

Drug-Free Policy

Unlawful possession, use, production, distribution, or sale of alcohol or other drugs by any faculty, staff, or student is prohibited on university property or as any part of university activities.

This policy is created to comply with the Drug-Free School and Communities Act Amendments of 1989 (Public Law 101-226), which requires that the university show it has adopted and implemented a program to prevent the illicit use of drugs and the abuse of alcohol by faculty, staff, and students, and to set forth the standards to provide a community setting that is safe, healthy, and productive for all faculty, staff, and students of The Ohio State University, including The Ohio State University Research Foundation. The university distributes this policy annually throughout the university community and this includes information about referral and treatment, applicable laws and sanctions, and current assessments of possible health risks.

Internal Sanctions

Any student, faculty, or staff member who violates the university's drug-free policy shall be subject to university disciplinary procedures. Students shall be subject to appropriate discipline by residence hall staff or the Office of Student Judicial Affairs, in accord with the Student Code of Conduct. Staff shall be disciplined under the university's operating manual, and faculty under faculty rule 3335-5-04. Such procedures may include the satisfactory participation in an alcohol or other drug assistance or rehabilitation program. Sanctions will be in compliance with collective bargaining agreements where applicable. Violation of this policy may also lead to referral for prosecution to the appropriate local, state and/or federal authorities. Faculty or staff who are convicted of any criminal drug statute violation occurring in the workplace and are employed by the university at the time of the conviction must notify the appropriate office (Academic Affairs for faculty; Human Resources for staff), within five (5) days of the conviction.

External Sanctions

Unlawful possession, use, manufacture, sale, or distribution of alcohol or illicit drugs may lead to referral to the appropriate federal, state and/or local authorities for prosecution. Depending on the nature of the offense, it may be categorized as a misdemeanor or a felony and may be punished by fine and/or imprisonment.

Federal law prohibits the trafficking and illegal possession of controlled substances (see 21 United States Code, Sections 811 and 844). Depending on the amount, first offense maximum penalties for trafficking marijuana range from five years imprisonment and a fine of \$250,000 to imprisonment for life and a fine of \$4 million. Depending on the amount, first offense maximum penalties for trafficking class I and II controlled substances (methamphetamine, heroin, cocaine, cocaine base, PCP, LSD, fentanyl analogue) range from five years to life imprisonment and maximum fines range from \$2-\$4 million. First offense penalties for the illegal possession of a controlled substance range from up to one year in prison and a fine of at least \$1,000, but not more than \$250,000, or both.

The State of Ohio and the City of Columbus also may impose penalties for trafficking and illegal possession or use of controlled substances. State and local penalties for trafficking illicit drugs include fines that range from \$1,000 to \$50,000 and mandatory jail sentences that range from six months to 10 years. Illegal use or possession of a controlled substance or drug paraphernalia may warrant fines ranging from \$100 to \$5000 and jail sentences ranging from 30 days to 10 years, depending on the amount and substance possessed. Violations may also lead to forfeiture of personal and real property and the denial of federal benefits such as grants, contracts, and student loans.

The State of Ohio and City of Columbus may also impose a wide variety of penalties for alcohol-related offenses. For example, a first driving-while-intoxicated offense may be punished by mandatory imprisonment of at least three consecutive days and a fine ranging from \$375 to \$1000. Subsequent offenses lead to increased sanctions. Illegal purchase, possession, use, or sale of intoxicating liquor by a minor may be punished by fines ranging from \$25 to \$1000 and up to six months in jail, depending on the circumstances. For extended and regional campuses, local law will apply in lieu of City of Columbus ordinances. Copies of those laws will be supplied upon request.

Referral and Treatment

To ensure the most effective implementation of this program, the university supports the following concepts:

Alcohol or other drug dependence is a disease that can be successfully treated.

