

GONZAGA UNIVERSITY

Biennial Review of Alcohol and Other Drug Programs Academic Years 2020-2021 and 2021-2022



Drug Free Schools contributors:

Office of Health Promotion

Resolution Center for Student Conduct & Conflict

Campus Security & Public Safety

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SUMMARY AND INTENT OF DOCUMENT

The Department of Education's Office of Safe and Drug-Free Schools requires, as a condition of receiving federal funding or other financial assistance, that an institution of higher education (IHE) certify it has adopted and implemented Drug-Free Schools and Communities Act (DFSCA) regulations to prevent the unlawful possession, use, or distribution of alcohol and illicit drugs by students and employees on school premises and as a part of any of its activities, and to establish and maintain University drug and alcohol prevention programs.

The institution's drug and alcohol prevention program(s) must include the following:

- Standards of conduct that clearly prohibit the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees
- A description of the legal sanctions under local, state, or federal law for the unlawful possession, use or distribution of illicit drugs and alcohol
- A description of any drug or alcohol counseling, treatment, rehabilitation or re-entry programs that are available to employees and students
- A clear statement that, for violations of the standards of conduct, the institution will impose sanctions on students and employees up to and including expulsion or termination of employment and referral for prosecution. A description of these sanctions will be provided to the campus community.

The law further requires that the institution conduct a biennial review of its program with the following objectives: (1) determining the effectiveness of the policy and implementing changes to the Alcohol and Other Drug (AOD) program if they are needed; and (2) ensuring that the sanctions developed to respond to violations of the policy are enforced consistently.

The biennial review must also include a determination as to: (1) the number of drug- and alcohol-related violations and fatalities occurring on the campus or as part of their activities that are reported to campus officials; and (2) the number and type of sanctions the IHEs impose on students and employees as a result of such violations or fatalities.

The intention of this document is to meet the legal requirements of conducting a biennial review and to summarize the programs and activities related to alcohol and drug prevention on Gonzaga University's campus.

An announcement of the biennial review's availability will be sent to all University students and staff via campus email no later than January 31, 2023. A copy of the report will be available on the University website no later than December 31, 2022. The report will be maintained on the University website and will be publicly accessible. Hard copies of the report can be provided upon request, by contacting 509-313- 4100.

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A. ALCOHOL POLICY AND DRUG POLICY

1.) Alcohol and Drug policies are found in the Student Code of Conduct link below:

<https://www.gonzaga.edu/student-life/student-services/resolution-center/student-code-of-conduct>

The Student Alcohol Policy is found in the following link:

<https://www.gonzaga.edu/student-life/student-services/resolution-center/student-code-of-conduct/standards-of-conduct-and-policies/university-policies/alcohol-policy>

The Student Drug Policy is found in the following link:

<https://www.gonzaga.edu/student-life/student-services/resolution-center/student-code-of-conduct/standards-of-conduct-and-policies/university-policies/drug-policy>

2.) The Employee Drug, Controlled Substance and Alcohol-Free Workplace Policy is accessible by clicking “Drug, Controlled Substance and Alcohol-Free Workplace Policy” from the following link:

<https://my.gonzaga.edu/campus-resources/offices-services/administration/university-policies>

3.) In addition, the faculty handbook’s Drug Free Workplace Policy is accessible online in the Gonzaga University Faculty Handbook at section 406.00:

<https://www.gonzaga.edu/academics/academic-resources/provost/about-office-provost/faculty-handbook>

B. STATEMENT OF HEALTH RISKS ASSOCIATED WITH ALCOHOL AND OR DRUG USE

The following are summaries of the major health risks associated with alcohol and other drug use. This is not a complete listing; for more information about the most commonly used drugs and related risks please visit the [NIDA](https://www.nida.nih.gov/) website. Each individual will experience the effects of alcohol and other drugs in a slightly different way given their tolerance, body size, family history, gender, and other physical and psychological factors. Misuse of alcohol and other drugs can lead to chemical dependency and can be harmful during pregnancy. Gonzaga University offers resources to help community members learn more, explore recovery, or reduce the risk of harm if choosing to use substances at:

<https://www.gonzaga.edu/student-life/health-well-being/office-of-health-promotion/wellness-toolbox/alcohol>

Alcohol

Alcohol in moderate amounts causes dizziness, dulling of the senses and impairment of coordination, reflexes, memory and judgment. Increased amounts of alcohol produce staggering, slurred speech, double vision, mood changes and, possibly, unconsciousness. Larger amounts result in death. Alcohol causes damage to the liver, heart and pancreas. It also may lead to malnutrition, stomach irritation, lowered resistance to disease and irreversible brain or nervous system damage.

Cannabis

Cannabis use leads to a substantial increase in heart rate. It impairs or reduces short-term memory and comprehension, and motivation and cognition are altered. With extended use it can produce paranoia and psychosis. Smoking cannabis damages the lungs and pulmonary system. Cannabis contains more cancer causing agents than tobacco. It also lowers male sex hormones, suppresses ovulation, and can cause changes in the menstrual cycle and possibly cause birth defects.

