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Executive summary

This resource is intended to support universities to address the place of alcohol in the university setting, including the risks and harms associated with the availability and use of alcohol.

The resource includes strategies and considerations for responding to alcohol in the university setting and an example alcohol policy for a hypothetical university. This has been generated in consultation with relevant experts by combining policy provisions from a cross section of Australian universities.

Alcohol use by university students and the associated harms provide cause for concern

Concerning drinking patterns have been identified among university students in Australia and a range of other countries. The first known prevalence study of drinking among Australian undergraduate university students aged 17 to 25 years was conducted in 2007 by Hallett and colleagues (7,237 students responded). Key findings include:

- 90% of students had consumed alcohol in the last 12 months;
- The average number of standard drinks consumed on a typical occasion was 5.1 for women and 8.7 for men;
- There was a high prevalence of hazardous drinking: half of men (51%) and over a third of women (36%) were drinking at hazardous levels (a score of ≥ 8 on the Alcohol Use Disorders Identification Test or AUDIT).2

Alcohol-related harm affects people other than the drinker. Hallett and colleagues’ study1 estimated the 4-week prevalence of secondhand effects of alcohol among undergraduate university students in 2007. Burns and colleagues conducted similar surveys in 20133 and 20144 and estimated the 12-month prevalence of secondhand effects. The most commonly reported secondhand effects were:

- Having to ‘baby-sit’ inebriated students (27% in 2007; 34% in 2013; 35% in 2014);
- Having studying or sleep interrupted (21% in 2007; 25% in 2013; 24% in 2014);
- Being insulted or humiliated (13% in 2007; 19% in 2013; 19% in 2014);
- Having a serious argument (13% in 2007; 13% in 2013; 15% in 2014); and
- Experiencing an unwanted sexual advance (11% in 2007; 14% in 2013; 13% in 2014).

Further studies on alcohol use among Australian university students supported the findings of the Hallett and colleagues’ and Burns and colleagues’ studies.5-7 In particular, the high prevalence of risky drinking among university students and harms experienced by university students from their own and others’ drinking are consistent with previous research.

International research suggests that university students have more concerning drinking patterns than their non-university peers.8-10 While further well-designed research on the drinking patterns of Australian university students is welcomed, there is sufficient information from Australia and other jurisdictions to demonstrate the need for action to reduce alcohol-related harm in this population.

What is the role of universities in responding to alcohol?

Universities have a number of important roles in the communities in which they operate, including as educational institutions, research centres and workplaces for many thousands of staff and students. These roles provide substantial scope for universities to be active participants in preventing and reducing harm from alcohol.

The Australian Human Rights Commission report, Change the course: National report on sexual assault and sexual harassment at Australian universities, identified alcohol as a contributing
factor to sexual assault and sexual harassment in university settings. The report discussed high levels of alcohol use at some university social events and residential colleges. Features of these settings included pressure to drink, a culture of excessive drinking, and ready availability of alcohol. The report provides further impetus to address the place of alcohol in the university setting.

A clear and comprehensive alcohol policy can assist the university to prevent harm from alcohol

Harm from alcohol is preventable and a substantial literature provides useful direction for approaches to addressing alcohol-related harms. A clear and comprehensive alcohol policy provides an important framework for approaches to prevent and reduce harm from alcohol within the university environment.

There is a strong and multifaceted rationale for universities to commit to a comprehensive alcohol policy. The most fundamental aspects of the rationale are (i) universities’ duty of care obligations under the relevant occupational health and safety legislation and (ii) the requirement that they comply with the spirit and letter of liquor licensing laws.

Alcohol policies should be tailored to specific university contexts

The process of developing a policy is an important factor in determining its success. Universities are diverse and require policies to be tailored to the specific context; no one strategy will be sufficient or necessary in all circumstances. A comprehensive response to alcohol will include consideration of:

- Relevant laws and regulations, including those related to occupational health and safety and liquor licensing;
- Restricting alcohol use in association with potentially risky activities;
- Identifying, reporting and managing alcohol-related fitness for work issues;
- Controls on the availability of alcohol;
- Controls on high-risk drinking practices;
- Encouraging alternatives to alcohol;
- Controls on the promotion of alcohol;
- Controls on the acceptance of funding from the alcohol industry and associated groups;
- Education and training;
- Access to support, counselling and treatment services;
- Resources and support for policy implementation; and
- Other strategies that address the particular needs, risks and circumstances of the university community.

Plan for an effective alcohol policy

The effectiveness of an alcohol policy can be strengthened through well-planned processes and approaches, including:

- A consultative policy development process that involves all key stakeholders;
- Ensuring the policy reflects the particular needs, risks and circumstances of the individual university;
- A comprehensive approach that addresses the range of issues and provides clear direction;
- Broad communication, dissemination and implementation of the policy;
- Consistent application throughout the university; and
- Ongoing monitoring, evaluation and review of the policy.
1. Introduction

Substantial levels of concern are present in the Australian community regarding harms from alcohol experienced by the individual drinker, the potential for harm to others and the broader impacts on society, such as the public cost of harms. Far from alcohol being an issue for only a relatively small number of severe problem drinkers, surveys consistently report substantial proportions of the population drinking at risky levels, at least occasionally. Drinking patterns are of particular concern among some population groups, and in some contexts, including among young people. While there are some encouraging trends in young people’s drinking, there is still cause for concern about young people who drink at risky levels, in risky contexts, and experience a range of harms from their own and others’ drinking. Surveys of university students’ alcohol use provide further evidence of the harms experienced by young people due to alcohol; this evidence is outlined in further detail below.

Much harm from alcohol is preventable and a substantial literature provides clear direction for approaches to addressing alcohol-related harms. A range of strategies is required within the broader community to address risks and harms associated with alcohol. For example, it is recognised that many students come to university with previous drinking experience and existing alcohol-related behaviours, and appropriate strategies are needed across the early years and adolescence. Health and other groups are actively working to ensure a comprehensive whole-of-community approach, within which universities play an important role.

Universities have a number of important roles in the communities in which they operate, including as educational institutions, research centres and workplaces for many thousands of staff and students. These roles provide substantial scope for universities to be active participants in preventing and reducing harm from alcohol. The Australian Human Rights Commission report, Change the course: National report on sexual assault and sexual harassment at Australian universities, reinforced the importance of universities providing a safe and supportive environment, and identified alcohol as a contributing factor to sexual assault and sexual harassment in university settings. The report adds to our understanding of concerns associated with alcohol in the university setting, and draws attention to experiences of being pressured to drink, a culture of excessive drinking, and ready availability of alcohol.

A clear and comprehensive alcohol policy provides an important framework for approaches to prevent and reduce harm from alcohol within the university environment. Among Australian universities, approaches to alcohol policies vary widely. Many universities already have some policies in this area. However, few examples of clear and comprehensive alcohol policies have been identified, and existing policies are often limited in focus or disjointed with relevant provisions scattered among different policies. There has been little action thus far to ensure consensus or commonality regarding approaches to preventing harm from alcohol within the university setting.

International approaches to alcohol on university and college campuses may help to inform approaches to Australian policy. Variation in minimum purchase age (e.g., US 21 years, Canada 19 years in some provinces) and cultural and other differences must be considered when drawing on international experience, and are likely to limit direct generalisation to Australian contexts; however, they provide useful guidance in the absence of substantial Australian-specific literature.

While the purpose of an alcohol policy is not to create alcohol-free campuses, there are useful lessons from experiences of smoke-free campus policies across Australian university campuses. Approaches to smoke-free campus policies in Australia may provide potential examples of the role of universities in implementing health promotion initiatives, the reach of universities to large populations of staff and students, and the importance of adopting a settings-based health promotion approach. Researchers have pointed to the importance of careful planning, awareness raising strategies, evaluation and enforcement of smoke-free campus policies, including the need to create a culture within the university of support for smoke-free policies.
A comprehensive approach to preventing and reducing harm from alcohol in the university environment requires universities to look ‘upstream’ at environmental factors, such as how alcohol is supplied and promoted, as well as ‘downstream’ at educational approaches and appropriate individual-level supports for those who experience problems. The strength of a comprehensive approach is in how these measures work together; there is no silver bullet.18, 23

Universities are not all alike. The locations of university campuses vary (e.g., jurisdiction, urban or regional, main or satellite campus, proximity to other amenities), as do populations (e.g., varying proportions of students entering university directly from Year 12, mature age entry or international students; students living on campus or commuting from surrounding areas) and areas of specialisation. Universities are part of the communities that surround them; they are not isolated or separate from the broader community, and what happens in the broader community can influence what happens in universities. The diverse nature of university communities requires that policies be tailored to the specific context – no single policy will fit all.

This resource is intended to support Australian universities to develop or strengthen their alcohol policies and to encourage and inform discussion on the appropriateness and place of alcohol within the university environment. The resource includes:

- Strategies and considerations for responding to alcohol in the university setting;
- A summary of expert guidelines and strategies for preventing harm from alcohol;
- A summary of research on alcohol use by university students;
- Key features of the rationale for universities to develop and implement a comprehensive alcohol policy;
- An illustrative alcohol policy for a hypothetical university;
- Considerations for developing an alcohol policy which is tailored for the local context;
- Summaries of relevant resources; and
- Selected example provisions from existing university policies.

The evidence used to inform this resource comes from within and outside the university setting in Australia and other countries. We encourage sharing and learning from positive initiatives, including building the evidence base within the Australian university context. We therefore encourage the development of a research agenda to inform and enhance universities’ responses to alcohol. There is substantial scope for Australian universities to act on the basis of the best available evidence – as reflected in this resource – and to contribute to the development of the evidence base through well-designed evaluation and communication of approaches to prevent and reduce harm from alcohol in the university setting.
2. Alcohol and health: expert guidelines and strategies

A substantial literature of authoritative reports, reviews and guidelines provides the context for developing effective approaches to addressing alcohol-related harms. A selection of the most relevant resources is outlined below.

**Australian Guidelines to Reduce Health Risks from Drinking Alcohol**

Australia's scientific guidelines for low-risk alcohol use produced by the National Health and Medical Research Council can assist individuals to make informed and reasonable decisions about using alcohol, and provide a sound evidence base for the development of appropriate educational materials to support an alcohol policy in the university setting.

**Guideline 1:**
Reducing the risk of alcohol-related harm over a lifetime. For healthy men and women aged 18 years or over, drinking no more than two standard drinks on any day reduces the lifetime risk of harm from alcohol-related disease or injury.

**Guideline 2:**
Reducing the risk of injury on a single occasion of drinking. For healthy men and women aged 18 years or over, drinking no more than four standard drinks on a single occasion reduces the risk of alcohol-related injury arising from that occasion.

**Guideline 3:**
For children and young people under 18 years of age, not drinking alcohol is the safest option.

**Guideline 4:**
For women who are pregnant, planning a pregnancy or breastfeeding, not drinking alcohol is the safest option.

**National Preventative Health Strategy - the Roadmap for Action**

The National Preventative Health Taskforce recommended a comprehensive approach to preventing harm from alcohol. Emphasising that there are no ‘magic bullets’, the Taskforce noted, “there is an increasingly solid base of evidence upon which policy decisions can be made...it is clear which of the various policies and programs hold the most promise of being effective, and those which offer the least”.

