions” online program – A reality-driven course designed to help students better understand why they struggle with alcohol and/or other drugs and learn avoidance strategies and other tactics.
- Referrals to the Personal Counseling Center for substance use assessment, psychoeducation and motivational enhancement to support harm reduction and protective behavioral change.

Community Standards Sanctions

- The Office of Community Standards has focused sanctions for alcohol offenses on educational objectives, including research and reflection papers/assignments, civic and community engagement opportunities, community mentoring program, alcohol intervention meetings, and counseling referrals.

Emergency Response/Alcohol Transport Protocols

- Intoxicated students are transported to a local medical facility for safety, assessment, and treatment. Students must be cleared by Emergency Room medical professionals to return to campus.
- All students who experience a transport to the hospital due to alcohol or other substance must attend mandatory session(s) with the Substance Use Clinical Counselor. The American College of Emergency Physicians, Emergency Nurses Association, American College of Surgeons-Committee on Trauma, and the American Public Health Association, have identified Alcohol Screening, Brief Intervention and Referral to Treatment as a pivotal injury and illness-prevention strategy to improve the health and well-being of patients seen in the Emergency Departments due to substance use. Students must schedule their appointment with the Personal Counseling Center (PCC) by the following business day by calling 401-865-2343. When calling students MUST identify that it is to follow up from a transport to expediate the appointment with the Substance Use Counselor. As appropriate, the Personal Counseling Center uses evidenced based screening methods including Cage Aid, AUDIT, and DAST. For additional information related to PCC services, please see: <https://personal-counseling.providence.edu/>
- Students are required to attend the Brief Alcohol Screening and Intervention for College Students (B.A.S.I.C.S.) program. The program is an evidenced based prevention and education approach to address alcohol and drug use. The program is conducted over the course of two sessions. The intervention prompts students to evaluate and explore concrete steps to change their drinking and substance use patterns through the lens of risk and harm reduction. The aims of the BASICS program are to reduce alcohol consumption and to promote healthier choices.
- Mandatory parent notification after alcohol transports for students under age 21. The Office of Residence Life & Housing recommends that you talk with your family about your alcohol transport.
- Caller Amnesty – A student who calls Public Safety for medical assistance on behalf of another person due to use or abuse of alcohol or drugs will not be subject to judicial action for the following conduct violation(s) only: use, possession, or distribution of alcoholic beverages.
- Chaplain's office provides added support to students by calling 401.865.2216
- Residence Life & Housing professional staff member support by calling 401.639.9110

CARE Team

- The CARE Team is an interdepartmental intervention & support team for students with concerning behavior including the misuse/abuse of alcohol and drugs. The team is led by the Dean of Students Office, and is comprised of staff from Residence Life, Academic Affairs, Personal Counseling, Student Health Services, the Chaplain's Office, Public Safety, and Community Standards. The CARE team meets weekly and is dedicated to supporting students and promoting student well-being and success in the context of community safety. Students who are referred to the CARE Team for alcohol/substance use or abuse are assigned a CASE manager who can offer a range of supportive referrals and resources depending on the severity of the concern including, but not limited to referral to substance use clinical counselors, referral for a harm reduction program (i.e. CHOICES, B.A.S.I.C.S., etc.), connection to other clubs and campus activities, and information on medical leaves of absences for students who meet the criteria for a more intensive treatment program.

The following chart summarizes the number of referrals to the CARE team for alcohol/substance use or abuse:

Semester	No. of Referrals
Fall 2024	9
Spring 2025	5
Fall 2025	16
Spring 2026	8
Total	38

Faculty & Staff Resources – Employee Assistance Plan - Lucet & Blue Cross Blue Shield of RI

The Lucet EAP is a free benefit that is available to all faculty and staff. The service is available 24/7 and offers employees confidential access to a variety of programs and counseling services. To contact the Lucet EAP call 800-624-5544 or visit them online at: <https://eap.lucethealth.com> (Company Code is providencecollege {no space}).

Blue Cross Blue Shield of RI offers access to resources for employees to connect with specialists trained in addressing substance use disorders, at 844-361-7712. Employees can sign-in to register on bcbsri.com and go to Find a Doctor and search by specialty.

AOD Program Assessment Data

2024/25 Vector Solutions AlcoholEdu for College Impact Report

All new students (first-year and transfer) completed the Vector Solutions AlcoholEdu Online Prevention Program in August 2024.

AlcoholEdu® for College Snapshot

Designed by prevention and compliance experts to provide your students with knowledge and skills to support healthier decisions related to alcohol.

Sample Size

1,279 students
at Providence College
completed surveys in
AlcoholEdu® for College from
June 1, 2024 to February 25,
2025.

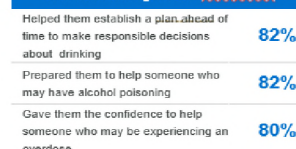
Impact on Learners

Students increased their alcohol-related knowledge, and their skills associated with healthier behavior.

Average Assessment Score:



Your students agree that *AlcoholEdu®*:



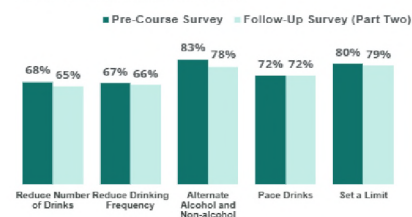
Note: Percentages represent students that responded "agree" or "strongly agree" to each item in the Post-Course Survey (n = 1,234).

Drinking Behavior and Norms

Intent to change drinking behaviors can be impacted by perceptions — or misperceptions — of peers' behavior. Prevention education can influence the students' perception of norms at your school and increase their intention to avoid risky behavior in the future.

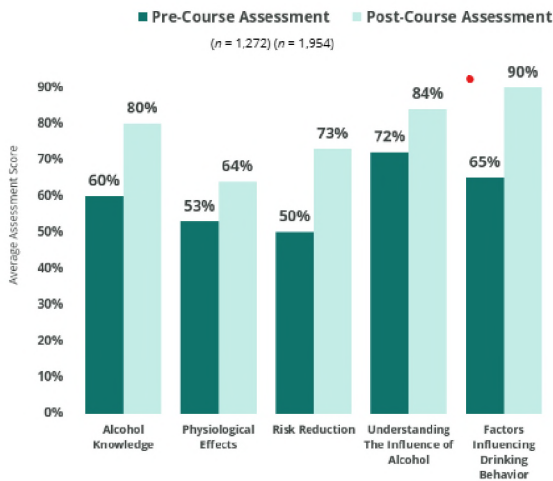
80% of students at Providence College report that *AlcoholEdu® for College* changed their perceptions of others' drinking behavior.

Percent of Student Drinkers who plan to:



Impact on Learners

Knowledge Gain



Course Impact

Your students reported that **AlcoholEdu® for College:**
(from the Post-Course Survey; n = 1,234)

Gave them the confidence to help someone who may be experiencing an overdose	80%
Prepared them to help someone who may have alcohol poisoning	82%
Helped them establish a plan ahead of time to make responsible decisions about drinking	82%
Changed their perceptions of others' drinking behavior	80%

Programming Tip

Where are your students knowledgeable and where is there room to learn more? AlcoholEdu® is intended to provide foundational knowledge and skills that can be built upon. Knowledge data can inform which content areas should be built out or reinforced as part of your ongoing prevention efforts.