Cocaine

Cocaine and its derivative crack produce dilated pupils and elevated blood pressure, heart rate, respiratory rate and body temperature. They may also cause insomnia, loss of appetite, tactile hallucinations, paranoia, seizure and death.

Barbiturates

In small doses, barbiturates produce calmness, relaxed muscles and lowered anxiety. Larger doses cause slurred speech, staggering gait and altered perception. Very large doses taken in combination with other central nervous system depressants (e.g., alcohol) cause respiratory depression, coma and sometimes death.

Amphetamines

Amphetamine use causes increased heart and respiratory rates, elevated blood pressure, and dilated pupils. Larger doses cause rapid or irregular heartbeat, tremors and physical collapse. An amphetamine injection creates a sudden increase in blood pressure that can result in stroke, high fever and heart failure.

Hallucinogens (including PCP, LSD, Mescaline, Peyote, Psilocybin)

PCP, or angel dust, interrupts the part of the brain that controls the intellect and impulsive behavior. PCP blocks pain receptors. Violent episodes, including self-inflicted injuries, are not uncommon. Chronic users report memory loss and speech difficulty. Very large doses produce convulsions, coma, heart and lung failure, or ruptured blood vessels in the brain. Mescaline, peyote, etc. cause dilated pupils, elevated body temperature, increased heart rate and blood pressure, and tremors. LSD causes pupil and changes in body temperature, blood pressure and heart rate. A person using LSD may experience loss of appetite, sleeplessness, dry mouth and tremors. Visual changes and hallucinations are among the more common effects.

Opioids (including Heroin, Codeine, Morphine, Opium, Percodan)

Narcotics cause drowsiness, nausea, and diminished pain reactions. The risks include shallow breathing, clammy skin, tremors, cramps, panic, and depression of male and female sex hormones, chronic constipation and slowing of the heart rate to the point of coma or death. When narcotics are injected, the use of contaminated needles can increase the risk for contracting AIDS and hepatitis. Symptoms of overdose include shallow breathing, clammy skin and convulsions. An overdose may result in a coma or even death.

Resources for drug and alcohol information on campus:

Health and Counseling Services

<https://www.gonzaga.edu/student-life/health-well-being/health-counseling-services>

Office of Health Promotion

<https://www.gonzaga.edu/student-life/health-well-being/office-of-health-promotion/alcohol-other-drugs>

Wellness Toolbox

<https://www.gonzaga.edu/student-life/health-well-being/office-of-health-promotion/wellness-toolbox/alcohol>

C. ALCOHOL AND/OR DRUG PROGRAMS AVAILABLE TO STUDENTS, STAFF AND FACULTY

Community Resources

Alcoholics Anonymous

Alcoholics Anonymous (AA) is an international fellowship of people who come together to solve their drinking problem. It is nonprofessional, self-supporting, multiracial, apolitical, and available almost everywhere. There are no age or education requirements. A.A.'s primary purpose is to help alcoholics to achieve sobriety. A schedule of AA meetings in Spokane can be found at their [website](#).

SMART Recovery

Self-Management and Recovery Training (SMART) helps people recover from all types of addiction and addictive behaviors. SMART sponsors in-person meetings and daily online meetings. They also sponsor a message board and 24/7 chat rooms. Please visit their [website](#) for more information.

LifeRing

LifeRing is an abstinence-based worldwide network of individuals seeking to live in recovery from addiction to alcohol or to other non-medically prescribed drugs. Please visit the [website](#) for more information about online meetings.

Women for Sobriety

Women For Sobriety, Inc. is a non-profit organization dedicated to helping women overcome alcoholism and other addictions. Please visit the [website](#) for more information.

Narcotics Anonymous

Narcotics Anonymous (NA) is non-profit fellowship of recovering addicts who meet regularly to help each other stay clean and share our experience, strength, and hope. Individuals meet regularly to help each other stay sober. This is a program of complete abstinence from all drugs. There is only one requirement for membership, the desire to stop using. NA information and meetings in Spokane can be found [here](#).

Peer Spokane

Peer Spokane cultivates powerful, healthy lives by providing peer emotional support and development services to the Spokane County community impacted by addiction and/or mental health. For more information about current offerings please visit their [website](#).

Celebrate Recovery

Celebrate Recovery is a Christ-centered recovery program. Bible study and personal connection help individuals grow spiritually while addressing all types of problems and addictions. Check out the [website](#) for more information.

Recovery Café

Founded in 2017, with a mission to serve people in recovery, Recovery Café has programming designed to help participants maintain their recovery, fulfill their potential, and reclaim their lives. Please visit their [website](#) for the schedule and information about associated services.

