

Alcohol Consumption and Related Problems among Frostburg State University Students: *Latest Findings and Recommendations for Action*

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THE MARYLAND COLLABORATIVE
TO REDUCE COLLEGE DRINKING AND RELATED PROBLEMS

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Funding and Background

- The data contained in this presentation are derived from the Maryland College Alcohol Survey (MD-CAS), which is funded by the Office of Population Health Improvement of the Maryland Department of Health.
- The Maryland Collaborative was established in 2012 and aims to use evidence-based strategies to reduce college student drinking and related problems.
- FSU is one of 18 colleges that comprise a partnership of institutions across the state whose presidents have agreed to join the initiative and work together to address underage and excessive drinking.

Excessive Drinking: A National Snapshot

Excessive Drinking

underage drinking
any drinking by people younger than
age 21 or pregnant people is
considered excessive

and

binge drinking
most common form of
excessive drinking

Binge Drinking



5+ drinks
on one occasion
for males



4+ drinks
on one occasion for females
and transgender people

33%

college students
during the past month¹

High Intensity Drinking



10+ drinks
on one occasion

1 in 10
college students
during the past two weeks²

¹Substance Abuse and Mental Health Services Administration. (2020). *Results from the 2019 National Survey on Drug Use and Health: Detailed tables*. Rockville, MD: US Department of Health and Human Services, Office of Applied Studies.

²Schulenberg, J. E., Johnston, L. D., O'Malley, P. M., Bachman, J. G., Miech, R. A., & Patrick, M. E. (2019). *Monitoring the Future: National survey results on drug use, 1975-2018: Volume 2, college students and adults ages 19-55*. Ann Arbor, MI: Institute for Social Research, The University of Michigan.

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Section A
Trends in Alcohol Use:
Overall MD-CAS Sample, 2014-2022

Definitions of Alcohol Risk Groups in the MD-CAS

LOW RISK

Students who *did not drink* during the past year (including lifetime abstainers)

MODERATE RISK

Drank during the past year, but *did not binge drink** during the past month

HIGH RISK

Binge drinking one to four times during the past month

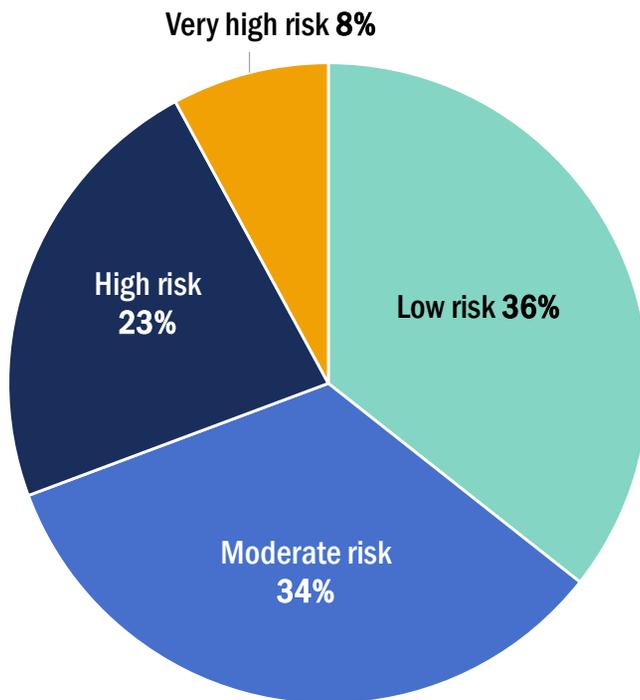
VERY HIGH RISK

Binge drinking five or more times during the past month

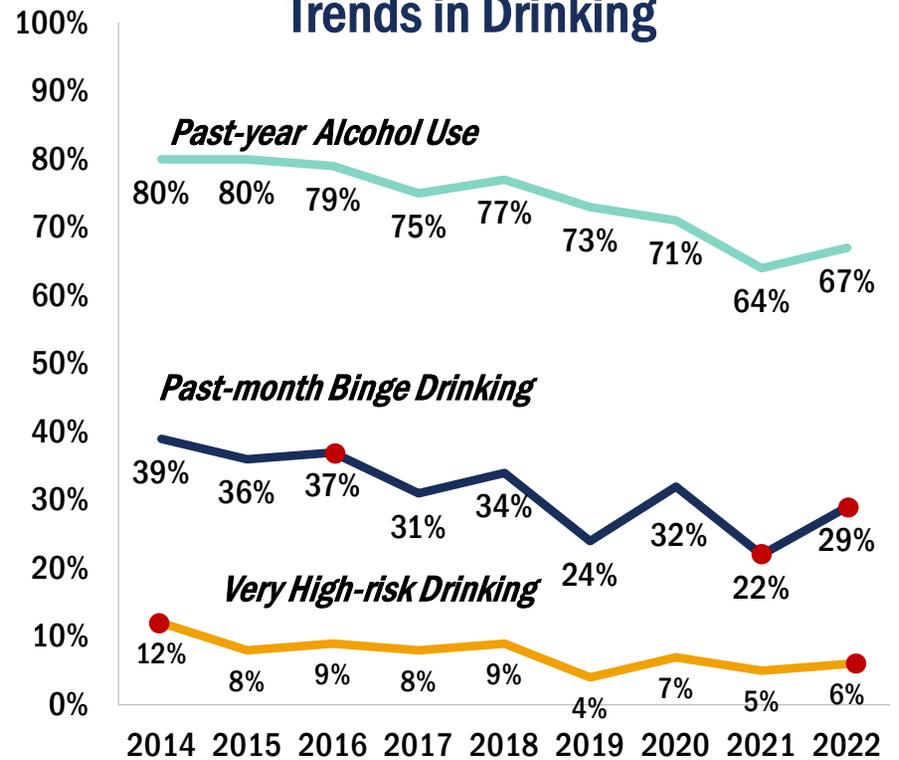
**Binge drinking is defined as consuming 5 or more drinks for males/4 or more for females and transgender people on the same occasion (i.e., in a row or within a few hours) on at least one day during the past 30 days.*

2022 Overall MD-CAS Sample (N=2,971)

Alcohol Risk Groups



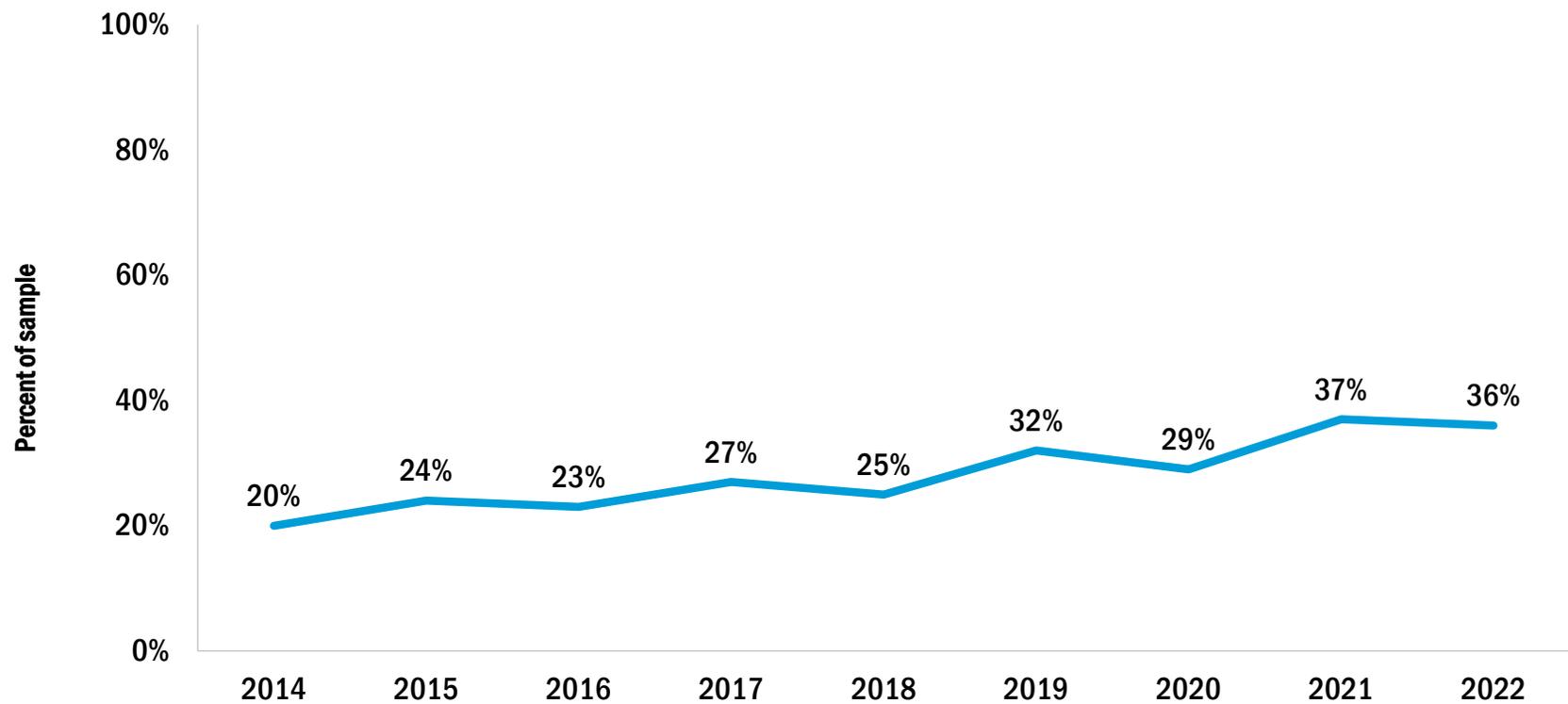
Trends in Drinking



● Statistically significant change between the years indicated by the red dots. $p=.05$ was used as the threshold for statistical significance.

Prevalence of Past-year Abstainers among All Students

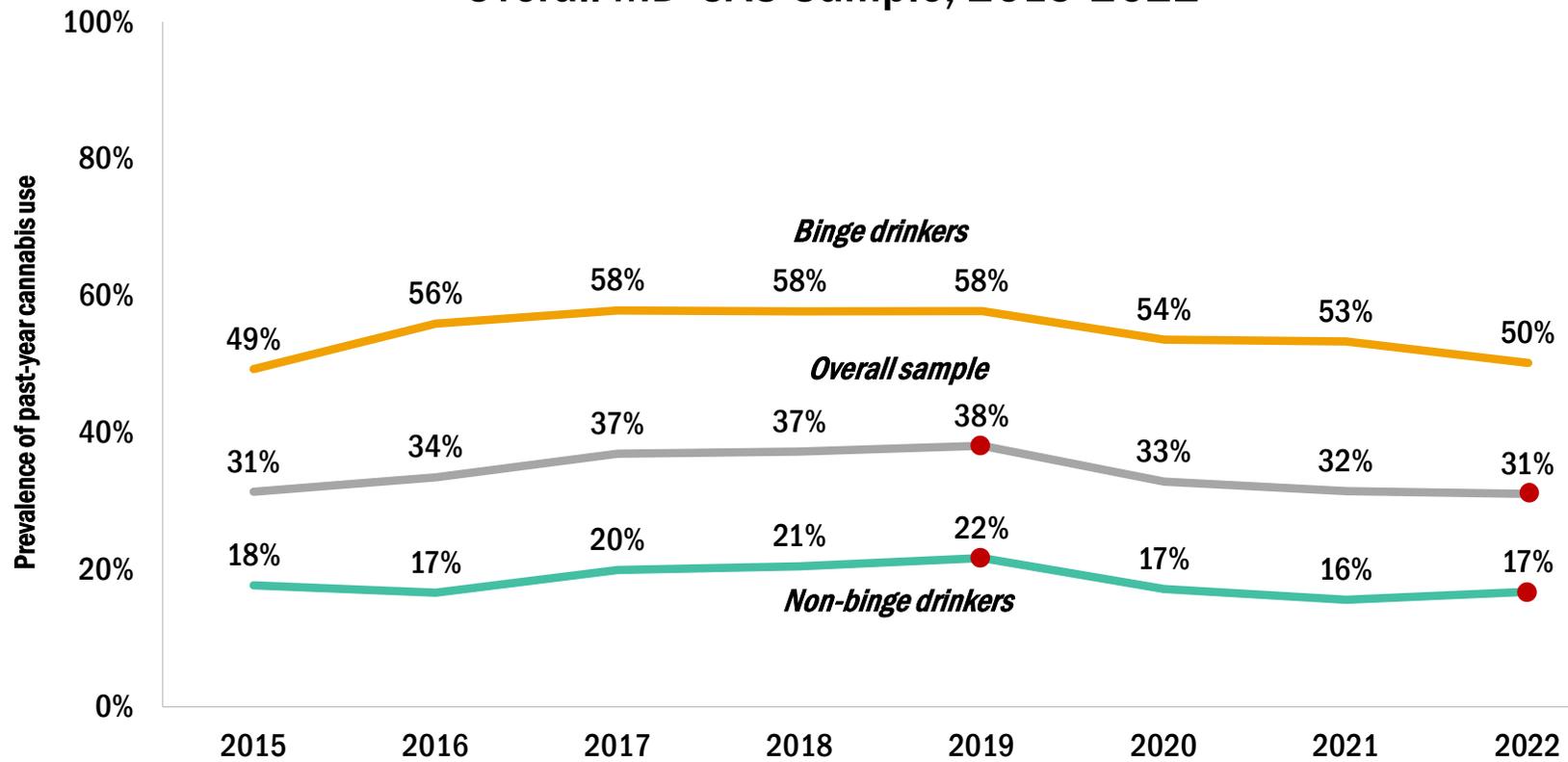
Overall MD-CAS Sample, 2014-2022



* Unadjusted trend line

Past-year Cannabis Use

Overall MD-CAS Sample, 2015-2022



● Statistically significant change between the years indicated by the red dots.



Section B
Maryland College Alcohol Survey
(MD-CAS) Results:
Frostburg State University, 2022

Participation in the MD-CAS 2022

- 2,971 students from ten schools participated in the MD-CAS in 2022.
- The online survey was administered in February and March 2022.
- FSU has participated in the MD-CAS every year since 2014.
- In 2022, 547 full-time undergraduate FSU students ages 18 to 25 participated (21% response rate).
- When compared with the overall FSU student body, males are underrepresented.

