Talking to your college student about alcohol
A parent/guardian guide

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Programs, Education & Resources
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A Brief Introduction

Though normalized, and sometimes even glorified in movies and media detailing college life, alcohol is the most widely misused drug among college students. Many students feel that drinking alcohol is part of the college experience and that they will miss out on social aspects of college if they do not drink. However, the results of misuse can be devastating.

Binge drinking, a pattern of drinking four or more drinks in a two-hour time period for women, and five or more drinks in a two-hour time period for men, has consistently been associated with higher instances of negative consequences such as law enforcement involvement, alcohol poisoning, assaults, and injuries due to drinking.

The Office of Substance Use Programs, Education & Resources has created this PDF guide for you to use as a resource when talking to your student about alcohol. Sometimes parents believe that their child will not listen or that their messages go unheard, but research shows that parents have significant impact on their children’s decisions regarding alcohol and other drug use. **YOU CAN MAKE A DIFFERENCE!**

You are the expert in your own child. Trust your instincts and be honest. This guide is merely meant to help facilitate these potentially challenging discussions.

We have written this guide to reach a wide audience, understanding that there may be sections that you and your family can relate to better than others. This is okay. Families differ and we want to respect those differences, while at the same time provide as much helpful information as possible. Here you will find information, conversation starters, guided questions, and helpful tips for talking to your child about your expectations around substance use while they are in college.

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Alcohol is the most widely misused drug among college students

38% of college students engage in binge drinking

Approximately 1,500 college students die and 696,000 assaults occur annually in relation to alcohol misuse every year across the country

Stanford is no different from other universities when it comes to risks associated with alcohol misuse

Between 36-38% of undergraduates at Stanford engage in binge drinking

While a minority, hundreds of Stanford students each year experience negative consequences from drinking - from receiving police citations to alcohol poisoning.
In this chapter, we outline some common challenges that parents may face when effectively communicating with their children. You know your child best and thus some parts of this may resonate more than others. Our hope is to remind you that there are many different approaches and ways to navigate these conversations.

Beginning a Dialogue
The hardest part is getting started. Sometimes these conversations will happen over the course of several sessions instead of just one. In fact, it can be better to spread out your communication about alcohol and drugs over time depending on surrounding circumstances. We created this guide to launch at the same time as AlcoholEdu to make the conversation starter a little easier! When you feel the time is right, ask your child about AlcoholEdu and how it’s going. Your child might be open to the conversation or they may respond with a negative reaction. Here are some common negative reactions and tips that other parents have found useful in navigating them.

Fear of Hearing a Lecture
Many students are open to dialogue but fear that the conversation will turn into a lecture in which they are told what is right and what is wrong. Your student might say, “I know what you will do if we talk, you’ll lecture me like you always do. Then if I argue, you will interrupt me.”

Navigation tip: “You are right. In the past, I have done that at times. But this time, I won’t lecture. Now that you are heading to college I recognize that you are going to be making your own decisions and I really want to hear what you think.”

Anger About Not Being Trusted
Your student might interpret your desire to talk about alcohol and drugs as a sign that you do not trust him or her. Studies show that when teens feel they can trust their parents and are trusted by them, they tend to drink less. Your child might say, “What’s the matter, you don’t trust me?” or “Have I ever given you reason not to trust me?”

Navigation tip: Reassure him or her that you are not suspicious and instead are trying to help. “I do trust you. I trust you to make healthy decisions around alcohol and drugs and I want to help you think through how you are going to do that because this is a very important issue. I want to pool the information we have between us so you to know what to expect. To do that we have to talk about it.”

The “navigation tips” are simply examples, but you know your child best. Some of these may not work well for your child. Use a strategy that you feel will not elicit a defensive response and instead will open up a constructive line of communication.
General Communication

The Student "Knows It All Already"
Your student might feel like s/he knows everything already. Sometimes this is based in a little personal experience, but for the vast majority of Stanford students, many do not have personal experience with alcohol or drugs prior to arriving at Stanford. Though your student might think s/he knows everything, you can often provide little tidbits of information that s/he hadn’t considered. Even if you have had a conversation about alcohol and drugs before when your child was younger, there is still more to talk about. S/he might say, “I took AlcoholEdu so I already know what I’m supposed to know. Plus, you talked to me about this years ago when I was in middle school. We don’t need to talk about this again.”