On Campus Resources

Recovery Support – Collegiate Recovery Community

Gonzaga University's Collegiate Recovery Community (CRC) fosters a collective community and sense of purpose that helps students lead meaningful lives as they work to stop or reduce their use of substances and other potentially harmful behaviors. This mission is supported by programmatic efforts, alternatives to alcohol and drug use, strategies and resources for maintaining wellness and a community of belonging, promoting recovery, holistic well-being, and academic success.

OUR (Our Unique Recovery) House provides dedicated space for students in recovery, or in hope of recovery, from any background. The community is committed to a recovery-positive environment where students can get support from other students who have been through what they've been through.

Resources include:

- 24/7 house access
- Weekly support group meetings
- Social events and activities including weekly community lunches
- Professional development opportunities including monthly recovery ally trainings and mobile outreach
- Mentorship
- Referrals
- Student Scholarships

Gonzaga University was awarded a **State of Washington Recovery Support Initiative Grant** in January 2020 that will continue through June 2023. The \$100,000 of grant funding has been integral in growing Gonzaga's recovery community student membership and increasing campus knowledge about addiction and recovery.

Employee Assistance Program

Faculty and Staff members employed by Gonzaga University have 24/7 access to the Employee Assistance Program (EAP). The EAP helps employees through personal problems, planning for life events or simply managing daily life which can affect work, health and family. [SupportLinc](#) is a no-cost, company sponsored benefit available to all Gonzaga benefit eligible employees and dependents. The EAP offers confidential support, resources and information to get through life's challenges. Access to EAP information is made at <https://www.gonzaga.edu/about/offices-services/human-resources/benefits/work-life>.

StudentLinc:

StudentLinc is a mental health resource that functions like an EAP for students; providing them with diverse options and modalities to assess care and support. Resources include 24/7 access to unlimited telephone and live chat with a diverse group of licensed mental health providers. Appointments are available within 72 hours (about 3 days), or 24 hours for urgent cases.

Health Advocate

Provides all benefit eligible employees and their immediate family members a variety of personalized healthcare services, free of charge.

Education and Intervention Opportunities

Gonzaga actively educates students about alcohol and other drugs. Workshops and presentations are offered throughout the academic year for various student groups and organizations, in addition to consultations for students and staff. Specific programs and interventions include the following:

eCHECKUP TO GO – This online program helps motivate students to reduce their consumption using personalized information about their own drinking and risk factors. It is designed and updated based on the most current and reliable research available. <https://www.gonzaga.edu/student-life/health-well-being/office-of-health-promotion/alcohol-other-drugs>

Alcohol Skills Training Program – Intended to help students examine their alcohol use in a small group format, ASTP reviews basics alcohol education concepts, provides information about peer alcohol use, and promotes risk reduction strategies.

Student Learning Objective (goal):

Educate students about alcohol and drinking-related behaviors while increasing the students’ interest in critically examining their drinking patterns and eventually implementing the skills they learn. In doing so, students can learn to recognize high-risk situations and to minimize the potential negative consequences through preventative action, reduced consumption, or abstinence.

Assessment:

Following the completion of a second peer-facilitated session, students participate in survey. The survey provides information about the student’s impression of the facilitator, level of learning, intention to change behavior, and willingness to engage with additional resources in the future.

Academic Year 2021-2022 Results: (n=94)

Facilitator impression/effectiveness

Statement	% Strongly Agree/Agree ‘21-’22
My facilitator was supportive.	100%
My facilitator was non-judgmental.	100%
My facilitator was knowledgeable.	100%

Likelihood of Future Behavior

Question	% Very likely/Likely ‘21-’22
How likely are you to make a change in your drinking behavior?	90%
How likely are you to refer a friend or acquaintance who might need assistance to OHP?	73%

Students also provide responses to ‘useful information they learned’, what they would like to know more about, and other things we can do to support them in the future. This feedback is analyzed and modifications/additions to the class presentation are made for the following year.

Zag Into Action– This is a self-paced online course (created by Gonzaga Student Affairs professionals) that covers substance use, healthy relationships, sexual misconduct, diversity and inclusion, and other topics critical to making a successful transition to college. The module about substance use includes the eCHECKUP TO GO assessment tool. The program must be completed by all new incoming undergraduates prior to the start of their first semester. The program sets a foundation that is reinforced during Orientation, and throughout the year through intentional opportunities via professional residential staff.

Relevant data from the Class of 2026: (n=1112)

This module helped me think about the role of alcohol and other drugs in my college experience.	
	Percent Answered
Strongly Agree	39.478%
Agree	55.485%

How often do you use alcohol?	
	Percent Answered
Never	47.482%
Sometimes	49.10%
Often	2.787%

How often do you use drugs for non-medical, personal use?	
	Percent Answered
Never	81.025%
Sometimes	16.366%
Often	1.618%
Daily	0.359%

Zags Help Zags- The Zags Help Zags program empowers the Gonzaga community to promote well-being and to actively prevent physical, mental, and emotional harm. This is a Gonzaga University designed program that provides comprehensive bystander intervention strategies for fostering a safe campus community. The program is run out of the Office of Health Promotion and helps develop students, faculty, and staff to be *active bystanders* who step in to make a positive difference in the Gonzaga community. <https://www.gonzaga.edu/zagshelpzags>

