

Alcohol & Alcohol Safety

Before drinking, think about its possible consequences (e.g., academic and health problems, unsafe sex, assault, injury, and even death). These consequences affect the person who drinks as well as other students (whether they choose to drink or not) and the community as a whole. See “Effects of Alcohol in your Blood” below.



Effects of Alcohol in Your Blood

Alcohol is a central nervous system depressant. How drinking affects your body and mind depends upon your blood alcohol concentration (BAC). BAC is related to how much alcohol you drink in a given period of time and your body weight.

% of Blood Alcohol Concentration (BAC)					
Body Weight	Number of Drinks in Two Hours*				
(lbs)	2	4	6	8	10
120	0.06	0.12	0.19	0.25	0.31
140	0.05	0.11	0.16	0.21	0.27
160	0.05	0.09	0.14	0.19	0.23
180	0.04	0.08	0.13	0.17	0.21
200	0.04	0.08	0.11	0.15	0.19
BAC	Effects				
0.05%	Relaxed state. Judgment is not as sharp. Release of tension; carefree feeling.				
0.08%**	Inhibitions are lessened.				
0.10%**	Movements and speech are clumsy.				
0.20%	Very drunk. Can be hard to understand. Emotions can be unstable. 100 times greater risk for traffic accident.				
0.40%	Deep sleep. Hard to wake up. Not able to make voluntary actions.				
0.50%	Can result in coma and/or death				

* 1 drink equals 1½ ounces 80-proof hard liquor, 12 ounces beer, or 5 ounces wine.

** Some states use 0.08 as the lowest indicator of driving while intoxicated. Some use 0.10.

Alcohol Poisoning

Call 9-1-1 for one or more of the following signs of alcohol poisoning or combining alcohol and other drugs, such as sedatives or tranquilizers. **Act quickly. Alcohol poisoning can be fatal.**

- Unconsciousness. This means the person is hard to rouse and can't be made aware of his or her surroundings. This can be brief, such as with fainting or blacking out. It can put a person into a coma.
- No breathing or slow and shallow breathing. This means 10 or fewer breaths per minute or time lapses of more than 8 seconds between breaths.
- Slow pulse rate (40 or fewer beats per minute)
- Skin that is cold, clammy, and/or pale or blue in color

{*Note:* Before emergency care arrives, place the person on his or her side with the knees bent, to prevent choking, if he or she vomits. Loosen the person's clothing around the neck and check the mouth and back of the throat to see that nothing obstructs the person's breathing. Stay with the person.}

Alcohol Safety Tips

- Choose substance-free housing, if available and desired.
- Be aware and think about the risks and consequences of drinking, including getting arrested, getting sick, contracting an STD, etc. One incident of alcohol use could cause you to do something you will regret for the rest of your life. Alcohol plays a part in most sexual assaults.
- Don't mix drinking with driving, drugs, or operating machines. Doing so can be fatal. Designate a sober driver.
- Don't give in to peer pressure or drink because "everyone else does it." Not everyone drinks. Be with people who drink non alcoholic beverages or ones that look like "drinks," such as non alcoholic beer in a glass. Also, it is better to get medical help for a person who needs it instead of worrying about getting a friend in trouble.
- Drink alcohol only if you want to, and if you do:
 - Know your limit and stick to it or don't drink any alcohol.

- Drink slowly. You are apt to drink less. Nurse one drink during a party. Take fake sips, if necessary. In reality, anything over two drinks does not increase the feeling of pleasure. Drinking too much leads to being unable to enjoy yourself.
- Eat when you drink. Food helps to slow alcohol absorption.
- Alternate an alcoholic beverage with a non alcoholic one. Use non alcohol or reduced alcohol beverages. Don't drink distilled beverages straight. Dilute them. Use more and more mixer and less and less alcohol. After two drinks, your taste buds are dulled and you won't be able to notice much difference.
- Don't participate in drinking contests and games.



For Information, Contact:

From <http://counseling.cofc.edu/aod/factsinfo.php>

Sobering Facts

Recent research from the National Institute of Alcohol Abuse and Alcoholism found that among college students and other 18- to 24-year-olds, binge drinking (generally defined as 5 or more drinks for men, or 4 or more for women, in about 2 hours) and, in particular, driving while intoxicated (DWI), have increased since 1998. The number of students who reported DWI increased from 2.3 million students to 2.8 million. The number of alcohol-related deaths also have increased. In 2001, there were an estimated 1,700 alcohol-related unintentional injury deaths among students 18–24, an increase of 6 percent among college students (that is, per college population) since 1998. In addition, it is estimated that each year, more than 696,000 students between the ages of 18 and 24 are assaulted by another student who has been drinking, and more than 97,000 students between the ages of 18 and 24 are victims of alcohol-related sexual assault or date rape. About 25 percent of college students report academic consequences of their drinking including missing class, falling behind, doing poorly on exams or papers, and receiving lower grades overall. Clearly, alcohol-related problems on campus remain a significant concern.

