Salve Regina University

2025 Alcohol and Other Drug (AOD) – Annual Notification

INTRODUCTION

This report is distributed annually in compliance with The Drug-Free Schools and Campuses Act of 1989. Part 86, the Drug-Free Schools and Campuses Regulations, requires that, as a condition of receiving funds or any other form of financial assistance under any federal program, an Institution of Higher Education (IHE) must certify that it has adopted and implemented a program to prevent the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees.

At Salve Regina University we are committed to creating an environment that supports the health, safety, and well-being of all students, faculty, and staff. We embrace the tenets of the institutional mission to impart and expand knowledge, develop skills, and cultivate enduring values. Through evidence-based and theorydriven strategies, initiatives, and programs we promote individual growth, cultivate a community of advocates, and create an environment which embraces wellness.

STANDARDS OF CONDUCT

At Salve Regina University we have policies and procedures which contribute to creating an environment that supports the health, safety, and well-being of all students, faculty, and staff. We ask that all students, faculty, and staff familiarize themselves with these policies and procedures to have a clear understanding of our expectations and standards.

Along with these policies and procedures, there are extensive University and local resources available to our students, faculty, and staff. These resources will be explained in more detail in the "Health Risks and Resources" section of this document.

EMPLOYEES

Alcoholic beverages may only be consumed by those persons over the age of 21. Employees are expected to comply with state law regarding the consumption and possession of alcoholic beverages and to exercise good judgment when using alcoholic beverages. Alcohol use or possession on University property is not permitted except at officially sanctioned University functions. It is illegal to manufacture, distribute, dispense, possess, or use controlled substances on University property.

For more information on employee standards of conduct, please refer to the University's "Employee Alcohol Use" policy at <u>Salve Regina University Alcohol Use Policy for Employees.</u>

STUDENTS

The University is committed to maintaining high standards of behavior. The student conduct process supports the Mission of the University and provides a framework within which the University behavioral standards are applied and reviewed. No person under 21 years of age is allowed to drink alcoholic beverages in the State of Rhode Island. The use of illegal drugs by persons of any age is a violation of State law. No person may purchase, procure, sell, deliver, serve, or give alcoholic or intoxicating beverages to a person under 21 years of age.

For more information refer to the student code of conduct, Community Expectations 8A and 8B starting on p.17 and Alcohol and Other Drug Policy on p.49 are both relevant to alcohol and other substance use related policies. Please see the <u>Salve Regina University Student Handbook</u>.

Housing and Residence Life Policy

In addition to the University-wide policies involving alcohol and other drugs, additional regulations apply to the use of alcohol in University housing. Salve Regina University extends the privilege of possessing alcohol to those students 21 years of age and older in designated areas.

For a complete list of designated residence halls in which alcohol is permitted for those students 21 years of age and older and other information regarding this policy, please refer to "Residence Life Alcohol Policy" on p.33-35 of the Student Handbook at <u>Salve Regina University Student Handbook</u>.

AMNESTY POLICY

Salve Regina University considers the safety and personal well-being of the student body a priority. The University recognizes that there may be alcohol or other drug-related medical or safety emergencies in which the potential for disciplinary action could act as a deterrent to students who want to seek assistance for themselves or others. The Amnesty Policy is designed to enable all students, or their guests, to receive the professional medical treatment they need.

Intoxicated or impaired students who are medically evaluated or hospitalized for alcohol or other drug use:

1. Will be required to have a follow up meeting with a member of the Dean of Students' office or a member of the Residence Life staff.

2. Will be required to complete an alcohol and/or drug educational program.

3. May also be referred to an outside program or counselor for substance abuse evaluation and/or appropriate treatment.

In rare circumstances such as cases where other violations occur, students may be referred for disciplinary adjudication. Examples include, but are not limited to fights, verbal or physical harassment, disorderly conduct, property damage or vandalism; failure to comply with directives.

If an intoxicated or impaired student is found in need of medical attention by University or Residence Life staff (professional staff or paraprofessional staff), the Amnesty Policy will not apply. Formal disciplinary action will be taken in instances when a student has a subsequent or repeat alcohol or drug-related incident requiring medical assessment.