BASICS: Brief Alcohol Screening and Intervention for College Students - An evidence-based intervention approach specifically designed for college students to prevent/reduce high-risk drinking and negative consequences. Students often conform to patterns of heavy drinking they see as acceptable, while holding false beliefs about alcohol's effects or actual alcohol-use norms. BASICS is designed to help students make different decisions about using alcohol. The program's approach is empathic, rather than confrontational or judgmental. It aims 1) to reduce alcohol consumption and its adverse consequences, 2) to promote healthier choices among young adults, and 3) to provide important information and coping skills for reducing risk. Developed at the University of Washington's Addictive Behaviors Research Center, BASICS is a widely recognized model program by the Substance Abuse and Mental Health

Services Administration, National Registry of Evidence-based Program and Practices, and by the U.S. Department of Health and Human Services.

Students engage in a self-reflective process whereby they independently choose to change high-risk alcohol use behaviors while using evidence-based information about alcohol, associated risks with excessive drinking, and alternative coping strategies. BASICS is facilitated in 1:1 sessions. Students who are sanctioned for an alcohol policy violation and self-report high risk drinking behaviors are required to attend these sessions.

Student Learning Objective (goal):

Students engage in a self-reflective process where they independently choose to change high-risk behaviors using information provided about alcohol, risks associated with excessive drinking, and alternative coping strategies.

Assessment

Each participant takes an online assessment of their alcohol/drug-use and is presented with their assessment results during the second session. Individuals reflect on their results and are invited to discuss certain assessment results. Following the completion of the second session, students participate in a survey. This provides information about the student’s impression of the facilitator, level of learning, intention to change behavior, and willingness to engage with additional resources in the future.

*Interventions continued to be offered virtually (over zoom) if necessary during the COVID-19 pandemic.

Academic Year 2021-2022 Results: (n=30)

Facilitator impression/effectiveness

Statement	% Strongly Agree/Agree '21-'22
My facilitator was supportive.	100%
My facilitator was non-judgmental.	100%
My facilitator was knowledgeable.	100%

Likelihood of Future Behavior

Question	% Very likely/Likely '21-'22
How likely are you to make any change in your drinking behavior?	77%
How likely are you to refer a friend or acquaintance who might need assistance to OHP?	89%

IMPACT - Is a personal discussion with an individual regarding the impact that alcohol/drugs may be having on their life, on their community, and potentially on their future. Through conversation and additional self-reflection, participants will assess their high-risk alcohol/drug use behaviors, associated risks with excessive use and alternative coping strategies (if associated). This one-on-one conversation occurs in 1-2 consecutive weeks. Each session lasts approximately one hour and is facilitated by professional and graduate assistant staff in the Office of Health Promotion. IMPACT is provided for students who have received prior alcohol-related sanctions or first-time cannabis or other drug violations.

Student Learning Objective (goal):

Upon completion of IMPACT, students will be able to reflect upon their substance use and the impact it has on and in their life, community and future, and self-assess use and potential for behavior change. Additional goals include sharing Collegiate Recovery Community resources and evaluating for community provided substance use assessment when warranted.

Academic Year 2021-2022 Results: (n=26)

Facilitator impression/effectiveness

Statement	% Strongly Agree/Agree '21-'22
My facilitator was supportive.	100%
My facilitator was non-judgmental.	100%
My facilitator was knowledgeable.	100%

Likelihood of Future Behavior

Question	% Very likely/Likely '21-'22
How likely are you to make a change in your behavior?	73%
How likely are you to refer a friend or acquaintance who might need assistance to CCP?	92%

D. STUDENT CLIMATE/HEALTH ASSESSMENT RELATED TO ALCOHOL OR DRUGS

Gonzaga University leverages information and data obtained from national and university specific alcohol and drug surveys. The information is used for quality improvement, to determine if existing programs are meeting intended alcohol and drug programming objectives, as well as identifying ongoing trends and opportunities to meet changing campus community needs.

Cannabis on Campus Survey

A survey developed by Gonzaga Student Affairs professionals was administered in the Fall of 2020 to learn about rates of student cannabis use, including method of use, motivation to use, common side

effects (e.g. anxiety, concentration), and perceptions. Two-thirds (2/3) of respondents indicated at least monthly use. The survey assessed changes in cannabis use during the COVID-19 pandemic:

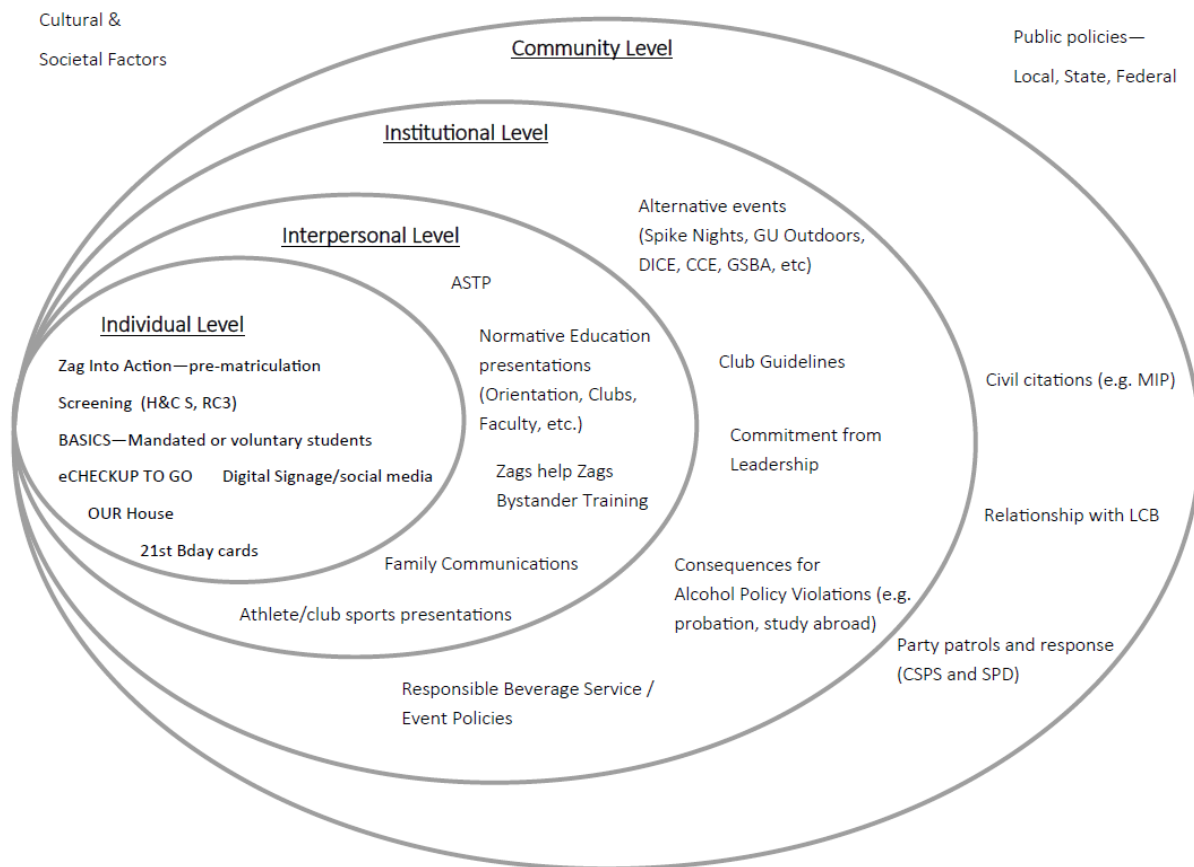
1	My cannabis use frequency has INCREASED during the pandemic	42.08%	202
2	My cannabis use frequency has DECREASED during the pandemic	19.17%	92
3	My cannabis use frequency has REMAINED THE SAME during the pandemic	36.88%	177
4	I prefer not to say	1.88%	9
			480 total respondents

Student Affairs Well-being Survey

In the Spring of 2022, a Gonzaga-built survey measured student reported rates of alcohol and e-cigarette use. The survey detected a decrease in student binge drinking rates. Up to 10% of students indicated concern about the frequency or quantity of their substance use, and up to 35% reported they have been concerned about a friends’ use during the last year. The information was used to create targeted marketing for OUR House.

Campus Climate Diagrams and Strategies

Gonzaga University is committed to implementing a comprehensive, public health approach to address student drinking and drug use, and related harms. The diagram of a socioecological model (below) highlights a myriad of strategies used both on and off-campus.



Additional Improvements/Updates since last review

- Graduate assistants and an undergraduate student were hired to facilitate brief motivational interventions.
- Recovery ally training was offered monthly and expanded knowledge, awareness, and referrals to OUR House.
- A health communication campaign encouraged harm reduction approaches and student referrals to OUR House.
- Online screening and intervention tools (e.g. CheckinWA and StudentLinc) were adopted, effective Fall 2022.

Recommendations for Improvements

- Maximize use of online interventions implemented effective Fall 2022. (e.g. subscription to cannabis eCHECKUP TO GO).
- Research and expand knowledge of polysubstance use and trends in hallucinogen usage for use in health education work, inclusion in ASTP, and other passive programming.

- Increase the reach of the Zags Help Zags bystander intervention program.
- Regularly monitor peer-reviewed literature and higher education high impact practices that address student cannabis use within a legalized recreational use state.