Navigation tip: “I’m really glad you finished AlcoholEdu and I want to hear about it. It would make ME feel better knowing what you learned. It would help me to better understand how things are different from when I was your age. Even though we have talked about this before, it’s different now that you are going to college. College is a big step and you are going to be in completely new situations that you haven’t been in before.”

Fear of Punishment
Another possible roadblock for your student might be that s/he is focused on fear of being punished. Studies show that when teens fear punishment they communicate less often with their parents. S/he might say, “Oh okay, yeah, if I talk to you about it I know what will happen. You will just tell me if I drink then you aren’t going to pay my tuition and I’ll have to come home. Forget it.”

Navigation tip: “I promise you that this conversation is not going to be about punishment. You are going to college and I recognize that you are coming into your adulthood. I will take what you say seriously. I’ll be straight with you and you be straight with me.”

Additional Considerations
You may hear a combination of these from your child, or even some different reactions than those presented above. Generally speaking, if you can, focus your response on caring about your child, wanting to understand his or her thoughts, and wanting to help navigate college experiences while at the same time recognizing his or her need for independence.
Quick Tips: Communication

Communicate the “why”
Communicate the "why". Why is this important to you, and where does it fit into your hopes for your student’s college experience? Whether it be your values, beliefs, personal experiences etc., connect the topic of substance use to other conversations you have had with your child about transitioning into college life.

Listen
Allow your student to speak without interruption. Listen to what s/he has to say. Sometimes a way to show you are listening is to paraphrase what you think s/he has said, “Let me see if I am understanding this. It sounds like you feel…”

Ask Questions
Ask open-ended questions and encourage your student to talk about feelings, thoughts, and any anxiety/worries about starting college.

Verbalize Respect
Whenever you can in the conversation, affirm your respect for your student. People who feel respected are often willing to talk more. Tell your student you are proud of him or her for being able to handle situations in the past around alcohol and drugs, or let your student know that you respect his or her thinking about these things ahead of time.

Choose a good time
It is best to find a time when your student is not going to feel rushed or trying to go elsewhere. Wait until you are both calm and have enough time to have a discussion. It could be over dinner, or you could take your student out for lunch or some other activity so you have him or her alone to sit and talk and listen to each other.

Eliminate distractions
Make sure there are not a lot of distractions. It is okay to talk over a meal. However, if someone is watching television or reading or doing dishes, it becomes more difficult to talk without being distracted.

Try to appeal to values and common goals
Show that you care about your student’s health, wellness, and success. Discuss how alcohol and drugs may impact these things. Young adults are more likely to listen when they know you are on their side. Remind your student that you want him or her to get the most out of his or her college experience and that includes happiness and safety.
Quick Tips: Communication

Be balanced
Show that you are a reliable source of information about alcohol and drugs. In order to make responsible and informed decisions about alcohol, you want your student to know s/he can come to you and ask questions. Showing that you can be impartial by providing unbiased information encourages students to take responsibility for their own decisions while acknowledging facts. One way to show that you can be impartial is to acknowledge the reasons why people choose to use alcohol and drugs, as well as the reasons that people choose not to.

Roll with resistance
Recognize that your student might disagree with you and that some conflict is natural. You are not identical to each other. Reframe conflict as an opportunity to listen to each other about your experiences and learn from each other.

Agree to take a pause if needed
You do not have to keep pushing through if the conversation becomes unproductive or defensive in nature. You can agree to temporarily stop the conversation and say that you want to think things over a bit more and have the conversation at a later time.

Body language is important
Even positioning yourself in a more open stance can help your student feel like you are open to his or her thoughts and ideas. Sometimes we have gut reactions to things and that is okay, but being aware of what your face or body language is telling your student is important.

Avoid a debate
Sometimes these conversations can become debates. If you sense that your student is getting defensive, try suggesting that you want to approach this from another angle. Use "I" (I am worried about...) statements instead of “you” (“you did this...”) statements to prevent putting him or her on the defensive.