LEGAL SANCTIONS

Federal and state law require mandatory prison terms for repetitive users and distributors of illegal substances and the full minimum prison term must be served. Federal law also states that those convicted of drug distribution within 1,000 feet of a college or school to legal minors are subject to twice the normal penalty with a mandatory prison term of one year. A third conviction for such an offense will result in mandatory life imprisonment.

The laws of the United States, the State of Rhode Island, and the City of Newport make the illegal use of alcohol and illicit drugs serious crimes punishable by a prison term, heavy fines, or a combination of both.

Federal Laws

For a list of federal drug trafficking penalties, see Federal Drug Trafficking Penalties.

How Drug Convictions May Affect Federal Student Aid

By law, some students who have drug-related convictions under any federal or state law may be ineligible for federal student aid. According to the law, if you are convicted of a drug-related offense during a period of enrollment for which you are receiving federal student aid, you may face these restrictions:

For possession of illegal drugs, you are ineligible for Federal student aid from the date of conviction (not arrest) for:

- 1 year for a first offense
- 2 years for a second offense
- Indefinitely for a third offense

For selling or conspiring to sell illegal drugs, you are ineligible for Federal student aid from the date of conviction (not arrest) for:

- 2 years for a first offense
- Indefinitely for a second offense

If a student loses federal student aid eligibility due to a drug conviction, the College will provide written notice describing the ways in which the student can regain eligibility. For information about specific legal implications, please consult the U.S. Department of Education Federal Student Aid webpage.

Rhode Island State Laws

DRUG POSSESSION

Simple possession of the minimum amount of any narcotic substance (any opium derivative) is a felony. Simple possession of most controlled substances except for marijuana is a felony. Therefore, possession of LSD or cocaine is a felony.

On May 25, 2022 Democratic Governor Dan McKee signed legislation (The Rhode Island Cannabis Act) into law legalizing the personal use and licensed retail sale of marijuana to those age 21 or older. Provisions in the law permitting adults to possess and home cultivate marijuana took effect upon signing. The Rhode Island Cannabis Act allows adults age 21 and up to possess (up to one ounce in public or up to 10 ounces at home), home-cultivate (up to six plants, no more than three mature), and purchase limited amounts of cannabis. It is important to note, however, that federal law still prohibits the use, possession, distribution, sale, or cultivation of marijuana. As an educational institution that receives federal funds, Salve Regina University must comply with federal law under the Drug-Free Schools and Communities Act Amendments of 1989 (20 U.S.C. Section 1011i). Therefore, students who possess a lawfully issued medical marijuana card may not use, possess, distribute, or cultivate marijuana in any university owned buildings or property within our campus geography. Accordingly, the use, possession, distribution, sale, or cultivation of marijuana remains prohibited for all students on campus via the Student Code of Conduct. However, students who possess a lawfully issued medical marijuana for that purpose in private, off-campus residences will be exempt from University policy in that regard.

For more information on drug related offenses and their penalties under Rhode Island Law, refer to Title 21, chapter 28 of the "Uniform Controlled Substance Act" at <u>Rhode Island Uniform Controlled Substances Act.</u>

ALCOHOL REGULATIONS FOR PEOPLE UNDER 21

If you are under the age of 21, it is unlawful for you:

- To enter a liquor store or restaurant for the purpose of buying or being served liquor.
- To drink, purchase, or attempt to purchase liquor or to have another purchase the liquor for you.
- To misrepresent or mistake your age or the age of any other person by: an armed service ID card, a driver's license, a RI ID card.
- (If your age is in doubt, bars and liquor stores may make you sign a book to show good faith.)

For more information on alcohol-related offenses and their penalties under Rhode Island Law, refer to Title 3, chapter 8 "Regulation of Sales" at <u>Rhode Island Regulatory Sales</u>.

Health Risks

ALCOHOL

Alcohol is a commonly used substance that is legal in the United States under certain parameters (see page 2 and 3). While it's widely recognized that excessive alcohol consumption can contribute to injuries and fatalities in car accidents, there's often less awareness regarding its association with increased risks of cancer, suicide, unintended pregnancies, sexually transmitted infections, and various other adverse health outcomes. There are also many misconceptions about the impact alcohol can have socially, physically, and emotionally. In order to make an informed decision about alcohol use every individual must understand: the parameters around legal use, the impact alcohol has on the body and mind, awareness of resources for support, the ability to recognize when you personally need support, and the tools to be an effective active bystander.

