Black students at a predominantly White institution: Alcohol, drugs, and mental health

Calvin Mahony
Rowan University

Follow this and additional works at: https://rdw.rowan.edu/etd

Part of the Higher Education Commons

Recommended Citation
Mahony, Calvin, "Black students at a predominantly White institution: Alcohol, drugs, and mental health" (2020). Theses and Dissertations. 2781.
https://rdw.rowan.edu/etd/2781

This Thesis is brought to you for free and open access by Rowan Digital Works. It has been accepted for inclusion in Theses and Dissertations by an authorized administrator of Rowan Digital Works. For more information, please contact graduateresearch@rowan.edu.
BLACK STUDENTS AT A PREDOMINANTLY WHITE INSTITUTION: 
ALCOHOL, DRUGS, AND MENTAL HEALTH

by

Calvin Mahony

A Thesis

Submitted to the 
Department of Educational Services and Leadership 
College of Education 
In partial fulfillment of the requirement 
For the degree of 
Master of Arts in Higher Education 
at 
Rowan University 
April 2, 2020

Thesis Chair: Andrew S. Tinnin, Ed.D.
Dedication

For Toni

One of the brightest lights in my life and, undoubtedly, the most delightful spirit with which I have ever crossed paths. Your dedication to cultivating community, unwavering loyalty and encouragement, and glowing smile will forever be imprinted on my soul. Thank you for giving me the opportunity to grow as both and professional and an individual under your kind guidance. I will carry your energy, ethics, and goodwill into each day of my work so that your life may continue to make the world a more lighthearted, sunny place as it did for me.
Acknowledgments

My SGA Executive Board; I will forever be thankful for the lessons you have taught me and each moment we have spent together in the suite. You have all had such an impact on my career that I will never forget or be able to fully repay.

Drew Tinnin, my thesis advisor, supervisor, and friend. Thank you for the opportunities you have afforded to me and giving me a chance to show my worth.

Kayla and Drea, my Greek Life Grads, for allowing me into your lives (and office) often and providing me with support and love I never felt I deserved.

Nikki Colasanti, for being a safe space for me to speak my mind and be myself and operating as a voice of reason when I needed it.

MaryBeth Walpole, for showing me the ropes of graduate school and pushing me to be my best in the classroom.

Alyssa Trytek, for reminding me of the parts of Higher Education that I fell in love with at my lowest point in my journey.

Rachel Broniec, Bri Ezrow, Marissa Ezrow, and Taylor Stenroos, for being the best friends to me when I needed to escape my current world and remember the experiences that I want to give to students in the future.

My Mom and Dad and brothers, Austin and Connor, for supporting me through my graduate school experience and trying your hardest to help me get through these past two years with as much support as possible.
Abstract

Calvin Mahony
BLACK STUDENTS AT A PREDOMINANTLY WHITE INSTITUTION: ALCOHOL, DRUGS, AND MENTAL HEALTH
2019-2020
Drew Tinnin, Ed.D.
Master of Arts in Higher Education

The purpose of this quantitative study is to understand why Black students use or abuse alcohol and/or drugs while attending a predominantly White institution. Research suggests that the habits of Black students at a PWI are different than those of Black students at an HBCU, therefore, this study was conducted at a PWI to learn about these habits. This study was conducted via an anonymous Qualtrics survey sent to the entire Black or African-American student population at a predominantly White institution. This research found that most Black students at a PWI do not feel pressured to consume alcohol or use drugs but do so for their own personal reasons. However, the reasons for using either drugs or alcohol were different. This study also found that there is not an obvious connection between drug or alcohol usage and sense of belonging. Regarding mental health, this study found that there was a connection between alcohol users and a need/want for mental health services that was disproportionate with the sample. This study also had numerous limitations that create a desire to conduct future research on this topic in a different manner to find more complex answers to the research questions.
# Table of Contents

Abstract .............................................................................................................................................. v

List of Figures ..................................................................................................................................... viii

List of Tables ..................................................................................................................................... ix

Chapter I: Introduction ....................................................................................................................... 1

  Statement of the Problem ................................................................................................................. 2

  Significance of the Problem ............................................................................................................ 3

  Purpose of the Study ......................................................................................................................... 3

  Assumptions & Limitations .............................................................................................................. 4

  Operational Definition of Important Terms ..................................................................................... 4

  Research Questions ......................................................................................................................... 5

  Organization of Remaining Chapters of the Study ......................................................................... 5

Chapter II: Review of the Literature ................................................................................................. 7

  Becoming a College Student ........................................................................................................... 7

  Predominantly White Institutions .................................................................................................. 8

  Historically Black Colleges and Universities .................................................................................. 10

  Long Term Effects, Mental Health, and Risk Perception ............................................................... 11

  Summary of Review ....................................................................................................................... 13

Chapter III: Methodology .................................................................................................................. 14

  Methodological Approach and Design ........................................................................................... 15

  Data Collection Strategies ............................................................................................................. 15

  Data Analysis Approaches ............................................................................................................. 17

Chapter IV: Findings ........................................................................................................................... 19

vi
Table of Contents (Continued)

Profile of the Sample ...........................................................................................................19

Analysis of the Data..................................................................................................................20

Research Question One...........................................................................................................20

Research Question Two .........................................................................................................26

Research Question Three .......................................................................................................29

Chapter V: Summary, Discussion, Conclusions, and Recommendations .........................32

Summary of the Study .............................................................................................................32

Discussion of the Findings......................................................................................................32

Research Question One ...........................................................................................................32

Research Question Two .........................................................................................................33

Research Question Three .......................................................................................................34

Conclusion ..............................................................................................................................34

Limitations ..............................................................................................................................35

Recommendations ..................................................................................................................37

References ...............................................................................................................................38

Appendix A: Consent Form and Survey Questions .................................................................40

Appendix B: Recruitment Email .............................................................................................54
### List of Figures

<table>
<thead>
<tr>
<th>Figure</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Figure 1.</td>
<td>Alcohol Users and Social Values</td>
<td>21</td>
</tr>
<tr>
<td>Figure 2.</td>
<td>Ranking of Reasons for Alcohol Consumption (N=62)</td>
<td>22</td>
</tr>
<tr>
<td>Figure 3.</td>
<td>Student Sense of Belonging (N=147)</td>
<td>26</td>
</tr>
</tbody>
</table>
### List of Tables

<table>
<thead>
<tr>
<th>Table</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Table 1. Profile of the Sample (N=147)</td>
<td>20</td>
</tr>
<tr>
<td>Table 2. Alcohol Consumption Frequency (N=96)</td>
<td>21</td>
</tr>
<tr>
<td>Table 3. Drug Usage Frequency (N=31)</td>
<td>24</td>
</tr>
<tr>
<td>Table 4. Purpose of Drug Usage</td>
<td>25</td>
</tr>
<tr>
<td>Table 5. Comparing Student Sense of Belonging: Alcohol vs Drugs vs Neither</td>
<td>28</td>
</tr>
<tr>
<td>Table 6. Alcohol, Drugs, and Need for Mental Health Services</td>
<td>29</td>
</tr>
<tr>
<td>Table 7. Alcohol, Drugs, and Mental Health History/Treatment</td>
<td>30</td>
</tr>
</tbody>
</table>
Chapter I