Behavioral Intentions

Impact For High-Risk Students

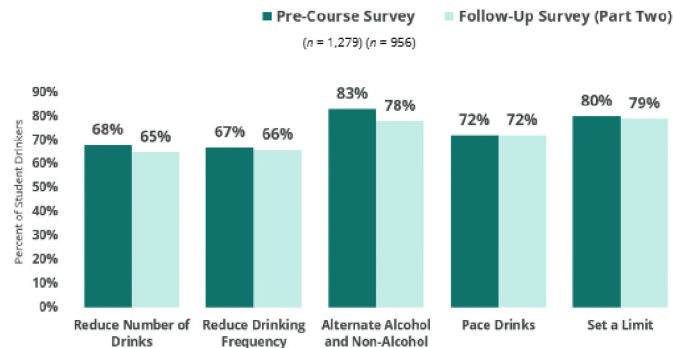
159 high-risk drinkers completing AlcoholEdu® for College saw "no need to change the way they drink" before taking the course. Following the course, 41% of those students (65 students) reported a readiness to change their drinking behavior.

Note:

Readiness to change represents the collective share of students who selected one of the following:

- I am thinking about drinking alcohol in a healthier and safer way.
- I am ready to try drinking alcohol in a healthier and safer way.
- I am currently trying to drink alcohol in a healthier and safer way.

Intention to Mitigate High-Risk Drinking



Note: Percentages represent the share of students who intend to engage in these behaviors in the next 30 days.

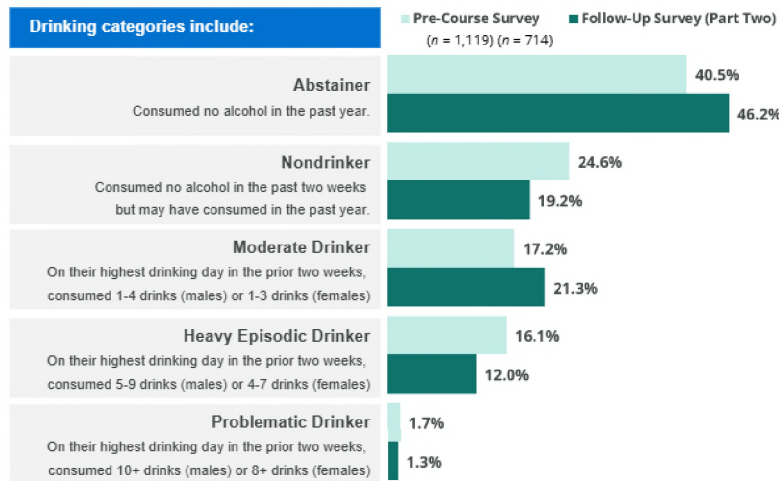
Institutionalization Tip

Intention has been shown to be the most important variable in predicting behavior change (Ajzen, 1991). Actual behavior change is driven, in part, by an individual's perception of the social environment surrounding the behavior. A campus environment that reinforces safe and healthy norms can help support individual intentions and, ultimately, changes in behavior. Where unhealthy behaviors are perceived as accepted and even encouraged, intentions may not be sufficient to support change. Did your students report an increase in healthy intentions, or a decrease? What environmental factors on your campus may have contributed to shifts in either direction?



Examination of Drinking Rates

Here is how your students reported their drinking rates on the Pre-Course Survey as well as after an intercession period (typically 30-45 days).



Relative Change

Pre-Course Survey to Follow-Up Survey (Part Two)

Category	Your Institution	Peer Institutions
Abstainer	14%	8%
Nondrinker	-22%	-5%
Moderate Drinker	24%	-17%
Heavy Episodic Drinker	-25%	-33%
Problematic Drinker	-26%	-33%

Programming Tip

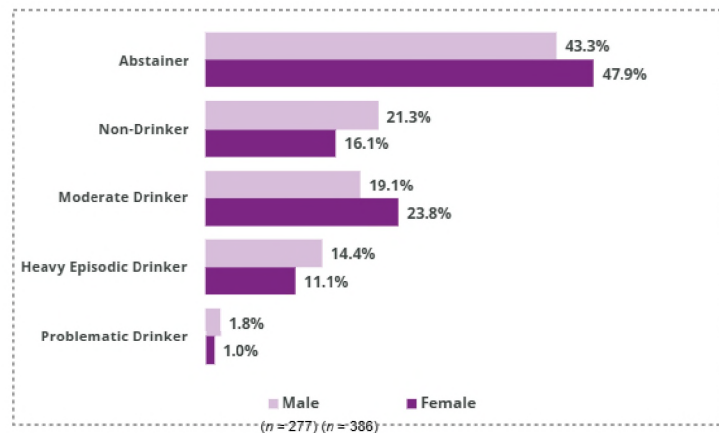
How did your students' drinking behavior change in the 30-45 days between these surveys? Keep in mind that even small percentage changes can reflect significant differences, especially for low-frequency behaviors like problematic drinking. Look at how you compare to similar institutions and think about how you can use this information to inform student programming. For example, a relative drop in the share of abstainers could indicate a need for programming to support incoming abstaining students.

Student Drinking Rates, Males and Females

While an individual's experience with alcohol varies based on a number of factors, biological birth sex informs different physiological responses to alcohol. Understanding this is an important ingredient in creating safer campuses. Here are your students' drinking rates from the Follow-Up Survey (Part Two), broken down by males and females (n = 663).

Note

Drinking categories are typically based on physiological differences as determined by biological birth sex (e.g., a biological female who drinks 4 drinks is considered a heavy episodic drinker while a biological male who drinks 4 drinks is considered a moderate drinker).



Critical Processes Tip

Consider other demographic characteristics that may influence an individual's drinking behavior, such as race/ethnicity, group membership, year in school, etc. This can inform how different subgroups of students experience the College Effect as well as shape their ability to effectively intervene in potentially harmful situations.



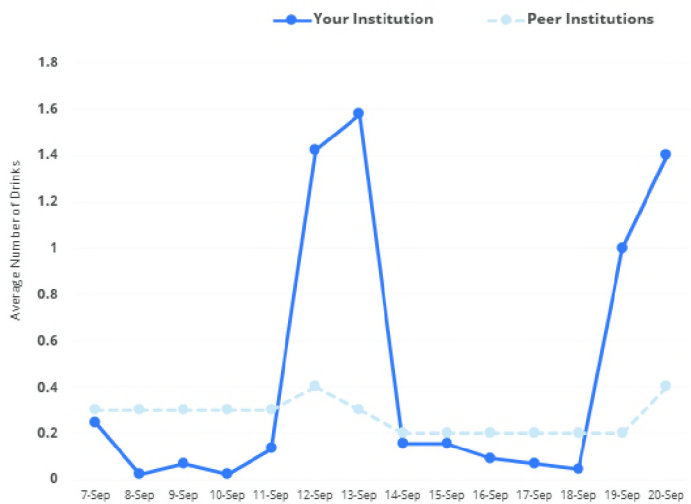
When Students Choose To Drink

The chart on this page shows student drinking rates over a two-week period of time. It represents the average number of drinks consumed by your students (drinkers only), compared to the average drinks consumed at peer institutions during that same two-week period.