What is alcohol?

Alcohol is a psychoactive (mind-altering) drug classified as a depressant, meaning it slows down the central nervous system. There are many contributing factors that impact how alcohol impacts the body and mind in the short and long term.

Alcohol is a chemical substance known as ethanol, which is produced through the fermentation or distillation of grains, fruits, or vegetables. Based on the way alcohol is made, substances will vary in their alcohol by volume (ABV). Standard serving sizes for alcoholic beverages (as seen in the graphic) are typically defined by the amount of pure alcohol they contain, rather than the total volume of the drink.

Understanding ABV and how alcohol is portioned is essential to adhering to University policies, laws, and determining how alcohol will impact the body.



High-Risk Behaviors Associated with Alcohol

High-risk behaviors associated with alcohol use encompass a range of actions that can have serious consequences for health, safety, and well-being. One of the most prevalent high-risk behaviors is binge drinking, which is defined as consuming a large amount of alcohol (4+ standard drinks) in a short period of time. Binge drinking significantly increases the risk of alcohol poisoning, accidents, injuries, and impaired judgment leading to risky behaviors such as unprotected sex, violence, or driving under the influence. Additionally, mixing alcohol with other substances, such as prescription medications, illicit drugs, or even over-the-counter medications, can compound the risks and amplify the negative effects on physical and mental health. Combining alcohol with other substances can lead to unpredictable reactions, overdose, and potentially fatal consequences.

Alcohol and the Impact on the Body

Short-Term Impact

Alcohol use can have immediate short-term impacts on your body, mind, and behaviors. These short-term impacts include:

- Diminished bodily functions (balance, cognitive processing, natural reaction)
- Injuries (falls, burns, cuts)
- Alcohol poisoning (a medical emergency with symptoms including vomiting, hypothermia, loss of consciousness)
- Risky sexual behaviors (unprotected sex with increased risk for unintended pregnancy and sexually transmitted infections)
- Increased risk for violence, self-harm, and suicide

Long-Term Impact

Over time the use of alcohol is associated with many chronic illnesses and other serious diseases. These include:

- High blood pressure, heart disease, stroke, liver disease, and digestive problems
- Cancer (breast, mouth, throat, liver, colon)
- Learning and memory troubles including dementia
- Social problems (maintaining personal relationships and employment)
- Mental health challenges (anxiety and depression)
- Alcohol use disorder and alcohol dependency

Alcohol and the Impact on the Mind

Alcohol, classified as a depressant, disrupts neurotransmitters in the brain, influencing our emotions, thoughts, and actions. Initially, it may induce relaxation and confidence by impacting brain areas governing inhibition. However, these effects are short-lived, and soon lead to negative emotions like anger, depression, or anxiety, irrespective of one's initial mood. Alcohol slows down cognitive processing, impeding accurate self-awareness and decision-making abilities. Over time, alcohol consumption depletes neurotransmitter levels, potentially worsening anxiety and depression symptoms, prompting increased drinking and potential dependence.

One common misconception is that alcohol can effectively alleviate social anxiety and facilitate social interactions. While alcohol may initially reduce inhibitions and feelings of anxiety, it is only a temporary solution. In reality, relying on alcohol to cope with social anxiety can lead to dependency and exacerbate anxiety in the long run. Moreover, alcohol-induced confidence may not accurately reflect one's true abilities or personality, leading to potential embarrassment or regretful behavior.

Alcohol use can also exacerbate symptoms linked to depression and anxiety and precipitate impulsive actions elevating the potential for experiencing suicidal ideation and related behaviors. Adverse effects may also extend to risky sexual behavior, driving while under the influence, injuries, and encounters with law enforcement. These multifaceted repercussions collectively contribute to a detrimental impact on mental health.

Alcohol and Bystander Intervention

It is likely that at some point in your life you may need to be an active bystander to prevent harm or support someone who has consumed too much alcohol or is showing concerning alcohol use. There are 5 key steps to being an effective bystander. These steps are (1) recognition, (2) assessment, (3) intervention, (4) support, and (5) follow-up.