Introduction

Overview of the Problem

Drug abuse, in all forms, is condemned by university officials on college campuses across the country in the form of rehabilitation programs, public service announcements, substance education for all incoming students, and more. There have been active efforts to educate students on both the long term and short-term damage that drug abuse can do to young adults (Barry, Jackson, & Watkins, 2016). Alcohol abuse is the most common form of drug abuse on campuses, but marijuana and other drugs are similarly popular. Aside from marijuana, many students use “harder” drugs like cocaine or methamphetamines as stimulants (Barry et al., 2016; Oberteiner, Tzilos, Zumberg, & Grekin, 2011; Wagner, Liles, Broadnax, & Nuriddin-Little, 2006). Even some prescription drugs can have major side effects that students end up abusing. However, these statistics on use and abuse differ when comparing students of the same ethnicity on different college campuses (Lewis, Likis-Werle, & Fulton, 2012; Wagner et al., 2006; Meilman, Presley, & Cashin, 1995). Specifically, this is noted when comparing an HBCU to a predominantly White institution. Both of these institutions operate in the same way in regard to functionality, but HBCUs have historical roots in providing higher education to Black students. This history creates a different culture and demographic makeup that predominantly White institutions which has effects on student behavior and mental health.
Statement of the Problem

Predominantly White institutions (PWI) make up a large majority of universities in the United States. Since our institutional system creates a lack of opportunity for students of color, many of these students will need to attend a PWI if they want to attend any institution of higher education (Clarke, 1996). This structure also creates college demographic minority students, which is a term used in this study in reference to students that identify as an ethnicity that is not the make up of the majority of students. Specific to drug abuse on these predominantly White campuses, it was reported in 2003 that about 38% of White adults aged from 18-25 used any illegal drugs or alcohol, but Black adults reported 28% regarding the same illicit substances (McCabe et al., 2007). However, since 2003 there has been a large spike in the statistics of Black adults engaging in illicit drug or alcohol usage that may be due to a lack of research performed on the topic of minority group drinking and drug patterns at colleges (Dotremon, 2011; Lewis et al., 2012; McCabe et al., 2007). Social norms at HBCUs tend to differ from those at PWIs. In fact, of students at HBCUs surveyed, Black students reported drinking about half as much weekly as White students at PWIs (Meilman et al., 1995). These environments also can provide different experiences for students based on their feeling of belonging on campus based on the cultural climate. The lack of information on a sudden spike in Black students’ illicit drug and alcohol usage that is not also reflected with White students at a PWI is a problem that has yet to be studied. Therefore, this study examines the drug and alcohol usage habits of Black undergraduate students at a predominantly White institution and their correlation with mental health.
Significance of the Problem

There is irrefutable evidence that college students are at higher risk for mental health problems than other students, but when this statistic is tied in with students experiencing discrimination and pressure to drink, colleges must begin coming up with proactive and reactive approaches to combat them (Barry et al., 2016; Oberleitner et al., 2011; Wagner et al., 2006). Mental health is also a major concern for Black students due to the external pressures they feel from racism in society. It has been found that Black men who attend PWIs have more mental health problems than those that attend HBCUs, but the underlying reason behind that has also not yet been solidified through research (Barry et al., 2016). Oberleitner et al. (2011) speaks about the misuse of prescription drugs and how this can attribute to suicidal ideation and other mental health concerns, let alone when they are not taken as prescribed or in combination with illicit drugs. Many students do not perceive their drinking as negative even though they are consistent with “binge drinking” patterns (Barry et al., 2016; Dotremon, 2011; McCabe et al., 2007). Universities do what they can to combat these statistics with targeted programming and multiple types of counseling sessions. Regardless of this, Black students attending colleges have emphasized the lack of use of counseling services on college campuses and attribute it to mistrust, rejection, and societal marginalization (Wagner et al., 2006).

Purpose of the Study

The purpose of this quantitative study is to understand why Black students use or abuse alcohol and/or drugs while attending a predominantly White institution. I believe this research would allow me to understand changes that can be made to combat the drug abuse problems on campuses by understanding why students may use alcohol or drugs
more frequently based on the climate of the community they have chosen to join. I would also like to learn about connections between mental health problems and alcohol and drug use rates among this student population to see what kind of resources a university may want to add to attempt to aid students further and encourage positive growth and development.

Assumptions & Limitations

This study will be limited to students at Rowan University over the time span of one academic year. The information gathered from these students will be through an anonymous survey, since the study will be quantitative. Therefore, it will consist of the opinions, thoughts, and feelings of students that choose to disclose any information. The study will also be drawn from a small population on Rowan University’s campus of which I do not identify. Due to this, there may be a lack of trust that causes a subject to not disclose all information that could be seen as incriminating or private.

Operational Definition of Important Terms

1. Black student(s): Students that self-identify their race/ethnicity as Black

2. Predominantly White Institution (PWI): An institution of higher education that has an undergraduate student population that a majority of student’s identify as White

3. Historically Black College or University (HBCU): An institution of higher education that was originally created to serve the Black community after the Civil War
4. Alcohol and drug use: Self-identifying themselves as a consistent alcohol or drug user. Consistent alcohol or drug users are being defined as those that use the aforementioned items at least bi-weekly

5. Belonging: A student’s sense of belonging in their campus community. This includes but is not limited to clubs and organizations, classes, residence halls, or on campus work environments

6. Cultural climate: The racial demographic breakdown of the undergraduate student population

7. Mental health: A student’s status of well-being based on their psychological wellness

**Research Questions**

1. What do Black Rowan students describe as their reason(s) for alcohol and drug use?

2. How does a sense of belonging/cultural climate in a chosen community like a university affect the alcohol and drug use and abuse rates of Black students?

3. What effects do these habits have on Black students specifically in regard to mental health?

**Organization of Remaining Chapters of the Study**

Chapter II consists of a literature review on multiple branches of the lives of Black undergraduate students. These pieces of literature contain information on mental health, drinking and drug use habits, and campus climate.

Chapter III contains information about the processes and procedures that will be used to collect data throughout the study.
Chapter IV shows the results of the study and how these results have answered the research questions or provided information to inquire further in future research.

Chapter V provides a summary and conclusion to the research and offers my own thoughts on what future research should focus on.
Chapter II
Review of the Literature

Becoming A College Student

Being a college student is entirely different for White students than it is for students of color. The amount of privilege in our society allows for the system of higher education to greatly benefit the wealthy, which disproportionately advantages White people (Clarke, 1996). This allows for those students to afford private high schools that provide better college application opportunities, SAT preparatory courses, disposable income to allow for more applications to be sent out, etc. Therefore, it can be expected for White students to move from high school to college without a second thought.