E. DISCIPLINARY SANCTIONS FOR VIOLATIONS OF THE ALCOHOL AND DRUG POLICY

Student Violations of the Alcohol Policy and Drugs Policy

In accordance with the Drug-Free Schools and Communities Act, information about minimum conduct outcomes associated with the use of alcohol and other drugs are available at:

<https://www.gonzaga.edu/student-life/student-services/resolution-center/the-conduct-process/conduct-outcomes-for-alcohol-and-other-drugs> and are listed in the tables below:

Violations of the Alcohol Policy Minimum Outcomes:

Class 1 Violations	1 Violation	2 Violations	3 Violations	4 Violations
Possession of Alcohol Paraphernalia - Residential Facilities Possession of Alcohol in a Restricted Area	\$25 Fine	\$50 Fine	\$100 Fine	\$150 Fine and Conduct Probation
Class 2 Violations	1 Violation	2 Violations	3 Violations	4 Violations
Underage Possession, Use, or Consumption of Alcohol	\$50 Fine	\$150 Fine	\$250 Fine and Conduct Probation	Suspension
Class 3 Violations	1 Violation	2 Violations	3 Violations	
Mass Quantities of Alcohol - Residential Facilities Drinking Games - Residential Facilities	\$100 Fine	\$200 Fine and Conduct Probation	Suspension	
Acute Intoxication (Regardless of Age)	No Fine Alcohol Education	\$200 Fine and Conduct Probation	Suspension	
Class 4 Violations	1 Violation	2 Violations	3 Violations	
Provision of Alcohol to Minors	\$200 Fine	\$300 Fine and Conduct Probation	Suspension	

Violations of the Drug Policy Minimum Outcomes:

Class 1 Violations	1 Violation	2 Violations	3 Violations	4 Violations
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Possession of Drug Paraphernalia	\$50 Fine	\$100 Fine	\$150 Fine and Conduct Probation	Suspension
Class 2 Violations	1 Violation	2 Violations	3 Violations	
Possession, Use, or Consumption of Marijuana Misuse of Prescription Drugs or Other Products Provision or Manufacture of Drug Paraphernalia	\$100 Fine	\$250 Fine and Conduct Probation	Suspension	
Class 3 Violations	1 Violation	2 Violations		
Provision of Marijuana Possession, Use, or Consumption of Other Drugs	\$250 Fine and Conduct Probation	Suspension		
Class 4 Violations	1 Violation	2 Violations		
Manufacture of Drugs Provision of Drugs or Controlled Substances	Suspension	Expulsion		

The Resolution Center for Student Conduct and Conflict and/or its designee(s) are not limited to the assignment of minimum outcomes. The nature of the violation, the circumstances surrounding the violation, the student’s prior conduct history (if any), the impact of the misconduct on the community, and conduct outcomes assigned to previous findings for such violations, will be among the factors considered in determining an outcome. The University generally assigns workshops and other educational assignments in addition to the University’s minimum response to improper use of alcohol or other drugs. A list of University conduct outcomes is available at: <https://www.gonzaga.edu/student-life/student-services/resolution-center/student-code-of-conduct/administration-of-the-student-code-of-conduct/conduct-outcomes>.

Employee Violations of the University’s Drug, Controlled Substance and Alcohol-Free Workplace Policy

Violation of the University’s Drug, Controlled Substance and Alcohol-Free Workplace Policy may result in actions ranging from mandatory participation in a drug rehabilitation program up to dismissal from employment. Full policy is available at: <https://my.gonzaga.edu/campus-resources/offices-services/administration/university-policies>

Clery-Reportable Disciplinary Referrals and Conduct Process Information

The tables below present Clery-reportable disciplinary referrals for calendar years 2020 and 2021 and conduct process information for academic years 2020-21 and 2021-22.

Clery-reportable disciplinary referrals include individuals referred to the Resolution Center for Student Conduct & Conflict as being present during incidents involving alleged alcohol or drug-related law violation(s). Some referrals include an initial review of names submitted only. Conduct process

information includes Clery-reportable and other disciplinary referrals resulting in initiation of disciplinary action. It includes findings of responsibility and sanctions. The University uses a preponderance of evidence standard and not all conduct processes result in findings of responsibility, and in those instances, the assignment of disciplinary sanctions does not occur.

Clery-Reportable Disciplinary Referrals

	2021			2020				
Conduct Referrals	On-Campus		Non-Campus	Public	On Campus		Non-Campus	Public
	Non-Housing	Housing			Non-Housing	Housing		
Disciplinary Referrals for Drugs	4	91	0	0	5	72	0	5
Disciplinary Referrals for Alcohol	10	512	0	3	18	375	0	0

Conduct Process Information

The data in these charts display numbers of individual Alcohol or Other Drug (AOD) violations. Students sometimes have multiple AOD related violations in the same incident.