	FSU MD-CAS 2021 Sample (n=547)	Overall FSU Student Body*
Gender		
Male	33%	51%
Female	64%	49%
Genderqueer, non-binary, or other gender	2%	
Declined to state	0%	
Race/ethnicity		
Non-Hispanic White	57%	53%
Non-Hispanic Black/African American	30%	34%
Hispanic	5%	6%
Non-Hispanic Asian/Pacific Islander	1%	1%
Other or Multiracial	7%	6%
Age		
18 to 21	79%	79%
Living Situation		
Lived in residence hall or school-owned apartment	54%	N/A

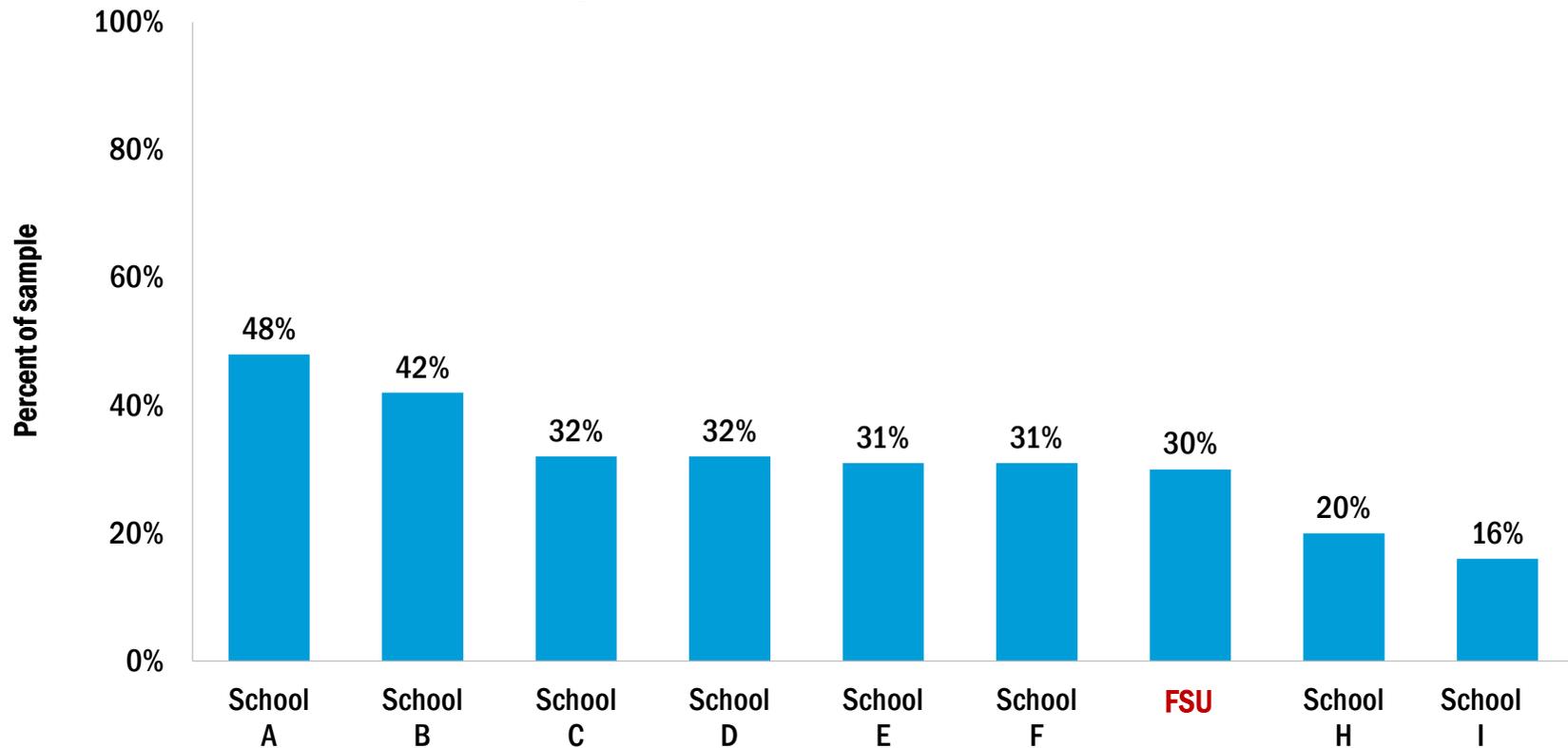
*National Center for Education Statistics. (2022). Integrated postsecondary education data system. Available at: <http://nces.ed.gov/ipeds/>

FSU MD-CAS 2022 Overview

- 34% abstained from both alcohol and cannabis during the past year (n=166)
- 68% drank alcohol in the past year (n=369)
- 55% drank alcohol in the past month (n=298)
- 30% binge drank in the past month (n=160)
- 26% used cannabis in the past year (n=127)
- 20% used cannabis in past month (n=100)
- 13% binge drank and used cannabis in the past month (n=63)
- 5% engaged in high intensity drinking in the past month

What Proportion of Students Binge Drink?

By School, MD-CAS 2022



Note: Past-month binge drinking

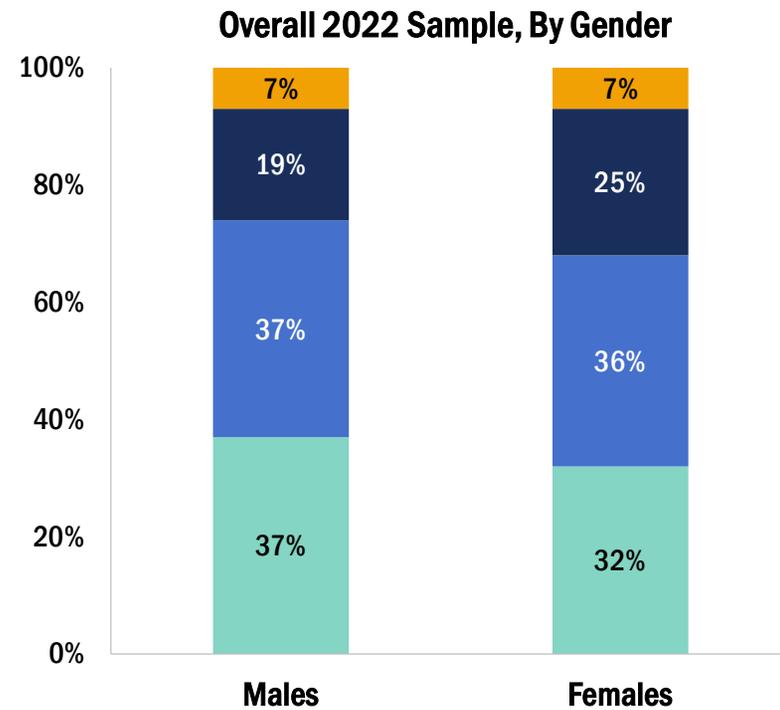
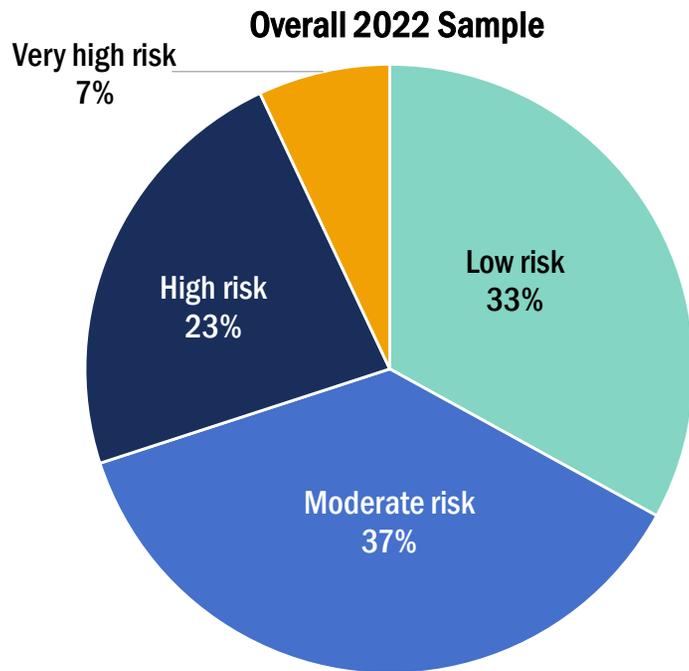


Characterizing Excessive Drinking and Related Problems

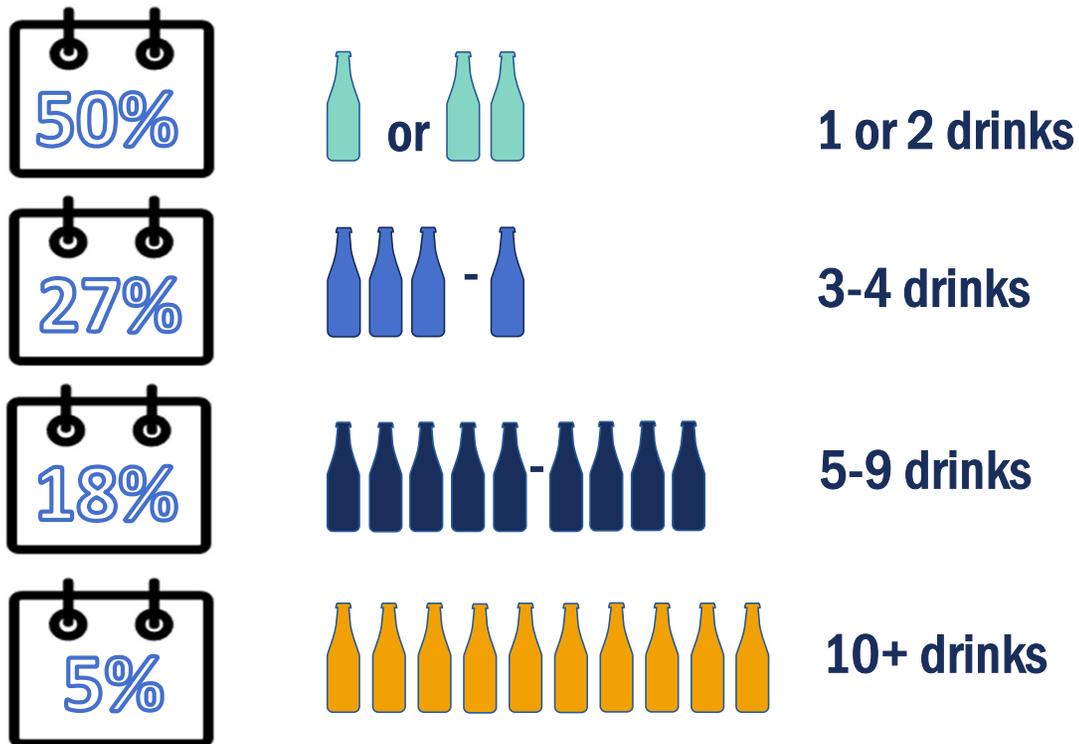
Alcohol Risk Groups

FSU MD-CAS Sample (n=547)

■ Low risk ■ Moderate risk ■ High risk ■ Very high risk

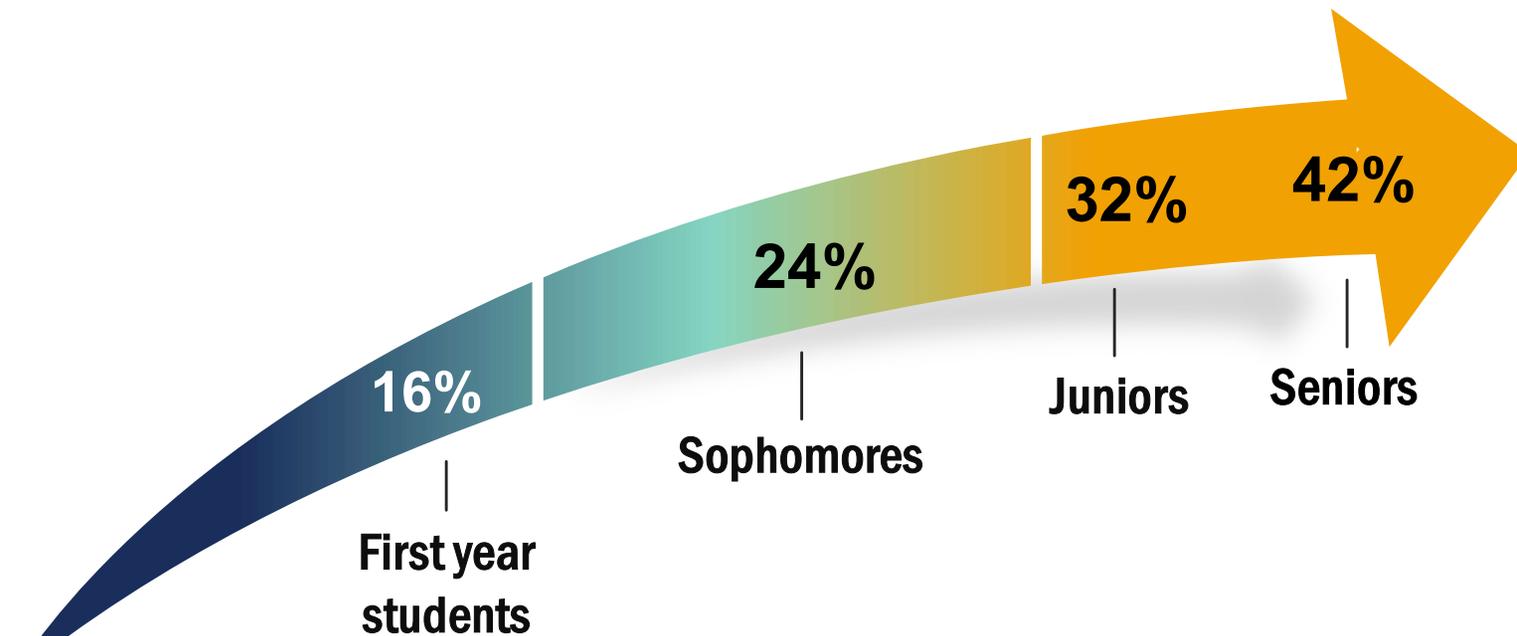


Number of Alcoholic Drinks in a Typical Week When FSU Students are Drinking



**Among past-month drinkers*

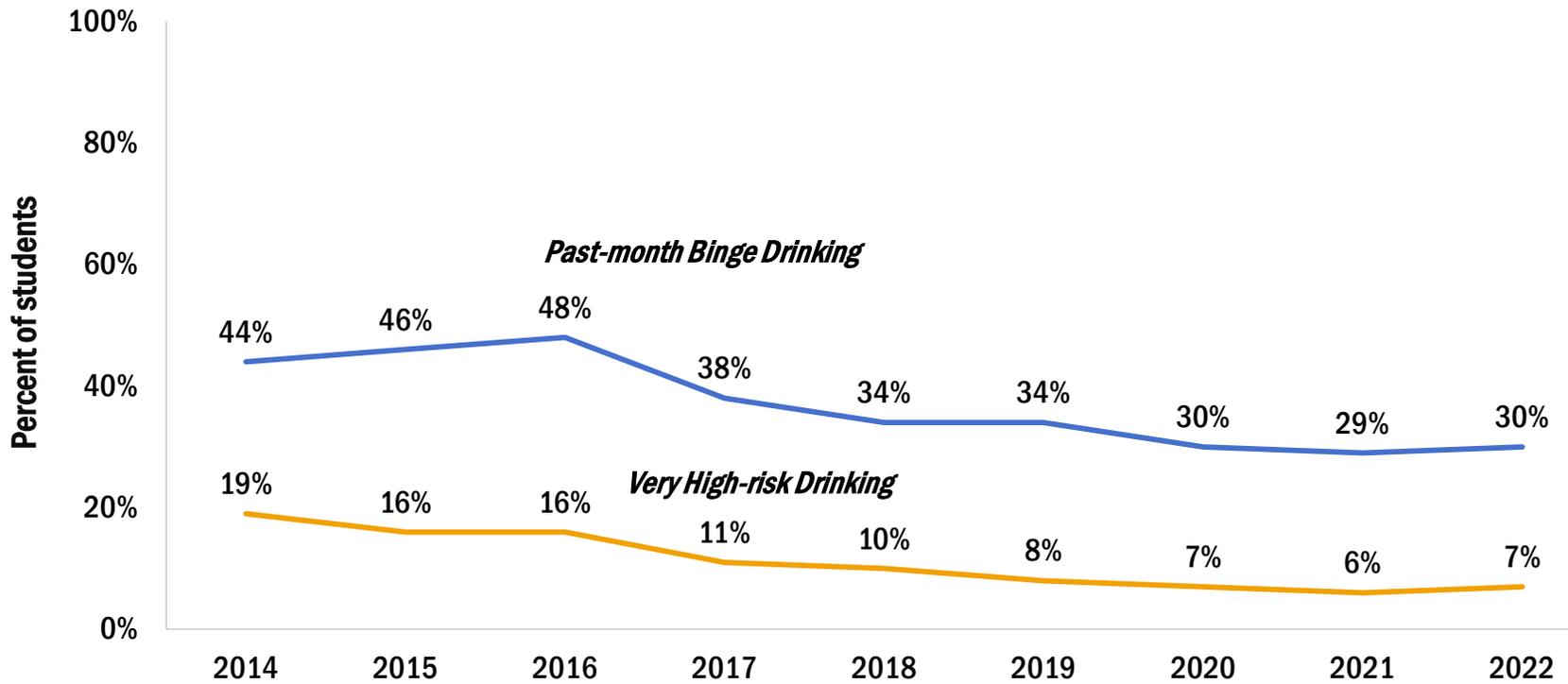
Percent of FSU Students with High or Very High-Risk Drinking



Upper Classmen have Largest Proportion of Students with High Risk/Very High-Risk Drinking

Trends in Binge and Very High-risk Drinking

FSU MD-CAS Sample



In What Contexts Do FSU Students Drink?