Students of color face many more roadblocks on the way to any undergraduate institution. According to Clarke (1996), even though there are examples of affluent minorities, they are disproportionately of low socioeconomic status. Affirmative action has aided in getting more minorities to attend universities in general, but there are still financial roadblocks that this policy cannot simply reverse (Clarke, 1996). This is why there is success to be found at historically Black colleges and universities. These institutions make conscious efforts to create equity for minorities prominent in their programming and admissions processes to counteract the centuries of discrimination that ravaged the system of higher education. Specifically, HBCUs offer an opportunity that allows for Black students to not feel like a minority during their college careers at institutions that were founded to benefit their culture (Barry et al., 2016; Dotremon, 2011; Meilman et al., 1995). This kind of experience can allow students to feel more in sync
with their institutions and have a different outlook on what they should be gaining from this experience; something that is less common in White students at PWIs.

**Predominantly White Institutions**

Predominantly White institutions report that a large majority of their undergraduate population identifies as White/Caucasian. Some universities have an excellent distribution of student demographics, but those tend to be top tier universities that are not attainable for all students to be admitted to. These demographics are reflective of the society that is present in the country and the disadvantaged system we have perpetuated. Many of these institutions do have a rich history of some sort, but they are not typically related to race as most founders and early academics at these institutions were White and wealthy men (Clarke, 1996; Meilman et al., 1995).

From students surveyed at PWIs, almost 75% of students reported drinking patterns that were consistent with binge drinking definitions (Dotremon, 2011). Binge drinking is defined in this study as drinking at least five alcohol beverages in a row (Dotremon, 2011). However, on these same surveys, it was noted that Black students reported the lowest level of these habits while attending college (Dotremon, 2011). Alcohol abuse is the most prevalent form of drug abuse on all college campuses, but these surveys also questioned the abuse of illicit and prescription drugs. White students overwhelmingly rank as the largest group of students that use illicit drugs while attending college (Dotremon, 2011; McCabe et al., 2007). Regarding all forms of abuse, there is a notable amount of privilege that can be seen in them. White students do not see much risk involved in them publicly engaging in these activities due to the undeniable system of institutionalized racism across the country; this is reflected in their undergraduate
experiences. Therefore, engaging in illegal and dangerous activities does not seem problematic due to their Whiteness (Barry et al., 2016; Dotremon, 2011; McCabe et al., 2007).

Another problem that is prevalent on these campuses is the illicit drug “cocktails” that can be found at parties where binge drinking is occurring. Typically, in my college experience and those studied in the aforementioned research, college aged men host off-campus parties and aid in perpetuating a party culture (Lewis et al., 2012). Men are also significantly more likely to engage in binge drinking patterns, illicit drug use, and misuse of prescription medication (Barry et al., 2016; Dotremon, 2011; McCabe et al., 2007; Newcomb, Birkett, Corliss, & Mustanski, 2014). Not only do a significant number of students take medication in ways that have not been prescribed, but they do so in tandem with other illicit stimulants (Oberleitner et al., 2011). College as a whole is a time of uncertainty for students and pressure to fit in with societal norms can be too much for many students. Therefore, being in a setting where peer substance use is the norm and alcohol is operating to impair judgement and as a social lubricant, there are perceivable short-term benefits to students going through a difficult time of transition (McCabe et al., 2007).

Many PWIs that have been studied have not been reported under specific names; therefore, it is difficult to see, from current research, whether or not there are specific culture differences between public and private institutions, let alone more specific classifications. Culture varies dramatically at these universities in different ways than HBCUs. For example, the culture of drug abuse may be entirely different at an Ivy League university due to the feelings of prestige among students attending them (similar
to those of students attending HBCUs), but this difference has yet to have been proven or even studied (Meilman et al., 1995). However, the purpose of HBCUs is to have a different campus culture from a majority of institutions by supporting minority students in the most public and effective way possible. Due to this, a campus culture difference between them and PWIs is expected and moreover, welcomed.

**Historically Black Colleges and Universities**

Minority students face an entirely different experience no matter what college they choose to attend. Not only are there factors from the world outside of their campus that affect their undergraduate experience, but many schools have a lack of social support and services that are meant to aid minority students (Barry et al., 2016). Therefore, attending an HBCU can be highly appealing to minorities, despite the large price tag that may come with it. Since HBCUs represent a very small portion of colleges across the country, there have been studies about drug use performed at these institutions due to their prominence and publicity as well as unique opportunities for Black students (Dotremon, 2001; Lewis, et al., 2012; Meilman, et al., 1996). This also allows them to have a chance to escape some forms of the racism they have experienced through other education institutions and be around like-minded people in a safer environment.

Social norms at HBCUs tend to differ from those at PWIs. In fact, of students at HBCUs surveyed, Black students reported drinking about half as much weekly as White students at PWIs (Meilman et al., 1995). Of those students, many of them stated that their reason for participating in “binge drinking” was due to the idea that it is a normal part of a college student’s life (Meilman et al., 1995; Wagner et al., 2006). It can also be noted that there is a vastly different cultural climate at HBCUs because of the financial demand
and level of pride associated with attending any of them. HBCUs are meant to create excellence through diversity and students of color who attend these universities feel more academic pressures to be successful, which may limit the amount of time they dedicate to drinking or taking illicit drugs (Lewis et al., 2012; Wagner et al., 2006). Meilman, Presley, and Cashin (1995) also noted that of the small percentage of White students who attend HBCUs, their desire to participate in these activities is also less prominent than that of PWIs. This could be due to the lack of a sense of belonging since there is less intrinsic synergy between White students and the general purpose of HBCUs, but there is not enough research to make a definite claim to such a thought.

Long Term Effects, Mental Health, and Risk Perception

Many students do not view their drinking habits as overall problematic, but rather as having short term effects like a hangover or spending less time studying (Meilman et al., 1995). However, these opinions only show that these undergraduates do not perceive their drinking as negative even though they are consistent with binge drinking patterns (Barry et al., 2016; Dotremon, 2011; McCabe et al., 2007). This can also contribute to what they believe are typical drinking habits according to Martin, Groth, Buckner, Gale, and Kramer (2013). As universities grow, more and more alcohol and drug prevention programs are being put in place to educate students on how “binge drinking” habits are defined. However, many students stated that drug abuse prevention policies and programs are beneficial to the student body, but they need to have stronger ties to Black culture to allow students to feel more comfortable and welcome to attend the events and create more positive health choices (Wagner et al., 2006). Through these programs, students
would be able to gain a better understanding of the long-term risks of abuse that can follow them after college (Meilman et al., 1995).

Students still overwhelmingly report having consequences from drinking such as hangovers, poor academic performance, arguments, and brief illness (Meilman et al., 1995; Wagner et al., 2006). However, there was a lack of perceived long-term consequences from these actions. In fact, some of the consequences that students reported may be perceived as short term but can cause a long-term ripple on their undergraduate experience. For example, having repeated poor academic performance or memory loss can cause students to delay their graduation due to failing courses. Many students could become injured while intoxicated as well, which could physically damage their undergraduate experience (Meilman et al., 1995).