Be ready to answer personal questions
Your student may ask you questions about your experiences. “Did you drink alcohol when you were my age? If it was okay for you to do, why is it not okay for me to do? Did you ever get drunk? Did you ever smoke marijuana?” You will need to be prepared to answer these questions in ways that your student will not decide that it’s permissible to misuse alcohol.

Talk about any relevant family history
Talking about a family history with alcoholism or drug addiction can be very difficult. However, it is important for your student to know. Studies show that there are some genetic influences when it comes to addiction. This is not the only factor, but students who know about a family history will be better prepared to make informed decisions about alcohol and drugs.
Common Misperceptions

Sometimes parents and guardians can be reluctant to talk with their student about drinking. Common myths that may make them more reluctant include:

<table>
<thead>
<tr>
<th>Myth</th>
<th>Fact</th>
</tr>
</thead>
<tbody>
<tr>
<td>My student is not interested in drinking</td>
<td>80% of Stanford students have consumed alcohol in the past year.</td>
</tr>
<tr>
<td>My student has learned about the negative effects of alcohol in school</td>
<td>Although most students do learn some basic facts in health class, this education can be variable and we have found that many important issues never get covered.</td>
</tr>
<tr>
<td>At this point, my student should know better</td>
<td>Even if your student has had experience with alcohol before, college is a new environment with completely new social dynamics and norms that will make this experience unfamiliar to them.</td>
</tr>
<tr>
<td>My student won't listen to me at this point</td>
<td>Research shows that parents are extremely influential when it comes to their childrens’ decisions about alcohol and drugs. The results of an American College Health Survey indicated that parents were the number one source that students turned to for important health information.</td>
</tr>
</tbody>
</table>

Did you know...
Stanford has a thriving substance free community that is growing larger every year! 1 in 4 undergraduates abstain from alcohol and drugs.

Exploring reasons why your student might choose to drink can help build your credibility and help him or her realize that you can see both sides. Exploring reasons why s/he may choose not to drink is equally important to remind your student that there are not only good reasons to abstain, but there are also alternatives to drinking.

Top Reasons Stanford students choose to drink
- To have a good time
- To celebrate
- To feel connected to people around me
- To get drunk

Top Reasons Stanford students choose NOT to drink
- I don’t want to lose control
- I don’t have to drink to have a good time
- I have other things to do
- I’m worried about the negative effects on my health
Harm Reduction

You might be wondering how you can reduce harms related to drinking if your student decides that s/he will drink in college. It is good to speak to your student about what responsible drinking looks like so s/he can make informed decisions. Address the following three topics to make sure you are covering your bases:

Discourage Binge Drinking

Decades of public health research indicate that binge drinking is the best predictor for negative outcomes due to drinking (police citations, alcohol related injuries, vomiting, alcohol poisoning, etc.). Stanford specific data support the same conclusions. Binge drinking is defined as four or more standard alcoholic drinks in a two-hour time period for women and five or more standard alcoholic drinks in a two-hour time period for men.

Discourage Hard Alcohol Use

Hard alcohol use, especially in the form of shots, is a strong predictor for negative consequences based on Stanford-specific data. While standard drinks all carry the same amount of pure alcohol, hard alcohol is highly concentrated, and therefore, very easy to consume quickly.

Encourage Risk Reduction Strategies

Promoting risk reduction strategies is an effective way to mitigate negative consequences from drinking. Things like eating a full meal before drinking, hydrating with water in between each alcoholic beverage, measuring drinks properly, setting a drink limit that does not exceed binge drinking standards, and pacing drinks to no more than one per hour are all empirically proven strategies that have helped students avoid negative consequences from drinking. You might also help your student come up with social strategies for being in situations where drinking is taking place. Encouraging your student to try to focus on meeting new people, finding individuals who share common interests other than drinking, or thinking about topics for conversation to keep the focus away from drinking, can be useful strategies to help them manage any possible social anxieties.
How Alcohol Works in the Body

Alcohol is absorbed into the bloodstream from the stomach and small intestine. The more food in the stomach, the more steadily it is absorbed into the blood stream. It is broken down as blood passes through the liver and multiple enzymes work to metabolize alcohol and eliminate it from the body. Because we have a limited number of enzymes to break down alcohol, there are limits to how fast alcohol can be metabolized and this process cannot be sped up. Until the liver has had time to break down the alcohol, it will continue to circulate in the bloodstream and affect all the body’s organs, including the brain.