	2020-2021	2021-2022
Number of Alcohol or Other Drug (AOD) cases	893	862
Number of cases with an AOD finding of responsibility	599	527

Alcohol		
Charge Language	Findings of Responsibility	
Underage Possession, Use, or Consumption of Alcohol	284	275
Acute Intoxication: Underage	11	23
Acute Intoxication: Of Age	2	7
Provision of Alcohol to Minors	62	62
Mass Quantities of Alcohol - Residential Facilities	0	0
Possession of Alcohol Paraphernalia - Residential Facilities	58	31
Possession of Alcohol in a Restricted Area	15	11

Drinking Games - Residential Facilities	56	25
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Drug		
Charge Language	Findings of Responsibility	
Possession, Use, or Consumption of Marijuana	71	52
Possession, Use, or Consumption of Other Drugs		3
Provision of Marijuana	3	0
Provision of Drugs or Controlled Substances		0
Possession of Drug Paraphernalia	27	38
Misuse of Prescription Drugs or Other Products	0	0
Provision or Manufacture of Drug Paraphernalia	0	0
Manufacture of Drugs	1	0

F. REVISED CODE OF WASHINGTON, TITLE 69.50,

State of Washington Laws relating to drug violations

The Drug-Free Schools and Communities Act requires institutions to provide documentation relating to drug related offenses and potential penalties associated with those crimes. The Revised Code of Washington (RCW) contains the classifications of controlled substances, definitions of drug related criminal acts and sentencing for violating those statutes. The most relevant laws of the section covering controlled substances are listed here with web links:

Uniformed Controlled Substances Act <http://app.leg.wa.gov/rcw/default.aspx?cite=69.50>

1. Article IV—Offenses and Penalties

RCW 69.50.401 <http://app.leg.wa.gov/RCW/default.aspx?cite=69.50.401>

Prohibited acts: A—Penalties.

(1) Except as authorized by this chapter, it is unlawful for any person to manufacture, deliver, or possess with intent to manufacture or deliver, a controlled substance.

(2) Any person who violates this section with respect to:

(a) A controlled substance classified in Schedule I or II which is a narcotic drug or flunitrazepam, including its salts, isomers, and salts of isomers, classified in Schedule IV, is guilty of a class B felony and upon conviction may be imprisoned for not more than ten years, or (i) fined not more than twenty-five

thousand dollars if the crime involved less than two kilograms of the drug, or both such imprisonment and fine; or (ii) if the crime involved two or more kilograms of the drug, then fined not more than one hundred thousand dollars for the first two kilograms and not more than fifty dollars for each gram in excess of two kilograms, or both such imprisonment and fine;

(b) Amphetamine, including its salts, isomers, and salts of isomers, or methamphetamine, including its salts, isomers, and salts of isomers, is guilty of a class B felony and upon conviction may be imprisoned for not more than ten years, or (i) fined not more than twenty-five thousand dollars if the crime involved less than two kilograms of the drug, or both such imprisonment and fine; or (ii) if the crime involved two or more kilograms of the drug, then fined not more than one hundred thousand dollars for the first two kilograms and not more than fifty dollars for each gram in excess of two kilograms, or both such imprisonment and fine. Three thousand dollars of the fine may not be suspended. As collected, the first three thousand dollars of the fine must be deposited with the law enforcement agency having responsibility for cleanup of laboratories, sites, or substances used in the manufacture of the methamphetamine, including its salts, isomers, and salts of isomers. The fine moneys deposited with that law enforcement agency must be used for such clean-up cost;

(c) Any other controlled substance classified in Schedule I, II, or III, is guilty of a class C felony punishable according to chapter [9A.20](#) RCW;

(d) A substance classified in Schedule IV, except flunitrazepam, including its salts, isomers, and salts of isomers, is guilty of a class C felony punishable according to chapter [9A.20](#) RCW; or

(e) A substance classified in Schedule V, is guilty of a class C felony punishable according to chapter [9A.20](#) RCW.

(3) The production, manufacture, processing, packaging, delivery, distribution, sale, or possession of marijuana in compliance with the terms set forth in RCW [69.50.360](#), [69.50.363](#), or [69.50.366](#) shall not constitute a violation of this section, this chapter, or any other provision of Washington state law.

(4) The fines in this section apply to adult offenders only

Washington State Crimes and Penalties — Alcohol

Persons under 21 - Minor in Possession and Consumption

RCW 66.44.270

(1) It is unlawful for any person to sell, give, or otherwise supply liquor to any person under the age of twenty-one years or permit any person under that age to consume liquor on his or her premises or on any premises under his or her control. For the purposes of this subsection, "premises" includes real property, houses, buildings, and other structures, and motor vehicles and watercraft. A violation of this subsection is a gross misdemeanor punishable as provided for in chapter 9A.20 RCW.

(2)(a) It is unlawful for any person under the age of twenty-one years to possess, consume, or otherwise acquire any liquor. A violation of this subsection is a gross misdemeanor punishable as provided for in chapter 9A.20 RCW. (b) It is unlawful for a person under the age of twenty-one years to be in a public place, or to be in a motor vehicle in a public place, while exhibiting the effects of having consumed

liquor. For purposes of this subsection, exhibiting the effects of having consumed liquor means that a person has the odor of liquor on his or her breath and either: (i) Is in possession of or close proximity to a container that has or recently had liquor in it; or (ii) by speech, manner, appearance, behavior, lack of coordination, or otherwise, exhibits that he or she is under the influence of liquor. This subsection (2)(b) does not apply if the person is in the presence of a parent or guardian or has consumed or is consuming liquor under circumstances described in subsection (4) or (5) of this section.