While the *Roadmap for Action* provided a whole-of-community strategy for preventing harm from alcohol, with a particular focus on effective approaches governments can take, a number of the themes and recommendations within the strategy have relevance to the university setting. The *Roadmap for Action* made particular reference to universities as an important setting for addressing alcohol issues:

“Settings where there are concentrations of young people in early adulthood, such as TAFEs and universities, provide a valuable opportunity for increasing awareness and promoting safer and healthier attitudes and behaviours in relation to alcohol.” (p246)

The themes and recommendations of the *Roadmap for Action* that are particularly relevant to the university setting are summarised below:

- Implement best practice approaches to the enforcement of liquor control laws, including outlet opening times and responsible serving of alcohol (Action 1.1).
- Provide security staff with information and training about approaches to complying and enforcing liquor licensing laws and managing public safety (Action 1.4).
- Ensure local communities can manage existing and proposed alcohol outlets. For example, determine appropriate conditions for licences such as operating hours (Action 1.5).
- Implement a comprehensive and sustained social marketing and public education strategy at levels likely to have significant impact. Build on existing high-quality campaigns to raise awareness and understanding of the National Health and Medical Research Council alcohol guidelines, de-normalise intoxication and raise awareness of...
the harmful consequences of excessive alcohol use (Action 2.1).

- Ensure social marketing campaigns complement and support alcohol policies and programs (Action 2.2).

- Introduce basic strategies in the workplace to prevent and reduce alcohol-related harm, including offering regular basic health checks for employees, developing evidence-informed workplace policies, and employee assistance programs (Action 2.3).

- In a staged approach, phase out alcohol promotions from times and placements which have high exposure to young people aged up to 25 years (Action 3.1).

- Enhance the role of primary healthcare organisations in preventing and responding to alcohol-related health problems (Action 6.1).

- Develop a more comprehensive network of alcohol-related referral services and programs to support behaviour change in primary healthcare (Action 6.2).

**National Drug Strategy 2017–2026**

The National Drug Strategy provides a framework for action on alcohol, tobacco and other drugs, and has an overarching approach of harm minimisation encompassing the three pillars of demand reduction, supply reduction and harm reduction. Prevention is an integral theme across the pillars. The National Drug Strategy recognises that creating safer settings can reduce harm from alcohol, tobacco and other drug use, and identifies young people as a priority group.

**Reducing alcohol-related harm in the workplace: an evidence review**

The National Drug Research Institute was commissioned by VicHealth in 2012 to review the national and international published and ‘grey’ literature to identify and describe evidence that informs the development of best practice interventions in the workplace that can prevent and reduce alcohol-related harm within and outside the workplace. The review identified that individual, community and workplace factors increase and decrease the risk of alcohol-related harm in the workplace, and that responses to reduce harm need to be tailored and multifaceted. The review emphasised that effective interventions are not about identifying a few alcohol dependent individuals, but that an effective approach will address the broad range of risks across the whole workforce.

The summary report considers the three pillars of the National Drug Strategy in the context of the workplace:

“The Australian National Drug Strategy involves a comprehensive focus on supply reduction or control, demand reduction and harm reduction strategies. In the workplace this might involve, for example, banning or instigating strong controls on the availability of alcohol (supply control), health promotion strategies and reduction of workplace risk factors (demand reduction) and strategies to ensure employees are not adversely affected by another’s alcohol use, or ensuring staff who attend a workplace function, where alcohol is available, get home safely (harm reduction).” (p7)

The review summarised the key features of best practice workplace interventions:

- Recognise the complexity of the issue. There is no single reason for risky alcohol use, no single alcohol problem and no single effective response;

- Be evidence-informed. Use research to guide and inform interventions;

- Be multifaceted with strategies that address the individual staff and organisational factors. Organisational strategies include physical and social factors affecting access to alcohol, organisational culture, structures and controls, the workplace environment and working conditions;
• Prioritise high risk occupations and workplaces. For example, workplaces where alcohol is readily available;

• Develop clear goals through consultation. A critical element of developing interventions is the involvement of key stakeholders in negotiating and agreeing upon goals;

• Engage all staff. Interventions are likely to have a more enduring impact if the development process is consultative and engages all staff;

• Assess the risk. Treat alcohol like any other safety and health issue. Carefully diagnose the risk and design a specific response. Risk assessments should include a review of how alcohol is made available, if at all, at work; and

• Tailor the intervention to the individual workplace and culture. Different strategies are required to respond to different workplaces and their individual characteristics.

These expert guidelines and strategies provide important context and guidance for approaches to address alcohol-related harm in the university setting, and their key features are reflected in the content of this resource.
3. Summary of research on alcohol use by young people

The National Drug Strategy Household Survey 2016 reports on the drinking patterns of the Australian general population, including the age groups most likely to make up university student populations:

- Levels of risky drinking among young people have declined since the previous survey, however;
- Adults aged 18–24 years were more likely to drink at harmful levels on a single occasion than the rest of the adult population (42% of 18-24 year olds drank at levels that put them at risk of injury on a single occasion at least monthly);
- Over 18% of 18-29 year olds drank alcohol in a way that put them at risk of alcohol-related harm over a lifetime;
- People in their late teens and 20s were more likely to consume 11 or more standard drinks than people in other age groups with about 3 in 10 18-29 year olds reporting they had done so at least once a year;
- Males were more likely to drink at harmful levels than females.

Hallett and colleagues conducted the first known prevalence study of student drinking in Australia with undergraduate students in 2007. The online survey of students aged 17-25 years at an Australian university (7,237 students responded; 56% response rate) found the overwhelming majority of students (90%) had consumed alcohol in the last 12 months. Key findings included:

- The number of standard drinks consumed on a typical occasion was, on average, 5.1 for women and 8.7 for men;
- There was a high prevalence of hazardous drinking among the students; half of men (50.6%) and over a third of women (35.7%) were drinking at hazardous levels (AUDIT score ≥ 8);
- A greater proportion of 17-19 year old students (44.5%) scored 8 or higher on the AUDIT than 20-25 year old students (39.1%);
- Residents of Australia and New Zealand were more likely to score 8 or higher on the AUDIT than non-residents (i.e., international students).

Similar surveys by Burns and colleagues of 2,465 students at an Australian university in 2013 and 2,422 students in 2014 found rates of hazardous drinking to be comparable to the Hallett et al. survey. Burns and colleagues found that in 2013, 39.7% of all students (46.9% of males and 35.2% of females) reported drinking at hazardous levels and in 2014, 38.0% of all students (42.5% of males and 35.0% of females) reported hazardous drinking. Burns and colleagues also found that most (85.2%) hazardous drinkers reported pre-loading (i.e., consuming alcohol before an event or social activity) at least once during the last four weeks; 55.8% reported drinking five or more standard drinks during their last pre-loading session.

The potential for alcohol-related harm to affect people other than the drinker has received

3.1 Australian research on alcohol use by university students

There have been no large, multi-institution, population-based studies of tertiary student drinking patterns in Australia, as there have been in other countries. Trends are difficult to determine from the available Australian research: recent studies have concentrated on a small number of locations; studies have generally relied on convenience samples; different measures of ‘risky drinking’ have been used; and some studies are not comparable. However, the existing body of research is informative and provides the best available estimates for Australia.
increased recognition in alcohol research and policy development in recent years. Hallett and colleagues’ study estimated the 4-week prevalence of secondhand effects of alcohol among undergraduate university students in 2007. Burns and colleagues (2015) and (2016) used comparable methods to survey 18-24 year olds studying at a large Australian university (2,465 students in 2013 and 2,422 students in 2014), and supported the findings of the Hallett and colleagues’ study. The most commonly reported secondhand effects were:

- Having to ‘baby-sit’ inebriated students (27.2% in 2007; 34.3% in 2013; 34.9% in 2014);
- Having studying or sleep interrupted (20.9% in 2007; 25.4% in 2013; 23.9% in 2014);
- Being insulted or humiliated (12.9% in 2007; 18.8% in 2013; 18.6% in 2014);
- Having a serious argument (12.5% in 2007; 13.3% in 2013; 15.0% in 2014); and
- Experiencing an unwanted sexual advance (10.9% in 2007; 14.0% in 2013; 12.7% in 2014).

In another study, Hallett and colleagues (2013) estimated the prevalence of alcohol-related problems among undergraduate hazardous drinkers. Participants were a subsample of the Hallett and colleagues’ study described above; full-time undergraduate students at an Australian university who were control group members of an internet-based intervention trial who scored ≥8 on the AUDIT (942 students; mean age 19.4 years). Burns and colleagues (2015) and (2016) also surveyed hazardous drinkers (who scored ≥8 on the AUDIT; 811 students in 2013 and 717 students in 2014) about academic problems experienced as a result of drinking in the previous 12 months in 2013 and 2014. Academic problems reported by hazardous drinkers as a result of drinking in the preceding 4 weeks in 2007 and previous 12 months in 2013 and 2014 included:

- Their drinking had impacted negatively on their learning or grades (45% in 2007; not asked in 2013 and 2014);
- Missed a class (25.6% in 2007; 38.9% in 2013; 42.6% in 2014);
- Had been unable to concentrate in class (25.7% in 2007; 42.8% in 2013; 45.6% in 2014); and
- Failed to complete an assignment on time (10.4% in 2007; 12.0% in 2013; 14.8% in 2014).

Personal problems reported by hazardous drinkers as a result of drinking in the preceding 4 weeks in 2007 and previous 12 months in 2013 and 2014 included:

- Hangover (74.8% in 2007; 91.5% in 2013; 92.3% in 2014);
- Blackouts (44.8% in 2007; 71.7% in 2013; 77.2% in 2014);
- Emotional outbursts (30.5% in 2007; 57.3% in 2013; 59.6% in 2014);
- Vomiting (28.1% in 2007; 73.3% in 2013; 76.3% in 2014);
- Drink-driving (23.2% in 2007; 28.7% in 2013; 32.0% in 2014) or being a passenger of a drink-driver (22.7% in 2007; 39.6% in 2013; 42.2% in 2014);
- Arguments (20.2% in 2007; 39.5% in 2013; 43.4% in 2014);
- Had a regretted sexual encounter (11.1% in 2007; 29.7% in 2013; 33.5% in 2014);
- Physically aggressive (9.3% in 2007; 20.3% in 2013; 21.0% in 2014); and
- Had unsafe sex (9.7% in 2007; 34.5% in 2013; 35.4% in 2014).

These studies suggest that students with heavier drinking patterns are more likely to experience harms. Hallett and colleagues (2013) found that among hazardous drinkers, more frequent and greater alcohol consumption increased the likelihood of harm. Other studies found that
hazardous drinkers (scored \( \geq 8 \) on the AUDIT) were more likely to experience secondhand and personal harms compared to low-risk drinkers, including criminal and aggressive behaviour, health and emotional harm, and sexual harm.

A number of other studies within Australian universities have identified similarly concerning drinking patterns and harms experienced by university students due to their own and others’ drinking.\(^5\), \(^7\), \(^42\)-\(^46\)

Said et al. (2013)\(^5\) conducted a web-based mental health survey of 6,206 students from a large Australian university, which included questions on alcohol use. The survey found that 33% of the sample scored \( \geq 8 \) on the AUDIT, indicating hazardous drinking. Among the sample of university students, odds of harmful drinking were significantly higher among 17-24 year old students, students born in Australia and New Zealand, students who spent more than 20 hours per week in paid employment, men, and students who identified as bisexual.