	Percent who said they drank alcohol in that context “sometimes”, “often”, or “frequently”
Alone**	42%
When you have no class or obligations	74%
While engaging in academics*	11%
Before going to class	2%
While in class (online or in person)	1%
While studying	11%
Right before or while driving a car	1%
With parents/guardians	60%
With other family members	56%

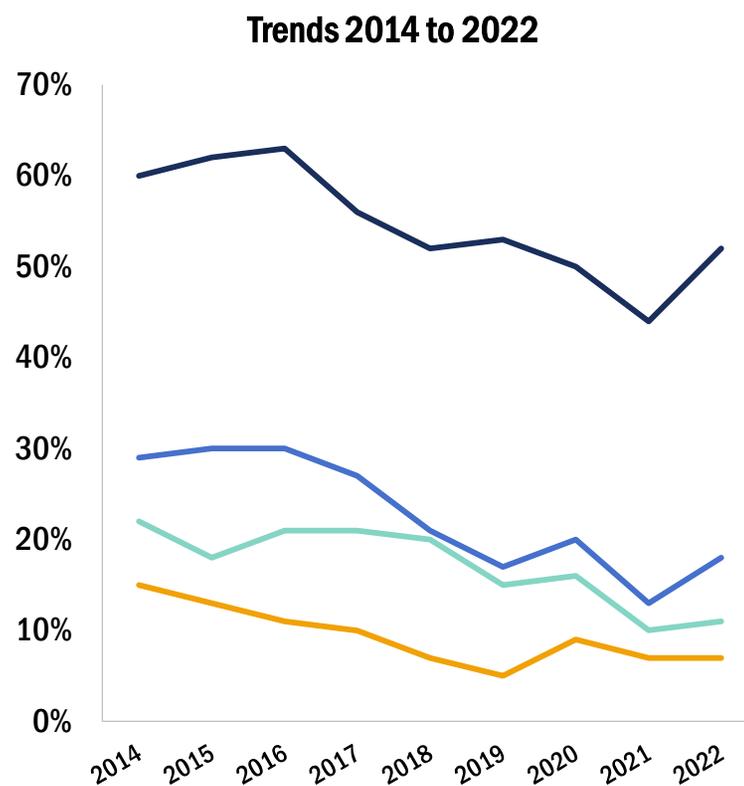
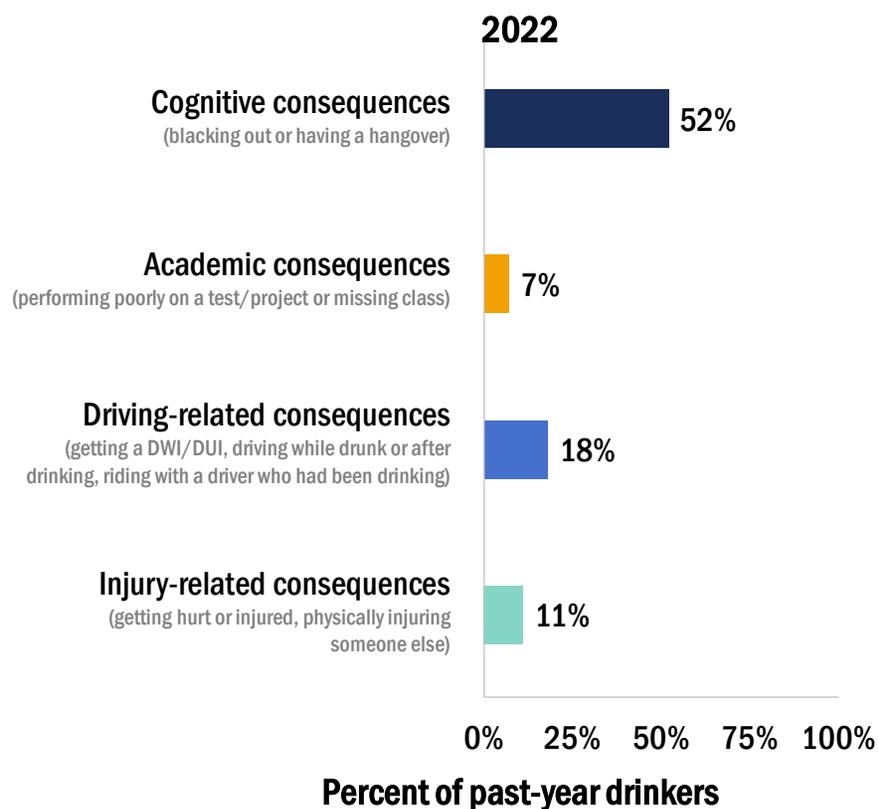
*This category includes the three categories below (before going to class, while in online class, and while studying).

****20% of students who drank alone reported having more than 3 drinks.**

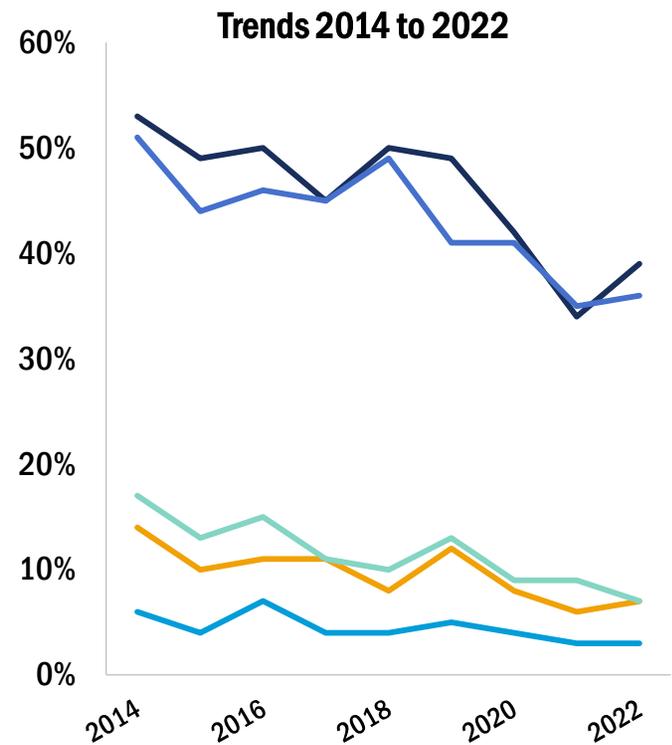
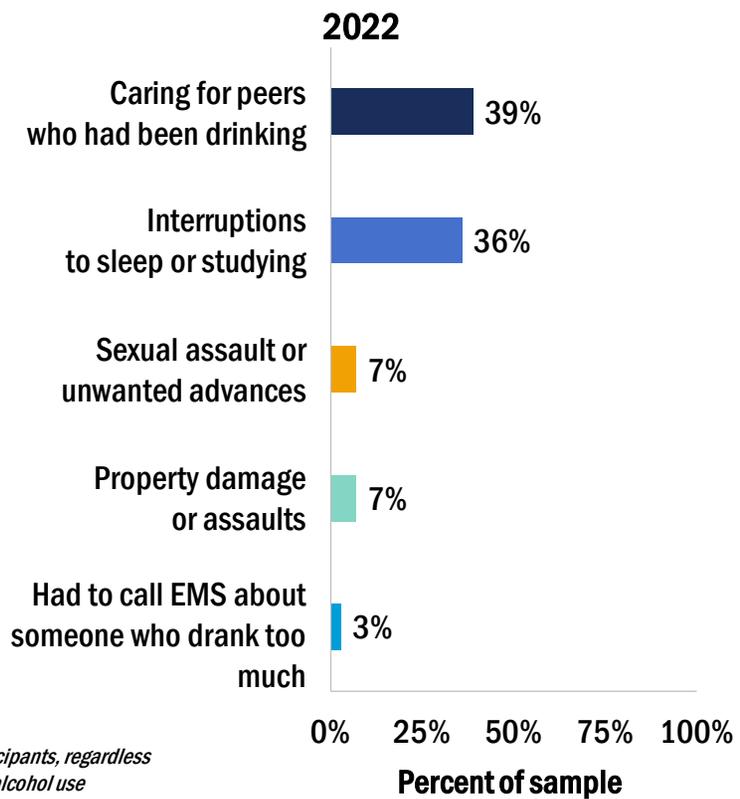


Alcohol-related Direct Consequences and Harms to Others

Direct Consequences of Alcohol Use among FSU Past-year Drinkers



Harms Experienced as a Result of Someone Else's Alcohol Use among FSU Students*



*Among all participants, regardless of their level of alcohol use



Mental Health and Substance Use

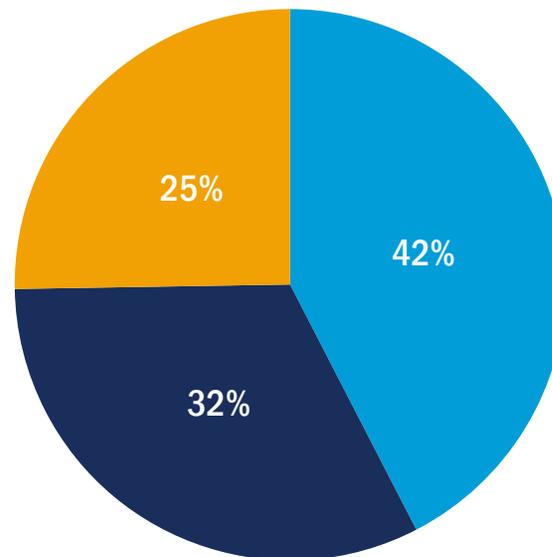
Depressive Symptoms

The PHQ is a standardized measure that asks how often student experienced depressive symptoms: “not at all”, for “several days”, “more than half the days”, or “nearly every day”:

Depressive Symptoms

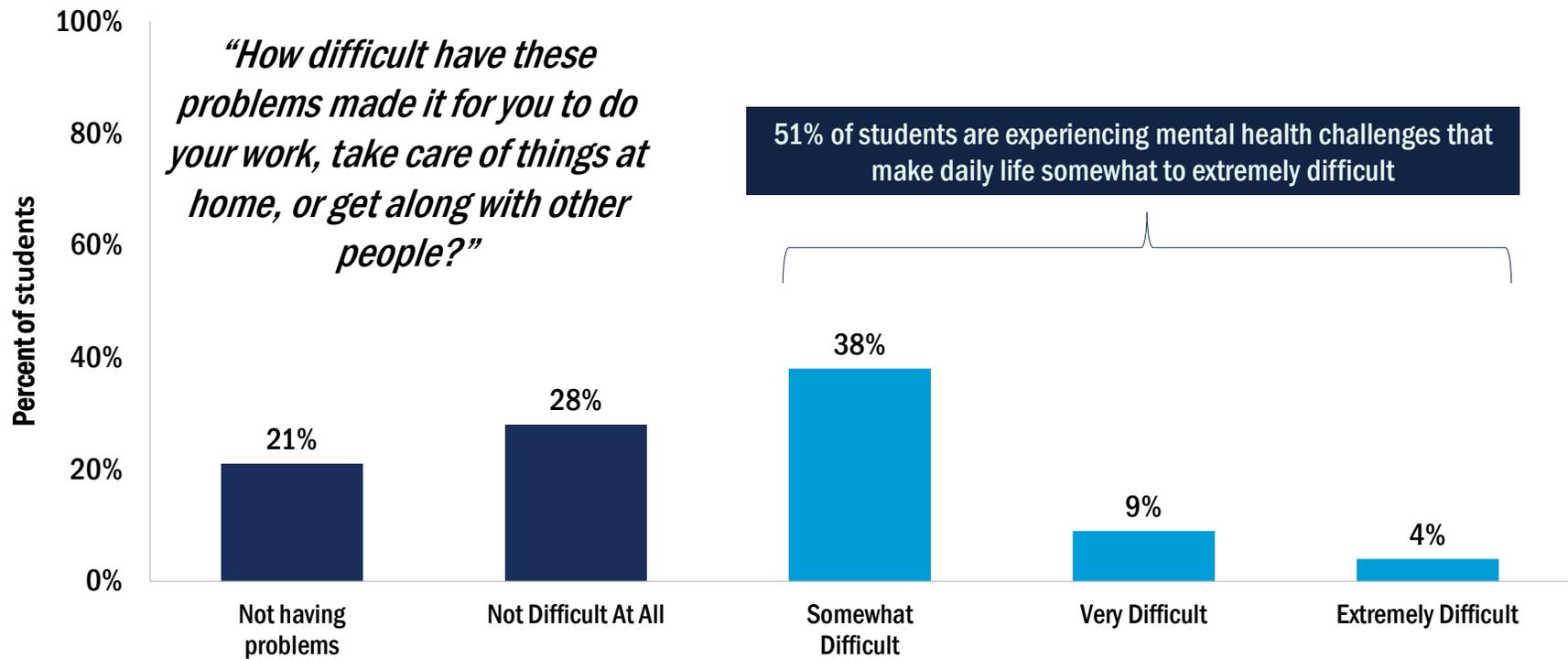
- decreased interest in normal activities
- feeling down
- feeling a sense of hopelessness
- change in sleep and/or appetite
- negative self image
- trouble concentrating
- letting others down

