

# DRUG FREE CAMPUS & WORKPLACE 2013-14



AUBURN UNIVERSITY  
OFFICE OF THE PRESIDENT

January 2014

University Students, Faculty, and Staff:

In continuing efforts to maintain a safe and healthy environment for its students, employees, and visitors, Auburn University has adopted and implemented policies and programs that address the illegal and improper use of alcohol and other drugs by members of the university community. The Board of Trustees has adopted a drug-free campus and workplace policy, and the administration has implemented a smoking policy.

The following online information is provided annually to all students and employees of Auburn University in compliance with our policies and the Drug-Free Workplace Act of 1988 and the Drug-Free Schools and Communities Act Amendments of 1989. More information can be found at the following websites:

**The Faculty Handbook**

<http://www.auburn.edu/academic/provost/handbook.html>

**The A&P Handbook**

[http://www.auburn.edu/administration/human\\_resources/ap/index.html](http://www.auburn.edu/administration/human_resources/ap/index.html)

**The University Staff Handbook**

[http://www.auburn.edu/administration/human\\_resources/us/index.html](http://www.auburn.edu/administration/human_resources/us/index.html)

**Student Policy eHandbook**

[http://www.auburn.edu/student\\_info/student\\_policies/](http://www.auburn.edu/student_info/student_policies/)

I urge you to read this information carefully and assist the university in achieving a drug-free campus and environment.

Sincerely,

A handwritten signature in black ink, appearing to read "Jay Gogue".

Jay Gogue  
President

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*Auburn University is an equal opportunity educational institution/employer.*

## FEDERAL DRUG-FREE WORKPLACE ACT REQUIREMENTS

Any employee receiving a criminal drug statute conviction for a violation occurring in the workplace shall notify the provost, or the chief Student Affairs officer of such conviction no later than (5) days after such conviction, and such offices will immediately report this information to the Vice President for Research. If the employee reporting such a conviction is employed under a contract or grant, Auburn University, through the Office of the Vice President for Research, will notify the appropriate granting or contracting agencies within ten (10) days after receiving such notice of a criminal drug statute conviction. The same procedure will be followed at Auburn Montgomery, with reporting to counterpart offices on the Montgomery campus.

## IMPLEMENTATION OF THE UNIVERSITY'S DRUG PREVENTION PROGRAM

The president has appointed an advisory committee for a drug-free campus and workplace to:

1. Establish procedures and develop informational materials to annually distribute to students and employees.
2. Provide recommendations to promote and further develop the university's drug prevention program.
3. Evaluate the university's drug prevention program biennially to determine its effectiveness and ensure that disciplinary sanctions are consistently enforced.

## FURTHER INFORMATION

Inquiries concerning matters described in this brochure should be directed to: Eric Smith, Director Health Promotion and Wellness Services, Division of Student Affairs, Auburn University  
ecs0012@auburn.edu • 334-844-1528 • Follow us @auburnhealth

# standards of conduct

The unlawful manufacture, distribution, dispensation, possession, or use of illicit drugs or alcohol by students or employees of Auburn University is prohibited at any time on any university property or at any university activity. Any employee who is impaired by an illegal drug or by alcohol will be refused access to the workplace and will not be allowed to perform any duties or represent the university in any capacity. Any student who is impaired by illegal drugs or alcohol will not be allowed to attend any classes or university activities.

# disciplinary sanctions

The university will impose sanctions (consistent with local, state, and federal law) upon all employees and students who violate these standards of conduct. Such sanctions may include, but are not limited to:

- 1) referral for prosecution;
- 2) probation, suspension, or expulsion of students;
- 3) suspension or termination of employees.

# types of drugs

## I. DEPRESSANTS (of the central nervous system)

**A. Opioid derivatives/narcotics (heroin, morphine, codeine, hydrocodone** [Lortab or Vicodin combinations], **oxycodone** [Oxycotin], **methadone and opium**). Lowers the perception of pain and can cause lethargy, apathy, loss of judgment, and self-control. Physical and psychological tolerance and dependence develop. Overdoses cause trouble breathing, convulsions, coma, and death. Additional risks of use include malnutrition, hepatitis, and AIDS (with the injectable opioids).

### B. Sedative/Hypnotics

**1. Alcohol** is a powerful depressant. Alcohol use decreases alertness and inhibitions. Accidents and/or risky behaviors can occur with possible negative consequences to health such as disease transmission. Long-term, heavy drinking is linked to cancer, stomach problems, heart and liver damage, birth defects and psychological disorders. Tolerance, physical, and psychological dependence develop. Danger increases when mixed with other drugs, particularly other depressants.