Many students believe that the policies that universities have in place to prevent on campus drinking are reasonable and beneficial to the student body, but there is little to no proof that these policies actually promote the type of behavior administrators desire from students due to the prevalence of rule breaking (Lewis et al., 2012; Meilman et al., 1995). Lewis, Likis-Werle, and Fulton (2012) also state that students tend to engage in negative drinking behaviors because they feel the risk of consuming alcohol, regarding repercussions from the university and the law, is low. This also appears to coincide with the ideology that students of color face discrimination from institutionalized racism more frequently which can incite more perceived risk from illicit drinking activities, therefore unintentionally creating a less of a desire among HBCU students to participate since a majority of their population is of color (Dotremon, 2011; McCabe et al., 2007; Wagner et al., 2006).
It is known that there is a mental health crisis on college campuses across the country. Specifically, from 31 to 39% of college students report mild depressive disorder and 27% report having anxiety (Kenney, Diguiseppli, Meisel, Balestrieri, & Barnett, 2018). This crisis, in tandem with peak lifetime drinking habits that occur during college, are a recipe for disaster among those students that suffer from mental illness (Kenney et al., 2018). Kenney et al. (2018) also found strong evidence that the perception that peers participate in binge drinking habits is riskier for mentally ill students than those that are not. If these statistics are already correlating for the general population of most colleges and universities, the concern for Black students should be even higher since they are more susceptible to mental illness at PWIs, as stated in previous research, than the college demographic majority (Barry et al., 2016).

**Summary of Review**

Based on all of the aforementioned pieces of literature, it can be seen that there is a notable difference between the drinking patterns of White students and Black students at a predominantly White institution. In connection with these statistics there is a larger number of Black students on these campuses that are suffering from mental illness due to their lack of sense of belonging in the community. These students already have a more difficult time adjusting to their change in community climate when entering the campus of a PWI, which may be a stressor that induces some behavior like this. There has yet to be a direct conversation or study done on the potential correlation or causation these items may have with one another, which is what this study is posed to allow us to understand on a higher level.
Chapter III

Methodology

The purpose of this study is to understand the usage of alcohol and drugs among Black or African American students while attending a predominantly White institution. I believe this research would allow me to understand changes that can be made to combat the drug abuse problems on campuses by understanding why students may use alcohol or drugs more frequently based on the climate of the community they have chosen to join. I would also like to learn about connections between mental health problems and alcohol and drug use rates among this student population to see what kind of resources a university may want to add to attempt to aid students further and encourage positive growth and development.

The following methodology is meant to address the following research questions:

1. What do Black Rowan students describe as their reason(s) for alcohol and drug use?
2. How does sense of belonging/cultural climate in a chosen community like a university affect the alcohol and drug use and abuse rates of Black students?
3. What effects do these habits have on Black students specifically in regard to mental health?

Black students feel different external pressures than White students do, especially at a predominantly White institution. All research that has been referenced throughout this study have noted that there are notable differences between these two student groups, however there is not enough research inquiring for a connection between alcohol and drug use, sense of belonging, and mental health. Acquiring answers to the
aforementioned research questions may allow universities to provide better resources to these at-risk students and impact them in more positive ways.

**Methodological Approach and Design**

It has been noted on several occasions in previous research that there is a difference between the drug use of minority students at these different universities and, when synthesized with other studies, can be applied to the various racial populations at PWIs and HBCUs (Barry, et al., 2016). Therefore, I would like to understand the multiple truths behind these behaviors and see where areas of mental health, sense of belonging, and alcohol/drug use intersect. Due to the nature of the topic, an anonymous survey will be used to collect information in a manner that protects to participants.

**Data Collection Strategies**

Proper data collection strategies were crucial in this study since the research topic inquired with students about their illicit drug use; therefore, students will want complete confidentiality. Therefore, upon receiving IRB approval and informed consent from all of my participants, I drew from a large sample of students at the university that identify as Black/African American (McMillan, 2016). At Rowan University, there are 1,621 of students that identify as such according to the 2019 Rowan University Common Data Set. The target enrollment for this study was 324 participants and was chosen based on the Campus Labs sample size calculator using a 20% response rate. Since the main purpose of this study is to learn about these habits through the eyes of a Black student specifically, this study would need to draw from a stratified sample (McMillan, 2016). The general population of Rowan University is too predominantly one racial group,
therefore, dividing the population into separate groups first and subsequently drawing a sample from the subgroup would allow for data that is more meaningful and generalizable (McMillan, 2016). The participants in this study will be recruited through an email to their student email address. This email was sent to all undergraduate students that identify as Black or African American.

A quantitative approach was used in this research because it was focused on the experiences of one group of students and gathering quantifiable data (McMillan, 2016). This information was gathered from each student through an anonymous survey and including questions that were designed to let them provide personal experiences and free opinions through open ended survey questions (McMillan, 2016).

The survey was kept anonymous due to the nature of the topic area and prioritization of the protection of the participants. These questions inquired about the spaces in which students consume different types of drugs and alcohol as well as their reasoning behind making these choices. The survey also inquired about each student’s involvement in cultural organizations to check for a relation between these communities and these habits. Finally, the survey also addressed the mental health of each participant by inquiring about their own mental health history, self-care practices, and awareness of university resources.

The Qualtrics survey, located in Appendix A, is divided into six main question filled sections. The first section is used to gather formal consent to participate in the research. Once a participant consents to the study, they move on to the second section, which is used to determine some general information about the student such as age,
ethnic identity, whether or not they use drugs and alcohol, and whether or not they use mental health services. The third section specifically asks students about their alcohol consumption rates. It consists of questions about how often they drink alcohol, how much and what type(s) of alcohol they typically consume, the settings in which they consume alcohol, and any perceivable benefits or disadvantages to these actions. The fourth section asks very similar questions to the previous section, but in regard to drug usage. The fifth section asks students about their sense of belonging at the institution. It consists of questions regarding their involvement in cultural organizations, ranking their sense of community on a Likert scale, and uses a matrix table to asks about their perception of the Rowan community (McMillan, 2016). The sixth and final section of survey asks about their mental health. It has questions about any mental health events they have attended or plan on attending, self-care practices, and asks how they feel their drug and alcohol habits have an effect on their mental health.