■ Low 0-3 ■ Medium 4-9 ■ High 10-24



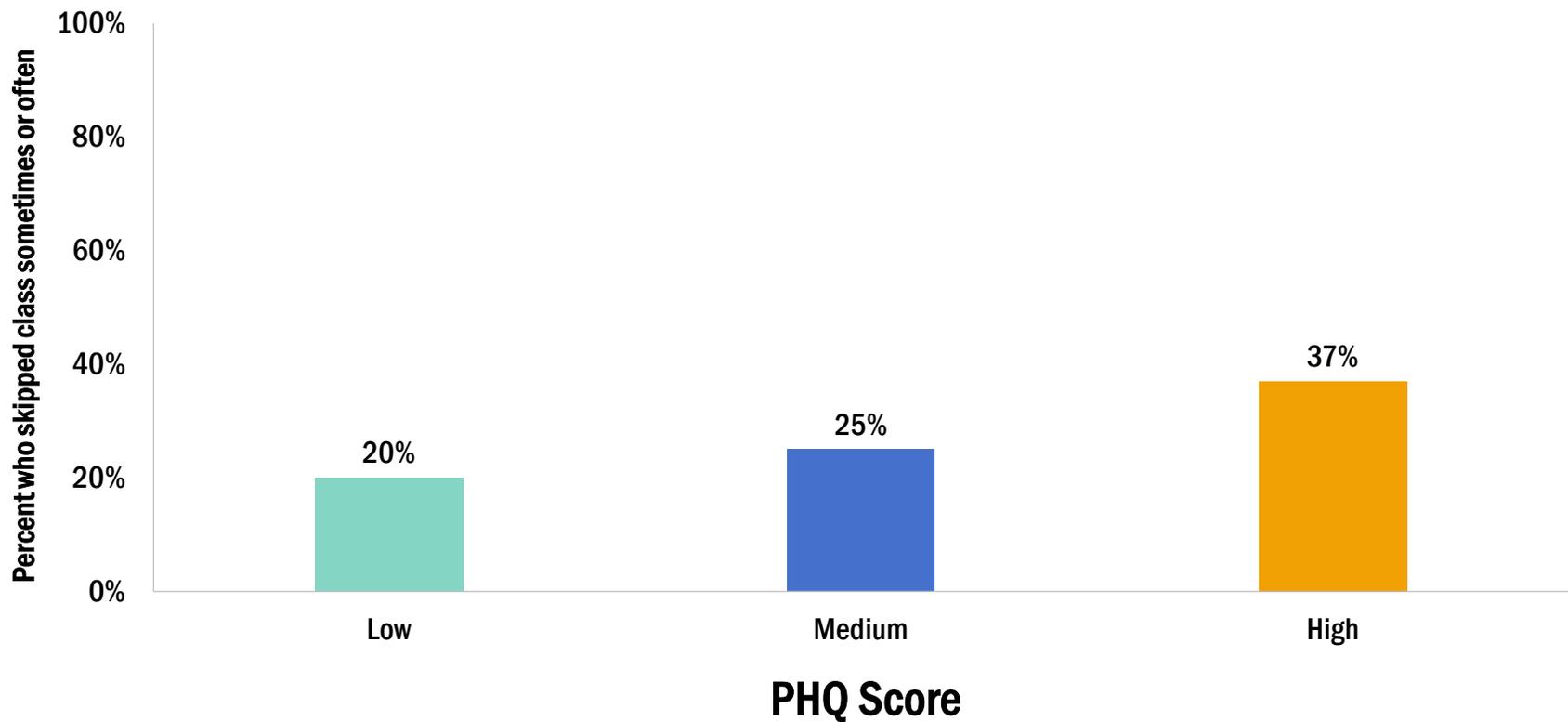
PHQ Score Distribution for 2022 FSU MD-CAS Sample

Half of FSU Students are Experiencing Mental Health Challenges That Affect Their Daily Life



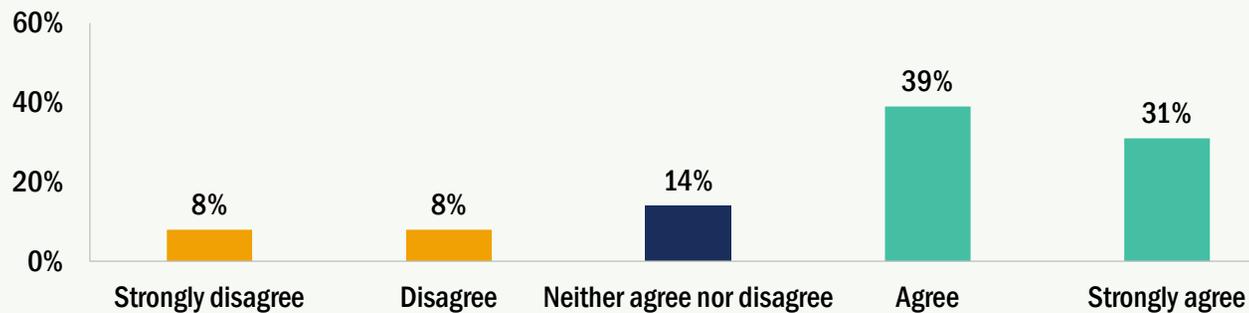
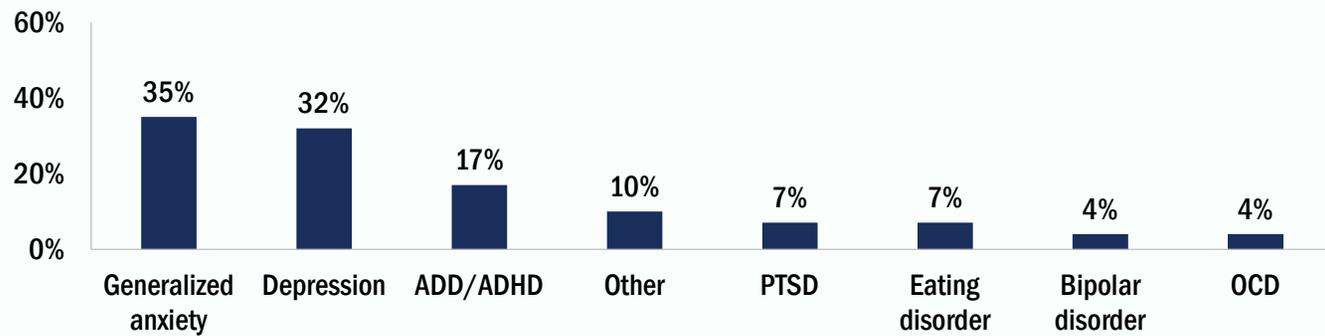
PHQ Scores Correlated with Skipping Class

FSU MD-CAS Sample 2022



Mental Health Diagnoses and Awareness of Resources at FSU

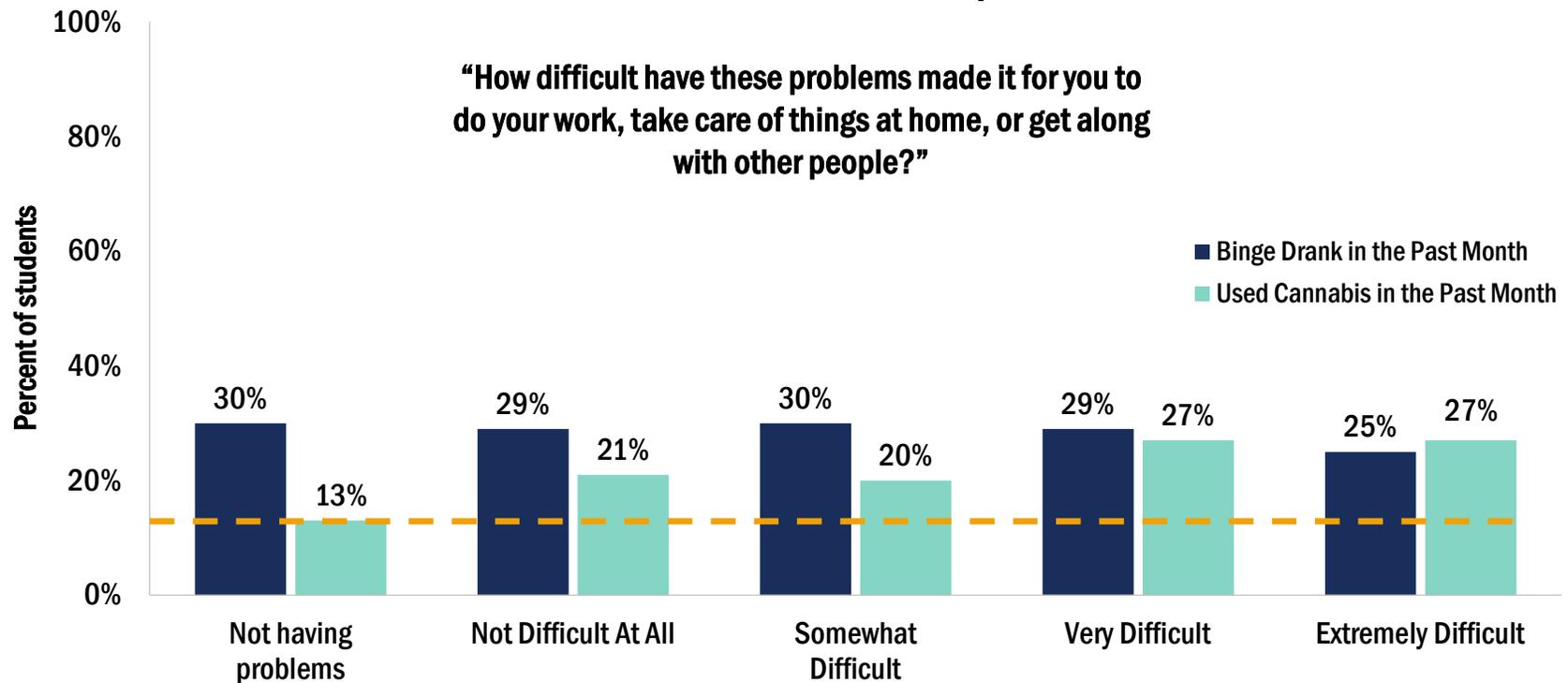
Prevalence of students who have been diagnosed or treated with a mental health condition



"If I needed, I would know where to access resources from my school"

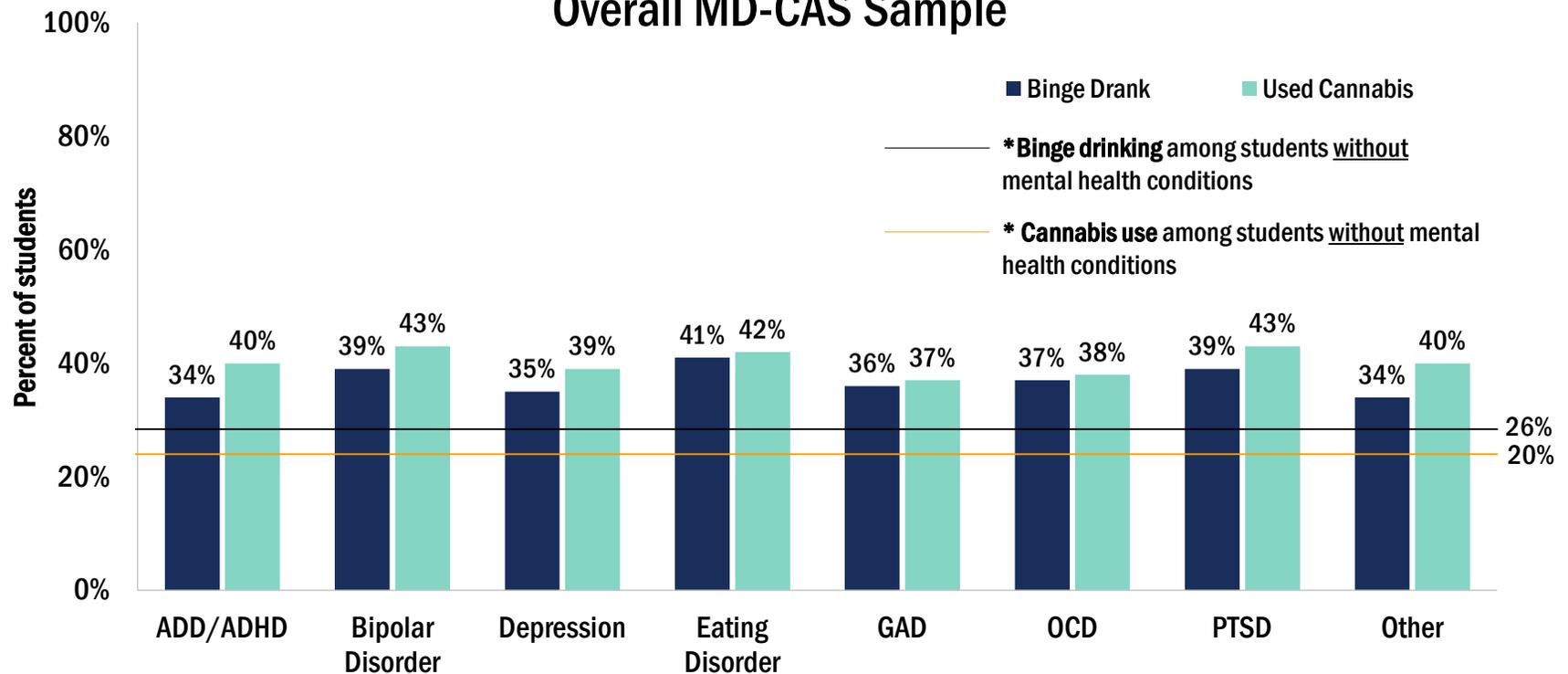
Association between Mental Health Challenges and Binge Drinking and Cannabis Use

Overall MD-CAS Sample



Students with Diagnosed Mental Health Conditions are more likely to Binge Drink and Use Cannabis

Overall MD-CAS Sample



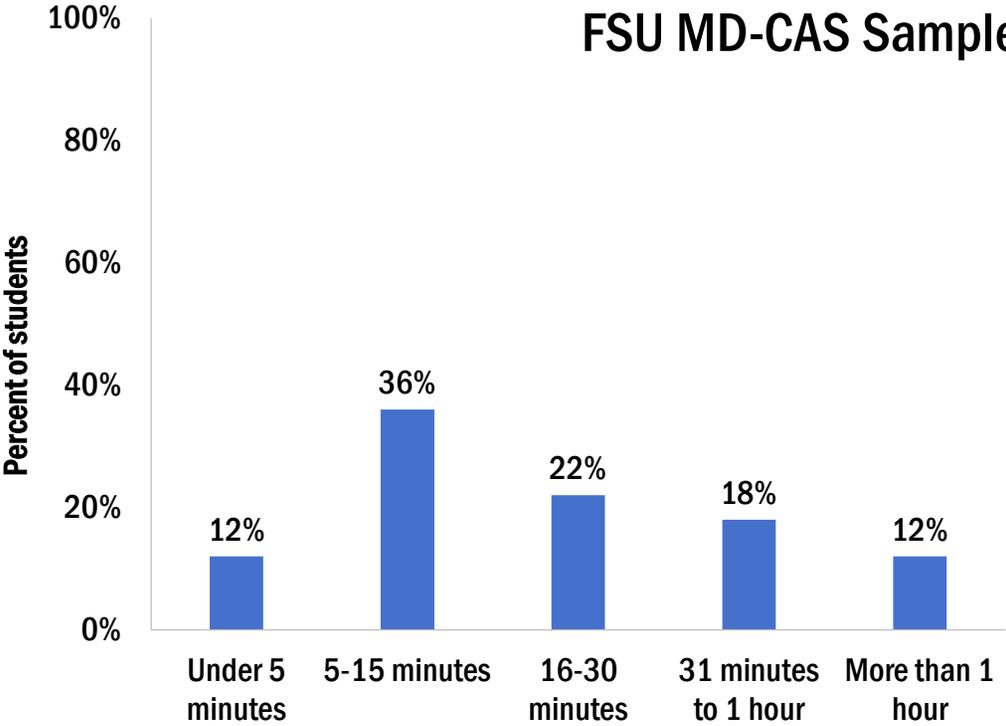
**Past-month binge drinking; past-year cannabis use; students without mental health conditions are those who have never been diagnosed*



Sleep During Past Two Weeks

How long does it usually take for you to fall asleep at night once you close your eyes?