Rickwood et al. (2011)\(^42\) conducted an online survey of 603 students aged 18-24 years at an Australian university; 46.6% reported drinking at harmful/hazardous levels (\( \geq 8 \) on the AUDIT). Harms experienced as a result of one’s own alcohol use included vomiting (47.6%), embarrassment (33.5%), memory loss (24.6%), missing a class (25.6%), financial problems (20.7%), driving a car after drinking too much (17.2%), sexual encounter that was later regretted (16.5%), being injured (13.0%), and poor academic performance (11.5%). Alcohol-related harms witnessed in relation to others’ alcohol use included someone driving after drinking too much (55.4%), verbal abuse (51.7%), physical violence (34.1%), someone losing consciousness (37.1%), and damage to property on campus (24.4%).

Mikhailovich et al. (2011)\(^7\) explored the experiences of 18-29 year old drinkers and non-drinkers at an Australian university (826 students). Both drinkers and non-drinkers revealed witnessing a range of alcohol-related harms since being a student at the university. Non-drinking students had directly observed and experienced problems associated with alcohol, including property damage and broken glass on campus, verbal abuse and intimidation of international students, driving after drinking alcohol, and disturbances to sleep on campus residences. The most commonly witnessed harms reported by drinkers included vomiting (70.2%), driving after having too much alcohol (57.3%), verbal abuse (52.4%), and threats of physical violence (44.9%).

A study by Polizzotto et al. (2007)\(^43\) assessed participation in drinking games and the associated alcohol use among students aged 18 to 25 years at an Australian university via interviews (27 students) and questionnaire responses (256 students). Participation in drinking games was common and motivators included boredom, social pressure, and social unease. Awareness of the risks of drinking games did not appear to affect the decision to participate in a game. Key findings from the questionnaire included:

- Three-quarters (74%) of students reported having participated in a drinking game;
- The majority (60%) of game participants reported being pressured to participate in the drinking games;
- Half (51%) of the participants reported an adverse outcome following participation; and
- Loss of consciousness due to drinking was experienced or witnessed by 89% of game players.

Reavley et al. (2011)\(^44\) conducted computer-assisted telephone interviews with 422 staff members and 774 students at an Australian university to investigate patterns of alcohol use. Staff were more likely to drink regularly, with 70% drinking twice per month or more compared to 48% of students, but students were more likely to drink heavily, with 33% drinking 6 or more drinks in one session at least monthly, compared to 21% of staff.
3.2 International research on alcohol use by university students

Harmful drinking patterns have been identified among university students in a range of other countries including New Zealand,17, 18, 47 the United States,48 Canada,39 the United Kingdom,49, 50 Belgium,51 Ireland,52, 53 Spain,54 South Africa,55 Egypt,56 Israel57 and Nigeria.58 International research suggests that university students may have more concerning drinking patterns than their non-university peers.8-10, 59

For brevity, this section will focus on the most relevant research from New Zealand. A study by Kypri and colleagues (2005)8 compared scores on the AUDIT of 17-24 year old students at a New Zealand university (1,424 students responded; 82% response rate) with those of the same age group in the general population in New Zealand (via the 2002/3 New Zealand Health Survey; 1,406 people responded; 72% response rate). The university students’ AUDIT scores were, on average, 50-60% higher than those of their peers. The prevalence of hazardous drinking (AUDIT score ≥ 8) was almost twice as high among the university students (65% vs 36%) and harmful drinking (AUDIT score ≥ 15) was three times as prevalent (31% vs 9%).

A number of other studies have identified that alcohol use among New Zealand university students is common and heavy.17, 60 Connor and colleagues (2014) undertook an online survey of full-time students aged 17-25 years at five New Zealand universities (2,812 students responded; 49% response rate).51 The aim of the study was to identify situational and contextual factors associated with common and serious alcohol-related adverse events among university students in New Zealand. Key findings included:

- Alcohol consumption was common and heavy among participating students; 84.3% of men and 86.9% of women reported drinking in the last 12 months; 52.9% of men and 58.9% of women reported heavy drinking in a typical 4-week period (defined as ≥ 4 drinks on one occasion for women and ≥ 6 drinks on one occasion for men).
- The defined adverse events included unsafe sex, unintentional injury, physical assault, sexual assault, and unsafe driving/riding. For the 4 weeks preceding the survey, 10.3% of women and 15.0% of men reported at least one of the defined adverse events while they were drinking or soon after.
- The number of drinks consumed, the number of drinking locations, drinking later into the night or the next morning, and ending up drunker than expected were associated with higher risk of adverse events.
- The authors concluded that strategies to reduce the duration and volume of alcohol consumption, including earlier closing of licensed premises, should be considered as countermeasures for alcohol-related adverse events.

Summary

The research described above provides evidence that:

- The majority of university students consume alcohol;
- There is a high prevalence of hazardous drinking among university students;
- University students may have more concerning drinking patterns than their non-university peers;
- University students experience a range of academic and personal problems as a result of their own drinking; and
- University students experience a range of problems as a result of the drinking of other students.

While further well-designed research on the drinking patterns of Australian university students is welcomed, there is already sufficient information from Australia and other jurisdictions to provide a strong rationale for action to reduce alcohol-related harm in this population.
4. Rationale for a comprehensive alcohol policy within universities

There is a strong and multifaceted rationale for universities to commit to a comprehensive alcohol policy. The most fundamental aspects of the rationale are universities’ duty of care obligations under the relevant Occupational Health and Safety legislation and their requirements to comply with the spirit and letter of liquor licensing laws. Other key aspects of the rationale are outlined below, with regard to individual and organisational outcomes.

4.1 Significance for individuals

1. University populations often comprise a substantial proportion of young people. There is genuine cause for concern regarding alcohol and young people as:
   a. The age at which most people attend university coincides with the age of those most likely to drink at risky levels.\textsuperscript{14, 61}
   b. Young people experience a range of short- and long-term harms related to alcohol use and may be more likely to experience some types of harm than older populations.\textsuperscript{14, 62}
   c. There is now growing evidence regarding the impact of alcohol on the developing brain. The young brain continues to develop into the early to mid-20s; risky drinking may cause irreparable damage to the developing brain leading to problems with memory, planning and organisation, impulse control, and mood regulation.\textsuperscript{63}
   d. Drinking from an earlier age can increase the risk of developing alcohol-related problems in adulthood.\textsuperscript{64}

2. Features of university populations may make them more vulnerable to harms from alcohol use. For example:
   a. University populations may include a substantial number of 17 year olds who are not yet of legal alcohol purchase age, as well as a large number of 18 and 19 year olds who are only recently of legal alcohol purchase age and who may be unfamiliar with drinking environments.
   b. Entering university may be students’ first time away from home. They may be exposed to new influences and have more freedom and independence than they have ever had before.
   c. University-affiliated residences may be new homes for many young people and students should be supported to adapt to their new lifestyle and responsibilities safely.\textsuperscript{78, 79}
   d. International students may have diverse cultural backgrounds and may not be familiar with alcohol or environments where alcohol is as available or generally accepted as it is in Australia. International students may also be unfamiliar with how to minimise the risks associated with their own drinking or may be exposed to excessive drinking by others within the university environment. The impact of alcohol on the university experience of international students should be considered.\textsuperscript{7}
   e. University life can place particular demands on students. Some students may use alcohol as a stress management or coping mechanism, despite alcohol often having counterproductive effects when used for this purpose.

3. There is evidence to suggest that university student populations may drink at riskier levels than other populations of young people.\textsuperscript{8} A wide range of alcohol-related harms to the drinker and others has been identified within university populations.
   a. Alcohol-related harms to the drinker can have serious implications for university students’ health and wellbeing. The range of alcohol-related harms experienced by university students may include academic impairment, blackouts, injury, unintended sexual activity, interpersonal and sexual violence, relationship problems, psychological distress, and suicide.\textsuperscript{1, 16, 38}
   b. A wide range of secondhand effects of alcohol – that is, harms caused by other people’s drinking – has been identified among university students. Examples include physical assault, unwanted sexual advances, having study or sleep interrupted, and property damage.\textsuperscript{1, 3, 4, 7}

4. University staff and students who experience alcohol-related problems should be well supported to access appropriate assistance.
4.2 Significance for organisations

1. A comprehensive alcohol policy can contribute substantially to approaches to managing a university’s legal and reputational risks.21
   a. Universities are workplaces for a substantial number of staff; there is therefore a range of legal requirements of a university, including in regard to occupational health and safety.
   b. Taverns and other licensed premises are present within some university campuses, which makes alcohol specifically available to university populations. Particular risks and responsibilities are associated with licensed premises on university campuses.
   c. The responsible management of alcohol is consistent with the principles of good governance in a university setting.
   d. Responding to alcohol-related harms can incur substantial costs to the university. Costs may include addressing reputational damage, student attrition, property damage, and litter.1

2. Universities have a range of roles in regard to their staff and students, and in the communities in which they are based, for example:
   a. Roles related to duty-of-care and pastoral care.7 Alcohol presents a number of duty-of-care concerns for universities, including in regard to drink-driving where alcohol is available on campus.16 The absence of a clear and consistent alcohol policy may lead to dealing with alcohol-related problems by inaction or arbitrary and inappropriate action.65
   b. Universities generally seek to be good corporate citizens. There is a community expectation that universities have a role in addressing the challenges facing society, including those of public health. Alcohol-related harm is increasingly recognised as a priority health and social challenge in Australia, and it is incumbent upon universities to contribute to broader activity to prevent harms from alcohol.