**Data Analysis Approaches**

After gathering all of the answers to the surveys, the data was checked for any trends or themes with visualization software to answer the research questions in a way that makes it understandable to outside readers (McMillan, 2016). These visual aids compared numerous different sets of collected quantifiable data to provide the best possible answers to the research questions (McMillan, 2016). Once the data was analyzed, it was necessary to document the clear information my research has shown, note any limitations noticed in throughout the study, and recommend questions to investigate in the future. After interpreting this data, the answered acquired from these findings were presented as aggregate data to the Wellness Center in an effort to improve
Black or African American student resources on campus. The findings from the survey are located in Chapter IV.
Chapter IV

Findings

Profile of the Sample

The participants involved in this study were selected as the entire Black or African American undergraduate student population at Rowan University: 1,621 students. These students were sent the survey via their student email address on February 26, 2020 with one reminder email sent on March 4, 2020. Data collection ceased on March 5, 2020. By the time data collected had ended, there were 147 completed responses to the survey; which is about a 9% return rate. This number is lower than anticipated due to unexpected complications that arose throughout data collection. These complications are further elaborated on in Chapter V. Table 1 shows a complete breakdown of the profile of the sample yielded by the time the survey had closed. Overall, almost half of the respondents to the survey stated that they were under 21 years old and the remainder stated that they were 21 or older. About 65% of the survey participants stated that they currently use alcohol with about 5% reporting that they no longer use alcohol after previous use. About 21% stated that they currently use drugs and about 16% no longer use drugs after previous use. Regarding mental health, about 51% of respondents do not desire any mental health services while about 35% do desire the service (with about 13% currently receiving those services). Regarding involvement, about 23% of respondents are currently involved in a cultural organization, about 8% were previously involved in one of these organizations but are no longer, and about 36% have never been in a cultural organization.
Table 1

*Profile of the Sample (N=147)*

<table>
<thead>
<tr>
<th>Variable</th>
<th>f</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 – 20</td>
<td>73</td>
<td>49.65</td>
</tr>
<tr>
<td>21 – 25</td>
<td>56</td>
<td>38.09</td>
</tr>
<tr>
<td>25 or older</td>
<td>18</td>
<td>12.24</td>
</tr>
<tr>
<td><strong>Alcohol Use</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Never used alcohol</td>
<td>26</td>
<td>17.69</td>
</tr>
<tr>
<td>Have in the past, but no longer</td>
<td>8</td>
<td>5.44</td>
</tr>
<tr>
<td>Use alcohol</td>
<td>96</td>
<td>65.31</td>
</tr>
<tr>
<td>No response</td>
<td>17</td>
<td>11.56</td>
</tr>
<tr>
<td><strong>Drug Use</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Never used drugs</td>
<td>75</td>
<td>51.02</td>
</tr>
<tr>
<td>Have in the past, but no longer</td>
<td>23</td>
<td>15.65</td>
</tr>
<tr>
<td>Use drugs</td>
<td>31</td>
<td>21.09</td>
</tr>
<tr>
<td>No response</td>
<td>18</td>
<td>12.24</td>
</tr>
<tr>
<td><strong>Mental Health</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Receiving services</td>
<td>19</td>
<td>12.93</td>
</tr>
<tr>
<td>Not receiving services, do want to</td>
<td>35</td>
<td>23.81</td>
</tr>
<tr>
<td>Not receiving services, do not want to</td>
<td>75</td>
<td>51.02</td>
</tr>
<tr>
<td>No response</td>
<td>18</td>
<td>12.24</td>
</tr>
</tbody>
</table>

Analysis of the Data

**Research question one.** What do Black students describe as their reason(s) for alcohol and drug use. As it can be seen in Table 1, there is a large disparity between alcohol users and drug users in this survey. Therefore, these will be examined separately as their reasons for using alcohol or drugs may be to a different end.

**Alcohol consumption.** Regarding alcohol use, there were 96 respondents that currently use alcohol. For this section of the data analysis, only those 96 responses will
be used. These 96 participants were asked how often they drink alcohol which is outlined in Table 2. It is seen that a majority of the participants use alcohol less than once a week.

Table 2

Alcohol Consumption Frequency (N=96)

<table>
<thead>
<tr>
<th>Variable</th>
<th>f</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 – 11 times in the past year</td>
<td>23</td>
<td>23.96</td>
</tr>
<tr>
<td>1 time a month</td>
<td>15</td>
<td>15.63</td>
</tr>
<tr>
<td>2 – 3 times a month</td>
<td>36</td>
<td>37.50</td>
</tr>
<tr>
<td>1 time a week</td>
<td>8</td>
<td>8.33</td>
</tr>
<tr>
<td>2 times a week</td>
<td>7</td>
<td>7.29</td>
</tr>
<tr>
<td>3 – 4 times a week</td>
<td>6</td>
<td>6.25</td>
</tr>
<tr>
<td>Every day</td>
<td>1</td>
<td>1.04</td>
</tr>
</tbody>
</table>

Figure 1. Alcohol Users and Social Values
Figure 1 shows how alcohol users rank their social values. It can be seen that they place high value on their social life, but do not associate alcohol consumption with it.

The alcohol users involved in this study were also asked directly to rank their reasons for consuming alcohol. Their options were: I enjoy the taste, it relaxes me, because my friends drink, and because it’s the best way to have a good time. Figure 2 shows an outline of how these questions were ranked. Of the 96 students, 62 responses were gathered in this section of the survey, which is reflected in the figure.

![Figure 2. Ranking of Reasons for Alcohol Consumption (N=62)]
Figure 2 shows that overall, the main reasons that these students consume alcohol is for their own purposes. The top two choices were “I enjoy the taste” and “It relaxes me” which do not have any direct connection with party culture or being social. It also shows that these students are not largely impacted by the actions of their friends when choosing whether or not to drink.

However, this survey also included a question on whether or not students enjoy getting drunk. Of the 96 students surveyed, 46 (47.92%) of them stated that they do not enjoy getting drunk. When cross-referencing this data with the aforementioned ranking, there were 24 students that answered both of these sections completely. Out of those 24 students, 14 of them ranked “It relaxes me” as their primary reason for consuming alcohol.

To coincide with this, after ranking these choices, students were given an option to state whether or not they feel internal or external pressures to consume alcohol. An overwhelming majority of students said that they do not feel any of these kinds of pressures. Students were then asked what disadvantages or advantages they find in consuming alcohol. These results also varied among participants. Regarding disadvantages, many students were concerned about their health. There was a consistent theme of hangovers and blacking out being a disadvantage, but when this word appeared there was often a mention of “relaxing” and “being more social” in the advantages category for each participant.

It can be seen that students in this survey turn to alcohol as a method of relaxation and because they enjoy the way it tastes. However, almost 50% of the participants that
ranked “because it is the best way to have a good time” in their top two reasons for consuming alcohol.

**Drug usage.** In this study, there were 31 participants that stated they currently use drugs. All of the drug users in this study were also regular alcohol consumers. Of these students, all of them reporting using marijuana. In tandem with marijuana, one student uses cocaine, one student uses opioids and methylenedioxymethamphetamine, and one reported using inhalants and nitrites. Table 3 shows a breakdown of how often each of these students uses drugs.