FSU MD-CAS Sample 2022



Average Amount of Sleep in Last Two Weeks

Among FSU Students

Average Amount of Sleep on a Weeknight (Excluding Naps)

- 2% Less than 4 hours
- 3% 4 hours
- 12% 5 hours
- 28% 6 hours
- 29% 7 hours
- 19% 8 hours
- 4% 9 hours
- 3% 10 or more hours



Average Amount of Sleep on a Weekend Night (Excluding Naps)

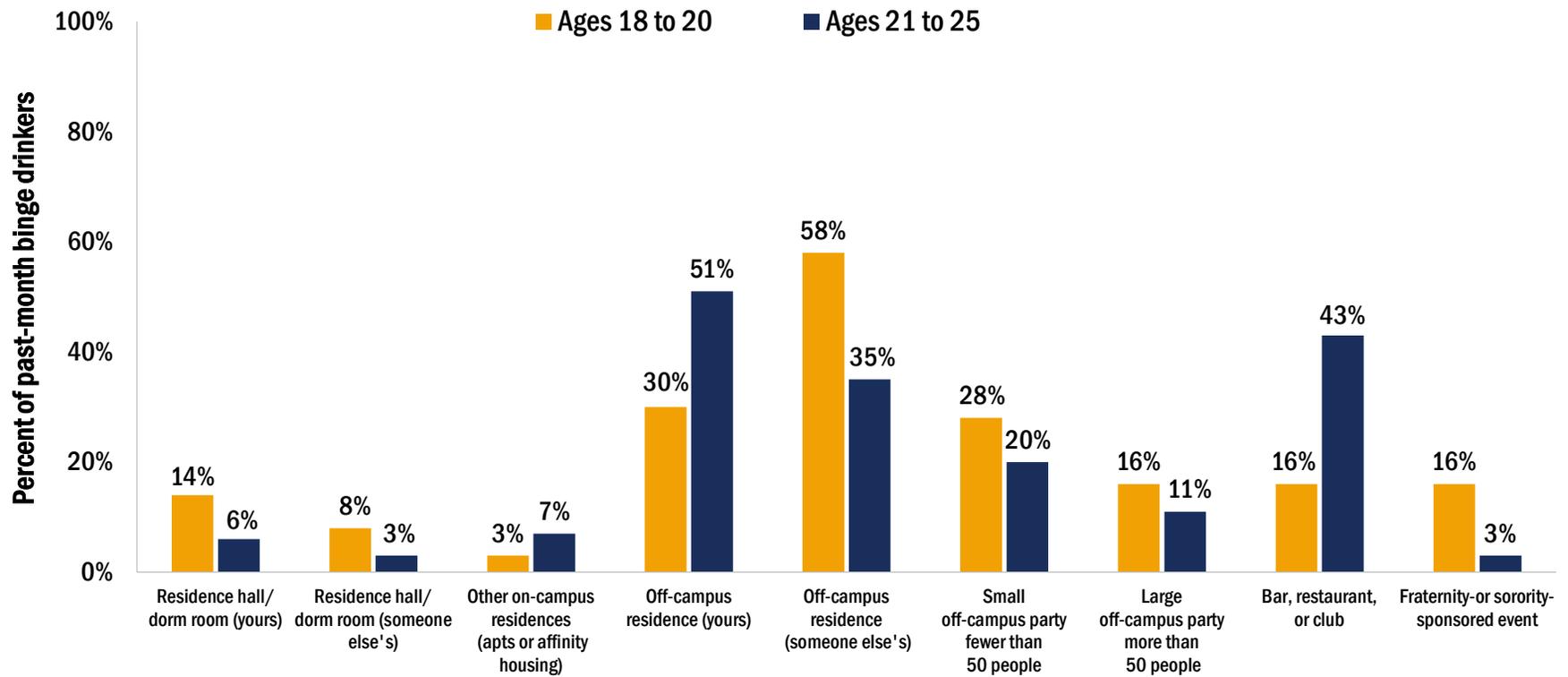
- 3% Less than 4 hours
- 4% 4 hours
- 7% 5 hours
- 14% 6 hours
- 20% 7 hours
- 27% 8 hours
- 15% 9 hours
- 11% 10 or more hours



Access to Alcohol

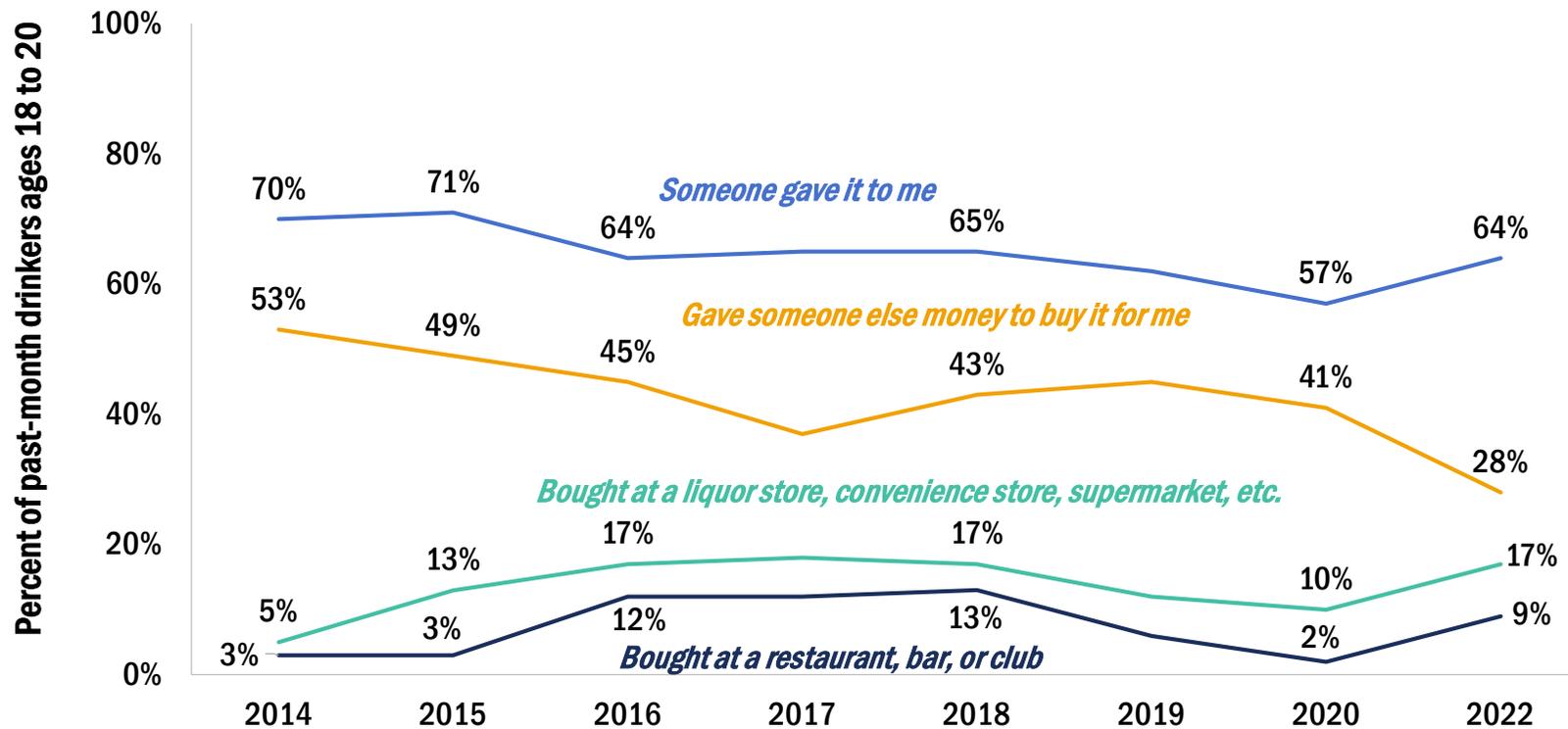
Where Do FSU Students Binge Drink?

By Age, among Past-month Binge Drinkers



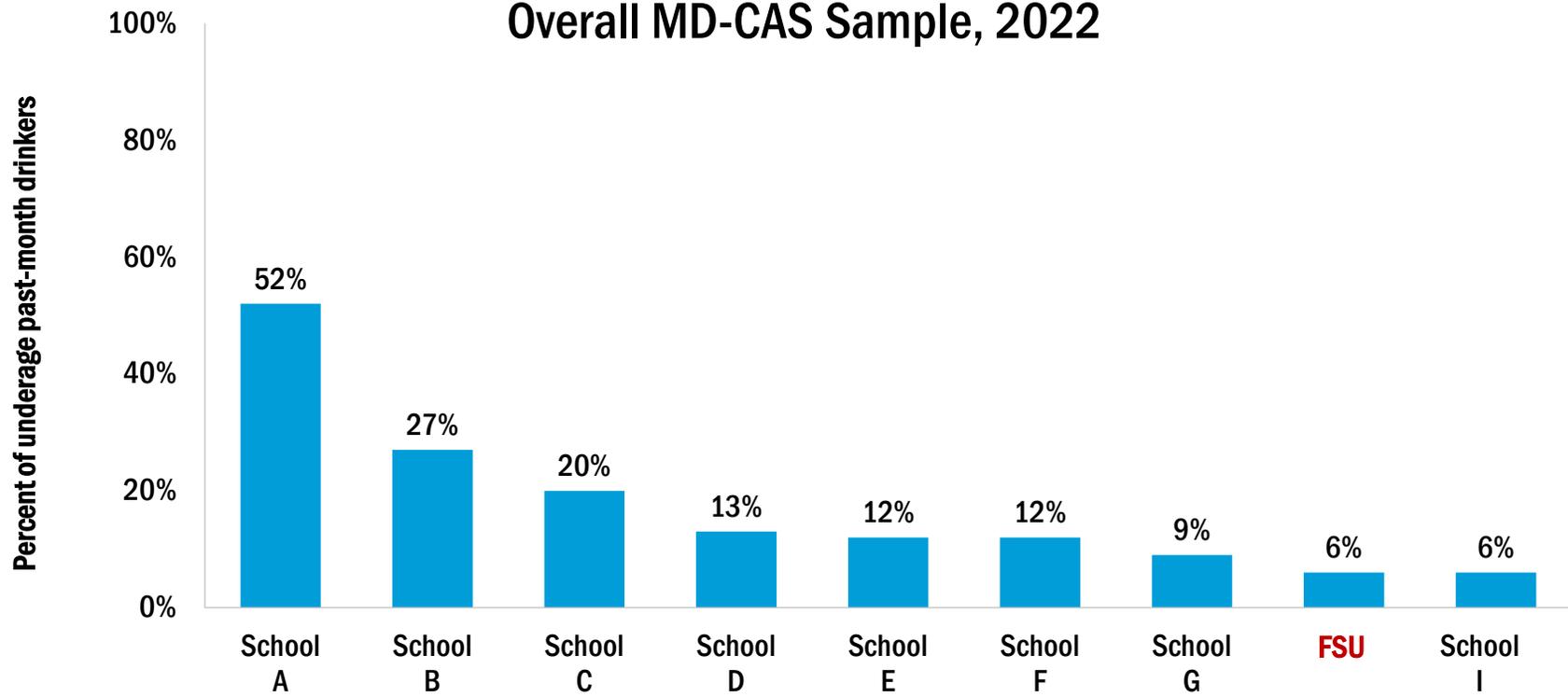
How Alcohol Was Obtained by Underage Drinkers

among FSU Past-month Drinkers **Ages 18 to 20**



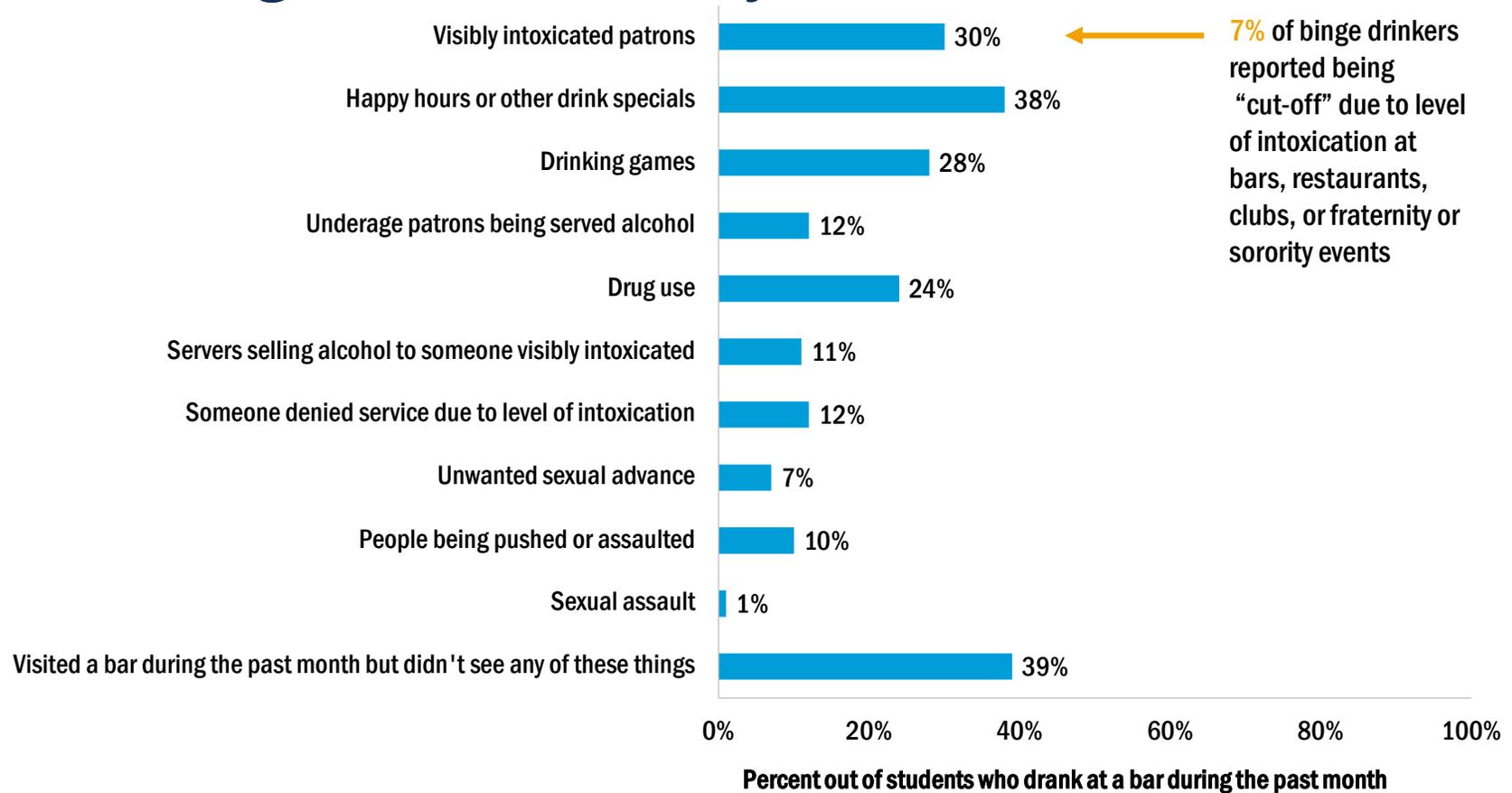
What Proportion of Underage Past-month Drinkers Use a False ID?