**2. Benzodiazepines**, e.g. alprazolam (Xanax), diazepam (Valium), and lorazepam (Ativan) are tranquilizers or anti-anxiety agents that are also depressants and can cloud judgment/reactions. They are especially dangerous when mixed with other depressants such as alcohol.

**Rohypnol** (flunitrazepam) is also a benzodiazepine and is a potent tranquilizer; it goes by several names, most commonly “roofies.” Used with other drugs such as alcohol, the effects of Rohypnol intensify. This drug is known as the perfect “date rape drug.” It can be slipped into beverages without detection (no change in taste or appearance). Within 30 minutes victims appear extremely intoxicated, are unable to resist unwanted advances, and afterwards, are unable to identify perpetrators since Rohypnol produces amnesia. With repeated use, physical and psychological dependence may develop. Respiratory failure and death may occur if used in combination with other drugs.

**3. Barbiturates** (downers), tranquilizers, and methaqualone (commonly called Qualudes) may cause confusion and loss of coordination. Tolerance, physical, and psychological dependence develop. Overdoses cause coma and death. Depressants taken in combination with alcohol are especially dangerous due to their combined effects.

**C. Inhalants** (aerosol products, lighter fluid, paint thinner, amyl nitrite, glues, and other volatile solvents) can cause loss of coordination, loss of bowel and bladder control, confusion, and hallucinations. Overdoses cause convulsions, cardiac arrest, and death. Psychological dependence develops. Permanent damage to lungs, brain, liver, and immune system may occur.

## II. STIMULANTS

**A. Amphetamines** (uppers, speed), **dextroamphetamine, methamphetamines** (ice, crystal), **methylphenidate** (Ritalin), and **amphetamine salts** (Adderall) cause increased alertness, trouble sleeping, decreased appetite, and weight loss and can cause euphoria and hallucinations during acute toxicities. Tolerance, psychological and physical dependence develop. Continued high doses cause heart problems, high blood pressure, malnutrition, and death.

**B. Cocaine or crack cocaine** causes confusion, depression, and hallucinations. Tolerance and physical dependence develop. Effects are unpredictable; convulsions, coma, cardiac arrest, and death are possible. Nasal membranes may be destroyed when snorted. Smoking causes lesions in the lungs. Brain damage may occur.

**C. Caffeine** in larger doses (>250 mg) results in caffeinism (agitation, anxiety, headache, insomnia, tremors). Larger doses, or if mixed with other stimulants, may result in delirium, high blood pressure, heart rhythm disturbances, convulsions, and respiratory arrest.

## III. HALLUCINOGENS (Psychedelics)

**A. Lysergic Acid Diethylamide (LSD)** causes hallucinations and panic. Effects may recur (“flashbacks”) even after use is discontinued. Tolerance and psychological dependence develop. Severe effects may occur in mother or baby if taken during pregnancy.

**B. Phencyclidine (PCP)** causes depression, hallucinations, confusion, and irrational behavior. Tolerance develops. Overdoses may cause convulsions, coma, or death.

**C. Mescaline** (peyote), mushrooms (psilocybin), ecstasy, and other “designer” hallucinogens cause anxiety, depression, paranoia, illusions, and hallucinations. Impaired perceptions may occur. Irreversible brain damage may occur.

**D. Cannabis** (marijuana) alters mood and perception. Use may cause confusion and loss of coordination. Long-term use leads to tolerance and psychological dependence. Users frequently begin using other drugs. Long-term use causes damage to lung tissue and other illnesses. Marijuana contains higher levels of carcinogens than tobacco.

## IV. OTHER

**A. Gamma Hydroxy Butrate (GHB)** is a synthetic “date rape drug” that is a colorless and odorless central nervous system depressant. It is commonly called “G” and is associated with other “club drugs.” Originally introduced as a treatment for narcolepsy, it is now an illegally manufactured drug. Gamma Butyrolactone (GBL) is a chemical found in GHB and associated with GHB. GHB is found in liquid form and is used the same way as is Rohypnol, on an unsuspecting victim. The effects of GHB can be felt as quickly as fifteen minutes after being introduced into the body. It has no taste when mixed in a drink or water, but there may be a salty aftertaste. Memory loss is associated with GHB as is nausea, unconsciousness, breathing difficulty, seizures, and possibly coma.

**B. Ketamine Hydrochloride (Ketamine)** is another “date rape drug,” or “club drug” used legitimately for general anesthesia of humans and animals. It is more commonly known as “Special K.” It is found in liquid form but can be processed and then introduced into the body orally or by inhalation. The effects of ketamine include nausea, slurred speech, agitation, elevated blood pressure, breathing problems, and hallucinations or out-of-body experiences.