Recognition: Bystanders should be trained to recognize signs of potential harm related to alcohol consumption, such as excessive intoxication, impaired judgment, or risky behaviors. To effectively recognize risks associated with alcohol, it is essential to understand the signs and symptoms of potential risks.

Severe Impairment

- (brown/blackout)
- Slurred speech
- Loss of balance and motor skills
- Impaired decision making
- Confusion

- Alcohol Poisoning
- Vomiting
- Irregular breathing
- Pale/blue skin
- Hypothermia
- Inability to wake
- Unconsciousness

Alcohol Dependence

- Increased tolerance
- Craving alcohol
- Scheduling use into schedule/preoccupation with alcohol
- Loss of interest in activities

Assessment: Once potential harm is recognized, bystanders should assess the situation to determine the level of risk and the most appropriate course of action. This may involve evaluating factors such as the severity of intoxication, the presence of other individuals who may be able to assist, and any immediate threats to safety. It is essential to consider your own safety as a bystander.

Applying Intervention Strategies: Active bystanders can employ various intervention strategies to address alcohol-related harm. These may include:

- **Direct Intervention**: Approaching the individual(s) in distress and offering assistance or support. This could involve helping them get to a safe place, contacting emergency services if necessary, or providing nonjudgmental support and reassurance.
- **De-escalation Techniques**: Using communication and conflict resolution skills to defuse potentially volatile situations. This may involve calmly speaking to individuals involved and helping them find peaceful resolutions to conflicts or disagreements.
- Seeking Assistance: If the situation is beyond their capabilities, active bystanders should seek help from authorities, medical professionals, or other responsible parties. This could involve calling emergency services, notifying venue staff or security personnel, or asking other bystanders for assistance.
- **Providing Support**: Offering emotional support and assistance to individuals affected by alcoholrelated harm. This may involve listening to their concerns, validating their feelings, and connecting them with appropriate resources or support services.

Follow-up and Support: After intervening, active bystanders should follow up to ensure the safety and well-being of those involved. This may involve checking in with individuals to see if they need further assistance or support and addressing any ongoing concerns or issues.

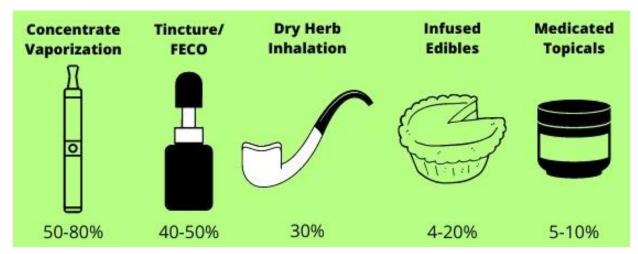
At Salve Regina University you should also consider sharing your concerns with professional staff members. You can learn more about this here: <u>Salve Regina University CARE Network</u>.

CANNABIS

Cannabis is becoming a more commonly used substance classified as a Schedule I controlled substance at the federal level. Despite its federal regulations, many states have legalized cannabis for medical and/or recreational use (see page 2 and 3). This has led to varying regulations and perceptions surrounding cannabis across different regions of the country. There are many misconceptions around cannabis use, which stem from limited research and data on the impact the substance has on the body and mind. In order to make an informed decision about cannabis use, every individual must understand the parameters around legal use, how cannabis delivery methods and potency vary, the impact cannabis has on the body and mind, and awareness of resources for support.

What is cannabis?

Cannabis is a psychoactive substance that goes by several names including marijuana, weed, and pot. The dried flowers, leaves, stems, and seeds of the cannabis plant can be used to create different delivery methods for consuming the substance. It is important to understand the bioavailability or THC percentage of a product, which denotes the amount of available THC that can be absorbed by the body. As the THC percentage increases, the absorption rate increases, and the effects of the product can be greater. In the image below, you can see five delivery methods of cannabis and the average THC percentage for that delivery method.



Understanding THC percentage and how cannabis is portioned is essential to adhering to University policies, laws, and determining how cannabis will impact the body. High-potency cannabis products, such as concentrates and edibles, can increase the risk of adverse effects, including acute intoxication, anxiety, paranoia, and psychosis, especially in inexperienced or sensitive users. Dosing can be challenging with high-potency products, leading to accidental overconsumption and undesirable effects.