Overall MD-CAS Sample, 2022



Note: Past-month false ID use

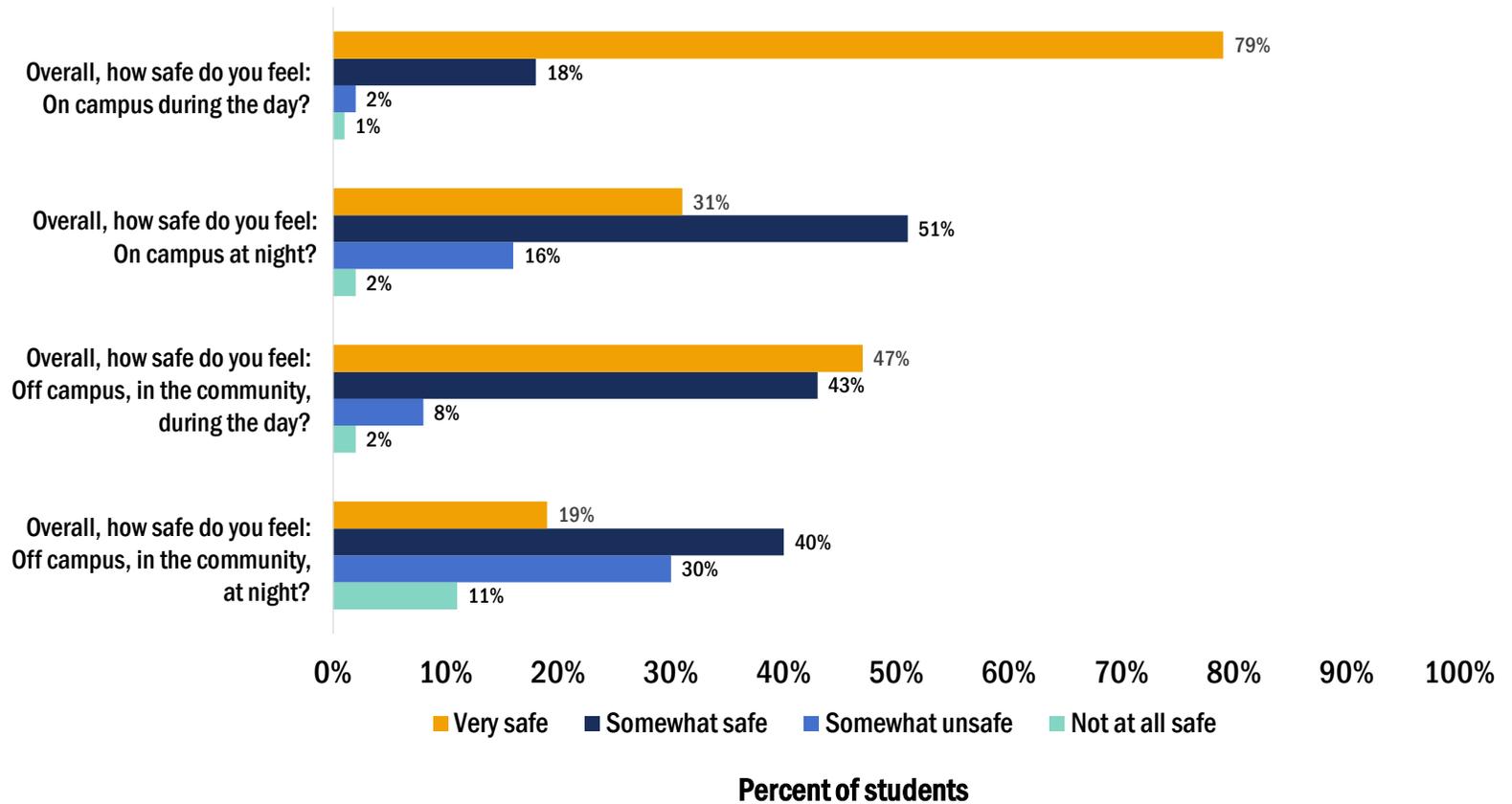
Things Seen at a Bar by FSU Students



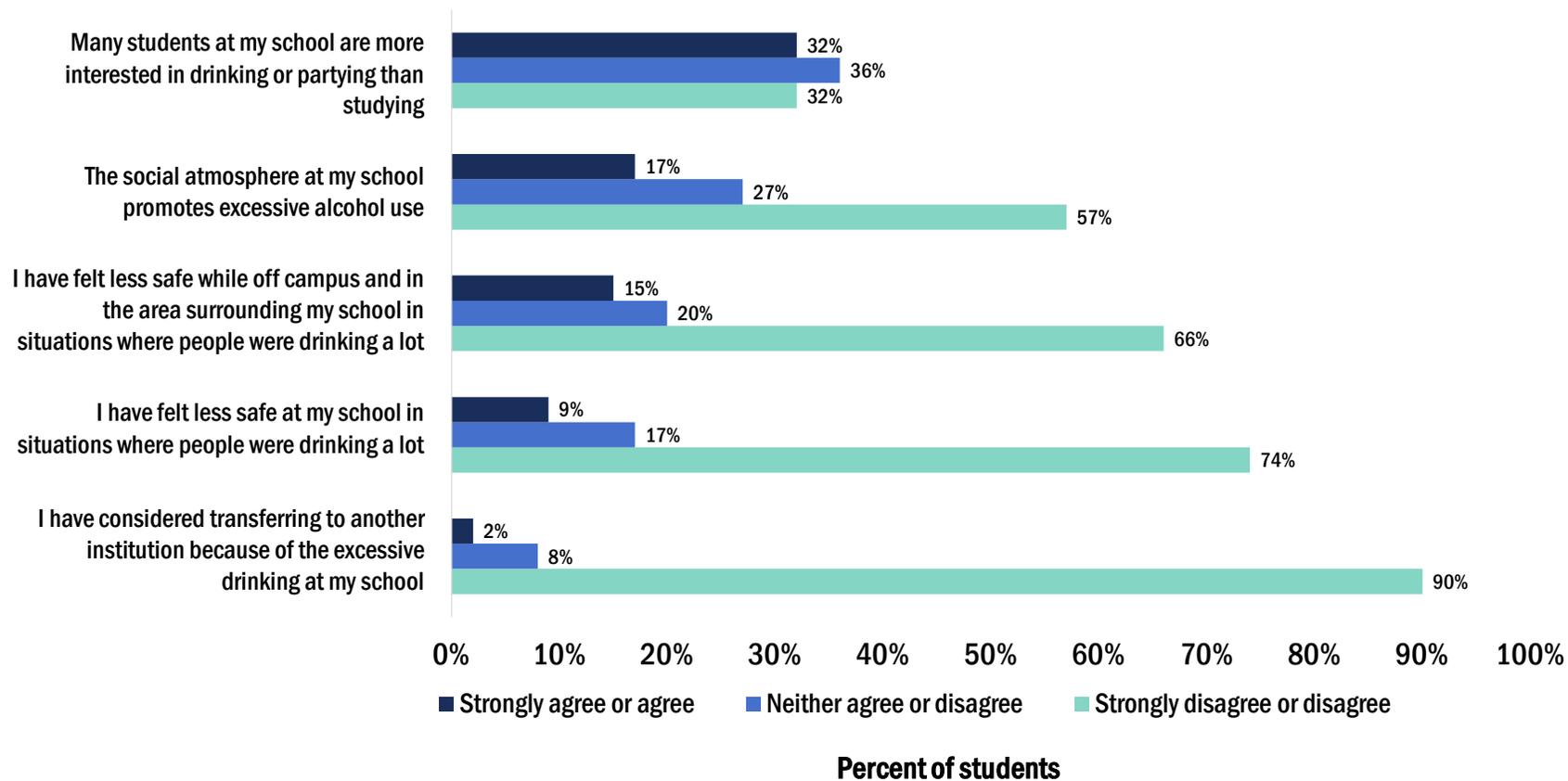


On- and Off-campus Climate and Policy Enforcement

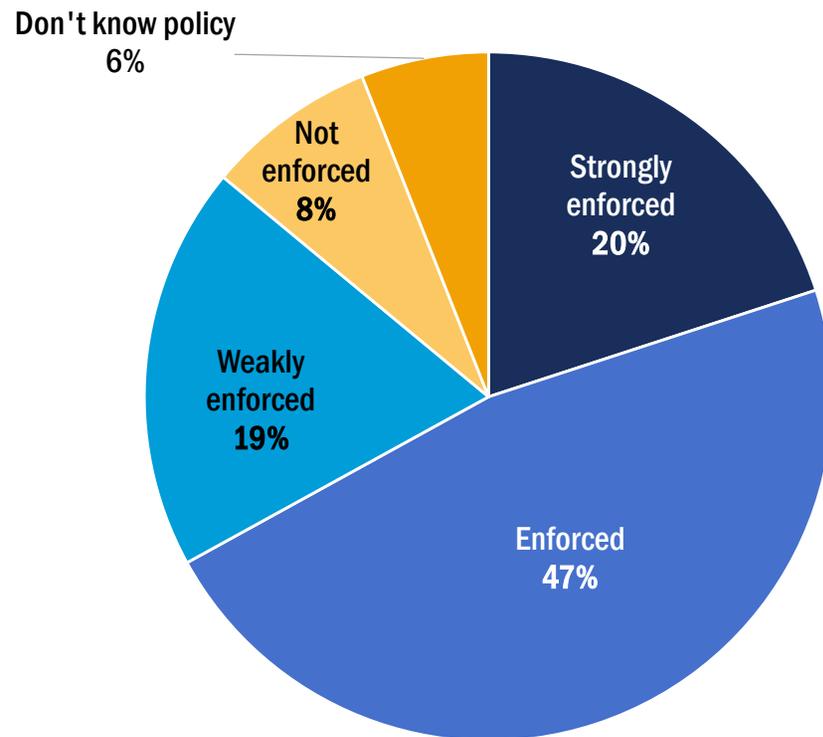
Student Perceptions of FSU Campus Safety



Student Perceptions of FSU Campus Climate



How Strongly Do FSU Students Think RA's Enforce Alcohol Policies?



To be effective, consequences must be:

- **Certain,**
- **Swift, and**
- **Sufficiently severe**

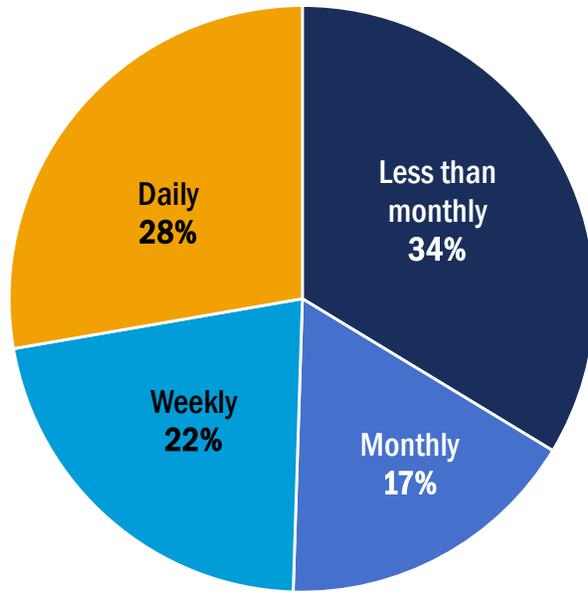
0% thought that there was no school policy



Cannabis and Other Substance Use

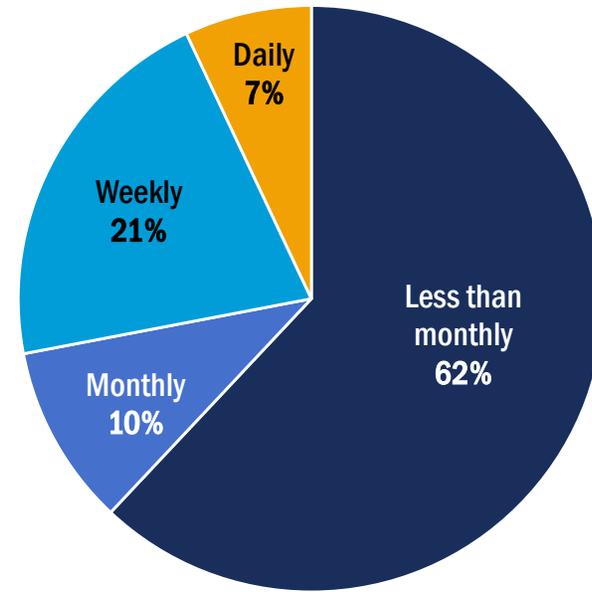
Past-year Cannabis and Past-year CBD Use among FSU Past-year Cannabis and CBD Users

Frequency of cannabis use during the
past year (n=127)



