BINGE DRINKING AMONG COLLEGE STUDENTS INCREASES

College students are drinking increasing amounts of alcohol with the primary purpose of getting drunk.
Statistics show that students, in general, are drinking less often than they did in years past. However, many of today’s students are not necessarily drinking less. Research is showing that they are waiting until Thursday, Friday, or Saturday night and "binge drinking," or drinking large quantities (5 or more drinks in one sitting) in a short period of time.

Ninety-three percent of today’s students report having consumed alcohol and 42% have engaged in binge drinking in the last two weeks. Freshmen are more likely to drink greater amounts and more frequently than seniors. One in three college students now drinks primarily to get drunk. The number of women drinking to get drunk has tripled between 1977 (10%) and 1993 (35%). This rate now equals that of men.

This "rite of passage" has become a serious threat to the health and well-being of today’s college students. Thirty-five to 70% of men and women say that they would not have engaged in sexual activity if they had been sober. Sexually transmitted diseases and unplanned pregnancies are common consequences.

If the trend continues, 240,000 - 360,000 of the nation’s current undergraduates will die of alcohol-related causes. The consequences of binge drinking could be devastating to one of our greatest potential assets — the college student.

Source: Report by the Commission on Substance Abuse at Colleges and Universities, June 1994, Center on Addiction and Substance Abuse (CASA), Columbia University.

ALCOHOL POISONING

Alcohol poisoning - a severe physical reaction to an overdose of alcohol - is the most dangerous consequence of binge drinking. The binge drinker’s brain struggles to deal with the overdose of alcohol, a depressant. The lack of oxygen begins to shut down the involuntary functions that, for example, regulate breathing and heart rate. Without medical assistance, the person who has a very high blood alcohol content (BAC), can die as his or her body "shuts down."

It is not always easy to spot alcohol poisoning, and some subjective judgement is usually needed. However, there are a few things that can be likely indicators of alcohol poisoning, and one should be aware of these when caring for someone who has reached a high level of intoxication.

Symptoms of Alcohol Poisoning:

1. Person is known to have consumed large quantities of alcohol in a short period of time.
2. Person is unconscious and cannot be awakened.
3. Person has cold, clammy, unusually pale or bluish skin.
4. Person is breathing slowly or irregularly - usually this means less than eight times a minute, or ten seconds or more between any two breaths.
5. Person vomits while passed out and does not wake up during or after.

For lots of students, sex is part of the college experience. For better or for worse, decisions about sex (whether or not to do it, with whom, and when) are thought about and talked about a lot. Each person’s sexual history is going to be different. But when it comes to sex under the influence, the potential risks put everyone on common ground.

**Doesn’t it seem like alcohol makes things easier?**
The reason it becomes easier is that alcohol helps an individual forget about the things that usually make him or her nervous. Alcohol frees a person up by making everything seem okay, and it helps get their nerve up. And sometimes alcohol seems like a good shortcut to getting things going in the right direction because it provides a false sense of comfort.

**Risque? Risky?**
With alcohol in an individual’s system, the power to make smart decisions plummets. The brain is sleeping, but the hormones are jumping! An individual’s thinking is more focused in the short-term, and he or she may be apt to view situations in this perspective. The truth is that even encounters which seem “casual” can have long-term considerations. Self-esteem, reputation, and emotional stability – while not always thought about at the time – could become very important later, when all is said and done. And alcohol can also bring on a state of loss of self-awareness, including awareness of one’s beliefs, attitudes, and self-standards.

**Body Language**
Alcohol can impair an individual’s perception of a situation. With too much alcohol in his or her system, the chances of an individual misunderstanding the body language of another and reading into another person’s actions increase. Interpretations of body language sometimes take the place of true understanding of another person’s intentions and limits.

When it comes to sex, guess work can get a person into all kinds of trouble. For example:

♦ An individual can never assume that just because someone has expressed interest that he or she has the green light to take it as far as he or she may want.

♦ If a person has been drinking, his or her judgment and communication skills will not be at their highest.

**Going Too Far**
If an individual is too drunk to understand a person trying to say “no,” if an individual is too drunk to listen and respect a person trying to say “no,” or if an individual has sex with a person who is incapable of giving consent, it is rape. Even if when sober, an individual would never force sex on a person, that individual might lose control if they have been drinking.