Cannabis and the Impact on the Body

Short-Term Impact

Cannabis use can have immediate short-term impacts on your body, mind, and behaviors. These short-term impacts include:

- Altered senses and mood change
- Diminished body movement
- Impaired decision making

Long-Term Impact

Although literature is still in development on the long-term impact of cannabis use, there is evidence to support the following health risks:

- Decline in cognitive processing and memory
- Respiratory difficulties
- Pregnancy-related risks

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- Hallucinations, delusions, and psychosis
- Breathing problems
- Increased heart rate

- High blood pressure and risk for stroke
- Heart-related issues
- Addiction and/or dependency

Cannabis and the Impact on the Mind

There are many misconceptions about cannabis use and mental health. Many young adults report the use of cannabis as a method of coping with anxiety and/or depression. However, there is no concrete evidence through research and literature supporting the use of cannabis to treat the symptoms of anxiety or depression. The use of cannabis for medical needs should be in consultation with a doctor and medical use should be monitored closely.

Often, young adults who frequently use cannabis, will experience withdrawal symptoms between use. Withdrawal symptoms can include anxiety, depression, decreased focus, and jitters. It can take two to three weeks for withdrawal symptoms to subside from long-term cannabis users.

There is also a connection between cannabis use in adolescents with psychosis and increased mental health disorders. Schizophrenia is more prevalent in people who start using cannabis at an earlier age and those who use cannabis more frequently. Cannabis use has also been linked to depression; social anxiety; and suicidal ideation and/or behaviors.

Concerns with Cannabis Use

Cannabis can be an addictive substance and can lead to social challenges. Negative social outcomes from cannabis use can include, but is not limited to, decreased academic performance, difficulties maintaining relationships, financial challenges, and loss of interest in personal aspects of life. Concerning use of cannabis can also be characterized as individuals depending on use, increased tolerance, failed attempts to quit, and withdrawal symptoms.

If you are concerned about your use of cannabis, there are several avenues to seek support. At Salve Regina University, you can consider scheduling an appointment with <u>Counseling Services</u> or <u>Health Services</u>. If you notice any challenges with the cannabis use of a peer, you should share your concerns with professional staff members. You can learn more about this here: <u>Salve Regina University CARE Network</u>.

OTHER DRUGS

There are many different substances that are used to attain varied effects in medical and recreational settings. In the United States, drugs are classified by the federal government based on their potential for abuse, accepted medical use, and degree of dependence liability. Under the Controlled Substance Act, drugs are categorized into five schedules, ranging from Schedule I to Schedule V, with Schedule I being the most restrictive and Schedule V being the least restrictive. It is important to understand how these substances can be used appropriately in medical settings or misused. The misuse of substances can have varied negative outcomes socially and physically in the mind and body. Review the federal laws and policies surrounding other drug use on page 2 and 3.

Prescription Stimulants

Drugs like Adderall, Ritalin, and Vyvanse, typically prescribed for attention-deficit hyperactivity disorder (ADHD) are Schedule II controlled substances due to their high potential for abuse, accepted medical uses, and risk of dependence.

Prescription stimulants are often misused as study aids or to enhance academic performance. These drugs can increase alertness, focus, and energy levels, but misuse can lead to serious health risks, including addiction, cardiovascular issues, and psychiatric symptoms. To avoid the misuse of prescription stimulants, always take your medication as prescribed including taking the correct dose at the correct setting. Also, avoid sharing your medication or taking medication that is not yours.

Prescription Sedatives:

Prescription sedatives, such as benzodiazepines (Xanax and Valium) Schedule IV controlled substances. They have a lower potential for abuse compared to Schedule II drugs and are accepted for medical uses with limited risk of dependence.

Prescription sedatives are sometimes misused for their calming or anxiety-reducing effects. Misuse of these drugs can lead to sedation, drowsiness, impaired coordination, memory problems, and respiratory depression. Benzodiazepine misuse also carries a risk of dependence and can cause withdrawal symptoms. The use of sedatives to cope with symptoms of anxiety can prolong seeking appropriate medial support for such mental health challenges. To avoid the misuse of prescription sedatives always consult a doctor prior to use, never share medication or take medication that is not yours.