74% of students at FSU have not used cannabis in the past year

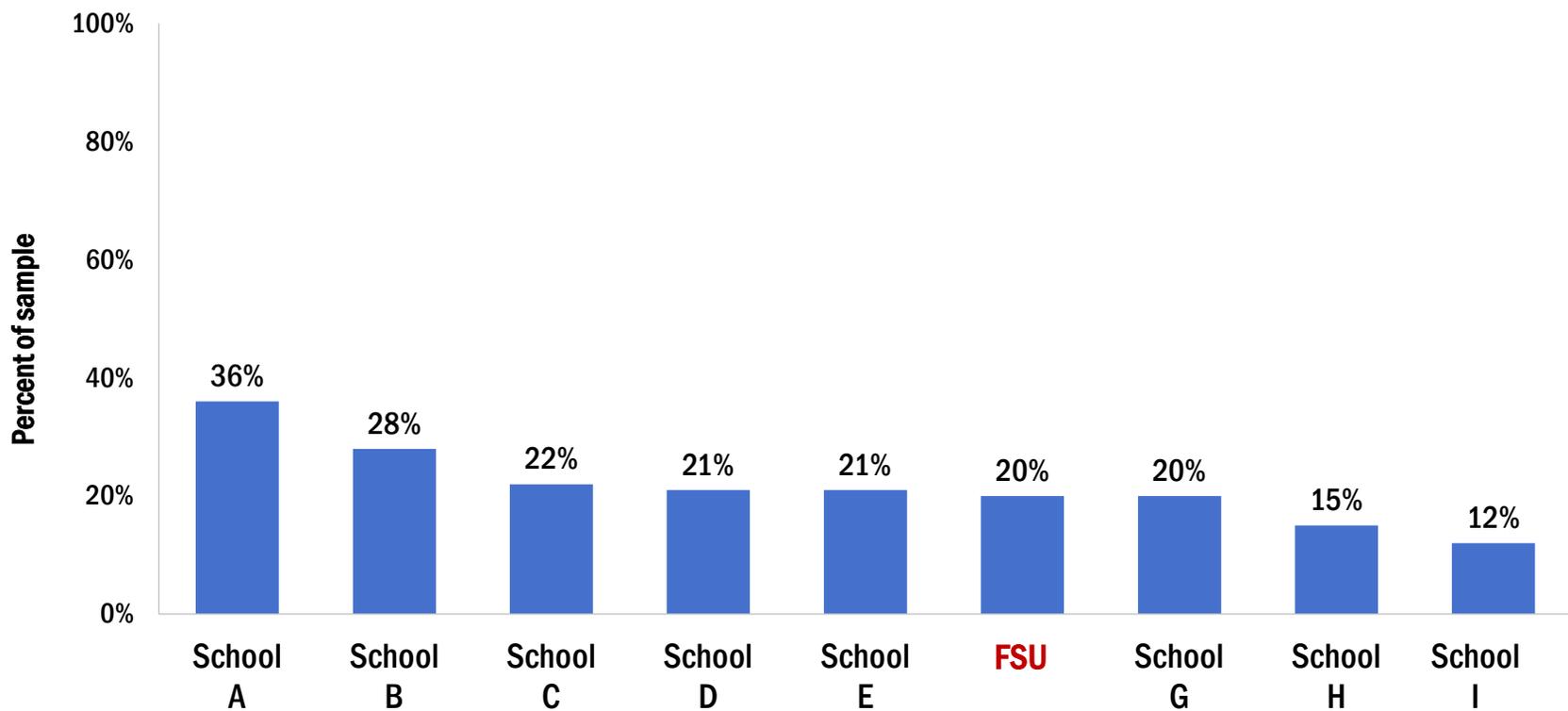
Frequency of CBD use during the
past year (n=68)



86% of students at FSU have not used CBD in the past year

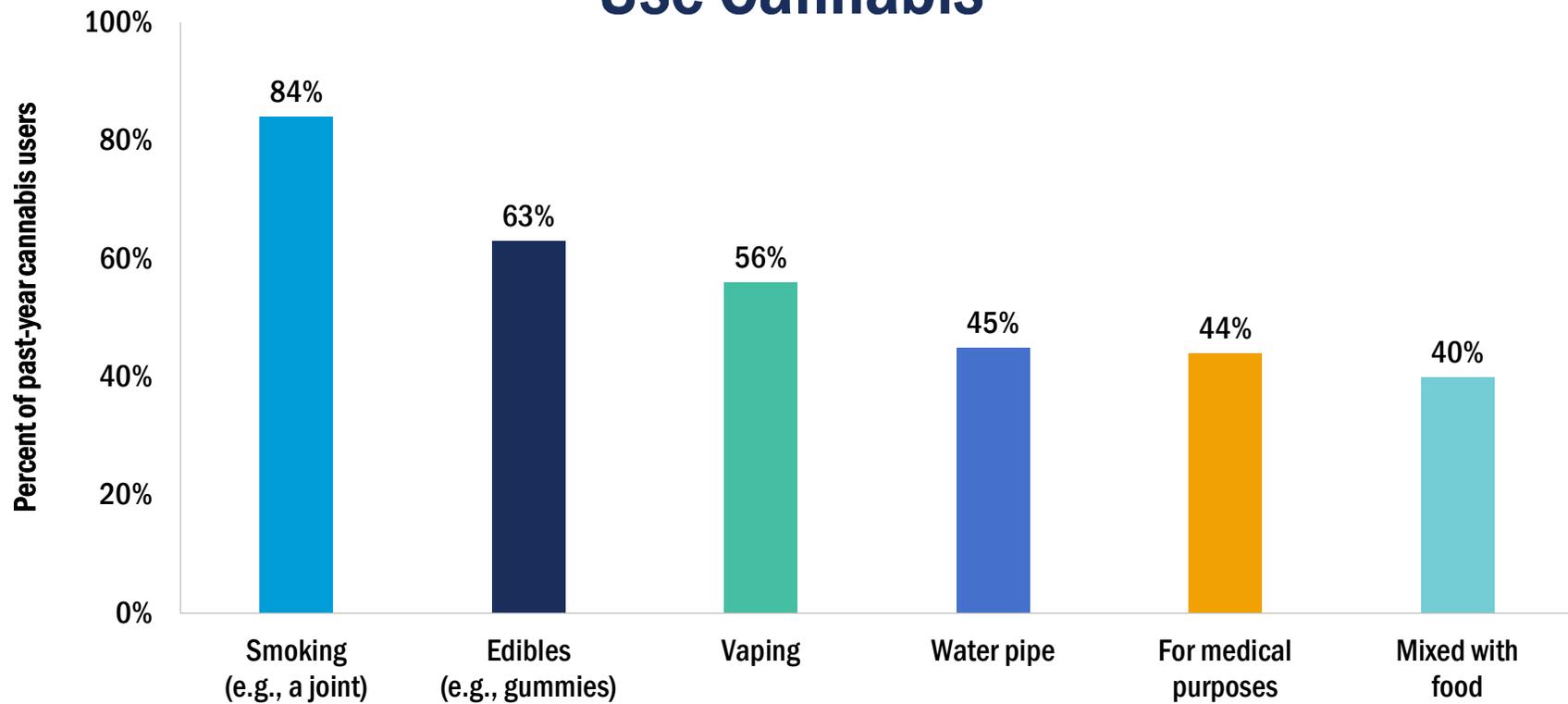
What Proportion of Students Use Cannabis?

By School, MD-CAS 2022



Note: *Past-MONTH* cannabis use

How FSU Students Use Cannabis*



**Among past-year cannabis users*

Other Cannabis Findings among the 2022 FSU MD-CAS Sample

- Those who binge drink continue to be more likely to use cannabis; students are not “replacing” one for the other
- While the use of alcohol and cannabis at the same time does occur, among students who use both alcohol and cannabis, 65% reported 1-5 days a month of simultaneous use for heightened effect
- The prevalence of daily or weekly cannabis use remained stable, but those who are using may be using more frequently and using higher potency products
- Students aged 21 and over are more likely to use cannabis, so prevention efforts and services should also target older students



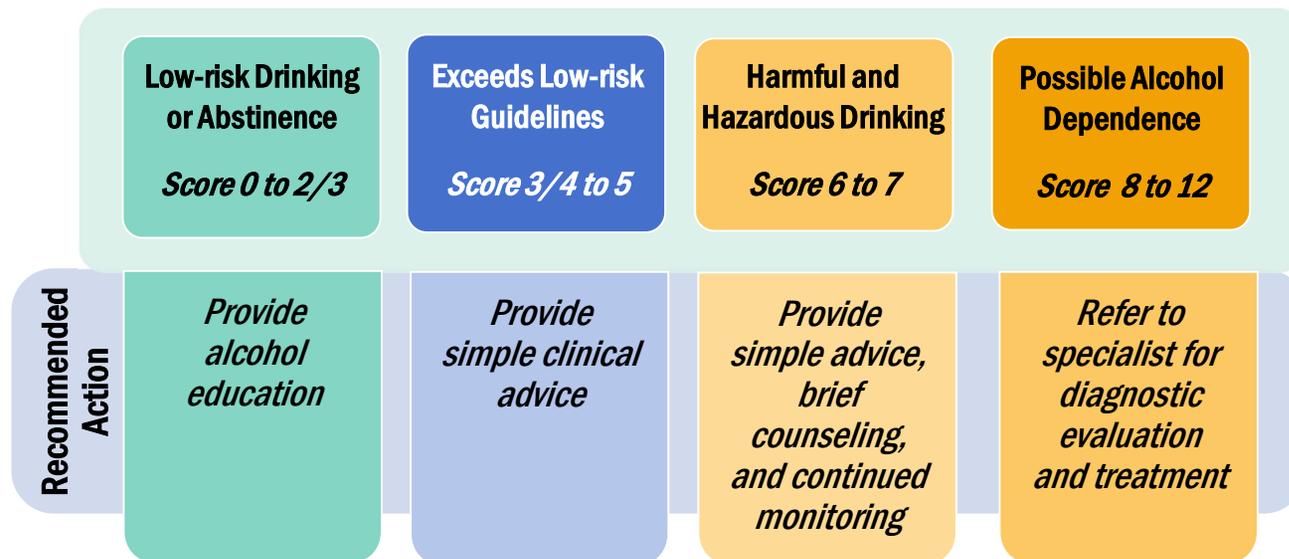
Other Substance Use among FSU Students

Substance	% of students who used during the past year
Tobacco	
E-cigarettes or other vape products	20%
Cigarettes	6%
Other tobacco products (e.g., hookah, cigars, little cigars)	9%
Prescription drugs used nonmedically	
Prescription stimulants	2%
Prescription analgesics (pain relievers)	1%
Prescription tranquilizers	1%
Prescription sedatives	0%
Other substances	
CBD products	14%
Hallucinogens	5%
Cocaine	2%
Ecstasy	1%
Heroin	0%
Methamphetamine use	0%



Opportunities for Screening and Intervention

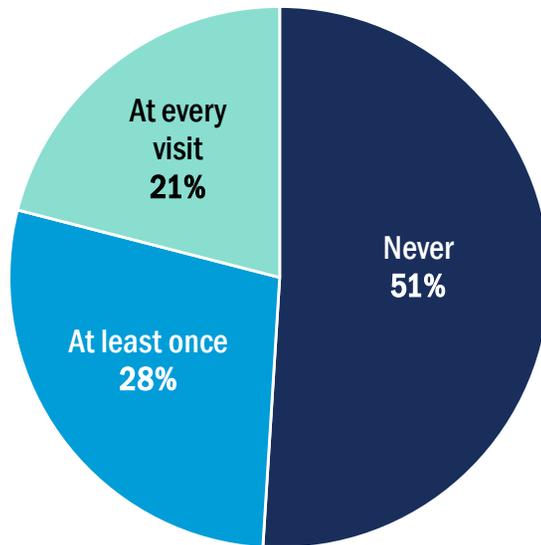
AUDIT-C Scores among FSU Students (Alcohol Use Disorders Identification Test)



	Low-risk Drinking or Abstinence Score 0 to 2/3	Exceeds Low-risk Guidelines Score 3/4 to 5	Harmful and Hazardous Drinking Score 6 to 7	Possible Alcohol Dependence Score 8 to 12
Men	63%	21%	12%	5%
Women	55%	38%	4%	3%

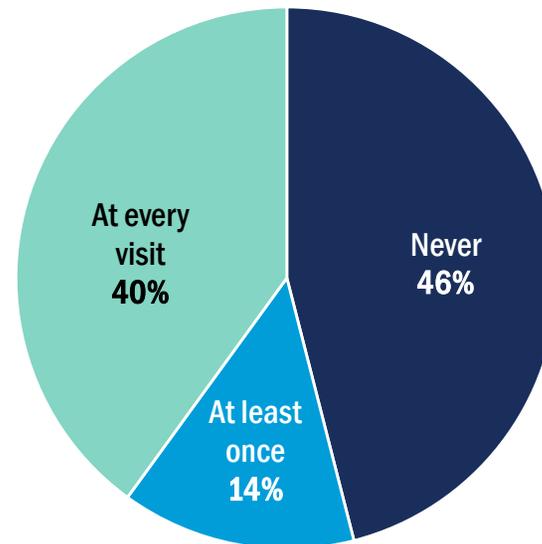
Are FSU Students Asked About Alcohol Use at the Counseling and Health Centers?*

During Counseling Center visits



36% of binge drinkers had ever visited the Counseling Center.

During Health Center visits



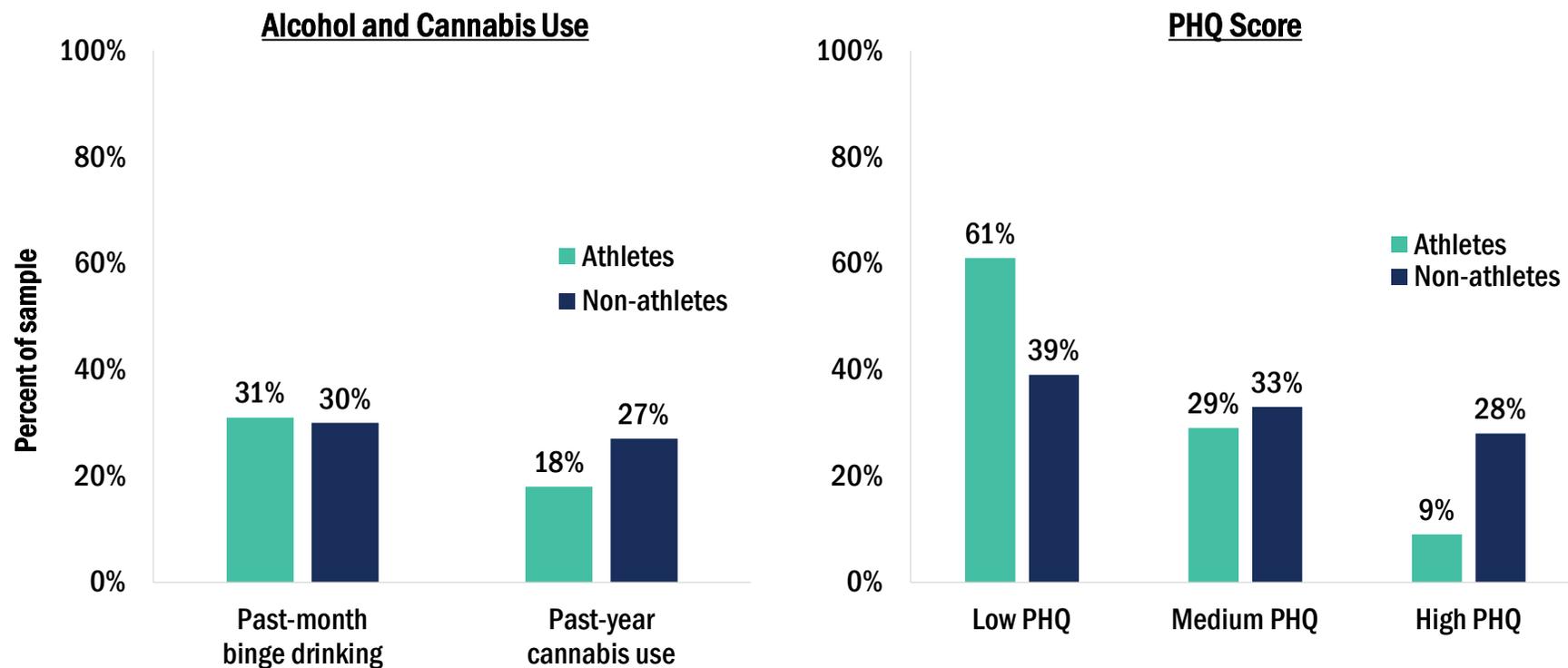
49% of binge drinkers had ever visited the Health Center.