<table>
<thead>
<tr>
<th>Variable</th>
<th>f</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Once a month</td>
<td>1</td>
<td>3.23</td>
</tr>
<tr>
<td>2 – 3 days a month</td>
<td>7</td>
<td>22.58</td>
</tr>
<tr>
<td>Once a week</td>
<td>2</td>
<td>6.45</td>
</tr>
<tr>
<td>Twice a week</td>
<td>1</td>
<td>3.23</td>
</tr>
<tr>
<td>3 – 4 days a week</td>
<td>6</td>
<td>19.35</td>
</tr>
<tr>
<td>Every day</td>
<td>3</td>
<td>9.68</td>
</tr>
<tr>
<td>No response</td>
<td>11</td>
<td>35.48</td>
</tr>
</tbody>
</table>

Students were also asked about their reasons for using drugs using a Likert scale as shown in Table 4. One interesting piece of these questions was the one regarding self-medication. This question was also asked of alcohol users and only 3.13% of them stated in the affirmative. With drug users, that percentage is more ten times larger. This shows one large difference between the uses of drugs and alcohol even though all participants
that use drugs also use alcohol. While this is likely not the only reasons these students are using drugs, it certainly shows a stark difference between drugs and alcohol and the purposes they serve.

Table 4

*Purpose of Drug Usage*

<table>
<thead>
<tr>
<th>Variable</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug use is an important part of my social life (N=31)</td>
<td>15 48.39</td>
<td>7 22.58</td>
<td>7 22.58</td>
<td>2 6.45</td>
<td>0 0</td>
</tr>
<tr>
<td>I only use drugs if someone gives them to me (N=31)</td>
<td>9 29.03</td>
<td>10 32.26</td>
<td>9 29.03</td>
<td>3 9.68</td>
<td>0 0</td>
</tr>
<tr>
<td>I use drugs to self medicate (N=31)</td>
<td>12 38.71</td>
<td>4 12.90</td>
<td>4 12.90</td>
<td>10 32.26</td>
<td>1 3.23</td>
</tr>
<tr>
<td>For my family, drug use is/was part of having a good time (N=21)</td>
<td>9 42.86</td>
<td>4 19.05</td>
<td>8 38.10</td>
<td>0 0</td>
<td>0 0</td>
</tr>
</tbody>
</table>

Twenty-one drug users answered the survey question regarding whether or not they feel drugs have an effect on their mental health. Of these participants, 42.86% stated that they believed it did have an effect on their mental health. When probed further by the
survey, the participants stated that drugs help them have a different outlook on life, improve their mental health, and make them unmotivated.

**Research question two.** *How does sense of belonging/cultural climate in a chosen community affect the alcohol and drug use rates of Black students.* Figure 3 shows a depiction of student answers on a Likert scale when asked about their sense of belonging at the institution.

*Figure 3. Student Sense of Belonging (N=147)*
Table 5 shows this information but comparing the drug users, the alcohol users, and students that use neither drugs nor alcohol. This number adds up to less than the total amount of participants because there were some users that did not select whether or not they use drugs or alcohol. Therefore, they could not be included in these statistics because they did not specifically say that they do not use either drugs or alcohol.
### Table 5

**Comparing Student Sense of Belonging: Alcohol vs Drugs vs Neither**

<table>
<thead>
<tr>
<th>Variable</th>
<th>Alcohol Users (N=96)</th>
<th>Drug Users (N=31)</th>
<th>Does not use drugs/alcohol (N=31)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel connected to the Rowan campus community</td>
<td>f, %</td>
<td>f, %</td>
<td>f, %</td>
</tr>
<tr>
<td>16, 16.67</td>
<td>3, 9.68</td>
<td>6, 19.35</td>
<td></td>
</tr>
<tr>
<td>12, 12.5</td>
<td>3, 9.68</td>
<td>8, 25.81</td>
<td></td>
</tr>
<tr>
<td>21, 21.88</td>
<td>4, 12.9</td>
<td>8, 25.81</td>
<td></td>
</tr>
<tr>
<td>11, 11.46</td>
<td>5, 16.13</td>
<td>5, 16.13</td>
<td></td>
</tr>
<tr>
<td>11, 11.46</td>
<td>10, 32.26</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel that I have a “place” in this community</td>
<td>f, %</td>
<td>f, %</td>
<td>f, %</td>
</tr>
<tr>
<td>14, 14.58</td>
<td>3, 9.68</td>
<td>7, 22.58</td>
<td></td>
</tr>
<tr>
<td>11, 11.45</td>
<td>3, 9.68</td>
<td>6, 19.35</td>
<td></td>
</tr>
<tr>
<td>17, 17.71</td>
<td>6, 19.35</td>
<td>5, 16.13</td>
<td></td>
</tr>
<tr>
<td>20, 20.83</td>
<td>3, 9.68</td>
<td>2, 6.45</td>
<td></td>
</tr>
<tr>
<td>8, 8.33</td>
<td>10, 32.26</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel welcome on Rowan University’s campus</td>
<td>f, %</td>
<td>f, %</td>
<td>f, %</td>
</tr>
<tr>
<td>8, 8.33</td>
<td>0, 0</td>
<td>5, 16.13</td>
<td></td>
</tr>
<tr>
<td>8, 8.33</td>
<td>6, 19.35</td>
<td>8, 25.81</td>
<td></td>
</tr>
<tr>
<td>19, 19.79</td>
<td>8, 25.81</td>
<td>10, 32.26</td>
<td></td>
</tr>
<tr>
<td>29, 30.21</td>
<td>7, 7.29</td>
<td>3, 9.68</td>
<td></td>
</tr>
<tr>
<td>7, 7.29</td>
<td>25, 26.04</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does not use drugs/alcohol (N=31)</td>
<td>f, %</td>
<td>f, %</td>
<td>f, %</td>
</tr>
<tr>
<td>6, 19.35</td>
<td>8, 25.81</td>
<td>5, 16.13</td>
<td></td>
</tr>
<tr>
<td>8, 25.81</td>
<td>5, 16.13</td>
<td>1, 3.23</td>
<td></td>
</tr>
<tr>
<td>5, 16.13</td>
<td>6, 19.35</td>
<td>6, 19.35</td>
<td></td>
</tr>
<tr>
<td>8, 25.81</td>
<td>2, 6.45</td>
<td>6, 19.35</td>
<td></td>
</tr>
<tr>
<td>10, 32.26</td>
<td>3, 9.68</td>
<td>6, 19.35</td>
<td></td>
</tr>
</tbody>
</table>
Research question three. What effects do these habits have on Black students in regard to their mental health. Students were asked about their mental health and well-being in this survey. When asked directly about whether they are currently receiving counseling or therapeutic services, 19 students stated that they are, 75 stated that they are not, and 35 stated that they are not receiving services but would like to begin receiving them. From a different perspective, of the students that answered this question, 41.9% desire mental health services while only 14.73% are receiving it. Furthermore, that means that of the students that desire mental health services, only 35.19% are receiving them. Table 6 shows an outline of this data with reference to student drug and alcohol usage. It should also be noted that all drug users in this study also reported using alcohol. Therefore, drug users also fit the criteria for being an alcohol user in these statistics.