(3) Subsections (1) and (2)(a) of this section do not apply to liquor given or permitted to be given to a person under the age of twenty-one years by a parent or guardian and consumed in the presence of the parent or guardian. This subsection shall not authorize consumption or possession of liquor by a person under the age of twenty-one years on any premises licensed under chapter 66.24 RCW.

(4) This section does not apply to liquor given for medicinal purposes to a person under the age of twenty-one years by a parent, guardian, physician, or dentist.

(5) This section does not apply to liquor given to a person under the age of twenty-one years when such liquor is being used in connection with religious services and the amount consumed is the minimal amount necessary for the religious service.

(6) Conviction or forfeiture of bail for a violation of this section by a person under the age of twenty-one years at the time of such conviction or forfeiture shall not be a disqualification of that person to acquire a license to sell or dispense any liquor after that person has attained the age of twenty-one years

Drivers under the Influence of Alcohol or Drugs

RCW 46.61.502

(1) A person is guilty of driving while under the influence of intoxicating liquor or any drug if the person drives a vehicle within this state: (a) And the person has, within two hours after driving, an alcohol concentration of 0.08 or higher as shown by analysis of the person's breath or blood made under RCW 46.61.506; or (b) While the person is under the influence of or affected by intoxicating liquor or any drug; or (c) While the person is under the combined influence of or affected by intoxicating liquor and any drug.

(2) The fact that a person charged with a violation of this section is or has been entitled to use a drug under the laws of this state shall not constitute a defense against a charge of violating this section.

(3) It is an affirmative defense to a violation of subsection (1) (a) of this section which the defendant must prove by a preponderance of the evidence that the defendant consumed a sufficient quantity of alcohol after the time of driving and before the administration of an analysis of the person's breath or blood to cause the defendant's alcohol concentration to be 0.08 or more within two hours after driving. The court shall not admit evidence of this defense unless the defendant notifies the prosecution prior to the omnibus or pretrial hearing in the case of the defendant's intent to assert the affirmative defense.

(4) Analyses of blood or breath samples obtained more than two hours after the alleged driving may be used as evidence that within two hours of the alleged driving, a person had an alcohol concentration of 0.08 or more in violation of subsection (1)(a) of this section, and in any case in which the analysis shows an alcohol concentration above 0.00 may be used as evidence that a person was under the influence of or affected by intoxicating liquor or any drug in violation of subsection (1)(b) or (c) of this section.

(5) Except as provided in subsection (6) of this section, a violation of this section is a gross misdemeanor.

(6) It is a class C felony punishable under chapter 9.94A RCW, or chapter 13.40 RCW if the person is a juvenile, if: (a) The person has four or more prior offenses within ten years as defined in RCW 46.61.5055; or (b) the person has ever previously been convicted of (i) vehicular homicide while under the influence of intoxicating liquor or any drug, RCW 46.61.520(1)(a), (ii) vehicular assault while under the influence of intoxicating liquor or any drug, RCW 46.61.522(1)(b), or (iii) an out-of-state offense comparable to the offense specified in (b)(i) or (ii) of this subsection.

Classification of Crimes – Sentences

RCW 9A.20.021 <http://app.leg.wa.gov/RCW/default.aspx?cite=9A.20.021>

Maximum sentences for crimes committed July 1, 1984, and after.

(1) Felony. Unless a different maximum sentence for a classified felony is specifically established by a statute of this state, no person convicted of a classified felony shall be punished by confinement or fine exceeding the following:

(a) For a class A felony, by confinement in a state correctional institution for a term of life imprisonment, or by a fine in an amount fixed by the court of fifty thousand dollars, or by both such confinement and fine;

(b) For a class B felony, by confinement in a state correctional institution for a term of ten years, or by a fine in an amount fixed by the court of twenty thousand dollars, or by both such confinement and fine;

(c) For a class C felony, by confinement in a state correctional institution for five years, or by a fine in an amount fixed by the court of ten thousand dollars, or by both such confinement and fine.

(2) Gross misdemeanor. Every person convicted of a gross misdemeanor defined in Title [9A](#) RCW shall be punished by imprisonment in the county jail for a maximum term fixed by the court of up to three hundred sixty-four days, or by a fine in an amount fixed by the court of not more than five thousand dollars, or by both such imprisonment and fine.

(3) Misdemeanor. Every person convicted of a misdemeanor defined in Title [9A](#) RCW shall be punished by imprisonment in the county jail for a maximum term fixed by the court of not more than ninety days, or by a fine in an amount fixed by the court of not more than one thousand dollars, or by both such imprisonment and fine.

(4) This section applies to only those crimes committed on or after July 1, 1984.

(5) The fines in this section apply to adult offenders only.