**Among students who have visited the health or counseling centers at least once*



Students At Risk for Binge Drinking and/or Cannabis Use

Trends among FSU Athletes and Non-athletes





Looking Forward:

Resources and Opportunities for Addressing Excessive Drinking and Related Problems at FSU

Engaging Faculty

- Faculty and staff survey
- Training webinar
- Roadmaps for campus resources
- Infographics

Towson Faculty and Staff Roadmap

The college years can be a difficult time for many students and finding campus resources can be challenging. Faculty, staff, and other members of the campus community are often unsure of when to turn or what to say when they come in contact with a student who needs help. This roadmap clarifies the resources available to students at Towson and provides tips on how to facilitate help-seeking.

Recognizing Warning Signs:

Trust your gut. It may be tricky to brush away red flags or assume that someone else is helping a student, but you might be the first person to act. Substance use and/or mental health issues are often related to academic disengagement, such as:

- ◻ Not showing up for class or meetings
- ◻ Poor performance on tests or projects
- ◻ Appearing disengaged/"checking out"

Irregularly changing moods or behavior or other signs that a student might need help. If something feels off, it's important to find a campus resource that can help.

Depending on the type of concern, please contact the following offices:

Type of Concern	Who To Contact	Contact Information
Alcohol and/or drug use	Alcohol, Tobacco, and Other Drug	641.411.3743 info@atod.towson.edu

UMES Faculty Help Hawks Thrive!

Faculty and staff at UMES play an integral role in student success. Substance use has significant impacts on students' academic and social development, and this resource provides information and strategies to address this important topic inside and outside the classroom.

IS SUBSTANCE USE "NORMAL" IN COLLEGE?

In short, no. Social norms and media can make it appear as if everyone is partying, but in reality, they aren't. There are many ways for students to get involved and have a rich social life that doesn't revolve around substance use.

70% of UMES students choose to NOT binge drink.

68% of UMES students did not use cannabis in the past year.

However, although substance use is less common than you think, it is likely more harmful than you realize.

WHAT ARE THE ACADEMIC IMPACTS?

UMES students who binge drink or use cannabis weekly or more are more likely to skip class often, and UMES students who binge drink or use cannabis have lower GPAs than students who do not binge drink or use cannabis.

Substance use has a sneaky way of robbing people of potential. For example, lost internships, dropping a class, not joining a student organization, these are all things that aren't necessarily made or broken by a student's ability to graduate, but they are what we call "opportunity costs". As faculty, you only want the best for students and to help them make the most of all the opportunities college has to offer. Luckily, you can have a huge impact on student success!

HOW CAN I HELP?

- Avoid unintentionally normalizing substance use, i.e. "don't go too crazy this weekend, you have an exam on Monday".
- Promote positive mental health and coping strategies by hosting guest lectures from health and wellness staff, adding supportive platitudes/statements, doing check-ins throughout the semester, etc.
- Keep an eye out for current news and research on substance use and behavioral health. This will help you be aware of emerging trends and concerns to look out for in your interactions with students.
- Most importantly, recognize red flags that a student is struggling, check in with them, and refer them to resources too. Red flags include chronic absenteeism or tardiness, appearing tired or even falling asleep in class, missing or late assignments, frequent requests for extensions, change in affect (for example, they used to participate frequently, but have stopped), and struggling academically (either consistently struggling or a sudden change in performance).

WHAT RESOURCES ARE THERE?

If you are feeling concerned about a student's substance use issues in general, or to collaborate with a staff member about educating students, you can work with, contact the ATOD Prevention Center. Lada Brown Building, info@atod.towson.edu

If you'd like to be part of the full UMES "Faculty Substance Roadmap" that includes other campus student support services like the Counseling Center, and off-campus resources, please contact the ATOD Prevention Center.

Steps for Meaningful Conversations with Students of Concern

BEFORE YOU BEGIN

Sometimes we push away gut feelings of concern for fear that we are overanalyzing, or even out of discomfort about what to do with our concerns. Moreover, sometimes we worry that if we reach out, we might be wrong, make things worse, or make the student defensive. So, step one is to reassure yourself, and take stock of the observations that have led you to be concerned.

Most people appreciate being checked-in on and will not be insulted if you approach them nonjudgmentally. If they are in fact doing alright, they will still appreciate that you care, and know that if something comes up in the future, that you will be there for them.

PREPARE

Review some direct observations and warning signs that have led you to be concerned. Some examples:

Student Scenario: Substance Use

STEPS FOR INTERVENING

- PREPARE
- REACH OUT
- EXPLORE, AFFIRM, AND REFLECT
- SUMMARIZE AND REFER
- FOLLOW-UP

SCENARIO

Kevin has always been a lively presence in your classes, cracking jokes and supporting his classmates. He says he broke his ankle a couple of weeks ago while playing on his intramural team. Lately, he's asked for a lot of extensions on assignments and explains his frequent absences as doctor's appointments. Although he's still his friendly self when he does show up for class, he's often late and appears tired.



PREPARE

Review what makes you concerned:

- Chronic Tardiness/Absenteeism
- Sudden Tired Appearance
- Requests for Extensions
- Recent Injury

REACH OUT

A post-class conversation with Kevin could start with:

Faculty Member: "Kevin I've been meaning to ask you how your ankle's been healing up? Do you have a few minutes to catch-up?"

Kevin: "Oh yeah sure thing, thanks for asking, it's been going okay, just feels like it's taking forever."

EXPLORE WHAT'S GOING ON

Faculty Member: "I bet. Must be hard to not be as active as you normally like to be."

Kevin: "Yeah it's the worst."

Faculty Member: "If you don't mind, I wanted to talk to you about how you've been lately in general?"

Engaging Parents and Families

- College Parents Matter Website
- Quarterly Newsletter
- Conversation Prompt Checklist
- Roadmap
- Custom letters

WHAT RESOURCES PARENTS NEED TO KNOW Before their student starts college

So your child is planning to go to college...now what? Whether choosing a college or preparing to drop them off for their first day, it's important to understand university resources, how to access them, and which resources are must-haves for you and your student when deciding on a school.

Every college is a little bit different and their resources are too. Take advantage of events like orientation sessions, open houses, and family weekends to learn more about what an institution offers. While we hope your student never experiences some of the concerns below, if they do, it's important to know where to turn.

Type of Concern	Common University Departments or Resources	What You Could Say or Ask
General concerns/Don't know where to start	Student Affairs, Admissions, Parent and Family Affairs	My student needs help with... and I don't know where to point them.
Struggling with homesickness, anxiety, sadness, stress, etc.	Counseling Center, Wellness Center, Residence Life	My student is really struggling and needs to talk to someone.

COLLEGE PARENTS MATTER: MOMENTS TO CHECK IN WITH YOUR STUDENT

The college years can be hard sometimes. With your help, your student will feel supported in making healthy decisions for themselves and have a happier and more successful experience! Here are some behavioral health conversation prompts and reminders to talk about with your student throughout the year.

Fall

- Always be there to quickly ask about their roommate and how their relationship with them is going.
- Ask how your student's campus resources (hotline help, etc.) they know which services are offered on the health and counseling centers?
- Use Fall faculty orientation or similar to talk to with your student about their well-being (sleep, mental health, nutrition, etc.).
- Fall means football (or other sports)! Offer them some ideas for tailgating that don't include alcohol.
- Football is a challenge can be really fun, but sometimes students feel pressure to drink alcohol to celebrate. Encourage them to enjoy new traditions.

Winter

- It's really stressful! Have a conversation over Thanksgiving about how they can manage stress during their upcoming exams.
- How are you, really? Set aside some time during winter break to talk about how their fall semester went. Include topics like grades, relationships, social life, etc.
- Ask if they've felt any need for support someone and if they've taken advantage of campus resources. Discuss any barriers they face to getting help.
- Remember "break before break". Even if your student drinks while away, it's still appropriate to communicate your expectations at home. High-risk events can include the Wednesday night before Thanksgiving and New Year's Eve.

Spring

- Spring break is here! Offer tips their plans? Parties, trips to the beach, etc. can involve high-risk drinking and funding them for your student might mean occasionally going for alcohol. Help them explore alternatives such as a "supporter" or a service trip.
- The cold, early spring months can exacerbate mental health concerns. Check in regularly and encourage your student to use campus resources. Offer to help them navigate the system.
- High-risk drinking "backlogs" include St. Patrick's Day, Cinco de Mayo, and graduation, but they don't have to be high risk. Help them explore safer options.
- Encourage self-care habits like good sleep, nutritious meals, and relaxation strategies during breaks. Many schools have "no-mess" events available.

Summer

- If your student will be away to college in the fall, start to talk about how to talk about these when they return. College Parents Matter has lots of resources available to help make these conversations a breeze.
- If your student will be heading off campus, this is a great time to talk with them about alcohol, and how they can make their home away from home a place where they can succeed as a student. College Parents Matter has specific guides for talking about off-campus housing.
- If your student is an early enroller, consider some needs (counseling and/or medication), talk with them about how to understand how your student can continue to access their care while away from home.

Find out more about these topics, including conversation tips and guides! Visit us at collegeparentsmatter.org

Addressing Cannabis

- Fact Sheet
- Faculty webinar
- Parent webinar
- Addressing cannabis misperceptions webinar

Mary Christie Quarterly

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LET'S TALK ABOUT

CANNABIS

If you feel confused about the terms cannabis, THC, marijuana, CBD, and their effects, you are not alone. The quickly evolving landscape around cannabis has made it difficult to keep track of health claims, risks, and regulations. We hope to give some clarity on these issues as well as recommendations for further resources that are up to date, easily accessible, and evidence based.

LET'S START WITH SOME BASICS

Cannabis, sometimes referred to as marijuana, is a plant with more than 100 chemical compounds called cannabinoids, of which THC and CBD are the most common.

THC (tetrahydrocannabinol) is the psychoactive compound that produces the "high" that many people associate with cannabis. There are three FDA-approved synthetic cannabis-related drug products. Cesamet™ can be used to treat nausea and vomiting caused by cancer and chemotherapy, as can Marinol® and Syndros®, which can also treat loss of appetite and weight loss in people who have HIV/AIDS.

CBD (cannabidiol) is another compound found in cannabis and does not produce a "high". There has been much interest in CBD in recent years regarding potential health benefits. So far only one cannabis-derived product has been granted FDA approval, Epidiolex®, which is used to treat seizures in individuals with Lennox-Gastaut syndrome, Dravet syndrome, and tuberous sclerosis complex.

ARE CANNABIS PRODUCTS REGULATED?

UNFORTUNATELY, NO, NOT REALLY. Cannabis-derived and cannabis-related products have been approved for a small number of medical uses. Although products in states that have legalized medical and/or recreational cannabis often list a variety of medicinal or therapeutic uses, they have not been approved by the FDA. It's important for consumers to realize that the FDA has not required testing of "medicinal cannabis" products for their safety or therapeutic value.

The FDA is particularly concerned that consumers might use CBD products in place of approved treatments for medical conditions. Even delaying approved treatment through the use of these products can have dangerous consequences.

Another concern is that some cannabis-derived products list inaccurate amounts of cannabinoids contained within them. A 2017 analysis of products containing CBD that were being sold online found that 26% contained significantly less CBD than was stated, with 43% containing more.

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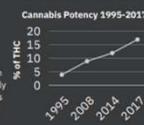
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WHAT ABOUT POTENCY?

Cannabis potency, or the % of THC in a product, has risen steadily for years. Conversely, the concentration of CBD in cannabis that is typically available in the U.S. has remained minimal and relatively unchanged.



A great variety of cannabis products are available, including concentrates and edibles, that are even higher potency, between 40-80% THC. Additionally, many products do not list their potency (see regulation section, left) and most edibles do not provide a "serving size"

The potential impacts of these high potency products will not be known for some time, but we know from years of data that cannabis use increases risk for neurocognitive deficits, dependence, and can precipitate or worsen some mental health disorders.

HOW DO I STAY UP TO DATE?

FIRST, YOU NEED TO KNOW WHERE TO LOOK. Cannabis information evolves rapidly, so it's best to bookmark some trusted resources that are objective and evidence based.

When evaluating a source, make sure the information is fact based rather than opinion based or anecdotal. If a website or other resource has a motivation to sell you something, they are unlikely to be a reliable source. As a general rule, these organizations have up-to-date information based on the latest research: FDA, NIDA, SAMHSA, and NIH.



How to Increase Profits & Protect Your Customers

A FREE ONLINE MARYLAND-CERTIFIED TRAINING FOR BAR OWNERS & MANAGERS

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What Bar Owners & Managers Are Saying

"I would **highly recommend** this short seminar as a resource to bar/restaurant managers and owners. Hanour's sessions are **informative and concise**, and a **great opportunity** to meet other industry professionals."
-Christopher Scott, General Manager, Chez Hugo, Baltimore, MD

"The training was **easy to listen to and informative**. It helped with the little, but important reminders to relay to our staff re-opening. Thank you!"
-Candace Dillon, Galway Bay, Annapolis, MD

"I don't get much out of most alcohol service-related trainings these days - but Gregg's was different. You can tell he's actually spent a considerable amount of his career as a boots-on-the-ground operator and not just a talking head. **Fully recommend!**"
-Timothy Graham, Event Center & Concessions Manager, UMBC Event Center

About the Trainer

Gregg Hanour consults bar owners and managers in sound alcohol management practices and profit maximization. He is the former owner of two bars in Southern California and author of *The Optimized Bar, Profits by Design* (available June 2022).

 THE MARYLAND COLLABORATIVE
TO REDUCE COLLEGE DRINKING AND RELATED PROBLEMS

Engaging Retailers

- Step 1: Data Collection
 - Collect data on management and service practices in 17 bars popular among college students.
- Step 2: Trainings for bar owners
 - Free online training to reduce over-service and improve patron safety
- Also available
 - Voluntary retail agreements

2022 Updated and Revised Campus Policies Reports

- 2016 report analyzed campus alcohol policies for:
 - Clarity
 - Accessibility
 - Effectiveness
- 21 Model Alcohol Policies for 2021
- 2022 update
 - Revisits policies and provides feedback for schools