3. A comprehensive alcohol policy is the foundation for approaches to preventing alcohol-related harm in the university environment.
   a. Universities have a reasonable degree of control over a number of important factors that influence drinking patterns within the university community, including environmental factors such as the availability and promotion of alcohol on or around campus.4
   b. Alcohol has been described by leading experts as “no ordinary commodity”.66 Alcohol is a legal product in Australia; however, its potential for harm requires that it be treated differently to other legal products. Universities should be mindful of how alcohol is made available and promoted in the university environment so that this environment does not inadvertently normalise alcohol use.
   c. Alcohol use that occurs outside normal work hours and outside the workplace can have adverse impacts on the workplace. Workplace productivity or safety may be affected by hangover effects, poor decision-making, absenteeism, or chronic illness.19

4. The effective management of alcohol in the university setting can contribute to a supportive working and educational environment.
   a. For example, improving the health and wellbeing of employees, preventing and reducing injuries, preventing future alcohol-related problems, enhancing productivity, and reducing absenteeism and staff turnover.19 The effective management of alcohol is also likely to link with efforts to promote mental health and sexual health in the university community.
   b. University populations comprise individuals from diverse cultural backgrounds and religious affiliations. If not handled appropriately, alcohol may present challenges for universities that seek to provide an inclusive and supportive environment for staff and students, including those who choose not to consume alcohol.
c. A genuine commitment to a comprehensive alcohol policy may contribute to a university’s recruitment and retention strategies for students and staff. Prospective students and their parents, as well as prospective staff, are likely to value a university’s concern for their safety and wellbeing.67

d. Creating an environment conducive to learning and high productivity is essential in order for a university – an institution of learning and research – to achieve its core business objectives. The absence of a clear and consistent alcohol policy may lead to undermining of the educational environment.68 Alcohol-related harms are inconsistent with a university’s pursuit of excellence.
的发展，一个清晰而全面的政策文件是鼓励的，而不是在各种政策文件中分散与会相关的规定。一个全面的政策文件将支持大学在沟通明确的政策立场方面，并将使大学社区的成员更容易找到并使用政策。

在大学的背景下，术语“工作场所”是指雇员的场所和学生的工作地点。因此，这一术语包括教职员工和学生。

有效的职场酒精政策有以下特征：

1. 咨询性政策制定过程，涉及所有关键利益相关者。
2. 政策是为组织量身定制的，以反映特定的需要、风险和环境的实际情况。
3. 全面的方法，解决了一系列问题和响应，提供了清晰的方向或规定：
   - 政策的目标和目的
   - 政策的范围
   - 适用相关法律和法规的义务
   - 关键利益相关者的角色和责任
   - 工作场所酒精的条件，包括现场许可场所
   - 人们期望的行为
   - 与酒精有关的个人缺乏工作能力的事件
   - 事件的记录和报告
   - 违反政策的构成及其相关纪律处分
   - 教育和健康促进计划
   - 治疗和支持服务，转介机制和保密问题。
4. 周密和广泛的沟通、传播和实施。
5. 在工作场所的各个层面上应用。
6. 持续的监测、评估和审查政策。

5. 有效的职场酒精政策的特征
6. Strategies and considerations for responding to alcohol in the university setting

The following represents a broad range of strategies that may be useful for universities to consider when developing a comprehensive response to alcohol. No one strategy will be sufficient or necessary in all circumstances; therefore, a range of strategies is presented and universities are encouraged to select and tailor relevant strategies to the setting.

**Relevant laws and regulations**
- Approaches by the university must be consistent with all relevant laws and regulations, including obligations under Occupational Health and Safety legislation and liquor licensing laws.

**Restrict alcohol use in association with potentially risky activities** (see example policy provisions on page 37)
- Consider any specific work/study settings where alcohol use may not be permitted; for example, settings that involve operating machinery or vehicles.

**Identifying, reporting and managing alcohol-related fitness for work issues** (see example policy provisions on page 38)
Consider:

- Appropriate procedures for identifying, responding to, and managing individuals affected by alcohol or who are otherwise unfit for work for alcohol-related reasons. Considerations may include duty of care, privacy and confidentiality, referral to services, recording incidents, appropriate disciplinary processes, and leave arrangements.

- The roles and responsibilities of members of the university community in regard to alcohol-related fitness for work issues.

- Alcohol testing procedures where appropriate, and how positive results and follow up action will be managed.

**Encourage alternatives to alcohol** (see example policy provisions on page 41)
Consider:

- Price incentives for non-alcoholic or lower alcohol beverages to ensure they are the cheapest available drink options.

- Encouraging the availability of good-quality, appealing and affordable food options where alcohol is available.

- Approaches to encouraging events and forms of entertainment and socialisation that do not include alcohol. This may be via the provision of appropriate spaces and venues, incentives for alcohol-free events, or the requirement for a proportion of events to be alcohol-free.

- Controls on the provision of alcohol as gifts or prizes.

**Controls on the availability of alcohol** (see example policy provisions on page 39)
Consider:

- The appropriateness of having licensed premises on a university campus.

- Universities may place conditions on licensed premises located on their grounds, over and above any conditions set by the liquor licensing authority (noting that additional conditions must not conflict with liquor licensing laws). For example, conditions may be placed on factors including but not limited to trading hours, the type and content of alcohol promotions, the product range and mix (including, for example, the availability of energy drinks and shots), and the supply and relative price of non-alcoholic beverages and food.

- Approaches to limiting the discounting of alcoholic beverages, including ‘happy hours’ and other promotions which may encourage the rapid consumption of alcohol.

- Appropriate planning processes for university functions and events involving alcohol to
minimise associated risks, including risk assessment and approvals processes. Considerations may include security arrangements and transport options for after the event.

- Developing guidelines to determine whether alcohol is appropriate at a particular function or event. Factors to consider may include the type of function, who will be invited, and cultural inclusiveness.
- The university may choose to place conditions on the availability of alcohol at functions and events. For example, the university may require food and non-alcoholic beverages to be provided free of charge but a fee to be charged for alcohol (where this is consistent with liquor licensing laws).
- Appropriate controls on the availability of alcohol in university residential areas. For example, specifying areas within university residences where alcohol use is or is not permitted.
- Developing approaches to monitoring the availability of alcohol in the locality surrounding the university. For example, monitoring liquor licence applications, participating in liquor licensing processes, and monitoring the operation of licensed premises near university grounds (e.g., promotions targeting students, anti-social behaviour).

Controls on high-risk drinking practices (see example policy provisions on page 40)
Consider:
- Restrictions on drinking practices that may encourage the rapid or excessive consumption of alcohol. For example, shots, drinking games, or drinking apparatus such as funnels.
- Options for preventing energy drinks from being consumed with alcohol.

Controls on the promotion of alcohol (see example policy provisions on page 43)
Consider:
- Appropriate restrictions on alcohol advertising and promotion on university grounds and in university communications (e.g., print materials, websites, social media accounts, email systems and at orientation and other events).
- Appropriate restrictions on the content of advertising materials for university functions and events involving alcohol (e.g., controls on references to the availability of alcohol, the price of alcohol and alcohol brands).

Controls on the acceptance of funding or sponsorship from the alcohol industry and associated groups (see example policy provisions on page 44)
Consider:
- The appropriateness of accepting funds from groups within or closely associated with the alcohol industry for research, sport, clubs, or other purposes.
- Restrictions on the acceptance of financial or in-kind contributions from groups within or closely associated with the alcohol industry.
- Monitoring and limiting the use of university club funds provided by the university on alcohol for club members.
- Recognising that it may take time to find alternative sources of funding, universities may consider establishing a reasonable timeline to phase out the acceptance of funds from groups within or closely associated with the alcohol industry.
- Approaches to identifying appropriate alternative sources of funding.
- Approaches to handling alcohol industry funding within conflict of interest policies and procedures.
Education and training (see example policy provisions on page 45)
Consider:

• Approaches to communicating the rationale for a comprehensive alcohol policy, including appropriate education strategies to communicate the risks of harm related to alcohol, based on the best available evidence and expert advice. The National Health and Medical Research Council Guidelines to Reduce Health Risks from Drinking Alcohol[^34] is a useful resource to inform health promotion and alcohol education approaches within the university.

• Health promotion programs implemented by universities should be cognisant of and consistent with best practice and relevant state and national alcohol campaigns. For example, the Alcohol.Think Again campaign[^72] in Western Australia.

• Implementing evidence-based alcohol harm minimisation programs appropriate to their settings and audience.

• Appropriate training opportunities for members of the university community to develop competencies in relevant areas (e.g., roles and responsibilities regarding policy implementation, conducting brief alcohol interventions, and Responsible Service of Alcohol training).

Access to support, counselling and treatment services (see example policy provisions on page 45)
Consider:

• The appropriate range of treatment and support services accessible to members of the university community. For example, screening and brief intervention programs, employee assistance program, university health service, student welfare officers, and community alcohol treatment services.

• Approaches to informing members of the university community about the available treatment and support services.

• Effective referral pathways and case management strategies.

Resourcing and support for implementation (see example policy provisions on page 46)
Consider:

• The roles and responsibilities of members of the university community in implementing policies and strategies.

• Communication strategies to ensure broad awareness of policies and strategies among the university community.

• The availability of resources and support for implementation, ongoing monitoring, and evaluation of the selected strategies.
7. Developing a policy for the local context

The process of developing a policy is an important factor in determining its success. Universities are diverse and will require policies to be tailored to the specific context. Below we have outlined a range of questions that might be considered when developing or strengthening the alcohol policy of a university. The questions are organised under the key phases of the process for developing a Fitness for Work Alcohol Policy from the resource developed by the WA Government Mental Health Commission (previously the Drug and Alcohol Office) and Department of Health.69

**Design Phase**

1. Understand and identify the rationale for responding to alcohol-related harm in the workplace.

2. Identify the policy type and establish supportive structures e.g. steering committee or working group.

   - How is alcohol addressed in the university’s existing policies? It may be useful to conduct a review or audit of the alcohol content of existing policies and processes against the strategies outlined above.
   - How is alcohol made available or promoted within the university and the surrounding community? It may be appropriate to conduct an audit of alcohol availability and promotion within the university environment.
   - If the university has an existing alcohol policy, when is the next review scheduled? It may be appropriate to start preparing for the scheduled review period in the context of the process for reviewing policies at the university.
   - If a new policy is required, are there formal processes for developing a new policy which must be followed?

   • Is the climate of the university likely to be receptive to change regarding alcohol? What steps may assist in preparing the university community for change?

   • Is there potential for leadership within the University Executive or senior staff to address alcohol-related harm?

   • Which individuals and groups within the university community should be involved in reviewing or developing the alcohol policy?

   • Are there particular areas of expertise within the university that may be useful to draw upon?

   • What information is required to inform the process of strengthening or developing an alcohol policy that is appropriate for the university community? Is this information already available or is there a need to collect additional information?

   • If additional information is required, what resources are available within the university community to source the additional information? For example, surveys or interviews of members of the university community may be planned and undertaken by students under the guidance of university staff with relevant research expertise.

   • What opportunities are available to educate the policymakers on the importance of a comprehensive alcohol policy and its components?

   • Are there potential ‘champions’ within the university community who may be influential in communicating the need for a comprehensive alcohol policy or building support for an effective policy? Champions could come from anywhere within the university community, for example, student health services or campus security. How could these champions be engaged and supported to assist in strengthening the alcohol policy?

   • “What’s in it for me?” It may be useful to consider which aspects of the rationale for a comprehensive alcohol policy are most...
relevant to particular sections of the university community. Those aspects can be highlighted in communications with that group.

**Implementation Phase**


5. Removal or reduction of workplace risk factors.

6. Awareness raising.

7. Workplace education and training.

   • What communication channels are available to inform the university community about the issue being addressed (i.e., alcohol-related harm), the rationale for addressing alcohol-related harm, and the evidence-base for the proposed approaches to addressing the issue?

   • What opportunities are there for feedback from members of the university community on the policy being reviewed or developed? How will they be informed of the opportunity to provide feedback?

   • Are there key policy areas that may be seen as more difficult to implement? Omitting key areas of the policy is likely to result in a substantially weaker approach which will be less effective in preventing alcohol-related harm in the university community. Additional planning may be required to build support for these areas.

   • Are there any potential unintended consequences of the proposed policy approaches? If so, how could these be monitored or avoided?

   • What funding sources are available to support areas which may require additional resourcing? For example, support services, education programs, and policy evaluation. Funding limitations should not preclude progress towards a strengthened alcohol policy. Where additional funding is required but not currently available, it may be useful to focus on those aspects which do not require additional funding.