Follow-Up Survey (Part Two), drinkers only (n = 247)

Critical Processes Tip

The data shown here reflect the 14-day period where institutions tend to report the highest drinking rates. Can these data be used to reinforce or support other data you have collected to identify celebrations or events that encourage or discourage heavy drinking?



Note: The data shown here reflect the 14-day period in which your students reported their highest drinking rates (via the Follow-Up Survey) with benchmark data for that same time period.

Where Students Choose To Drink

The most common locations where your students reported consuming alcohol recently, among those who had a drink in the previous two weeks.

Follow-Up Survey (Part Two), drinkers only (n = 247)

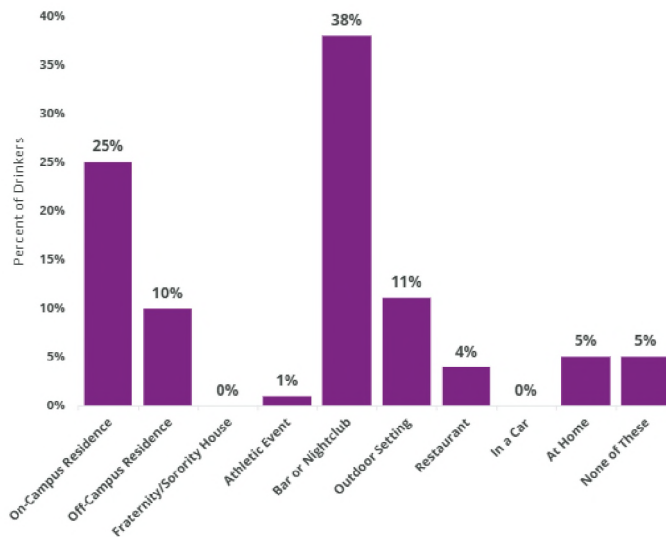
Policy Tip

Certain drinking locations — including campus pubs, off-campus house parties — have been shown to be associated with significant negative outcomes (EVERFI, 2012). The same study also indicated that certain locations (on-campus dances and concerts) have a greater relationship with sexual assault than other locations.

A more recent study found students living off-campus (without parents) report significantly more frequent alcohol consumption, drinking larger quantities, more frequent heavy drinking, and a greater number of negative alcohol-related outcomes than students living on-campus (Benz et al., 2017).

How can this research and drinking location data from your school inform housing and on-campus policy at your institution?

Where Students Choose To Drink



Note: Percentages represent the students who chose each option in response to the question, "In the past two weeks when you consumed alcohol, where did you spend most of your time drinking?"

Why Students Choose To Drink

Drinkers indicated their most important reasons for choosing to drink alcohol.

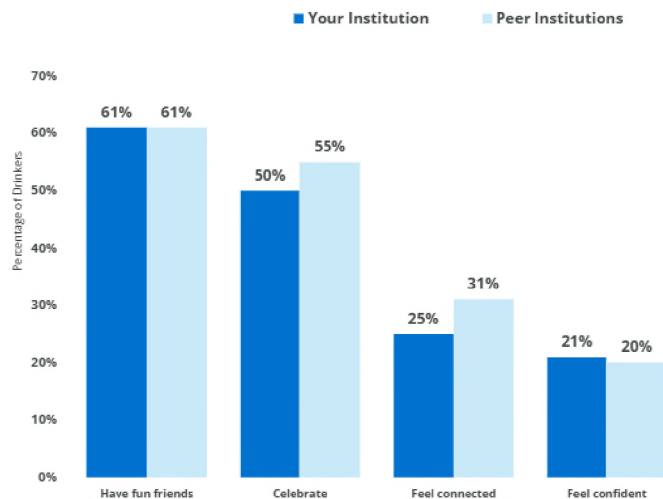
Follow-Up Survey (Part Two), drinkers only (n = 247)

Programming Tip

Reasons for consuming alcohol vary greatly for institutions and across different groups of students. Consider the reasons why students are choosing to drink and investigate whether those challenges can be met with other strategies for these students.

With your data, you can also explore whether certain reasons for drinking are associated with higher-risk drinking behaviors and negative outcomes. These reasons could be candidates to target with social norm campaigns or other prevention efforts.

Top Reasons Students Choose To Drink



Notes: Percentages represent the students who chose "Important" or "Very Important" in the Follow-Up Survey (Part Two).



Why Students Choose Not To Drink

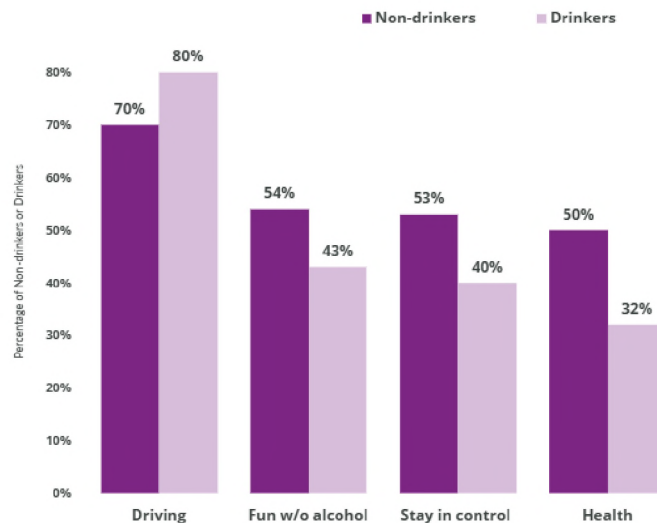
Both non-drinkers (abstainers + nondrinkers) and drinkers indicated their most important reasons for choosing whether or not to drink alcohol.

Follow-Up Survey (Part Two), nondrinkers (n = 467) and drinkers (n = 247)

Programming Tip

"It would be far easier to increase the salience of existing reasons that drinkers have for restricting their alcohol use than to win their endorsement of still additional reasons that are primarily endorsed by abstainers (Huang et al., 2011)." Which reasons are most endorsed by drinkers on your campus? By nondrinkers? Consider those when designing campaigns focused on behavioral decision-making for each of these groups of students.

Reasons Students Choose NOT To Drink, for Non-Drinkers and Drinkers



Notes: Percentages represent the students who chose "Important" or "Very Important" in the Follow-Up Survey (Part Two). Non-drinkers includes abstainers and non-drinkers.



High-Risk Drinking Behaviors

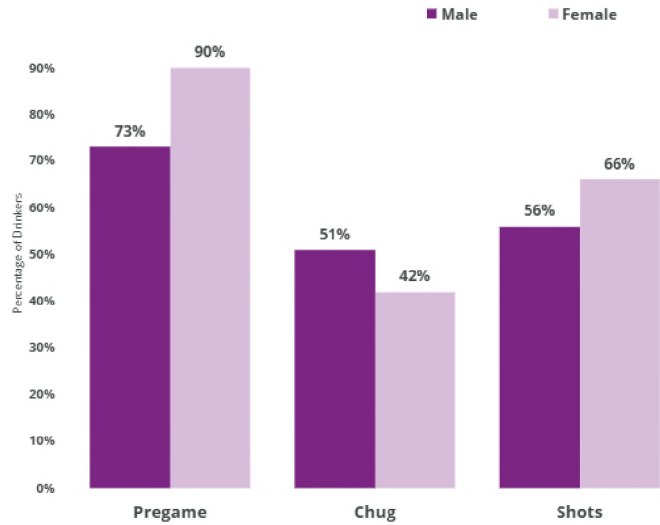
These are some of the most common risk-related drinking behaviors reported by your students who had a drink in the two weeks prior to taking the Follow-Up Survey (Part Two).