Opioids: Opioids, including prescription painkillers like oxycodone, hydrocodone, and codeine, as well as illicit drugs like heroin, are classified as Schedule II (in the case of oxycodone and hydrocodone) and Schedule I (in the case of heroin) controlled substances. These classifications are due to their high potential for abuse, accepted medical uses, and significant risk of dependence and addiction.

Opioids are sometimes used for their euphoric effects or to self-medicate pain. Opioid misuse can lead to addiction, overdose, respiratory depression, and death. The opioid epidemic has become a significant public health concern in the United States.

Psychedelics: Psychedelic drugs, such as LSD (acid), psilocybin mushrooms (magic mushrooms), and MDMA (ecstasy), are classified as Schedule I controlled substances. This classification is due to their high potential for abuse, lack of accepted medical uses, and lack of accepted safety for use under medical supervision.

Psychedelics are sometimes used for their hallucinogenic and euphoric effects. These drugs can alter perception, mood, and consciousness, but misuse can also lead to adverse reactions, including panic attacks, psychosis, and flashbacks. The long-term effects of psychedelic use are not well understood.

Cocaine: Cocaine is a powerful stimulant drug that is classified as a Schedule II controlled substance. This classification is due to its high potential for abuse, accepted medical uses (primarily as a local anesthetic), and significant risk of dependence and addiction.

Cocaine is misused for its energizing and euphoric effects. Cocaine use can lead to increased heart rate, elevated blood pressure, anxiety, agitation, and paranoia. Chronic use of cocaine can result in addiction, cardiovascular issues, neurological damage, and other health problems.

Concerns with Other Drug Use

If you are concerned about your use of the substances listed above there are several avenues to seek support. At Salve Regina University you can consider scheduling an appointment with <u>Counseling Services</u> or <u>Health Services</u>. If you notice any challenges with the cannabis use of a peer, you should share your concerns with professional staff members. You can learn more about this here: <u>Salve Regina University</u> <u>CARE Network</u>.

SALVE REGINA UNIVERSITY ADDITIONAL RESOURCES

At Salve Regina University we are invested in the health, safety, and well-being of our students. There are many opportunities for our students to learn more about what wellness means in their life as well as multiple avenues for support for any of your wellness needs. For more information and support please refer to the following resources available at Salve Regina University:	
Health Education & Prevention <u>Wellness@salve.edu</u> <u>https://www.salve.edu/student-and-peer-wellness</u>	Health Education and Prevention is dedicated to creating engaging opportunities for students to discover what wellness means in their lives. To learn more about educational opportunities, risk- reduction strategies, events, and substance-free events on campus.
Counseling Services (401) 341 – 2919 (non-emergency) https://www.salve.edu/counseling-services	If you are seeking support, counseling is a way to take care of your well-being and evaluate your relationship to substance use.
Health Services (401)341-2901 (non-emergency) <u>https://www.salve.edu/health-services</u>	At Health Services you can meet a Nurse Practitioner to for your health-related needs. If you are ever concerned with your substance use or prescriptions, Health Services can meet and discuss your concerns.
The Office of Student Engagement (401) 341 - 2915 <u>https://www.salve.edu/student-engagement</u>	The Office of Student Engagement enhances the educational experience by offering a variety of involvement opportunities that challenge, enlighten, and entertain. Contact Student Engagement to learn about substance-free events on campus.
Dean of Students Office <u>deanofstudents@salve.edu</u> <u>https://www.salve.edu/dean-of-students</u>	The Dean of Students office can assist students in resolving educational, personal, and other concerns that affect the quality of their academic and community life. Contact the Dean of Students Office if you would like to learn more about the Students Handbook.
Residence Life residencelife@salve.edu https://www.salve.edu/residence-life	The Office of Residence Life offers a safe and healthy living space for our students. Contact Residence Life if you would like to learn more about the Residence Life Policy.
Public Safety (401) 341 - 2325 <u>https://www.salve.edu/safety-and-security</u>	The Office of Safety and Security provides services to the campus community 24 hours a day, 365 days a year. In an emergency, you can contact them for support and assistance.

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