**C. Methylenedioxy-Methylamphetamine (MDMA), or Ecstasy** is commonly known as XTC. It is a synthetic stimulant and is being recognized as a “date rape drug” by many law enforcement entities. It is usually found in tablet form with a variety of different imprints ranging from the design of a butterfly to the word: SEX. Ecstasy can be deadly when mixed with alcohol. Other effects include anxiety, inability to sleep, chills, increased heart rate and blood pressure, rapid eye movement, and confusion.

**D. Synthetic Marijuana (Spice or K2)** may be sold in legal retail outlets as herbal incense and can be labeled not for human consumption to mask their intended purpose and avoid FDA oversight. These products consist of plant material that has been laced with substances that claim to mimic THC, the primary psychoactive ingredient in marijuana, and are often marketed as a “legal” high. Please note these substances are currently illegal in Alabama.

**V. TOBACCO** use in the form of cigarette smoking is linked to emphysema, lung cancer, heart disease, and other illnesses. Physical and psychological dependence may develop. Smokeless tobacco use leads to cancer of the head and neck areas. Passive smoking may increase upper respiratory illnesses.

Auburn University is a smoke-free campus. This will provide a healthier and cleaner community. Members of the Auburn Family interested in quitting can contact the Auburn University Harrison School of Pharmacy, the Auburn Medical Clinic, or the Office of Health Promotion and Wellness Services for more information about cessation programs and services.

**VI. ANABOLIC STEROIDS** may produce behavioral effects including aggressiveness, irritability, impaired judgment, impulsiveness, mania, and paranoid delusions. Sexual functioning is frequently impaired. Serious health problems include cancer and liver and heart disease.

# legal sanctions

## I. Possession, Use, or Distribution of Alcoholic Beverages

**A.** Alabama state law prohibits the purchase, consumption, possession, or transportation of alcoholic beverages by persons under 21 years of age. Penalties for conviction may include a fine, a jail sentence, and a 90-day driver’s license suspension.

**B.** Public intoxication, driving under the influence of alcohol (DUI), and the unlicensed sale of alcoholic beverages are also against the law. Penalties may include a fine, jail sentence, suspension of driver’s license, and/or required completion of an alcohol rehabilitation program.

**C.** Alabama state law prohibits a person from having in his/her possession alcoholic beverages in an open

container in the passenger area of a motor vehicle of any kind on a public highway or right of way of a public highway. A violation of this is a Class C misdemeanor that carries a fine of up to \$25.

## II. Possession of Controlled or Illicit Drugs

### A. Marijuana

1. Possession of a small amount of marijuana for personal use only is a misdemeanor punishable by a prison sentence of up to 1 year, a fine of up to \$6,000, or both, and a 6-month driver’s license suspension.
2. Possession of marijuana for other than personal use, or a second conviction for personal use, is a felony punishable by a prison sentence of 1 to 10 years, a fine of up to \$15,000, or both, and a 6-month driver’s license suspension.
3. Possession of more than 2.2 pounds of marijuana is considered “drug trafficking” and is punishable by a minimum prison sentence of 3 years and a fine of up to \$25,000. It also includes a 6-month driver’s license suspension.

### B. All Other Controlled Substances

1. Possession of a controlled substance other than marijuana is a felony punishable by a prison sentence of 1 to 10 years and a fine of up to \$15,000, or both, and a 6-month driver’s license suspension.
2. Possession of large amounts of a controlled substance other than marijuana is considered “drug trafficking” and is punishable by a minimum prison sentence of 3 years and a fine ranging from \$50,000 to \$500,000 and a 6-month driver’s license suspension.

## III. Sale of Controlled or Illicit Drugs

**A.** The sale of a controlled substance is a felony punishable by a prison term of 2 to 20 years or a fine of up to \$30,000, or both.

**B.** The sale or distribution of a controlled substance by a person 18 years old or older to a person under the age of 18 is a felony punishable by a prison sentence of 10 years to life imprisonment or a fine of up to \$60,000, or both. The sentence for the distribution of a controlled substance to a minor cannot be suspended and there is no provision for probation.

**C.** The sale or distribution of a controlled substance within a 3-mile radius of any school or college is punishable by a mandatory sentence of 5 years in addition to other penalties described above.

**D.** The sale of large amounts of controlled drugs is considered “drug trafficking” and is punishable by a minimum prison sentence of 3 years and a fine ranging from \$50,000 to \$500,000.

**E.** Federal trafficking penalties for first offenses range from up to 1 year of imprisonment and a fine of up to \$4 million depending on the illicit drug involved. Repeat offense penalties range from up to 2 years of imprisonment and a fine of up to \$200,000 to mandatory life imprisonment and a fine of up to \$8 million depending on the illicit drug involved.

# alcohol and drug education, prevention, and intervention

Educational and treatment programs are available to students and employees of Auburn University. Programs fall generally into three categories: (A) Information/Education; (B) Self-Help; (C) Professional Treatment.