In a recent survey, 19% of college students aged 18-24 met the mental health diagnostic criteria for alcohol abuse or dependence (alcoholism). Only 5% of these students actually sought treatment in the year prior to the survey, while another 3% thought they needed help but did not seek it. This study emphasizes the point that those who drink in a dangerous way (to themselves and others) do not get the help they need, often waiting for catastrophic circumstances, "hitting bottom" to realize they need help.

Everybody Drinks Myth: Well the research shows that they actually don't, and of those that do, only a few drink excessively. Of 18 - 20 year olds, 49% don't drink, 27% drink 1 - 4 drinks when they drink, and only 24% drink 5+ drinks - a sizeable (and noisy) group, but hardly "everybody." To further pull your excuse out from under you, national surveys recently found that alcohol use has continued to decline

among high school seniors (next year's college freshmen). Only 41% drink anything at all, and binge drinking has decreased to 23%. (National Institute on Drug Abuse's 2010 Monitoring the Future Survey)



From <http://counseling.cofc.edu/aod/marijuana.php>

Marijuana Information

- Controlled research and studies of both high school and college students show that more students now smoke marijuana than cigarettes.
- National data shows that among 19-30 year olds, 15% smoke at least monthly, and 5% smoke daily.
- DATA FROM THE COLLEGE OF CHARLESTON SHOWS THAT 12% OF STUDENTS SMOKE MARIJUANA 3 TIMES A WEEK OR MORE (COMPARED TO 7% AVG. AT OTHER COLLEGES).
- While students express a variety of reasons to smoke - to relax, to concentrate, to socialize, most focus on the low probability of addiction/dependence, and the public debate about the "medical" uses, and therefore "legitimate" uses of marijuana to support their own use.
- What most college students don't know is that marijuana use interferes with the very cognitive skills needed most to be successful in school.

Below is a brief listing of research suggesting that students comply with current law and not smoke at all, or delay their smoking to winter break or summer, and NOT use during the school year

1. An estimated 72.2 percent of students who did not use marijuana in the past month reported an A or B average in their last semester or grading period compared with 58.0 percent of those who used marijuana on 1 to 4 days and 44.9 percent of those who used marijuana on 5 or more days during the past month. <http://www.samhsa.gov/data/2k6/academics/academics.htm>
2. In fact, heavy marijuana users generally report lower life satisfaction, poorer mental and physical health, relationship problems, and less academic and career success compared to their peers who came from similar backgrounds. For example, marijuana use is associated with a higher likelihood of dropping out from school. Several studies also associate workers' marijuana smoking with increased absences, tardiness, accidents, workers' compensation claims, and job turnover. Research has shown that, in chronic users, marijuana's adverse impact on learning and memory persists after the acute effects of the drug wear off; when marijuana use begins in adolescence, the effects may persist for many years. Research from different areas is converging on the fact that regular marijuana use by young people can have long-lasting negative impact on the structure and function of their brains. <http://www.drugabuse.gov/publications/drugfacts/marijuana>

3. A national study of 12th graders concluded that students who were regular smokers, or under the influence of marijuana or alcohol, performed significantly lower on standardized tests relative to their peers. Jeynes WH. The relationship between the consumption of various drugs by adolescents and their academic achievement. *Am J Drug Alcohol Abuse*. 2002;28(1):15-35.
4. Research has shown that marijuana's negative effects on attention, memory, and learning can last for days or weeks after the acute effects of the drug wear off. Polen, M.R.; Sidney, S.; Tekawa, I.S.; Sadler, M.; and Friedman, G.D. Health care use by frequent marijuana smokers who do not smoke tobacco. *West J Med* 158(6):596-601, 1993.
5. Not surprisingly, evidence suggests that, compared with their nonsmoking peers, students who smoke marijuana tend to get lower grades and are more likely to drop out of high school. Richer, I., and Bergeron, J. Driving under the influence of cannabis: Links with dangerous driving, psychological predictors, and accident involvement. *Accid Anal Prev* 41(2):299-307, 2009.
6. A meta-analysis of 48 relevant studies—one of the most thorough performed to date—found cannabis use to be associated consistently with reduced educational attainment (e.g., grades and chances of graduating). Schempf, A.H., and Strobino, D.M. Illicit drug use and adverse birth outcomes: Is it drugs or context? *J Urban Health* 85(6):858-873, 2008.
7. Among marijuana-using undergraduates, daily use is associated with greater impairments to memory and motivation ([Kouri, Pope, Yurgelun-Todd, & Gruber, 1995](#)). In fact, among students who reported using marijuana 5 times or more in the past year, 40.1% had difficulty concentrating after using and 13.9% overslept and missed class ([Caldeira et al., 2008](#)). Use also appears related to spending less time studying and more time socializing ([Bell et al., 1997](#)) and students who use marijuana in addition to alcohol (although not necessarily at the same time) are more likely to perform poorly on tests, miss class, and experience memory loss than students who only use alcohol ([Rhodes et al., 2008](#) and [Shillington & Clapp, 2001](#)). Mental health problems and interest in marijuana treatment among marijuana-using college students [Julia D. Buckner](#) 
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8. Marijuana use increases risk of academic problems. USA Today, 06/07/2013, summary of extensive study at University of Maryland School of Public Health. <http://www.usatoday.com/story/news/nation/2013/06/07/marijuana-academic-problems/2399693/>