Common Myths about Alcohol Processing

Myth: Black coffee will help you become sober
Myth: Exercise will help you become sober
Myth: Eating food will help you become sober
Myth: Taking a cold shower will help you become sober
Myth: Fresh air will help you become sober
Myth: Going from dark lighting to bright lighting will help you become sober
Myth: Drinking milk before drinking will allow you to drink as much as you want
Myth: Putting a penny in your mouth will lower your BAC

These myths circulate, in part, because a person’s sense of their own sobriety is very subjective. They are important to dispel because if your student believes these will sober him up, then he may participate in activities that are dangerous, such as driving, believing he has sobered up.

As alcohol circulates and reaches the brain, the person begins to feel intoxicated and, eventually, drunk. This may feel different for different people and even different for one person across experiences. However, what happens physiologically is much the same across individuals. Alcohol is a depressant so it depresses the central nervous system, slowing down major functions of the brain such as breathing, heart rate, and our ability to process information and react.
If an individual drinks too much, the central nervous system begins to shut down, and an individual’s breathing or heart rate can reach dangerously low levels and even stop. Not only do these survival functions slow down, but alcohol impairs all other parts of the brain as well. Most notably, alcohol impairs the memory center of the brain (the hippocampus) and at certain levels, can prevent the brain from forming new memories – typically called a “blackout”. During a blackout, the person is awake and often responding to other people, but the brain is not recording memories. Blackouts can be particularly risky because people vary in the amount of alcohol that it takes to blackout. For most people, blacking out is likely anytime after reaching a blood alcohol content of 0.10% or higher.

Alcohol intoxication is measured by blood alcohol content (BAC) or blood alcohol level (BAL). You might recall that a BAC of 0.08% is the legal limit for driving under the influence (a DUI). See the following chart for typical effects of different BAC levels.

<table>
<thead>
<tr>
<th>Blood Alcohol Content</th>
<th>Behavioral and Physiological Effects</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.02% to 0.04%</td>
<td>Lightheaded - Relaxation, sensation of warmth, &quot;high&quot;, minor impairment of judgment</td>
</tr>
<tr>
<td>0.05% to 0.07%</td>
<td>Buzzed - Relaxation, euphoria, lower inhibitions, minor impairment of reasoning and memory, exaggerated emotions (good and bad)</td>
</tr>
<tr>
<td>0.08% to 0.10%</td>
<td>Legally Impaired - Euphoria, fatigue, impairment in balance, speech, vision, reaction time and hearing. Judgment and self-control are impaired</td>
</tr>
<tr>
<td>0.11% to 0.15%</td>
<td>Drunk - &quot;High&quot; reduced and depressive effects set in. Gross motor impairment, judgment and perception are severely impaired</td>
</tr>
<tr>
<td>0.16% to 0.19%</td>
<td>Very Drunk - Strong state of depressive effects, nausea, disorientation, dizzy, increased motor impairment, blurred vision, judgment further impaired</td>
</tr>
<tr>
<td>0.20% to 0.24%</td>
<td>Dazed and Confused - Gross disorientation to time and place, increased nausea and vomiting, may need assistance to stand/walk, impervious to pain, blackout likely</td>
</tr>
<tr>
<td>0.25% to 0.30%</td>
<td>Stupor - All mental physical and sensory functions are severely impaired, accidents very likely, little comprehension, may pass out suddenly</td>
</tr>
<tr>
<td>0.31% and up</td>
<td>Coma - Onset of coma. Possibility of death due to respiratory arrest</td>
</tr>
</tbody>
</table>
Conversation Starters

Try to begin with a statement that conveys open-mindedness and then ask your child about his or her experiences.