Specific steps will be taken for referral of persons at risk for alcohol and other drug problems to the appropriate resources for assessment and treatment:

- University Faculty and Staff Assistance programs;
- Counseling and Consultation Service;
- Student Health Services; and
- Community drug/alcohol treatment centers.

Faculty, staff, and students are warned that treatment is not a refuge from disciplinary action and that dependency problems that do not respond to treatment may ultimately result in appropriate disciplinary action. Disciplinary actions may be held in abeyance pending the conclusion of a treatment program and may be mitigated by the results of such a program.

The university supports follow-up monitoring and encouragement of the individual to follow through with the treatment plan. Deferred sanctions may be applied by the university if the individual is uncooperative or fails to make improvements.

Parental Notification Guidelines for Alcohol and Controlled Substance Violations

These guidelines were developed in response to the Higher Education Amendments of 1998. These amendments created an exception to the Family Educational Rights and Privacy Act (FERPA), thus enabling universities to notify parents or legal guardians, under certain circumstances, of a student under 21's use or possession of alcohol or a controlled substance. This change supports the practice of The Ohio State University of establishing a collaborative partnership with parents and actively involving them, when appropriate, in addressing student behavior as it relates to alcohol and drugs.

Notification of parents is done when the university believes it will help the student. When practicable, conversations normally are held with the student before contact is made with parents, in an effort to determine whether such contact is the best course of action.

Generally, the university contacts parents in an effort to provide support for students' physical health and safety, academic success, and personal development. Factors that are considered when deciding to contact parents may include, but are not limited to:

- A situation in which a student has received medical attention
- The occurrence of an arrest and consequent criminal charges
- A major disruption to the university's educational mission
- Substantial harm caused to other students, or

- Significant property damage

Contacts are made, if possible, by a personal appointment with parents or by phone. Written communication is used only when other attempts to contact parents have failed. The goal is to develop a partnership between the university and the parents for the good of the student.

Parent contacts are not to be viewed as a “disciplinary sanction” but rather as a positive engagement of the broadest possible resources to help a student succeed in his/her educational endeavor. Parents are encouraged to discuss the situation with their son or daughter.

Questions or concerns regarding these guidelines should be directed to Student Judicial Affairs, 33 W. 11th, Room 115, Columbus, OH 43210, 614-292-0748 or to University Housing 350 Morrill Tower 1910 Cannon Drive Columbus, OH 43210, 614-292-8266.

Current Assessments of Possible Health Risks Associated with Drug Use/Abuse

Type of drug (and generic effects) Effects	Name	Possible
Stimulants speed up action of the central nervous system.	Amphetamines (speed, uppers, pep pills, bennies)	Hallucinations may occur. Tolerance, psychological and sometimes physical dependence can develop. Continued high doses can cause heart problems, malnutrition, and death.
	Cocaine (coke, snow, crack, rock – legally classified as a narcotic)	Confusion, depression, and hallucinations may occur. Tolerance and physical dependence can develop. Effects are unpredictable – convulsions, coma, and death are possible. Smoking may cause lesions in lungs.
Depressants relax the central nervous system.	Barbiturates (barbs, good balls, downers, blues) Tranquilizers	Confusion, loss of coordination, etc., may occur. Tolerance and physical and psychological dependence can develop. An overdose can cause coma and/or death. Depressants taken in combinations or with alcohol are especially dangerous.
Cannabis alters mood and perception	Marijuana (grass, pot, weed, reefer)	Confusion, loss of coordination. With large doses, hallucinations may occasionally occur.
	Hashish (hash)	Long-term use may cause moderate tolerance and psychological dependence.
	Hashish oil (hash oil)	Long-term use may cause damage to lung tissue.