Follow-Up Survey (Part Two), drinkers only (n = 247)

Programming Tip

More than other high-risk behaviors, pregame has been shown to have a predictive relationship with a variety of negative outcomes (EVERFI, 2012). As such, participation in pregame can potentially be used to identify students who are more likely to be at risk for experiencing negative outcomes.

High-Risk Behaviors, Males and Females



Note: Percentages represent the students who chose "Sometimes" or "Frequently" or "Always" in the Follow-Up Survey (Part Two).



Impact of High-Risk Drinking

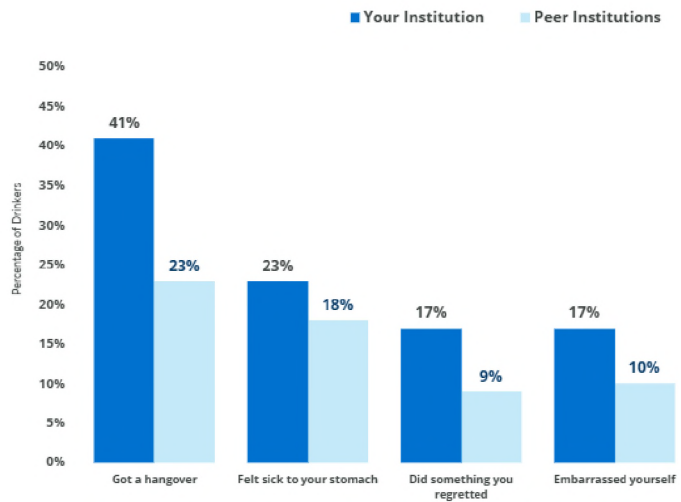
Students who reported drinking in the past two weeks experienced the following as a result of their drinking.

Follow-Up Survey, drinkers only (n = 247)

Programming Tip

The AlcoholEdu® Facilitator Guide provides recommendations for campus programs that reinforce course content. It includes sample discussion topics and activities designed for use by trained facilitators, including ways to reduce the risk of experiencing negative outcomes.

Top Negative Outcomes Experienced



Note: Percentages represent students who experienced each outcome one or more times, and the options shown represent the top four for your institution.



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All new students (first-year and transfer) completed the Vector Solutions AlcoholEdu Online Prevention Program in August 2025.

AlcoholEdu® for College Snapshot

Designed by prevention and compliance experts to provide your students with knowledge and skills to support healthier decisions related to alcohol.

Sample Size

1,237 students
at Providence College
completed surveys in
AlcoholEdu® for College from
June 1, 2025 to February 25,
2026.

Impact on Learners

Students increased their alcohol-related knowledge, and their skills associated with healthier behavior.

Average Assessment Score:



Your students agree that *AlcoholEdu®*:

Helped them establish a plan ahead of time to make responsible decisions about drinking	83%
Prepared them to help someone who may have alcohol poisoning	83%
Gave them the confidence to help someone who may be experiencing an overdose	80%

Note: Percentages represent students that responded "agree" or "strongly agree" to each item in the Post-Course Survey (n = 1,190).

Drinking Behavior and Norms

Intent to change drinking behaviors can be impacted by perceptions — or misperceptions — of peers' behavior. Prevention education can influence the students' perception of norms at your school and increase their intention to avoid risky behavior in the future.

79% of students at Providence College report that *AlcoholEdu® for College* changed their perceptions of others' drinking behavior.

Percent of Student Drinkers who plan to:



Course Impact

After taking the course, students were asked to reflect on the course experience and share how it impacted their awareness, knowledge, and confidence to help them make healthier decisions and support their peers in the future.

Programming Tip

Where are your students knowledgeable and where is there room to learn more? *AlcoholEdu®* is intended to provide foundational knowledge and skills that can be built upon. Knowledge data can inform which content areas should be built out or reinforced as part of your ongoing prevention efforts.

Your students reported that *AlcoholEdu® for College*:

(from the Post-Course Survey; n = 1,190)

Gave them the confidence to help someone who may be experiencing an overdose	80%
Prepared them to help someone who may have alcohol poisoning	83%
Helped them establish a plan ahead of time to make responsible decisions about drinking	83%
Changed their perceptions of others' drinking behavior	79%
Gave them confidence in their ability to recognize an alcohol overdose	83%
Made them more likely to refrain from sexual activity if a potential partner has been drinking	83%
Increased their confidence in reaching out and offering support to someone who may have a problem with drugs or alcohol	83%
Affected their own decision not to drink or use other drugs.	70%
Affected their ability to support a decision made by someone else not to drink or use other drugs.	78%



Behavioral Intentions

Impact For High-Risk Students

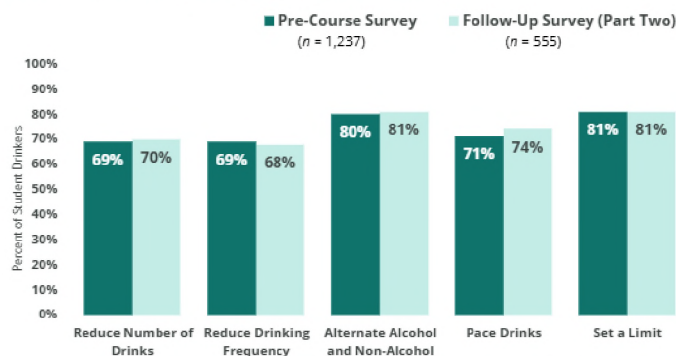
112 high-risk drinkers completing *AlcoholEdu*® for College saw "no need to change the way they drink" before taking the course. Following the course, 51% of those students (57 students) reported a readiness to change their drinking behavior.

Note:

Readiness to change represents the collective share of students who selected one of the following:

- I am thinking about drinking alcohol in a healthier and safer way.
- I am ready to try drinking alcohol in a healthier and safer way.
- I am currently trying to drink alcohol in a healthier and safer way.

Intention to Mitigate High-Risk Drinking



Note: Percentages represent the share of students who intend to engage in these behaviors in the next 30 days.