In these situations, drinking does not excuse the crime or make things easier for the persons involved. Although alcohol is sometimes used to rationalize sexually aggressive behaviors, rape is rape, drunk or sober.

**FACTS**

♦ 50% or more of all rapes are alcohol related.
♦ 67% of women were intoxicated when an unplanned pregnancy occurred.
♦ 72% of all offenders in assault cases had been using alcohol.
Legal Definition of Rape

In 1993, the Kansas Legislature amended the law on rape. K.S.A. 21-3502 as amended reads as follows:

Rape is sexual intercourse with a person who does not consent to the sexual intercourse, under any of the following circumstance:

a. When the victim is overcome by force or fear;

b. When the victim is unconscious or physically powerless; or

c. When the victim is incapable of giving consent because of mental deficiency or disease, or when the victim is incapable of giving consent because of the effect of alcoholic liquor, narcotic, drug, or any other substance, which condition was known by the offender or was reasonably apparent to the offender.

Rape is a severity level 2, person felony.

No Glove, No Love

Today, having sex without protection is about as safe as driving drunk with one’s eyes closed. Safer sex is the responsibility of both parties. If someone is sexually active, he or she needs to carry a condom.

Condoms will not always provide 100% protection, but unprotected sex is high-risk sex. Condoms are the next best method of disease prevention following abstinence.

Sexually transmitted diseases, including HIV/AIDS, are real worries. The fastest growing group of individuals infected with HIV are heterosexuals. More than ever, it is important to have discussions about past sexual activity with partners (something which doesn’t usually happen in a casual sex situation).

Sobering Thoughts

In her two years of experience at the University of Alabama, one staff therapists said that she can’t remember a date rape case that didn’t involve alcohol. According to the therapist, the scenario for date rapes usually starts at parties. "Most people will start drinking because that is what everybody else is doing. Then they can’t stop."

Source: Mobile Register, November 29, 1992
K-STATE STATISTICS

During the fall semesters of 1993 and 1994, the KSU Alcohol and Other Drug Education Service went to classrooms on campus and administered an anonymous and voluntary survey (N=187 in 1993; N=396 in 1994).

The first part of the survey was an alcohol use survey called T.O.A.S.T. (Teaching Others Alcohol Safety Tactics) which was designed at Ft. Hays State University as a requirement for a small Kansas Department of Transportation grant; all Regents institutions participate in the survey.

As an addendum to the T.O.A.S.T. survey, four separate questions of special interest to the KSU AODES office were added. The results from those four questions for 1993 and 1994 are as follows:

<table>
<thead>
<tr>
<th>KSU FALL SURVEY</th>
<th>1993</th>
<th>1994</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you smoke Cigarettes?</td>
<td>Yes...13.4%</td>
<td>Yes...19.9%</td>
</tr>
<tr>
<td>Have you smoked marijuana within the past month?</td>
<td>Yes...8.6%</td>
<td>Yes...11.4%</td>
</tr>
<tr>
<td>Have you ever been arrested for D.U.I.?</td>
<td>Yes...3.7%</td>
<td>Yes...2.3%</td>
</tr>
<tr>
<td>Have you ever taken L.S.D.?</td>
<td>Yes...2.7%</td>
<td>Yes...1.7%</td>
</tr>
</tbody>
</table>

Higher Education is a publication of the KSU Alcohol and Other Drug Education Service, Lafene Health Center, Kansas State University, Manhattan, KS 66506-3302. (913) 532-6927. An equal opportunity/affirmative action employer. Director: Bill Anck, M.S.; Assistant Director: Roxanne Ayotte, B.A.; Production Assistant: Alima Rammarine.

Campus Resources

University Counseling Services
Lafene Health Center-2nd floor
532-6927

Al-Anon Meeting
K-State Union, State Room #1
Thursdays 5-6pm
532-6927 (Roxanne)

Alcoholics Anonymous
Open Noon Meeting
(M-F, Noon-1pm)
Ecumenical Campus Ministry
1021 Denison
Lafene Health Center
532-6544

Alcohol and Other Drug Education Service
Lafene Health Center-Room#214
Kansas State University
Manhattan, KS 66506-3302
(913) 532-6927