Be willing to talk about your own experiences and opinions, but most importantly about how they have changed over time. Showing that you can be open will encourage your student to do so. Try to avoid sweeping generalizations about alcohol and drug use.

It is OKAY to share your opinion. In fact, you SHOULD. But try to distinguish between facts and opinions (e.g. “My opinion is that...and I have based that on personal experiences...and I have based that on facts that I have learned...and I have based that on these observations...”)

Use the AlcoholEdu course as an excuse to talk about it.

"Have you completed the online courses about alcohol and drugs that you are supposed to do? What have you learned so far?”

"I know you have been doing some online education about alcohol and drugs, how has that been going?”

Start by talking about the excitement of going to college.

"Are you getting excited to start school? College can be a stressful time, both academically and socially. Some people party a lot to try to fit in, or feel like they need to in order to have a social life. What has been on your mind as you think about the possibilities of parties and your social life?

Use a natural segue, like a commercial advertising alcohol. At dinner if you have an alcoholic beverage you might bring it up, or during a movie or TV show when alcohol is mentioned.
6 Overarching Goals for the Conversation

1. Be explicit about your expectations
   Depending on how you feel about alcohol and drugs, your family history and personal experiences, this may look like a discussion about abstinence or harm reduction. Either way, let your student know that you expect him or her to be responsible about his or her decisions. Some parents and guardians allow their children to drink a small amount of alcohol on special occasions. Others believe teaching their child how to drink alcohol responsibly at home will ensure that their child drinks responsibly outside the home. You must decide as a parent what fits into your values and beliefs. Again, whatever you decide, you should outline what responsible drinking looks like. Studies consistently show that when parents permit their children to drink, they tend to drink more often and heavier outside the home.

2. Show that you care about your student’s health, wellness, and success
   Discuss how alcohol and drugs can impact the body, overall health, well-being, and academics. Young adults are more likely to listen when they know you are on their side. Remind them that you want them to get the most out of their college experience and that includes happiness and safety.

3. Show that you are a reliable source of information
   In order to make responsible and informed decisions about alcohol, you want your student to know they can come to you and ask questions. Showing that you can be impartial by providing unbiased information encourages students to take responsibility for their own decisions while acknowledging facts. One way to show that you can be impartial is to acknowledge the reasons why people choose to use alcohol and drugs, as well as the reasons that people choose not to.

4. Help your student think through the kinds of situations they might face in making decisions around alcohol and drugs.
   Talk about why you made the decisions you did around alcohol and drugs and how that impacted you. If you could go back in time to give advice to yourself at your student’s age, what are the things you would say? What kinds of things would have resonated with you?

5. Talk about any important family history with substance use
   Students who know that they have a family history involving addiction will be better prepared to make responsible decisions when it comes to alcohol and drugs.

6. Let your student know about Stanford on-campus resources
   See the resource section later in this guide.
Guided Questions

Ask your student what they think! Asking questions can be a supportive way to help him or her sift through thoughts and ideas. It also helps your student feel like it’s not a lecture.

Examples

1. Do you know kids who drink a lot? How has it affected them?
2. Have you ever been offered alcohol by someone you knew? If so, what did you say? If not, what would you say?
3. What do you think you’d do if you didn’t want to drink but someone really pressured you into it? What would you say if the person said...?
4. What do you imagine your social life will look like at Stanford? Do you have any worries about how you will navigate the social scene at Stanford? What have you heard about it?
5. Have you thought about drinking in college? What kinds of things are you hoping to get from this choice? Do you have any concerns or questions?
6. What do you think are some potential risks around alcohol and drugs in college?
7. What kinds of questions do you have for me about alcohol and drugs?

Skill Building: Developing Assertiveness

When your student begins at Stanford, s/he will have a full residential living-learning experience. For most first-year students at Stanford, this means s/he will be creating an entirely new social network away from home. This can be exciting and anxiety provoking at the same time.

Developmentally, young adults' social networks are highly important at this stage. Along with this desire and need for strengthening new friendships, there can be explicit (“That test was ridiculous, let’s go get drunk!”) and implicit pressure (e.g. your child notices that the people who seem to have the most friends host parties in their room with alcohol every weekend) to drink.