**Management and Evaluation Phase**

8. Process and methodology for monitoring, reviewing and evaluating the policy.

   • How will the policy be evaluated? Is there relevant expertise and capacity within the university to plan and undertake a comprehensive evaluation? For example, the evaluation may be planned and undertaken by students under the guidance of university staff with relevant research expertise.

   • When will the policy next be formally reviewed?

The questions noted here were informed by a broad literature. Additional information is available in Appendix A, *Lessons on the development and implementation of university alcohol policies.*
8. An illustrative university alcohol policy

An example alcohol policy for a hypothetical university is provided below as a guide to what a comprehensive university alcohol policy may look like. This example policy was generated by combining provisions from policies from Australian universities and, where necessary, drafting additional provisions to address the components of section 6, Strategies and considerations for responding to alcohol in the university setting.

Many of these policy areas are already in place in existing alcohol policies of Australian universities; however, no single university addresses all the policy areas in a comprehensive manner. Examples of provisions from published university alcohol policies are provided in Appendix B.

Definitions

Head of Academic or Administrative Unit: For academic areas, this includes head of faculty, department, school, institute or centre. For administrative areas, this includes head of division, branch, centre or unit.

Impaired: adversely affected by alcohol. As a general guide, a person is impaired by alcohol when their level of consumption is likely to be at or over the legal limit for driving.

Supervisor: a person responsible for overseeing: a) the work program of other staff; b) the study program of honours and postgraduate students; or c) undergraduate and postgraduate students in lectures, tutorial and practical classes and on field trips.

1. Scope

a) The Policy applies to all university staff, students, contractors and visitors.

b) The Policy applies to all university activities conducted on university premises or activities organised by the university, including activities undertaken beyond university premises and outside normal business hours.

c) The application of the Policy should be consistent with all relevant legislation.

2. Policy objectives

The objectives of the Policy are to:

a) Meet the university’s obligations under the Occupational Health and Safety Act;

b) Support the university to provide a safe, supportive and inclusive environment for all members of the university community;

c) Prevent and reduce alcohol-related harm within the university community; and

d) Guide the effective management of alcohol-related problems within the university community.

3. Links to relevant internal and external policies and laws

External:

a) Occupational Health and Safety Act

b) Liquor Control Act

c) Road Traffic Act

Internal:

a) Staff agreements

b) Charter of student rights and responsibilities

c) Student misconduct regulations
4. Responsibilities of staff, students and others

4.1 Responsibilities of Heads of Academic and Administrative Units
a) Ensure the staff and students in the Unit are aware of the University Alcohol Policy.

b) Ensure all activities of the Unit are conducted in accordance with the University Alcohol Policy.

c) Address identified risks to the wellbeing or welfare of any member of the university community, or damage to university property due to alcohol.

d) Report incidents which may contravene the University Alcohol Policy through the online University Incident Reporting System.

e) Report incidents through the online University Incident Reporting System.

4.2 Responsibilities of Supervisors
a) Address identified risks to the wellbeing or welfare of any member of the university community, or damage to university property due to alcohol.

b) Identify work performance problems that may be associated with alcohol use.

c) If a Supervisor determines that someone is impaired by alcohol to the extent that they are a risk to themselves or others, the Supervisor will direct them to cease work or academic activities immediately and will make arrangements to ensure they get home safely (e.g., contacting next of kin or a taxi) or are provided with medical attention where indicated.

d) When the affected person returns to the university, the relevant supervisor will arrange a private meeting to:
   a. Provide information regarding access to support services (see section 14 – Treatment and support services);
   b. Discuss the relevant behaviours and incidents that may be subject to misconduct provisions of relevant agreements, regulations or policies, and provide a copy of the relevant agreements, regulations or policies;
   c. Document incidents and meetings; and
   d. For further assistance, contact one or more of the following: the relevant Head of Academic or Administrative Unit, Human Resources, University Health Services or the Safer Community Team.

e) Report incidents through the online University Incident Reporting System.

4.3 Responsibilities of Staff and Students
a) Staff members and students who are impaired by alcohol should not attend work or academic activities at the university.

b) Alcohol may not be consumed immediately prior to (i.e., in such proximity that it can compromise safety through intoxication or hangover effects) or during participation in any activity that is inherently hazardous or which may become hazardous as a result of alcohol use. Activities include, but are not limited to, handling dangerous goods, operating machinery or equipment and maintenance work.

c) Report incidents through the online University Incident Reporting System.

d) Seek assistance if support in regard to alcohol is required.

4.4 Responsibilities of Contractors
a) Contractors who are impaired by alcohol should not attend work at the university.

b) Alcohol may not be consumed immediately prior to (i.e., in such proximity that it can compromise safety through intoxication or hangover effects) or during participation in any activity that is inherently hazardous or which may become hazardous as a result of alcohol use. Activities include, but are not limited to, handling dangerous goods, operating machinery or equipment and maintenance work.
c) Report incidents to the relevant university project manager.

5. **Licensed premises on university grounds**
   
a) Licensed premises must be operated in accordance with the Liquor Control Act and the Responsible Service of Alcohol requirements.
   
b) Alcohol brand promotions within a licensed premise on university grounds must be limited to alcohol product information at the point of sale and on menus.
   
c) Alcohol may not be made available in a way that may encourage the rapid consumption of alcohol, for example, in a shot glass.
   
d) Energy drinks may not be sold or promoted within licensed premises on university grounds.
   
e) Affordable food should be available at the licensed premise at all times when alcohol is available. Convenience snacks (e.g., packaged chips) are not sufficient.
   
f) The maximum normal trading hours of licensed premises on university grounds are 11am to 6pm (Monday to Thursday) and 11am to 7pm (Friday) during teaching weeks only.
   
g) Alcoholic beverages may not be offered at a discounted price.
   
h) Non-alcoholic beverages should be the lowest priced option available and may be discounted to ensure there is a substantial price difference between alcoholic and non-alcoholic beverages.

6. **Functions and events involving alcohol**
   
a) All functions and events must be conducted in accordance with the Liquor Control Act.
   
b) Alcohol may not be served at university functions and events where minors can reasonably be expected to be present.
   
c) Alcohol must not be the primary focus of university functions and events.
   
d) Alcohol may only be consumed in the area designated or licensed for this purpose.
   
6.1 **Responsible Service of Alcohol**
   
a) The availability of alcohol at all functions and events must comply with Responsible Service of Alcohol requirements. Consistent with Responsible Service of Alcohol requirements, alcohol must not be supplied to minors or to a person who is intoxicated.
   
b) Where alcohol is available at functions or events, alcohol must be served by servers trained in the Responsible Service of Alcohol. Alcohol products may not be made available for guests to serve themselves.
   
6.2 **Responsibilities of Event Managers**
   
a) Functions and events where alcohol is intended to be served must have a nominated Event Manager who has current training in Responsible Service of Alcohol.
   
b) The Event Manager takes responsibility for planning and managing the event in line with this policy and its procedures.
   
c) The Event Manager is responsible for the assessment of any risks associated with holding a function or event involving alcohol so as to minimise risks to attendees, university property and the university’s reputation.
   
d) The nominated Event Manager is responsible for obtaining all relevant authorisations, approvals and licenses to provide alcohol at the event. Internal university approval is required from the University Security Manager for all events involving alcohol regardless of their location and must be requested at least six weeks before the date of the function or event. For events involving alcohol held in locations
other than licensed premises, external approval may be required from the Liquor Licensing Authority and/or local government following internal university approval.

e) Appropriate security arrangements must be made for functions and events where alcohol is involved. It is the responsibility of the Event Manager to liaise with university security services at least six weeks before the date of the function or event to determine security arrangements.

f) The Event Manager is responsible for planning an appropriate course of action to manage difficult situations resulting from alcohol use associated with functions and events, including where someone: becomes intoxicated at the event, arrives at the event already intoxicated, leaves an event intoxicated or becomes ill.

g) The Event Manager and servers may not consume alcohol immediately prior to or during the function or event.

h) Event Managers are responsible for doing everything that is reasonable and practicable to ensure that university property is not damaged by attendees. Event Managers must report any damage to property that occurs at an event to the University Security Manager.

6.3 Advertising of functions or events where alcohol is served/available

a) Any advertising of functions or events must not: emphasise the availability of alcohol, refer to the amount of alcohol available, encourage attendance by promoting discounted alcohol or all-inclusive ticketing (i.e., entrance fee and all you can drink for the one price), or include any form of alcohol brand promotion. Advertising of functions or events which mentions alcohol must make equal reference to the availability of non-alcoholic beverages.

6.4 Attendance fees

a) Non-drinkers should not be required to share the cost of alcoholic beverages with drinkers. Where an attendance fee is charged for functions, the cost for admission, food and entertainment must be separate from the cost of alcoholic beverages.

6.5 Limiting the amount of alcohol served

a) The amount of alcohol available at university functions and events should be limited so that the anticipated allowance per person will be within the National Health and Medical Research Council guidelines for reducing the risk of alcohol-related injury which recommends no more than four standard drinks on a single occasion for healthy men and women over the age of 18.

b) Functions and events are to have an advertised start and finish time, and no alcohol is to be served before the start time or after the finish time.

c) Alcohol may not be provided in a way that may encourage the rapid or excessive consumption of alcohol, for example, in a shot glass.

d) Drinking games or any type of drinking apparatus (e.g., funnels) which encourage or enable a person to consume large quantities of alcohol rapidly are not permitted at university functions and events.

6.6 Availability of non-alcoholic and low alcohol beverages

a) Free drinking water must be available at any time at which alcohol is available.

b) Adequate quantities of appealing non-alcoholic drinks must be easily available at functions where alcohol is served.

c) Low alcohol beverages should be available.

d) Non-alcoholic and low alcohol beverages must be offered at cheaper prices than the alcoholic beverages being served.

6.7 Availability of food

a) Adequate quantities of fresh and interesting foods must be available at functions where alcohol is served. High salt content foods should be minimised as they promote thirst.
b) Alcohol should not be served for longer than 30 minutes before substantial food is served.

7. Alcohol-free functions and events

a) The university encourages alcohol-free events to maximise cultural inclusivity and the health and safety of the university community.

b) University-associated groups (e.g., student clubs, sports groups, staff social clubs) which organise more than one function or event in a calendar year should ensure at least half of these events are alcohol-free (no alcohol to be supplied by event organisers or guests).

c) Where funding from organisations within the alcohol industry or related industries for research or other purposes is approved, the source, purpose and quantity of funding will be publicly disclosed on the university’s website.

d) Any discounts provided by external licensed premises to the university (e.g., as in-kind support for university-associated events or advertisements in university communications) must only relate to non-alcoholic beverages or food.

8. Alcohol promotion

a) All forms of alcohol brand advertising and promotion are prohibited on university premises and in university communications (including, but not limited to, university print materials, websites and email systems). The only exemption to this provision is noted in section 5(b) (product information at a licensed premise’s point of sale and on menus).