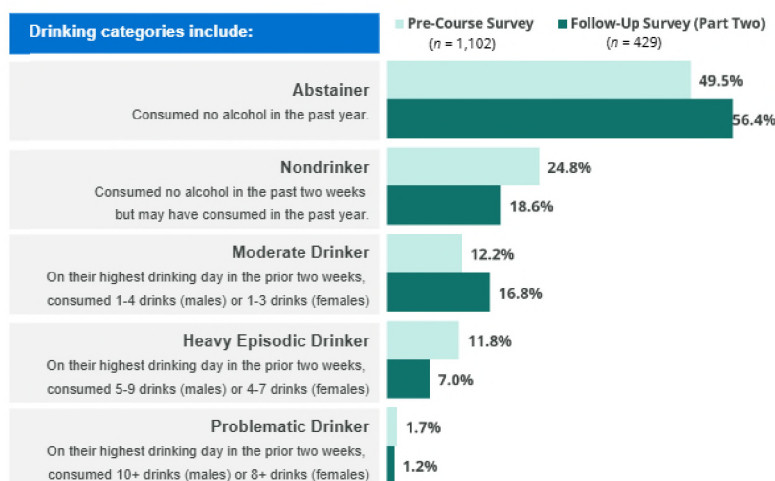
Institutionalization Tip

Intention has been shown to be the most important variable in predicting behavior change (Ajzen, 1991). Actual behavior change is driven, in part, by an individual's perception of the social environment surrounding the behavior. A campus environment that reinforces safe and healthy norms can help support individual intentions and, ultimately, changes in behavior. Where unhealthy behaviors are perceived as accepted and even encouraged, intentions may not be sufficient to support change. Did your students report an increase in healthy intentions, or a decrease? What environmental factors on your campus may have contributed to shifts in either direction?



Examination of Drinking Rates

Here is how your students reported their drinking rates on the Pre-Course Survey as well as after an intersession period (typically 30-45 days).



Relative Change

Pre-Course Survey to Follow-Up Survey (Part Two)

Category	Your Institution	Peer Institutions
Abstainer	14%	5%
Nondrinker	-25%	-7%
Moderate Drinker	38%	-12%
Heavy Episodic Drinker	-41%	-14%
Problematic Drinker	-32%	6%

Programming Tip

How did your students' drinking behavior change in the 30-45 days between these surveys? Keep in mind that even small percentage changes can reflect significant differences, especially for low-frequency behaviors like problematic drinking. Look at how you compare to similar institutions and think about how you can use this information to inform student programming. For example, a relative drop in the share of abstainers could indicate a need for programming to support incoming abstaining students.

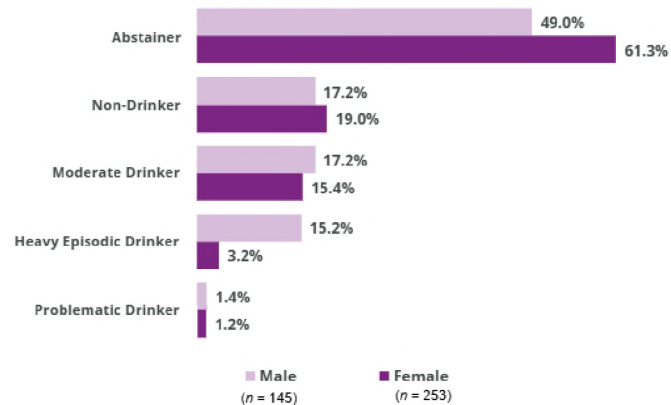


Student Drinking Rates, Males and Females

While an individual's experience with alcohol varies based on a number of factors, biological birth sex informs different physiological responses to alcohol. Understanding this is an important ingredient in creating safer campuses. Here are your students' drinking rates from the Follow-Up Survey (Part Two), broken down by males and females ($n = 398$).

Note

Drinking categories are typically based on physiological differences as determined by biological birth sex (e.g., a biological female who drinks 4 drinks is considered a heavy episodic drinker while a biological male who drinks 4 drinks is considered a moderate drinker).



Critical Processes Tip

Consider other demographic characteristics that may influence an individual's drinking behavior, such as race/ethnicity, group membership, year in school, etc. This can inform how different subgroups of students experience the College Effect as well as shape their ability to effectively intervene in potentially harmful situations.



When Students Choose To Drink

The chart on this page shows student drinking rates over a two-week period of time. It represents the average number of drinks consumed by your students (drinkers only), compared to the average drinks consumed at peer institutions during that same two-week period.

Follow-Up Survey (Part Two), drinkers only ($n = 107$)

Critical Processes Tip

The data shown here reflect the 14-day period where institutions tend to report the highest drinking rates. Can these data be used to reinforce or support other data you have collected to identify celebrations or events that encourage or discourage heavy drinking?



Note: The data shown here reflect the 14-day period in which your students reported their highest drinking rates (via the Follow-Up Survey) with benchmark data for that same time period.



Where Students Choose To Drink

The most common locations where your students reported consuming alcohol recently, among those who had a drink in the previous two weeks.

Follow-Up Survey (Part Two), drinkers only (n = 107)

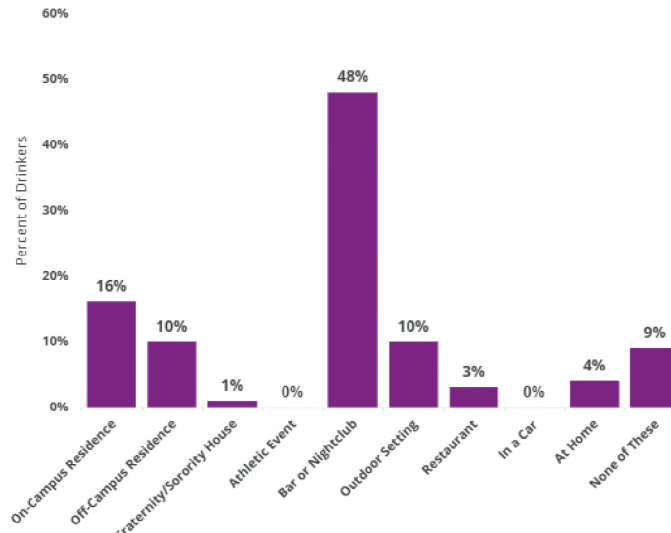
Policy Tip

Certain drinking locations — including campus pubs, off-campus house parties — have been shown to be associated with significant negative outcomes (EVERFI, 2012). The same study also indicated that certain locations (on-campus dances and concerts) have a greater relationship with sexual assault than other locations.

A more recent study found students living off-campus (without parents) report significantly more frequent alcohol consumption, drinking larger quantities, more frequent heavy drinking, and a greater number of negative alcohol-related outcomes than students living on-campus (Benz et al., 2017).

How can this research and drinking location data from your school inform housing and on-campus policy at your institution?

Where Students Choose To Drink



Note: Percentages represent the students who chose each option in response to the question, "In the past two weeks when you consumed alcohol, where did you spend most of your time drinking?"



Why Students Choose To Drink

Drinkers indicated their most important reasons for choosing to drink alcohol.

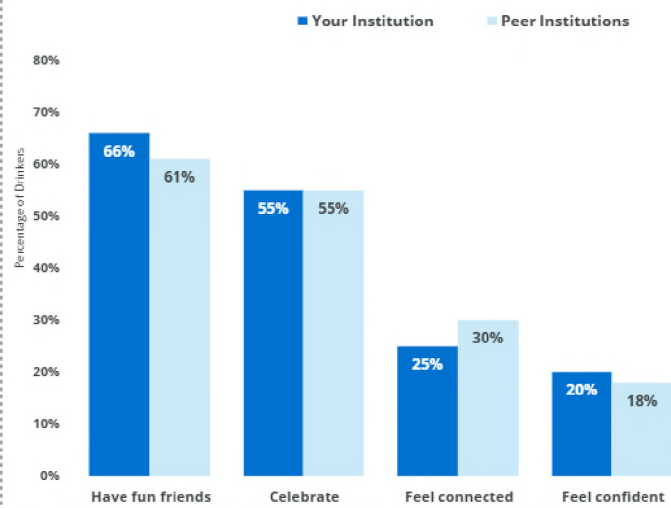
Follow-Up Survey (Part Two), drinkers only (n = 107)

Programming Tip

Reasons for consuming alcohol vary greatly for institutions and across different groups of students. Consider the reasons why students are choosing to drink and investigate whether those challenges can be met with other strategies for these students.