There are a few ways to help your student develop assertiveness when it comes to facing these pressures.
4 Ways to Discuss Social Pressure to Drink

MAKE IT CLEAR THAT NOT EVERYONE IS DRINKING

At Stanford, 1 in 4 students choose to abstain from alcohol completely, and less than half of undergraduates engage in binge drinking if they do choose to drink. Stanford has a vibrant and growing substance-free community, with Cardinal Nights substance-free social events every weekend!

REMIND THEM NOT TO FOLLOW THE CROWD

Even if everyone was doing it, it doesn't mean that it is right or healthy. This is where some knowledge about risks of substance use can come in handy to discuss with your student.

REMIND THEM THAT TRUE FRIENDS WILL RESPECT YOUR DECISIONS

Friends will respect your student for choosing not to drink. Choosing not to drink does not necessarily exclude your student from activities where others are choosing to drink.

HELP THEM DEVELOP RESPONSES TO EXPLICIT AND IMPLICIT PRESSURES

When your student has some set responses that s/he can fall back on, it can be helpful in the moment. Things like, "It’s just not for me" or, "It’s not what I want to do" or "I don’t want to drink" can be effective because they are simple and straightforward.
On-Campus Resources

Below you will find on-campus resources that may be helpful for your student to access while at Stanford.

<table>
<thead>
<tr>
<th>Resource</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office of Substance Use Programs, Education &amp; Resources (SUPER)</td>
<td>We offer 1:1 alcohol and drug counseling, alcohol and drug prevention education, and harm reduction trainings.</td>
</tr>
<tr>
<td>Cardinal Nights</td>
<td>Cardinal Nights offers award-winning substance free social programming every Thursday, Friday, and Saturday night. In the past, events have featured famous comedians, musical artists, movies, and much more.</td>
</tr>
<tr>
<td>5-SURE</td>
<td>Our student-run safe rides program will get your child home safely any night of the week from 9pm-2am.</td>
</tr>
<tr>
<td>5-SURE on Foot</td>
<td>A student-run bystander intervention program. These students table on Friday and Saturday nights, handing out snacks, water, and safe walks home for those going to and from parties on campus.</td>
</tr>
<tr>
<td>Dean of Students</td>
<td>The Dean of Students office offers a variety of case management services to connect students to the best possible mental health and wellbeing resources across campus, and in the community.</td>
</tr>
<tr>
<td>Vaden Student Health Center</td>
<td>Vaden Health Center is home to clinical medical services, counseling and psychological services and an array of wellness programs under iThrive.</td>
</tr>
<tr>
<td>Counseling and Psychological Services</td>
<td>Offers brief treatment and counseling for students who may be struggling with mental health and/or acute stressors. Counseling and Psychological Services staffs clinical psychologists, psychiatrists, and clinical social workers.</td>
</tr>
<tr>
<td>Stanford University Department of Public Safety</td>
<td>Stanford works closely with it's department of public safety to ensure that all students on campus are safe and have access to emergency services when needed.</td>
</tr>
<tr>
<td>Residential Education</td>
<td>Providing a network of support to students in residence, Residential Education is often the first point of access for students to get help when needed.</td>
</tr>
<tr>
<td>Alcoholics Anonymous</td>
<td>Students who are interested in attending AA meetings can do so on campus every Sunday at 9a in the Nairobi Room in the Graduate Community Center.</td>
</tr>
</tbody>
</table>
For More Information

National Institute on Alcohol Abuse and Alcoholism
www.niaaa.nih.gov

NIAAA College Drinking Changing the Culture
www.collegedrinkingprevention.gov

National Council on Alcoholism and Drug Dependence
www.ncadd.org/index.php

Substance Abuse and Mental Health Services Administration
www.samhsa.gov

Alcoholics Anonymous
www.alcoholics-anonymous.org

Sources

This guide was written using the sources above, and draws heavily from an evidence-based "Parent Handbook" written by Rob Turrisi, PhD from the Prevention Research Center at Pennsylvania State University. All Stanford specific data or references to Stanford norms are unpublished and managed by Institutional Research.