9. Funding and support

a) The University will not accept funding from organisations with a vested interest in limiting measures to mitigate harmful social or health impacts of their products. Funding from organisations within the alcohol industry or related industries for research or other purposes may only proceed with the written approval of the Deputy Vice-Chancellor (Research). Approval must be obtained prior to submission of a proposal funded by those industries.

b) No social or medical research relating to alcohol may be funded by any member of the alcohol industry.

c) Where funding from organisations within the alcohol industry or related industries for research or other purposes is approved, the source, purpose and quantity of funding will be publicly disclosed on the university’s website.

d) Any discounts provided by external licensed premises to the university (e.g., as in-kind support for university-associated events or advertisements in university communications) must only relate to non-alcoholic beverages or food.

10. Gifts and prizes

a) No prizes, incentives or gifts in the form of alcohol should be offered or rewarded for any event, competition or other university activity.

11. Residential services

a) Residential service managers may determine where, when and if alcohol may be consumed by anyone in any area outside a resident’s own private bedroom (e.g., common areas, dining areas, or outdoor areas).

b) University functions or events in residential areas where alcohol may be involved must follow the policy provisions relating to Functions and Events.

c) The residential services division will support the provision of attractive, alcohol-free environments for events and activities, and will encourage the organisation of activities and events which are alcohol-free (no alcohol to be supplied by event organisers or guests).

d) Alcohol must not be supplied to any person who is intoxicated or aged under 18 years within residential areas.

e) Residents and/or their guests must not be subjected to any pressure to drink alcohol.
12. Transport

a) The driver of any vehicle used for university business travel must have zero blood or breath alcohol content immediately before or whilst driving the vehicle.

b) An appropriate range of transport options should be available to transport function or event attendees from the university function.

c) Any transport services provided or organised by the university must not facilitate drinking.

d) Appropriate transport options must be accessible at places and at times when alcohol is available (and immediately afterwards) to assist in the dispersal of patrons.

13. Health promotion

a) The university will embed primary prevention and harm minimisation in relation to alcohol into all relevant university policies, procedures, guidelines, plans and agreements.

b) The university will support appropriate alcohol education strategies for the university community.

c) The university will support appropriate training opportunities to build health promotion capacity in the university community (e.g., Responsible Service of Alcohol training).

d) Health promotion strategies of the university will include the availability and promotion of screening and brief intervention programs for members of the university community.

e) The National Health and Medical Research Council Guidelines to Reduce Health Risks from Drinking Alcohol will be used to inform health promotion approaches within the university.

f) Health promotion resources and information used within the university must not have been developed by groups within or closely associated with the alcohol industry.

g) The university will establish and maintain partnerships with local councils, police, and government and non-government health service groups to support the policy objectives.

14. Treatment and support services

a) The university acknowledges that some members of the university community might experience problems as a result of their own or others’ alcohol use. Alcohol-related problems will be addressed in a supportive, confidential and constructive way. Seeking confidential assistance from any treatment or support services, or being referred to them, will not result, by itself, in disciplinary action nor will it affect the personal or professional situation of the individual in the university setting.

b) Those assisting individuals with alcohol-related problems will respect the privacy and confidentiality of those who seek help unless the health and safety of others is potentially at risk.

c) The university will ensure appropriate access to alcohol and other drug expertise, services and effective referral pathways for all members of the university community.

d) A range of appropriate treatment and support services will be accessible to members of the university community with concerns about their
alcohol use or related problems. Services will include, but are not limited to, the university’s employee assistance program, the university health service, student welfare officers and community alcohol treatment services.

e) Information about how to access the range of services will be maintained on an appropriate website, for example, the University Health Services website.

15. Policy implementation

a) Information about the university’s alcohol policy will be provided through student orientation and staff induction activities, relevant online modules, and through annual programs for senior university staff.
Conclusion

The roles of universities as educational institutions, research centres, and workplaces provide substantial scope for universities to be active participants in preventing and reducing harm from alcohol. A clear and comprehensive alcohol policy provides an important framework for approaches to prevent and reduce harm from alcohol within the university environment. Key aspects of the rationale for universities to commit to a comprehensive alcohol policy include (i) duty of care obligations under the relevant occupational health and safety legislation and (ii) the requirement that they comply with the spirit and letter of liquor licensing laws.

The process of developing a policy is an important factor in determining its success. Effective alcohol policies follow a consultative development process; are tailored to the particular needs, risks, and circumstances of the individual university; apply a comprehensive approach that addresses the range of issues and responses; are broadly communicated and universally applied; and are the subject of ongoing monitoring, evaluation, and review.

We encourage sharing and learning from positive initiatives, including building the evidence base within the Australian university context. We therefore encourage the development of a research agenda to inform and enhance universities’ responses to alcohol.

While further well-designed research on the drinking patterns of Australian university students is welcomed, there is sufficient information from Australia and other jurisdictions to demonstrate the need for action to reduce alcohol-related harm in this population, and clear direction for approaches to addressing alcohol-related harms.

We hope university leaders will feel able to act on the basis of the best available evidence – as reflected in this resource – to develop or strengthen their alcohol policies and to contribute to the development of the evidence base through well-designed evaluation and communication of approaches to prevent and reduce harm from alcohol in the university setting.
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APPENDIX A: Lessons on the development and implementation of university alcohol policies

Lessons to support effective policy development

Few documented accounts are available of the development of university alcohol policies, particularly in the Australian context. A useful account is available of the development of an alcohol and other drug (AOD) policy at Curtin University between 1986 and 1991.\(^1\)\(^2\)\(^3\)\(^4\)\(^5\) While it is acknowledged that universities and the broader society have changed substantially since this time, this account provides some useful lessons about the process of developing policy.

A paper by Blaze-Temple and colleagues (1991) documented the policy development process. Ultimately, the draft policy was not approved by the university Resources Board and did not progress to implementation. Researchers, including Lockwood and Saunders (1993), have investigated why the attempt was not successful.

Blaze-Temple and colleagues (1991) acknowledged that some of the negative reaction may have been avoided with a modified process and provided recommendations to facilitate the acceptance of an AOD policy:

- Minimise the use of terms that could be perceived to be patronising, disparaging or punitive.
- Ensure the policy is seen to be weighted in favour of primary prevention rather than disciplinary measures.
- Articulate benefits to staff and students clearly.
- Avoid lengthy documentation that may be perceived as too much to read.
- The Working Party should be seen as representative of the university population. Include representatives of appropriate groups from early on to prevent the perception of not being included.
- Develop campus-wide education programs to support understanding of the rationale for the proposed policy. Identification of sources of funding would be required.
- Ongoing and organised lobbying and consultation with staff and student opinion leaders to assist in identifying allies who may lobby in support of the policy and in identifying potential sources of opposition. A reasoned, personal approach may assist in neutralising opposition.
- Conduct opinion polls with representative samples of staff and students to identify levels of support, negative attitudes or misperceptions. Communicating encouraging levels of support could convince others of the merits of the policy.

Curtin University researchers Lockwood and Saunders (1993) used key informant interviews and a review of relevant documents to investigate why the policy failed. They identified a number of contributing problems, including:

- Inadequate policy rationale.
- Lack of genuine consultation resulting in perceived ownership of the policy by the working party rather than the university and its members.
- The tone of the policy documents was perceived as prohibitionist, accusatory, unnecessarily restrictive, judgmental and disciplinary rather than supportive.
- The general presentation of the documents was a major impediment to careful consideration of the content. Concerns included that documents were too detailed, complex and long; poorly organised; and confused in presenting relationships between policy, procedures, rules, and regulations.
- An alienating introductory process. The personal styles of those involved in promoting the draft were seen as problematic to its acceptance.
- The draft policy was seen as potentially detrimental to the majority in order to address the problems of a few.
- A mismatch between the attitudes of the policy promoters and the wider community.
While this example is a few decades old, the lessons are likely to remain relevant in supporting an effective policy development process.

Lessons to support effective policy implementation and enforcement

Lessons on the implementation and enforcement of university alcohol policies are provided by Cremeens and colleagues (2011). The researchers interviewed US college administrators (71 administrators representing 21 institutions) to examine challenges and barriers to enforcing alcohol policies and practical recommendations to support effective enforcement. Common challenges included inconsistent enforcement (including of laws regarding alcohol access by underage students), the acceptability of alcohol (reinforced by exposure to alcohol promotion), a lack of concern about consequences, parental acceptance of their child’s alcohol use, mixed messages received by students, and university size and location (specifically, proximity to bars and/or clubs).

Recommendations included:

- A comprehensive approach to alcohol harm prevention;
- Effective communication of alcohol policies;
- Appropriate resourcing to address alcohol harm prevention (e.g., staff and funding);
- Enhanced alcohol education (e.g., required online courses and orientation activities);
- Consistent messages about alcohol use and the consequences of policy violations;
- Collaboration with the community to limit access to alcohol and ensure sufficient resourcing to address alcohol issues;
- Limiting alcohol advertising in campus media outlets;
- Offering more alcohol-free activities; and
- Holding all members of the university community to the same standard of expectations.

The need for collaboration between members of the university community was emphasised, including staff, senior administrators, students, student organisations, parents, sporting groups, law enforcement officials, and residential services.

The researchers noted that “Prevention efforts for alcohol use among college students are not a one-size-fits-all approach. University leaders need to determine which policies and strategies are most effective for their specific campus environment” (p429). Cremeens and colleagues encouraged university administrators to implement policies and strategies that have shown to be effective, and also to follow through with enforcement of those policies.
Selected policy provisions from published university alcohol policies are provided here as examples. These examples show that existing university alcohol policies have some very useful features which can be built upon to form a comprehensive policy or act as exemplars for other universities.

The subheadings align with the components of section 6, Strategies and considerations for responding to alcohol in the university setting.

These examples are not exhaustive and are purposefully brief. All example provisions were sourced from policies available on university websites (current at the time of publication). For further information, please access the original policy.

Example policy provisions: Scope of policy

The University of Western Australia: Alcohol and Other Drugs (April 2014)

This policy sets out the principles that guide the University’s management of alcohol and other drugs by staff, students, contractors and visitors to the University.

University of Melbourne: Alcohol Policy (December 2016)

This policy applies to:

- all members of the University community, including students, employees, independent contractors, honoraries and visiting fellows
- visitors to the University
- University campuses, teaching sites and University-controlled sites
- events involving alcohol that are organised or controlled by the University, including University-controlled entities, University business operations and University clubs affiliated to the University through a student association.
Example policy provisions:

Policy Objectives

**University of Sydney: Alcohol: Policy and Guidelines on Consumption (November 1992)**

The University's specific objectives are to:

a) minimise alcohol-related harm to the individual;

b) minimise alcohol-related damage to property;

c) preserve the reputation of the University in the community;

d) provide members of the University community with adequate information about alcohol and the consequences of its excessive use;

e) offer appropriate forms of assistance to those for whom alcohol has become a problem.

**University of Queensland: Alcohol, Tobacco Smoking and other Drugs Policy (September 2009)**

The objectives of the Alcohol, Tobacco Smoking and Other Drugs Policy are to:

- contribute to the provision of a workplace and learning environment free from alcohol, tobacco and other-drug related harm;

- promote moderation in a responsible attitude towards the use of alcohol;

- ensure that adequate resources are available for:
  
a) education programs and information dissemination on drug and alcohol use and associated issues and problems;
  
b) dissemination and implementation of the Alcohol, Tobacco Smoking and Other Drugs Policy;
  
c) the provision of informed referral processes and appropriate counselling services for those experiencing alcohol, tobacco and other drug related problems; and

- d) enforcement of the policy which reflects the University's commitment to the *Statement of Principle*.