With your data, you can also explore whether certain reasons for drinking are associated with higher-risk drinking behaviors and negative outcomes. These reasons could be candidates to target with social norm campaigns or other prevention efforts.

Top Reasons Students Choose To Drink



Note: Percentages represent the students who chose "Important" or "Very Important" in the Follow-Up Survey (Part Two).



Why Students Choose Not To Drink

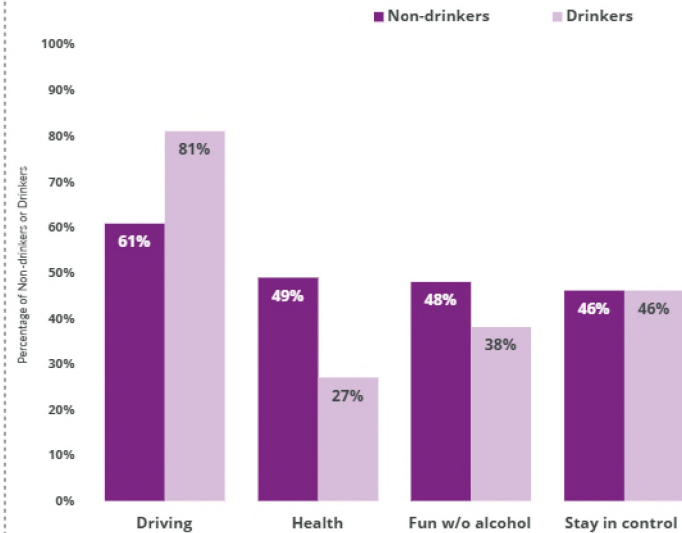
Both non-drinkers (abstainers + nondrinkers) and drinkers indicated their most important reasons for choosing whether or not to drink alcohol.

Follow-Up Survey (Part Two), nondrinkers (n = 322) and drinkers (n = 107)

Programming Tip

"It would be far easier to increase the salience of existing reasons that drinkers have for restricting their alcohol use than to win their endorsement of still additional reasons that are primarily endorsed by abstainers (Huang et al., 2011).² Which reasons are most endorsed by drinkers on your campus? By nondrinkers? Consider those when designing campaigns focused on behavioral decision-making for each of these groups of students.

Reasons Students Choose NOT To Drink, for Non-Drinkers and Drinkers



Notes: Percentages represent the students who chose "Important" or "Very Important" in the Follow-Up Survey (Part Two). Non-drinkers includes abstainers and non-drinkers.



High-Risk Drinking Behaviors

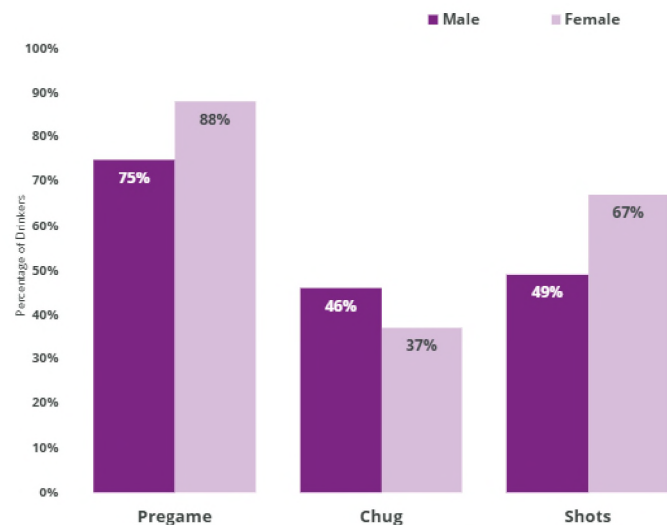
These are some of the most common risk-related drinking behaviors reported by your students who had a drink in the two weeks prior to taking the Follow-Up Survey (Part Two).

Follow-Up Survey (Part Two), drinkers only (n = 107)

Programming Tip

More than other high-risk behaviors, pregaming has been shown to have a predictive relationship with a variety of negative outcomes (EVERFI, 2012). As such, participation in pregaming can potentially be used to identify students who are more likely to be at risk for experiencing negative outcomes.

High-Risk Behaviors, Males and Females



Notes: Percentages represent the students who chose "Sometimes" or "Frequently" or "Always" in the Follow-Up Survey (Part Two).



Impact of High-Risk Drinking

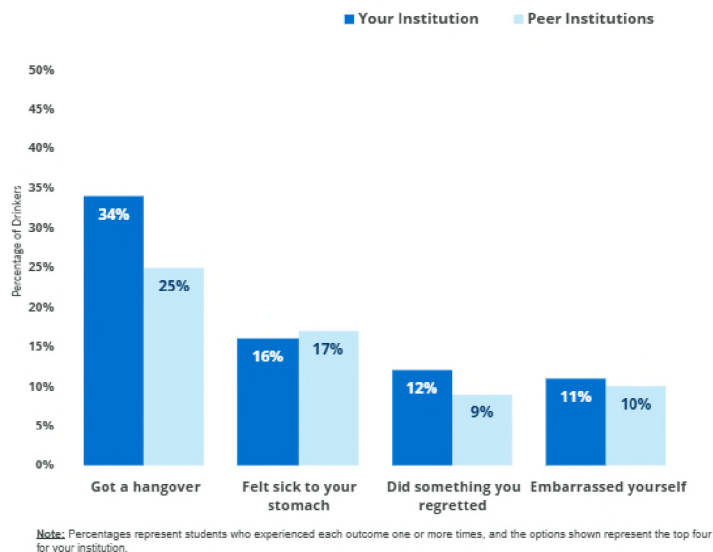
Students who reported drinking in the past two weeks experienced the following as a result of their drinking.

Follow-Up Survey, drinkers only (n = 107)

Programming Tip

The AlcoholEdu® Facilitator Guide provides recommendations for campus programs that reinforce course content. It includes sample discussion topics and activities designed for use by trained facilitators, including ways to reduce the risk of experiencing negative outcomes.

Top Negative Outcomes Experienced



Summary of AOD Programs Strengths and Weaknesses

Providence College uses a comprehensive, multi-departmental approach to alcohol and other drug prevention, intervention, enforcement, treatment, and recovery support. The College's program includes universal education for new students; targeted programming for student-athletes and students living on and off campus; environmental management and policy enforcement; late-night and substance-free activities; evidence-based interventions for students identified as being at risk; confidential counseling and referral services; emergency response protocols; and support for students in recovery. These efforts involve collaboration among Student Affairs, Academic Affairs, Athletics, the Chaplain's Office, Public Safety, Human Resources, and the General Counsel's Office.