**Employee Assistance Program (EAP):** Auburn University’s EAP provides information and referral to employees about a variety of topics, including alcohol and drugs.

- **Location:** Foy Hall
- **Phone:** 844-4145
- **Services:** (A)

**Auburn University Medical Clinic (AUMC):** AUMC provides students and employees medical evaluation for alcohol and other drug concerns, treatment and/or referral for intensive inpatient or outpatient services when indicated.

- www.auburn.edu/au\_medical/
- **Location:** 400 Lem Morrison Drive
- **Phone:** 844-4416
- **Services:** (A, B, C)

**Student Counseling Services (SCS):** SCS provides assessment, education, and first-level intervention (individual & group counseling) for students with alcohol and other drug concerns. Referrals are provided for intensive inpatient or outpatient services when indicated. Educational information on alcohol and other drugs is available through SCS. Staff is available to provide campus-wide educational programs upon request. Additional educational resources/links and an online alcohol screening are available at [www.auburn.edu/scs](http://www.auburn.edu/scs). Click on the “Mental Health Screening” icon on the home page and then type in keyword “Auburn.” [www.auburn.edu/scs](http://www.auburn.edu/scs)

- **Location:** 400 Lem Morrison Drive, Suite 2086
- **Phone:** 844-5123
- **Email:** [scsinfo@auburn.edu](mailto:scsinfo@auburn.edu)
- **Services:** (A, B, C)

**Health Behavior Assessment Center (HBAC):** The Health Behavior Assessment Center (HBAC) uses the Brief Alcohol Screening and Intervention for College Students (BASICS) curriculum, which includes an alcohol use evaluation along with detailed personal drinking feedback and advice. The primary goal of BASICS is to provide objective lifestyle feedback and to encourage positive changes in drinking behavior.

- <http://media.cla.auburn.edu/psychology/hbac/>
- **Location:** 101 Cary Hall
- **Phone:** 844-4823
- **Email:** [hbacpsc@auburn.edu](mailto:hbacpsc@auburn.edu)
- **Services:** (A, B, C)

**Auburn University Pharmaceutical Care Center (AUPCC):** The AUPCC is located on the second floor of the Harrison School of Pharmacy (HSOP) which is located in the Walker Building on campus. The AUPCC offers the “Pack It Up” tobacco cessation program for employees and students who wish to stop smoking or stop using smokeless tobacco products. This individualized service is provided by pharmacy faculty, post-doctoral pharmacy residents, and senior pharmacy students. Pharmacists meet with each patient one-on-one to evaluate readiness to quit using tobacco and assess whether a medication (such as nicotine replacement therapy, bupropion, varenicline, etc.) might be beneficial. If a prescription product is appropriate, the pharmacist coordinates this care by working with the patient’s physician. Exhaled carbon monoxide levels are monitored to provide feedback for smokers during the quit attempt. Pharmacists provide continued monitoring, assistance, and support.

- **Location:** 2155 Walker Building (Employees and dependents can also be seen in the AUPCC sites located in Montgomery (AUM), Birmingham, Tuscaloosa, and Huntsville.)
- **Phone:** 844-4099
- **Email:** [aupcc4u@auburn.edu](mailto:aupcc4u@auburn.edu)
- **Services:** (A, B, C)

### East Alabama Mental Health – Mental Retardation Center:

Intensive outpatient treatment for substance abuse problems is available through: Opelika Addictions Center and Russell County Addiction Center.

- **Location:** 2300 Center Hills Drive, Building 1, Opelika, AL 36801
- **Phone:** 772-2877 or 1-800-815-0630
- **Services:** (A, B, C)

**Private Alcohol and Drug Treatment Programs:** A number of private programs are operated in proximity to Auburn University, throughout Alabama, and in neighboring states. Those programs are too numerous to list, but information may be obtained from the above referral sources.

- **Services:** (A, B, C)

**Auburn University Health Promotion and Wellness Services (HPWS):** Our office is responsible for developing and implementing alcohol and drug prevention programs, such as the Tiger Education and Screening Intervention (TESI) and the Auburn University Recovery Community. TESI is an individual educational intervention program for Auburn University students who have experienced negative consequences or other problems related to alcohol use. TESI is designed to help students make better alcohol-use decisions and to reduce their risks for alcohol-related harm. The Auburn University Recovery Community provides a supportive environment in which students recovering from addictive disorders can successfully pursue academic, personal, and professional goals to become productive members of society.

- **Location:** Suite 2101 Student Center
- **Phone:** 844-1528
- **Email:** [hpws@auburn.edu](mailto:hpws@auburn.edu)
- **Services:** (A, B, C)