- minimise the legal liability of the University that could result from death, injury, assault, disadvantage, insult or damage caused by a drug and/or alcohol related incident; and

- enhance the community perception of the University of Queensland as a safe, supportive and responsible institution.

**University of Melbourne: Alcohol Policy (December 2016)**

The objectives of this policy are to:

a) prevent harm from the consumption of alcohol;

b) set out the University's commitment to provide an inclusive environment for all members of the University community who choose not to consume alcohol;

c) set out the University's commitment to the responsible management of alcohol service and consumption; and

d) establish expectations of employees, students, managers and supervisors with respect to the service and consumption of alcohol while on University premises, performing duties for the University or representing the University.
Example policy provisions:

**Restrict alcohol use in association with potentially risky activities**

**Monash University: Alcohol and Other Drugs Management: Events Involving Service of Alcohol Procedures (June 2014)**

**Activities requiring zero blood alcohol**
Academic/administrative units in which staff, students, visitors and contractors undertake activities where the consumption of alcohol could pose a risk to health and safety should develop and implement local procedures requiring that no alcohol be consumed prior to or during the activity.

For example zero alcohol levels are required when:

a) operating machinery and electrical equipment;

b) working at heights;

c) working in confined spaces;

d) working with high voltage.

**La Trobe University: Alcohol and Drugs (Staff) Policy (November 2016)**

Staff who operate vehicles, equipment, machinery ('resources') or work within laboratories must not consume any alcohol whilst operating the resources or working within laboratories. In addition, staff must not have consumed drugs (legal or illegal) which cause impairment whilst operating the resources or working within laboratories.

Activities using La Trobe resources or within laboratories are deemed to be of high risk activities. For example:

a) operating machinery and electrical equipment

b) working in laboratories

c) working at heights

d) working in confined spaces

e) working at high voltage

**La Trobe Motor Vehicles**
Staff driving a La Trobe motor vehicle must:

a) not have consumed alcohol (staff must have a BAC level of 0 blood alcohol concentration)

b) not have consumed illicit drugs or be impaired by legal drugs

c) not smoke in La Trobe motor vehicle

**University of Western Sydney: Alcohol and Drug Control Policy (October 2016)**

Staff, students and visitors are not to consume alcohol during or prior to participating in any activity that is inherently hazardous or likely to become hazardous as a result of the consumption of alcohol, including:

a) handling dangerous goods;

b) operating University vehicles or controlling heavy machinery or equipment;

c) undertaking electrical maintenance work;

d) working at heights or in confined spaces.
Example policy provisions:

**Identifying, reporting and managing alcohol-related fitness for work issues**

For an example policy, see the Monash University: Alcohol and Other Drugs Management: Problem Management Procedures (June 2014) at the Monash University Policy Bank, [http://policy.monash.edu.au/](http://policy.monash.edu.au/)

**University of Newcastle: Alcohol and Other Drugs Policy (June 2008)**

**Staff Responsibilities**

i. All members of staff are expected to recognise that performance of duties can be affected by alcohol and other drugs.

ii. Staff members who are adversely affected by alcohol and/or drugs must not report for work whilst affected.

iii. If the University has concerns that a staff member is impaired by alcohol or drug use, the University will direct that staff member to cease work immediately.

iv. A staff member engaged in behaviour that impacts on the safety or performance of other staff, students and/or members of the University community may be subject to disciplinary action in accord with the misconduct/serious misconduct provisions of the relevant Workplace Agreement.

v. When representing the University at functions where alcohol is available, staff are expected to demonstrate professional and responsible behaviour.

**Student Responsibilities**

i. All students are expected to recognise that performance of their academic activities can be affected by alcohol and other drugs.

ii. Students who are adversely affected by alcohol or other drugs should not attend an academic activity e.g. lectures, tutorials, laboratories, workshops or excursions.

iii. If the University determines that a student is impaired by alcohol or other drug use, the University will direct that student to cease academic activity immediately.

iv. A student engaging in behaviour that impacts on the safety or performance of other students and/or other members of the University community may be subject to disciplinary action being taken in accordance with the Student Misconduct Rule.

v. When participating in University functions where alcohol is available, or when visiting or residing in Residential Colleges, students are expected to demonstrate responsible behaviour.
Example policy provisions: 
Controls on the availability of alcohol

The University of Western Australia: Alcohol and Other Drugs (April 2014)

The operators of licensed premises of an ongoing nature such as the Guild Tavern and The University Club on University land are required to undertake a full risk assessment, provide training to staff in responsible serving of alcohol and have a system for tracking and reviewing any incidents related to the consumption of alcohol.

University of Sydney: Alcohol: Policy and Guidelines on Consumption (November 1992)

Practices the University considers desirable:

a) structuring the price of function tickets to include the cost of admission, food, entertainment and a small amount of alcohol, with further alcohol to be purchased from a cash bar;

b) availability at functions and venues of low alcohol and attractive non-alcoholic drinks in adequate quantities;

c) price subsidisation of low alcohol and non-alcoholic drinks;

d) adequate security at functions and licensed venues with provision of security being the responsibility of the venue manager;

e) functions and licensed premises offering a mix of alcohol, food and entertainment, rather than alcohol only;

f) function organisers and/or venue managers negotiating and determining amounts of alcohol to be available at functions in advance, using the University’s “Alcohol Quantity Guidelines” as a guide;

g) use of trained bar staff to serve alcohol and use of serving practices consistent with the “National Guidelines For Responsible Serving Of Alcohol”.

Practices the University considers undesirable:

a) promotional activities, including alcohol promotions conducted in cooperation with alcohol suppliers, which offer inducements or otherwise encourage drinking;

(b) subsidisation of alcohol either directly (e.g. free or discounted drinks) or indirectly (e.g. structuring the price of function tickets to include all the purchaser wishes to drink, which effectively means the subsidisation of heavy drinkers by non-drinkers and moderate drinkers);

(c) customs which exert social pressure on students to drink to excess, including particularly, competitive drinking practices.

Monash University: Alcohol and Other Drugs Management: Events Involving Service of Alcohol Procedures (June 2014)

Limiting the amount of alcohol served

The amount of alcohol available at university events/activities should be controlled so that the anticipated allowance per person will be within the National Health and Medical Research Council (NHMRC) guidelines for reducing the risk of alcohol-related injury which recommends no more than four standard drinks on a single occasion for both healthy men and women.

Importantly, this does not represent a ‘safe’ or ‘no-risk’ drinking level; neither is it a prescribed intake level.

University of Melbourne: Alcohol Policy (December 2016)

Event Manager responsibilities

Event managers will ensure that alcohol is managed and used appropriately at University events by:

a) ensuring that a safe and welcoming environment is provided for persons who choose not to consume alcohol;

b) ensuring that alcohol is not served to persons under 18 years of age or persons who are impaired by alcohol.
University of Wollongong: Guidelines on the use and management of alcohol at university functions (November 2013)

Drinking and Driving
• Prior to any function where alcohol is to be served, the organiser of the function should provide information to those attending the function about the transport facilities available to travel to and especially from the function.

• Where people have to drive vehicles home following a function, the organiser should consider providing non-alcoholic drinks free of charge to the “designated drivers”.

• If the organisers of the function are aware that a guest has had too much to drink, he/she should arrange for supervised transportation home for that person.

• If guests are charged a fee, separate the price of admission or food from the cost of drinks; where possible, avoid having non-drinkers share the cost of alcoholic beverages.

Monash University Residential Services Alcohol Policy (December 2015)

The Monash Residential Services (MRS) Alcohol Policy rests on the following principles:
• Residents and/or their guests are not to engage in binge drinking and must refrain from promoting and/or participating in and/or encouraging drinking games.

• The following items are not permitted at any time within a MRS accommodation complex:
  a) Kegs,
  b) Alcoholic punch;
  c) Any form or variation of drinking games,
  d) Any type of alcohol drinking apparatus which enables a person to consume large quantities of alcohol very quickly.

Curtin University: Housing Services The Residence Handbook 2017

Alcohol consumption
The consumption of alcohol is permitted for residents of legal age but must be kept to a sensible level so as not to cause stress or inconvenience to other people. The following Rules apply:

• Drinking games – and the use of implements of drinking games (like funnels) that encourage binge drinking and the excessive consumption of alcohol – are prohibited. If found, drinking games implements will be confiscated by staff.

La Trobe University: Rules of Residence 2017

Drugs and Alcohol
In order to ensure the safe and responsible consumption of alcohol:

• All events must comply with Accommodation Services and University guidelines

Example policy provisions: Controls on high-risk drinking practices

Monash University Residential Services Alcohol Policy (December 2015)

The Monash Residential Services (MRS) Alcohol Policy rests on the following principles:

• Residents and/or their guests are not to engage in binge drinking and must refrain from promoting and/or participating in and/or encouraging drinking games.

• The following items are not permitted at any time within a MRS accommodation complex:
  a) Kegs,
  b) Alcoholic punch;
  c) Any form or variation of drinking games,
  d) Any type of alcohol drinking apparatus which enables a person to consume large quantities of alcohol very quickly.
All games and activities involving and/or encouraging the consumption of alcohol are prohibited at all times. This applies to events and social gatherings alike.

Alcohol containers/collections that promote irresponsible drinking/binge drinking (including but not limited to kegs, beer balls, funnels, beer pongs, punch buckets, shot glasses) are not permitted on Residence. Such items may be confiscated by staff and destroyed.

Monash University: Alcohol and Other Drugs Management: Events Involving Service of Alcohol Procedures (June 2014)

Ensuring Appropriate and Safe Behaviour
Event Managers must ensure that at all university events/activities involving alcohol:

- the event/activity does not include activities that encourage the excessive or inappropriate consumption of alcohol such as pub crawls and drinking competitions

Example policy provisions: Encourage alternatives to alcohol

Monash University: Alcohol and Other Drugs Management: Events Involving Service of Alcohol Procedures (June 2014)

Availability of non-alcoholic and low alcohol beverages
a) High quality, non-alcoholic beverages should always be visibly available in adequate variety and supply and should be presented in as appealing a manner as beverages containing alcohol.

b) Low alcohol beverages should be available.

c) Non-alcoholic and low alcohol beverages must be offered at cheaper prices than the alcoholic beverages being served.

Availability of drinking water
The licensee or Event Manager must have available for patrons on the licensed or authorised premises, or must provide on the request of a patron, free drinking water at any time at which liquor is available.

University of Sydney: Alcohol: Policy and Guidelines on Consumption (November 1992)

Practices the University considers desirable:

a) price subsidisation of low alcohol and non-alcoholic drinks;

University of Adelaide: Alcohol Management and Use Policy (February 2014)

Alcohol and low alcohol alternatives
Alcohol-free and low-alcohol drinks will be priced at least 10% cheaper than full strength drinks where alcohol is being sold.

University of Wollongong: Guidelines on the use and management of alcohol at university functions (November 2013)

Food
- Adequate quantities of fresh and interesting foods should always be made available at functions where alcohol is served.
• Alcohol should not be served for longer than 30 minutes before substantial food is served.

• High salt content foods should be avoided as they promote thirst.