A significant strength of the College's approach is the combination of prevention education with individualized interventions. All first-year and transfer students complete online alcohol and drug education, while students whose behavior indicates increased risk may receive AlcoholEdu sanctions, BASICS, counseling or substance use assessments, reflection assignments, parental notification, and other educational or disciplinary responses. Students transported for alcohol or other substance use receive mandatory follow-up with a substance use clinical counselor, and the College maintains caller-amnesty provisions intended to encourage students to seek medical assistance for others.

AlcoholEdu assessment results indicate that the required program increases students' alcohol-related knowledge and preparedness to intervene. In both assessment years, students reported that the course helped them recognize alcohol poisoning, assist another person, establish a plan before drinking, and gain confidence in responding to a potential overdose. The results also show positive movement from the pre-course to post-course assessments in students' understanding of alcohol knowledge, physiological effects, risk reduction, alcohol poisoning, and factors influencing behavior. At the same time, assessment and conduct data identify continuing areas of concern. AlcoholEdu follow-up data

show that alcohol use remains concentrated in certain social contexts and that friendship, celebration, and connection continue to be important motivations for drinking. Students who drank also reported high-risk practices, including pregaming, consuming shots, and chugging.

Community Standards data show decreases from 2024–25 to 2025–26 in several frequently reported violations, including underage possession or consumption, possession or use of alcohol in restricted areas, possession of hard liquor, alcohol paraphernalia, marijuana possession or use, and marijuana-related paraphernalia. However, the same data show increases in public or private intoxication, alcohol-related medical transports, central alcohol sources, hosting parties where alcohol is present, unauthorized possession or use of controlled substances, and drug-related medical transports. These patterns indicate that fewer violations in some categories should not be interpreted as a uniform reduction in risk, and it should also be noted that Community Standards data paints an incomplete picture of alcohol and drug use patterns, as it includes only reported behaviors.

Another area for continued development is the coordination and assessment of the College's many AOD initiatives. The College has substantial programming and intervention capacity, but the available information is distributed across multiple offices and data sources.

Overall, Providence College has developed a strong foundation that combines education, environmental strategies, policy enforcement, early intervention, clinical services, emergency response, and recovery support. The primary opportunity for the next biennial period is to connect these components through a more coordinated prevention strategy, establish shared measures of effectiveness, and direct resources toward the populations, behaviors, locations, and times associated with the greatest potential for harm.

Status of Fall 2022 – Spring 2024 Report Recommendations

- **RECOMMENDATION:** Mobilize the AOD Working Group to identify near-term and long-term recommendations to enhance the Providence College student experience to help ensure student safety and student success. The task force will use its expertise to develop and recommend innovative strategies to decrease risk behaviors and the negative outcomes that result from substance use and misuse. The work will include: Assessing PC campus mental health, alcohol, tobacco and other drug use; Reviewing AOD policies and evaluating consistency and proportionality of enforcing sanctions for undergraduate and graduate populations; and Developing a comprehensive AOD prevention and education program for undergraduate and graduate students.
 - STATUS: In progress. Group met for the first time in the Fall of 2024 with members from Dean of Students Office, Public Safety, Health Center, Counseling Center, Community Standards and Student Engagement and Leadership. In the Spring of 2025, the group gathered data (student self-reported behavior data, Institutional outcome data, National comparison data, and Peer institution benchmarking); compiled research summaries and evidence-based best practices related to alcohol and other drug prevention in higher education; evaluated PC's policy and conduct processes; and gathered research, national guidance, evidence-based interventions, and prevention frameworks for substance use issues and prevention work. The work was used to inform the creation of a Collegiate Recovery Program (CRP) at Providence College which will launch Fall 2026. The work of this group will be further summarized and utilized for the

launch and ongoing programming efforts of the CRP and other substance use education and prevention efforts.

- **RECOMMENDATION:** Partner with Institutional Research to analyze Community Standards Alcohol Violation data to identify potential demographic trends of students found responsible for alcohol policy violations. Use findings to inform education and prevention programming.
 - STATUS: Complete. In partnership with Institutional Research, we analyzed alcohol policy violations from academic years 2021-22 through 2023-24 to identify demographic trends among students found responsible for alcohol-related conduct violations. The study examined 2,266 violations involving 913 unduplicated students and explored relationships between violations and student characteristics including gender, class level, major, race/ethnicity, first-generation status, and Pell eligibility. The findings suggest that alcohol education and prevention efforts should prioritize: First-year and sophomore students, particularly those under age 21; Male students, who are disproportionately represented among alcohol policy violators; Students in academic programs with higher concentrations of violations, particularly within the School of Business; High-risk periods identified in the study, including the fall semester (especially September), March, and weekends, when most violations occur. This work will be used to inform the future development of education and programming from the Collegiate Recovery Program and Office of Health Promotion & Student Wellbeing, both of which will launch in Fall 2026.

Recommended Improvements to the AOD Programs

- **Formalize the AOD Working Group as an ongoing coordinating and assessment body.**
 - Establish a regular meeting schedule, defined membership, and annual responsibilities for reviewing student behavior, conduct incidents, medical transports, educational programming, counseling and referral activity, and emerging substance use concerns.
- **Develop a coordinated, multi-year AOD prevention and harm-reduction plan.**
 - Use the findings of the AOD Working Group to create a prevention plan that identifies priority populations and behaviors, assigns responsibility for each initiative, establishes an implementation timeline, and defines measures of success.
 - Supplement first-year online education with developmentally appropriate follow-up programming during the academic year.
 - Expand targeted education addressing high-risk drinking and substance use practices as well as co-occurring addictive behaviors.
 - Use conduct and assessment data to target prevention efforts. Use Institutional Research findings regarding class year, age, gender, academic program, semester, month, and day of the week to guide the timing and audience of prevention initiatives.
- **Launch the Compass Collegiate Recovery Program**
 - Promote recovery support and sober activities in ways that reduce stigma and make services accessible to students at different stages of help-seeking and recovery.
- **Launch the Office of Health Promotion & Student Wellbeing**

- Develop and implement a research informed well-being curriculum, including alcohol and drug education/prevention, that integrates education, outreach, prevention, and community building through a scaffolded learning approach.
- Expand prevention education beyond online education modules, with intentional focus at key transition points, including the start of freshmen year, study abroad, and off-campus living.

AOD Notifications to Students and Employees

The Alcohol and Drug-Free School and Workplace Policy is embedded in the Student Handbook, which is distributed to all undergraduate, graduate and school of continuing education students via email from the Director of Community Standards at the beginning of the fall and spring semesters.

The College (via Human Resources) distributes its annual written AOD notification to faculty and staff via email in January of each year. AOD notification is also incorporated into the Human Resources new hire onboard program.

AOD Policy

College personnel regularly review and revise the College’s alcohol and drug policies to reflect changes in the law. The most current copy of the Alcohol and Drug-Free School and Workplace Policy can be found on the [Office of the General Counsel’s Policy Manual webpage](#) in the “General Counsel & Risk Management” section.