Table 6

Alcohol, Drugs, and Need for Mental Health Services

<table>
<thead>
<tr>
<th>Alcoholic User (N=96)</th>
<th>Drug User* (N=31)</th>
<th>Uses Neither Drugs Nor Alcohol (N=32)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f</td>
<td>%</td>
</tr>
<tr>
<td>Currently receiving mental health services</td>
<td>16</td>
<td>16.67</td>
</tr>
<tr>
<td>Not currently receiving mental health services, but I would like to</td>
<td>28</td>
<td>29.17</td>
</tr>
<tr>
<td>Not currently receiving services, and I do not want to</td>
<td>52</td>
<td>54.17</td>
</tr>
</tbody>
</table>

*All drug users in this study also reported using alcohol
From this data, it can be seen that 45.84% of alcohol users and 48.39% of drug users have a want/need for mental health services while 29.03% of students that do not use either possess the same desire.

Table 7 shows an outline of what students answered when inquired further about their mental health treatment history with the same filters between alcohol users, drug users, and those that do not use either. However, this table refers to percentages regarding the number of students that stated in the affirmative of any of the variables.

Table 7

<table>
<thead>
<tr>
<th>Alcohol, Drugs, and Mental Health History/Treatment</th>
<th>Uses Neither Drugs Nor Alcohol</th>
</tr>
</thead>
<tbody>
<tr>
<td>Variable</td>
<td>Alcohol User</td>
</tr>
<tr>
<td></td>
<td>f</td>
</tr>
<tr>
<td>Attended counseling for mental health concerns</td>
<td>27</td>
</tr>
<tr>
<td>after starting college (N=30)</td>
<td></td>
</tr>
<tr>
<td>Taken a prescription medicine for mental health</td>
<td>3</td>
</tr>
<tr>
<td>concerns after starting college (N=4)</td>
<td></td>
</tr>
<tr>
<td>Been hospitalized for mental health concerns</td>
<td>2</td>
</tr>
<tr>
<td>after starting college (N=2)</td>
<td></td>
</tr>
</tbody>
</table>

*All drug users in this study also reported using alcohol

Mental health and well-being go beyond attending counseling meetings and receiving service from a medical professional. Therefore, students were also asked about their own self-care practices. Self care was defined in different ways by each student as it
was left as an open text box on the survey. Out of the 61 students that answered this question, 52 stated that they do practice self-care. This was described in multiple ways, but some of the recurring terms were exercise, spa days (both professional and personal), meditation, cleaning, reading, watching television, listening to music, sleeping, and talking to friends and family. Of these 52 students, 38 of them were alcohol users and 8 of them were drug users. Of the 9 students that said they do not practice self care, 4 of them were drug users and all of them were alcohol users.
Chapter V

Summary, Discussion, Conclusions, and Recommendations

Summary of the Study

This study was meant to learn about the reason or reasons that Black student use alcohol or drugs at a predominantly White institution, inquire how sense of belonging in this chosen community affects the alcohol and drug use rates of Black students, and see what effects these habits may or may not have on their mental health. This study was conducted through a Qualtrics survey distributed twice in a two-week period to all self-identifying Black or African-American students at Rowan University through their university provided email address.

Discussion of the Findings

Research question one. What do Black students describe as their reason(s) for alcohol and drug use. According to some research data, alcohol is often used as a form of social lubricant or to become more comfortable in uncertain situations or spaces (McCabe et al., 2007). This is why many questions regarding social life, behavior, and general value of a social experience were asked in this survey. While it is seen that these students do place high value on their social experiences, they also stated that they do not see alcohol as playing a large role in this. In fact, many students ranked “I like the way it tastes” as their top reason for consuming alcohol even though almost half of the alcohol users in this study stated that they do not enjoy getting drunk. The second highest ranked reason for consuming alcohol was “It relaxes me”, which may be in reference to
uncomfortable social situations, which would be more connected to previous research, but it cannot be solidified in this study due it not being a specific enough answer. Almost half of the participants also ranked “It is the best way to have a good time” in their top two choices for reasons for consuming alcohol, which supports to aforementioned research. However, overwhelmingly it was seen that students do not feel influenced by their peers to consume alcohol. In fact, when prompted to state whether or not they felt pressures to consume alcohol, many students wrote that they make their choices independently regardless of what their friends decide to do.

When asked about their drug usage, students gave a very different response than with alcohol. Based on this survey, drug usage has little to no connection with social experiences. In fact, drug users overwhelmingly stated that drug usage has no connection with their social life or due to habits of their family members. Drug users did tend to lean towards self-medication as a primary reason for using drugs. All drug users in this study also use marijuana, which had been legal for medical use in the State of New Jersey at the time of this study.

**Research question two.** How does sense of belonging/cultural climate in a chosen community like a university affect the alcohol and drug use and abuse rates of Black students. Overall, when all students involved in this study were asked about feeling welcome on Rowan University’s campus, a large majority of them stated in the affirmative. However, when asked if they feel connected to that community, more students stated that they did not feel this way than those that did. There was data showing that students do feel that they have a “place” in the community, but with this other data, it
would seem that they do not feel connected to the community as a whole but rather in
their own in-group of sorts.

When comparing this data between drug users, alcohol users, and those that use
neither, there was not an obvious difference in their sense of belonging in connection
with their usage of these items or lack thereof.

**Research question three.** *What effects do these habits have on Black students
specifically in regard to mental health.* From this data, almost 50% of alcohol or drug
users have a want/need for mental health services while about 28% of those that do not
use either have the same want/need. This means that of the 53 students that have a
want/need for these services, 83.01% of them are alcohol users and 28.3% of them are
drug users. However, only 65.31% of the survey population use alcohol and 21.09% of
the survey population use drugs. This shows that there is not an obvious connection
between drug use and a want/need for mental health services, there seems to be a much
more substantial connection between these needs and those students that consume
alcohol.

Regarding self care, it seems that there was little to no connection between drug
and alcohol use and these practices. This data was in line with the sample population
data.

**Conclusions**

In conclusion, this data further affirms the data of previous research that was
discussed in Chapter II. It can be seen that Black students use drugs and alcohol for
different reasons. Alcohol tends to be used for relaxation purposes, but this relaxation
may be in social situations or in spending time with oneself. Drugs tend to be used for self-medication, but the most common drug used by participants was marijuana, which is used in many states as a form of medicine. It was seen that while Black students do not feel strongly connected to the community at this predominantly White institution as a whole, they do feel that they have a “place” in the community. It can also be seen that alcohol and drug use do not have a large connection with this sense of belonging.

Regarding alcohol, drug use, and mental health, it should be noted that of the population of students that need/want mental health services, a large majority of them are alcohol users. This majority is also larger than the percentage of students that identified as alcohol users in the entirety of the sample and therefore, may be connected to mental health concerns in these students.