Hallucinogens temporarily distort reality	Lysergic acid diethylamide (LSD, acid)	Hallucinations, panic may occur. Effects may recur (flashbacks) even after use is discontinued. Possible birth defects in users' children
	Phencyclidine (PCP, angel dust) legally classified as a depressant.	Depression, hallucinations, confusion, irrational behavior. Tolerance develops. An overdose may cause convulsions, coma and death.
	Mescaline (MDA, DMT, STP, psilocybin, "designer drugs").	Effects are similar to those of LSD.
Narcotics lower perception of pain	Heroin (H, scag, horse, junk, smack) Morphine (M, dreamer) Codeine Opium	Lethargy, apathy, loss of judgment and self-control may occur. Tolerance and physical and psychological dependence can develop. An overdose can cause convulsions and death. Risks of use include malnutrition, infection and hepatitis.
Deliriant cause mental confusion	Aerosols, lighter fluid, paint thinner, amyl nitrate, other inhalants (poppers)	Loss of coordination, confusion, and hallucinations may occur. An overdose can cause convulsions and death. Psychological dependence can develop. Permanent damage to lungs, brain, liver, and bone marrow can result.
Alcohol		Long-term, heavy drinking is linked to cancer, heart and liver damage, and other serious illnesses. Tolerance and physical and psychological dependence can develop
Cigarettes		Long-term cigarette smoking is linked to emphysema, lung cancer, and heart disease. Physical and psychological dependence can result.
Smokeless tobacco		Long-term use of chewing tobacco or snuff is linked to oral cancer of gums, mouth, pharynx, larynx and esophagus. Physical and psychological dependence can result.

Passive Smoke		Combination of secondhand smoke exhaled by the smoker and sidestream smoke from the burning end of tobacco products accounts for an estimated 8,000 deaths due to cancer a year. More than 3,000 known toxic substances in tobacco smoke.
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Alcohol: Zero-One-Three

Reduce your risk for experiencing alcohol-related impairment problems. Set guidelines for the use and non-use of alcohol and stick to them. Zero-One-Three can be a helpful tool in developing a clearer idea of what is "responsible drinking."

The Zero-One-Three concept was developed by the Enjoy Michigan Safely Coalition and funded by the Michigan Office of Highway Safety Planning. Zero, One, and Three are easy numbers to remember. They represent alcohol consumption norms that should be promoted. Each number stands for a component of the concept.

Zero = Zero alcohol

It's OK not to drink, especially if you're under 21, driving, chemically dependent, or pregnant. Alcohol is a drug, and tens of millions of adults choose to live a drug-free, and, therefore, alcohol-free lifestyle. It is a choice made by approximately 30 percent of the adult population.

Situations where zero is a wise choice:

- People who are not of legal age
- Women who are pregnant or think they may be pregnant
- People who suffer from alcoholism or other chemical dependencies
- People from homes where alcoholism or abusive consumption is present
- People who do not like the physiological or psychological effects of alcohol
- People who are trying to cut down on empty calories
- People who prefer the taste of non-alcoholic beverages
- Diabetics
- People on certain medications

One = One drink per hour

One drink is defined as one 12-ounce can of beer OR one glass of wine OR one shot of liquor (a mixed drink). If a person is having more than one drink per hour he/she is out of bounds and is exceeding the recommended consumption pace. Because of the rate by which alcohol is metabolized in the body, more than one drink per hour will/can cause a person to test as legally under the influence of alcohol. By keeping the pace to one drink per hour, the body's alcohol metabolism capacity will likely not be surpassed by alcohol intake. This will help keep blood alcohol concentration within safer limits. Remember, the legal blood alcohol concentration limit is .08 for driving in Ohio. If under 21, it is a violation if the concentration of alcohol is .02 or greater.

Three = No more than three drinks per day, and never daily.

Three represents the maximum number of drinks a person should ever have in a single day. It does not mean three at each of six pubs. Also, remember these three drinks are not to be consumed at a faster pace than one per hour. Some people will quickly point out the existence of individual differences (body

weight, etc.) as they relate to these guidelines. It is important to note, however, individual differences also exist for blood cholesterol levels, exercise prescriptions, and all other quantified health norms. The standard of Zero-One-Three is one that is acceptable for most people.