Enforcement

The Department of Public Safety and Office of Residence Life & Housing are the two departments primarily responsible for documenting AOD policy violations on campus. The Office of Community Standards and the Office of Residence Life & Housing oversee the adjudication of AOD policy violation cases for students. The Office of Human Resources oversees employee violations of the AOD Policy (none were reported during the review period).

Student Alcohol Violation & Sanction Summary (Community Standards & Residence Life)

Code of Conduct Violations: Alcohol	2024-25	2025-26
4a. Underage possession or consumption of alcohol anywhere on College property, at College-sponsored events, student organization/club/team events, or off-campus establishments.	314	271
4b. The sale or distribution of alcohol by or to underage persons anywhere on College property or at College-sponsored events, or off-campus establishments.	1	0
4c. The possession or consumption of alcohol in restricted areas or on city property, streets and sidewalks.	45	15

4d. The sale, distribution or dispensing of alcohol without a permit in any premises, building, apartment, or other place used by any club, association, social or organization to the members thereof, their guests, or other persons.	0	0
4e. On-campus possession of hard liquor by any student of any age, with the limited exception of purchase and consumption of such beverages at McPhail's by those 21 years or older.	122	39
4f. Intoxication, regardless of age, in public or private.	23	34
4g. Encouraging or contributing to the intoxication of another person.	0	0
4h. Operating a motor vehicle on campus or in the local community while under the influence of alcohol.	1	0
4i. Excessive alcohol consumption requiring medical transport, including the consumption of alcohol while using prescription or over-the-counter medicine where such alcohol-drug combinations are inadvisable.	20	34
4j. The on-campus use or possession of paraphernalia specifically associated with the consumption of alcohol (e.g., funnels, beer-pong tables, shot glasses, any item associated with drinking games, etc.).	34	28
4k. The possession by a student or student groups of central alcohol sources (including kegs, beer balls, punch bowls, etc.) on campus or at student organization events that occur either on campus or off campus.	3	12
4l. The possession or storage of excessive amount of alcohol on campus by students. An excessive amount is defined as any amount in excess of six (6) standard drinks per person at any given time.	0	0
4m. The possession of alcoholic beverages in the following residence halls: McDermott, Raymond, McVinney and Guzman as students living in these halls are all, or are nearly all, under the age of 21.	1	0
4n. Possession, consumption or storage of alcohol in common areas of individual suites & apartments by students age 21 years or older if any resident of the suite/apartment is under age 21.	2	0
4o. Possession or consumption by students 21 years or older of open containers of alcohol in the common areas of individual suites or apartments whenever guests/visitors under the age of 21 are present.	0	0

4r. Displaying alcohol containers (whether unopened, partially filled or empty) on campus including in residence halls. It is a further violation of the Code of Conduct for underage students to possess or store empty alcohol containers anywhere.	17	0
4s. Hosting a guest, registered or unregistered, whose alcohol consumption requires medical transport. Including the consumption of alcohol while using prescription or over-the-counter medicine where such alcohol-drug combinations are inadvisable.	0	0
4t. Hosting a party where alcohol is present.	0	15

Sanctions for Alcohol Violations	2024-25	2025-26
Alcohol EDU	26	240
Alcohol Violation Fine - \$60.00	56	172
Alcohol Violation Fine - \$100.00	1	0
Alcohol Violation Fine - \$150.00	0	0
Alcohol Violation Fine- \$300.00	0	0
Anger Management Program	0	0
Apology Letter	10	9
Assessment & Counseling	0	1
BASICS (Brief Alcohol Screening and Intervention for College Students)	14	52
BEHAVIORAL MOTIVATIONAL INTERVIEW (BMI)	0	0
Career Center Meeting	35	17
Community Mentor Referral	4	18
Curfew	3	0
Disciplinary Warning	100	209
Deferred Disciplinary Probation	12	1
Disciplinary Probation	46	107
Deferred Suspension	3	4
Drug Education/Assessment	0	8
Educational Program Attendance & Review (CHOICES)	105	0
Fine	6	22
Housing Relocation	0	0
Individualized Involvement Activity	0	0
Loss of Guest Privileges	0	2
Loss of Privileges	9	0
No Contact Directive	0	0
OCS Civic Engagement Experience - Community Service 10 Hours	0	0
OCS Community Standards Reflection Assignment	4	38
Office of Personal Counseling	0	46
Other Appropriate Sanction(s)	3	0

Parental Notification	30	102
Referral for Alcohol and Drug Assessment	0	20
Residence Hall/Housing Probation	1	9
Residence Life Fine	0	0
Residence Life Reflection Paper	0	0
Restitution	1	8
Senior Privilege Removal Warning	1	1
Susan Ellingwood	0	0
Suspension	1	3
Weekend(s) at Home	0	0
TOTAL SANCTIONS	471	1089

Code of Conduct Violations: Drugs	2024-25	2025-26
6a. Possession/use of marijuana, including edibles and oils anywhere on college property, at College-sponsored events or student organization/club/team events.	24	13
6b. The on-campus use or possession of marijuana and/or other drug-related paraphernalia including, but not limited to bong, bowls, grinders, vaporizers, hookahs, shishas, scales, and pipes.	27	11
6c. The cultivation, manufacturing, provision, sale or distribution of marijuana (including edibles or oils) or marijuana paraphernalia.	1	0
6d. Unauthorized use or possession of any controlled substance or illegal drug. This includes unauthorized possession or use of prescription medication for which the student in possession does not have a valid prescription.	1	9
6e. Provision, sale, or distribution of any controlled substance, illegal drug, or drug paraphernalia, or prescription drug.	1	0
6f. Knowingly being present in a room or space where marijuana is being used, whether or not the student is using or observed using marijuana.	1	0
6h. Use of marijuana, controlled substance, illegal drug, or misuse medication requiring medical transport: Use of marijuana, any controlled substance and/or illegal drug, or misuse of any prescription or over-the-counter medication requiring medical transport.	0	9
6i. Intoxication: Intoxication whether in public or private.	0	2

Sanctions for Drug Violations	2024-25	2025-26
Apology Letter	0	14
Behavioral Motivational Interview (BMI)	0	0
Community Mentor Referral	1	0
Career Center Meeting	1	0
CHOICES	5	0
Drug Violation Fine - \$60	4	13

Drug Violation Fine - \$100	1	0
Drug Violation Fine - \$150	0	0
Deferred Disciplinary Probation	2	0
Deferred Suspension	0	15
Disciplinary Probation	4	16
Disciplinary Warning	8	10
Drug Education/Assessment	3	17
Fine	0	0
Individualized Involvement Activity	0	0
Loss of Privileges	0	19
OCS Community Standards Reflection Assignment	0	0
Office of Personal Counseling	1	1
Other Appropriate Sanction(s)	0	14
Parental Notification	2	1
Referral for Appropriate/Substance Use Assessment	1	30
Remote Off Campus Learning	0	0
Residence Hall/Housing Probation	2	1
Residence Life Fine	0	0
Personal Counseling Center Substance Use Services and Assessment – Susan Ellingwood (AOD Educator)	0	0
Suspension	1	1
TOTAL SANCTIONS	36	152

Student Handbook Code of Conduction Violations for Alcohol (Code of Conduct Item #4) and Drugs (Code of Conduct Item #6) can be found via the “Current Student Handbook” link on the [Student Handbook website](#).