• Distribution of food should be in waves to encourage frequent return trips back to the table or have food served by walking around the room.

• Where possible, service of alcoholic beverages should cease at least an hour before the designated time for close of the function. At this time non-alcoholic beverages, eg coffee, tea, soft drinks can be made available.

Victoria University: Student Alcohol and Other Drugs Policy and Procedures (September 2014)

The provision of alcohol as a gift or expression of thanks can be culturally inappropriate, and potentially harmful for many people. The provision of gifts containing alcohol is discouraged.

James Cook University, St Mark’s College: Responsible Consumption of Alcohol Policy (December 2016)

• The College will seek to ensure that appropriate alcohol-free functions are provided so those under aged residents are able to be included in the structured aspect of the social life in their College community.

Monash University Residential Services Alcohol Policy (December 2015)

The Monash Residential Services (MRS) Alcohol Policy rests on the following principles:

• Residents and/or their guests must not be subjected to any pressure to drink, or to drink more than they judge to be reasonable. Nor should they feel compelled to drink alcohol because no reasonable and attractive alternative is offered.

La Trobe University: Alcohol and Drug (Staff) Policy (November 2016)

Part B – La Trobe Business Activities

18) La Trobe related business activities include, but are not limited to, conferences, seminars, work organised social events (e.g., Christmas events), and business partner sponsored/arranged events such as business lunch or sporting event attendance, informal social events such as a lunch or after work drinks.

20) Alcohol is not essential to any La Trobe or business related event. Where provided, consumption is a personal choice. No one should feel pressured to drink or not to drink or be made to feel uneasy or embarrassed as a result of their choice.
Example policy provisions: Controls on the promotion of alcohol

University of Sydney: Alcohol: Policy and Guidelines on Consumption (November 1992)

Practices the University considers undesirable:

a) promotional activities, including alcohol promotions conducted in cooperation with alcohol suppliers, which offer inducements or otherwise encourage drinking.

Victoria University: Student Alcohol and Other Drugs Policy and Procedures (September 2014)

The University will avoid promotional activities, including alcohol promotions conducted in cooperation with alcohol suppliers, that encourage excessive alcohol consumption or condone activities within the University that exert social pressure on students to consume alcohol.

University of Otago: Alcohol Regulations (October 2014)

Prohibited Activities
Except as authorised by or under these Regulations, no person shall:

d) display any material advertising alcohol (other than incidentally on personal clothing, bags or similar items) or conduct events or activities involving alcohol-related sponsorship in any part of the Campus.

Except as authorised by or under these Regulations, no person shall:

a) distribute communication; or

b) conduct or endorse events or activities, involving alcohol-related advertising or sponsorship, in the name of, or in a way which implies the involvement of, the University.

University of California Berkeley: Berkeley Campus Policy Governing the Promotion of Alcoholic Beverages and Tobacco Products on the Campus and at Campus-Sponsored Events http://students.berkeley.edu/uga/alcohol.stm

Particular brands or manufacturers of alcoholic beverages and tobacco products may not be advertised or promoted either (a) on the Berkeley campus or (b) in conjunction with activities or events away from the campus that are sponsored by campus units or campus-recognized groups and attended by students. Campus-recognized groups include organizations of students, employees, or alumni that are registered with the campus or that use the name of either the University of California or the Berkeley Campus.

University of Wollongong: Guidelines on the Use and Management of Alcohol at University Functions (November 2013)

Advertisement for Functions where Alcohol is Served

• Advertisements should not overemphasise the availability of alcohol, or refer to the amount of alcohol available. For example an event should be labelled as providing “Drinks and Nibbles” rather than “Wine and Cheese”.

• Advertisements and organisers should not encourage rapid drinking.

• Advertisements should not encourage in any way the excessive consumption of alcohol eg advertising drinking contests or “as much as you can drink” functions.

• Advertisements should give equal reference to the availability of non-alcoholic drinks.

• Advertisements should display a clear start and finish time for the function.
Marketing, promotion or sponsorship of events which involve alcohol must only depict responsible and moderate consumption of alcoholic beverages, and accordingly:

- must not encourage excessive consumption, misuse or abuse of alcohol or promote offensive behaviour
- must not encourage under-age drinking
- must not promote events that encourage the rapid consumption of alcohol
- must not identify access to free or cheap alcohol
- must not depict the consumption or presence of alcohol as causing or positively contributing to personal, academic, business, social, sexual, sporting, or other successes and activities
- must not suggest that the consumption of alcohol offers any therapeutic benefit or is a necessary aid to relaxation
- must not suggest that the consumption or presence of alcohol may create or contribute to a beneficial change in mood of environment.

Example policy provisions:
Controls on the acceptance of funding from the alcohol industry and associated groups

Deakin University: External Relationships Policy (May 2014)

Proscribed Relationships:
Except with the written permission of the Vice-Chancellor, the University will not accept funding from, or enter into any partnership or arrangement with organisations with a vested interest in limiting measures to mitigate harmful social or health impacts of their products.

The University will not accept funding from:

- a) the tobacco industry, including
  - (i) companies directly engaged in the production, manufacture, distribution, promotion or marketing of tobacco products as their primary business.
- b) foundations primarily funded by the tobacco industry
- c) the gambling industry.

Funding from the alcohol industry or related industries will be considered on a case-by-case basis and may only proceed with the written approval of the Deputy Vice-Chancellor Global Engagement and input from other relevant Executive members as required.
Example policy provisions: Education and training

**Victoria University: Student Alcohol and Other Drugs Policy and Procedures (September 2014)**

In order to create a safe and healthy learning environment for students and to reduce the harm associated with alcohol and other drug use, the University will:

- provide educational services and resources to students on drug related issues, which focus on harm minimisation strategies, understanding drug use issues, and the University’s alcohol and other drugs policies;

- establish and maintain partnerships with relevant local councils, the Victoria Police and other community and service groups who are working with drug related issues;

- ensure that alcohol and other drugs issues are incorporated in relevant course curricula (eg. Occupational health and safety);

- maintain a Drug and Alcohol Sub-committee that will meet upon request to provide advice and strategic direction on drug and alcohol related issues.

**The University of Western Australia: University Policy on: Alcohol and Other Drugs (April 2014)**

The University contributes to the provision of a healthy and safe workplace in relation to alcohol and other drugs as follows:

- By providing a range of education and confidential support services for staff and students with respect to the prevention and management of the negative effects of alcohol and other drugs.

Example policy provisions: Access to support, counselling and treatment services

**University of Queensland: Alcohol, Tobacco Smoking and other Drugs Policy (September 2009)**

[Section 10] Confidential referral and counselling for drug and alcohol related problems

- The University acknowledges that some staff and students will experience problems as a result of their own or others alcohol and drug use. While it cannot be accepted as an excuse for poor performance, unsafe work practices or inappropriate behaviour, alcohol and drug related problems will be addressed in a supportive, confidential and constructive way for those who are willing to confront their problems and work to overcome them.

- Seeking confidential assistance from the various University services, alcohol and drug treatment agencies, other health professionals or chaplains, or being referred to them will not result, by itself, in disciplinary action nor will it affect the personal or professional situation of the individual in the University setting. Counsellors and others assisting individuals with a drug and alcohol problem will respect the privacy and confidentiality of those who seek help unless the health and safety of others is potentially at risk.

- Administrators, managers and supervisors should be made aware that work and study impairment is commonly associated with the misuse of alcohol and other drugs and of the sensitivities and mechanisms for helping those affected to seek assistance.

- Staff can access help from or be referred to the Staff Assistance Scheme (see www.uq.edu.au/ ohs/) or from community health facilities and alcohol and drug treatment services.

- Students can obtain assistance from or be referred to University based services such as the University Health Service, Student Services, Chaplaincy Services and the Student Union Welfare Officer as well as community health and alcohol and drug treatment services.
University of Melbourne: Alcohol Policy
(December 2016)

University support
The University will provide support for employees and students who are experiencing alcohol-related issues, including addiction. This support may take the form of:

a) referral to appropriate counselling or medical services;

b) facilitation of time to attend treatment and management programs; or

c) any other support that the University considers appropriate in the circumstances.

Example policy provisions:
Resourcing and support for implementation

Monash University: Alcohol and Other Drugs Management: Events Involving Service of Alcohol Procedures (June 2014)

Responsibilities With Regards to the Management of Alcohol, Tobacco and Drug Usage

Heads of Academic and Administrative Units
It is the responsibility of heads of academic and administrative units to:

a) implement these procedures in their area;

b) ensure staff are aware of the university Alcohol and Drugs Management Policy and Procedures;

c) ensure that any events/activities conducted in their unit which involve alcohol sale, service or provision are conducted in accordance with these procedures;

d) take action if there is a risk to the wellbeing or welfare of an impaired person or others, or possible damage to university property; and

e) address safety issues or impaired performance that may result from ongoing alcohol or drug use.

Supervisors
It is the responsibility of supervisors to:

a) identify possible abuse of alcohol and/or other drugs by staff or students they supervise and take appropriate action;

b) take action if there is a risk to the wellbeing or welfare of an impaired person or others, or possible damage to university property;

c) identify work performance problems that may be a result of ongoing alcohol or other drugs and take appropriate action;

d) report any incidents via the online Incident Prevention System (IPS); and

e) implement these procedures in their area.
Staff and Students
It is the responsibility of staff and students to:

a) ensure that they do not attend or represent the university if adversely impaired by alcohol or other drugs;

b) ensure that when they are in charge of Monash University vehicles and machinery, handling hazardous chemicals or undertaking hazardous activities, they are not impaired by alcohol or other drugs and that they comply at all times with relevant Victorian laws and University policies and guidelines;

c) report any incidents via the online Incident Prevention System (IPS); and

d) seek assistance if they require support in dealing with an alcohol or drug-related problem.

Contractors
It is the responsibility of contractors to:

a) ensure that they do not attend the university if adversely impaired by alcohol or other drugs; and

b) report any incidents on a Hazard and Incident Report Form, with a copy to be provided to the relevant Project Manager / Officer.

The University of Queensland: Alcohol, Tobacco Smoking and other Drugs Policy (September 2009)

Education and Information
Staff and students will be informed of the policy and related guidelines through handbooks, leaflets, signage or other means appropriate to the situation or activity. Course planners will include alcohol, tobacco and other drug education in appropriate places or relevant study areas.

Persons or organisations responsible for guests, workers, participants in events on University premises or others on University business, must ensure that such individuals or groups are informed of the relevant aspects of the Alcohol, Tobacco Smoking and Other Drugs Policy.
APPENDIX C:
Expert committee members

The Expert Committee was intended specifically to comprise university-based or affiliated experts on alcohol issues with relevant expertise. We thank the Expert Committee members for their input towards the preparation of this resource. Final responsibility for the content rests with the McCusker Centre for Action on Alcohol and Youth at Curtin University and not with the Expert Committee members.

The following people supported this process (alphabetical by surname):

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Professor Margaret Hamilton AO
Professor Kypros Kypri
Dr Tina Lam
Deputy Commissioner Peter Martin APM
Professor Peter Miller
Professor Rob Moodie AM
Professor Simone Pettigrew
Professor Ann Roche
Professor Robin Room
Associate Professor Bernadette Tobin AO
Mr Brian Vandenberg