Sexual Assaults and Alcohol

According to recent studies, between 20 and 25 percent of all college-age women are sexually assaulted (date rape, acquaintance rape, sexual harassment) during their college years. In addition, approximately 80 percent of these assaults involve acquaintances. Since many women drop out of school after such an assault without reporting it, the 20 to 25 percent figure could be an underestimate. A major contributor to sexual assault on campus is alcohol consumption. Research shows that 75 percent of men and 50 percent of women were drinking at the time of assault.

In many incidents of sexual assault the victim, the offender, or both were drinking. A study on alcohol and sexual assault by Johnson and colleagues (1978) suggest a pattern of a relationship between alcohol and sexual assault. The study indicated that there is a higher level of force and violence in rapes in which alcohol was present than in rapes in which alcohol was not present. In addition, there was a greater likelihood of alcohol presence in "spontaneous" rapes as opposed to "planned" rapes.

Sexual assault is a serious campus issue, and terms such as rape, date rape, and acquaintance rape have become a part of our common language. Creating an environment where students feel safe is of major importance. Students' fear of sexual assault or sexual harassment can and does interfere with their ability to pursue their education, and can also negatively affect a college or university's recruitment and/or retention of students, faculty and staff.

The reality is that alcohol use and sexual activity is a choice that many college students make. Approximately 14% of K-state students do not drink alcoholic beverages, and about one in six students have not engaged in sexual intercourse. Abstinence from alcohol consumption and sex is a choice in today's world that may become more and more positive given the above facts about sexual assault and the staggering statistics about alcohol use and sexually transmitted diseases. According to various recent surveys...

* 60% of women who became infected with a sexually transmitted disease were, at the time of intercourse, intoxicated.
* 67% of women who had an unplanned pregnancy were, at the time of intercourse, intoxicated.
* 85% of women who had unplanned sex were, at the time of intercourse, intoxicated.
General Information

Rohypnol (row-hip-nol) is a powerful hypnotic-sedative drug 10 times stronger than Valium. The drug, manufactured by Hoffman-LaRoche, is used in Europe, Asia, Columbia and other South American cities as a sleeping pill and a pre-surgery relaxant. Rohypnol is not sold legally in the United States. The drug provides a sedative effect, amnesia, muscle relaxation, and a slowing of psychomotor responses. Sedation occurs 20-30 minutes after administration, peaks in one to two hours, and lasts for eight to twelve hours (2mg dose).

Rohypnol has been termed "the Quaalude of the 90's". In the past few years, Rohypnol, nicknamed "roofies", "rophies", "rope", and the "forget pill" or "drop pill" (drop it into her/his drink) is quickly becoming the "date rape drug of choice". It has been smuggled into the U.S., and has found its way primarily to Florida and Texas, but it has appeared in 23 other states. It has gained popularity as a cheap high among young people, averaging $3-5 per tablet. The drug is often distributed in it's original "bubble packaging", which adds an air of legitimacy and makes it appear to be legal. "Roofies" are often combined with alcohol, marijuana, or cocaine to produce a rapid and very dramatic "high". Even when taken by itself users can appear extremely intoxicated, with slurred speech, no coordination, and blood-shot eyes...with no odor of alcohol. The drug has been added to punch and other drinks in social gatherings, where it is given to party participants in hopes of lowered inhibitions and potential sexual conquest.

An overdose of Rohypnol (like Valium or Xanax) may cause drowsiness, loss of consciousness, depressed breathing, coma, and death if left untreated. Rohypnol is an addictive drug where frequent users quickly build up a tolerance. When taken repeatedly, it can lead to physical and psychological dependence. Side effects often include drowsiness, headaches, memory impairment, dizziness, nightmares, and psychomotor impairment. Patients addicted to Rohypnol need medical detoxification. Termination of the drug will result in withdrawal, accompanied in some cases by seizures (often seven or more days after termination of use). Although there have been no reports of fatal overdoses, recent reports indicate that the drug has been involved with date rapes and gang initiatives because users lose their inhibitions and completely forget what they have done.

Deadly combination
Rohypnol taken with alcohol can be a deadly combination. Kurt Cobain, of the hard rock group Nirvana, was in a drug induced coma a month prior to his death as a result of mixing Rohypnol and alcohol. Users also combine marijuana and Rohypnol for a "floating" effect, or cocaine and Rohypnol to produce a fast hit followed by a mellow state. Some young people also consider the drug a cure for alcohol-induced hangovers. (*There is no cure for hangovers).

Drug Classification
As of July, 1995 Rohypnol (a brand name for flunitrazepam) was classified as a Schedule IV drug, however, the DEA is trying to reclassify it under the Controlled Substance Act as a Schedule I drug. The drug is marketed in one-milligram and two-milligram doses. Although Rohypnol is chemically a sedative, the drug has a paradoxical effect in that users can become energized and aggressive.
ALCOHOL-INDUCED MEMORY FUNCTION AND SLEEPINESS

Alcohol is known to impair various aspects of cognition function, including learning and memory. Despite the large number of studies on alcohol-induced memory impairment, there is little consensus about the specific components of memory affected by alcohol or about the neurobiological mechanisms underlying alcohol's effects. However, most studies reveal that the degree of long-term amnesia increases with larger alcohol doses and for those who have an extensive drinking history. Significant alcohol abuse also tends to impair the acquisition of new information, but does not seem to affect the retrieval of previously learned information (of course, both of these are seriously affected when one is intoxicated).

Laboratory studies also reveal that alcohol has a biphasic (dual) response, and therefore its consumption usually affects sleepiness. Generally speaking, at low alcohol doses and while the blood alcohol concentration (BAC) is ascending, alcohol's stimulating effects prevail. In contrast, at high alcohol doses and while one's BAC is descending, alcohol has primarily sedative effects. Although alcohol may cause one to be sleepy, other research indicates that alcohol actually decreases the important REM part of sleep.

Information obtained from the Alcohol Health & Research World Journal, Vol. 19, No. 2, 1995
For your health...

Every year 15 million Americans try to quit smoking, and only 1.5 million are able to stop successfully. Quitting smoking is very hard because nicotine is a physically and psychologically addictive drug.

In a 1993 report Donna Shalala, Secretary of Health and Human Services, said that on average smokers die 7 years earlier than non-smokers. In addition, a Veterans Administration report indicates that older persons who quit smoking, even if they have smoked several packs of cigarettes a day for as long as 50 years, will feel noticeably better within a year. More importantly though, they will apparently reduce their chances of having a stroke and potentially will delay the onset of a variety of forms of senility, including Alzheimer's disease.

More than one out of every six deaths in the U.S. is attributed to smoking. In 1991, an estimated 3,888 Kansans died due to smoking related illnesses (this represents 18% of all deaths reported that year). Approximately 31% of KSU students smoke cigarettes.

According to an overwhelming amount of scientific research, cigarette smoking is the #1 preventable cause of death and disability in the United States!

Motivating reasons to quit:

- health
- stained teeth and fingers
- bad breath
- smoker's cough
- fatigue
- smell of smoke on everything
- cost and time spent smoking

Campus Resources

Higher Education is a publication of the KSU Alcohol and Other Drug Education Service, Lafene Health Center, Kansas State University, Manhattan, KS 66506, (913)532-6927. An equal opportunity employer. Director: Bill Arck, M.S., Assistant Director: Jelena Jovanovic B.S.

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