**Limitations**

This research study was completed as a capstone assignment for an academic program and needed to be completed before leaving the institution. Therefore, the survey could only be open for a short period of time. Due to an extended approval process from the Institutional Review Board, this survey could only be distributed for a maximum of a 3 week period rather than 7 weeks as was anticipated. Upon distribution, this survey was also misinterpreted by students in its purpose, which caused apprehension about participation in the survey and the nature of the topic. Of the students that raised concerns stemming from misinterpretation, they believed the study was sent out to students that the researchers believed had a higher probability of being a drug user. Since the study was sent to all Black or African-American students at the institution, these students believed that the researchers were assuming that all Black or African-American students were drug
or alcohol users. This was clarified on multiple occasions to students that inquired about the study by both researchers. Due to these misconceptions and concerns, the survey needed to be closed early, which resulted in only a 2 week period of data collection.

This study was initially intended to be a qualitative research study, which was a recommendation for future research in numerous studies about similar topics, but due to concern from the Institutional Review Board, this was not approved and it needed to be change to a quantitative study to protect the identity of the participants. Due to this, the research questions have been answered, but not to the extent recommended by previous researchers.

Due to the nature of this topic, it was essential to make all questions optional to allow students to not feel obliged to answer a question they feel did not apply to them or that made them uncomfortable. While this aided participants in their discomfort, this resulted in partial data loss for some questions that would have provided much deeper insight for answers to these questions.

A number of students expressed concerns over the study to the investigators and were much more receptive to the study after these conversations. Even though the purpose of the research was outlined in the recruitment email, students felt more comfortable after hearing the purposes reiterated in person.
Recommendations

My recommendations for future research on this topic are as follows:

1. Conduct the research over a longer period of time to gather more participants and more substantial data that can be applied to a larger population

2. Use recruitment methods that allow the researcher to directly speak to potential participants to ease dissonance

3. Conduct a qualitative research study in a way that protects the identity of participants
References


Appendix A

Consent Form and Survey Questions

Informed Consent

Consent to Participate in Research

You are being asked to participate in a research study that is intended to understand Black student alcohol and/or drugs use while attending a predominantly White institution. You will be presented with relevant information and asked to answer some questions about it. Please be assured that your responses will be kept completely confidential.

The study should take you around 10 minutes to complete. Your participation in this research is voluntary. You have the right to withdraw at any point during the study, for any reason, and without any prejudice. No identifiable information will be collected from this study, and if you choose to participate, your response will be completely anonymous. There are no additional expectations for subjects who complete this survey.

You may contact Calvin Mahony (mahony93@rowan.edu) or Dr. Drew Tinnin (tinnin@rowan.edu) if you have questions about the research, and/or the Office of Research Compliance at (856) 256-4078 if you have any questions about your rights as a research subject.

By clicking the button below, you acknowledge that your participation in the study is voluntary, you are 18 years of age, and that you are aware that you may choose to terminate your participation in the study at any time and for any reason.

Please note that this survey will be best displayed on a laptop or desktop computer. Some features may be less compatible for use on a mobile device.

- [ ] I consent, begin the study
- [x] I do not consent, I do not wish to participate

https://rowan.o1.lquitrices.com/QEditSectionBlocks/Ajax/GetSurveyPrintPreview?ContextSurveyID=SV_7WJ6GEFwEx4W&ContextLibraryID=UR_YyFmm3... 1/15
Age

Are you:

- Under 18
- 18 - 20
- 21 - 25
- 25 or older

Core

Part 1 of 5 - About You

Do you racially identify, in some part, as Black or African American?

- Yes
- No

During the last 12 months, how often did you usually have any kind of drink containing alcohol?

A drink we mean 0.5 ounces of absolute alcohol (e.g. a 12 ounce can or glass of beer or cooler, a 5 ounce glass of wine, or a drink containing 1 shot of liquor).

Choose only one. Your responses are anonymous.

- Every day
- 5 - 6 times a week
- 3 - 4 times a week
- 2 times a week
- 1 time a week
- 2 - 3 times a month
Do you use drugs?
Your responses are anonymous.

- Yes, 4 or more times a week
- Yes, 2 - 3 times per week
- Yes, once a week or less
- Yes, once a month
- I have in the past, but no longer
- Never

The following statements describe different student experiences/thoughts. Please indicate how well each statement describes your thoughts on each statement. Read each statement carefully, select only one answer per statement.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neither Disagree nor Agree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic success is very important to me</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I believe the networks you form at college are vital for success</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Having a good time while in school is very important to me</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>I use alcohol to self-medicate</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Drinking is an important part of my social life</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

I enjoy getting drunk 〇 〇 〇 〇 〇 〇
Drug use is an important part of my social life 〇 〇 〇 〇 〇 〇
I only use drugs if someone gives them to me 〇 〇 〇 〇 〇 〇
I use drugs to self-medicate 〇 〇 〇 〇 〇 〇

Are you currently receiving counseling or other therapeutic services?

〇 Yes, on campus services
〇 Yes, off campus service
〇 Both on and off campus
〇 Not currently receiving services, but I would like to
〇 Not currently receiving services, and I do not want/need to

Alcohol Use

Part 2 of 5 - Alcohol Use

During the last 12 months, how many alcoholic drinks did you have on a typical day when you drank alcohol? Select the box to the right if the number is greater than 20.

0 2 4 6 8 10 12 14 16 18 20

More than 20

Drag the slider to the number you choose 〇
During the last 12 months, what is the largest amount of drinks containing alcohol that you drank within a 24-hour period? Select the box to the right if the number is greater than 20.

<table>
<thead>
<tr>
<th>0</th>
<th>2</th>
<th>4</th>
<th>6</th>
<th>8</th>
<th>10</th>
<th>12</th>
<th>14</th>
<th>16</th>
<th>18</th>
<th>20</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Drag the slider to the number you choose □

During the last 12 months, how often did you drink this largest number of drinks? Choose only one.

☐ Every day
☐ 5 to 6 days a week
☐ 3 to 4 days a week
☐ twice a week
☐ once a week
☐ once a month
☐ 1 or 2 days in the past year

During the last 12 months, how often did you have 5 or more (males) or 4 or more (females) drinks containing any kind of alcohol in within a two-hour period?

☐ Every day
☐ 5 to 6 days a week
☐ 3 to 4 days a week
☐ two days a week
☐ one day a week
☐ 2 to 3 days a month
☐ one day a month
Which of the following types of alcohol have you consumed since you enrolled into college?

- Beer
- Wine
- Four Loko, White Claw, other prepackaged alcohol drink
- Liquor - in a mixed drink, jungle juice, etc.
- Liquor - Shots

In what setting(s) do you consume...
Check all that apply. Do not check any of the boxes for that row if you do not typically consume a particular type of alcohol.

<table>
<thead>
<tr>
<th></th>
<th>In my home/residence</th>
<th>At a party</th>
<th>At a bar/club</th>
<th>At other public events (sports or concert venues, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beer</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wine</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Four Loko, White Claw, other prepackaged alcohol drink</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Liquor - in a mixed drink, jungle juice, etc.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Liquor - Shots</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Rank the reason(s) below that best describe why you drink alcoholic beverages.

- I enjoy the taste
- It relaxes me
- Because my friends drink
- Because it’s the best way to have a good time

https://rowan.co1.qualtrics.com/Q/EditSection/Blocks/AjaxGetSurveyPrintPreview/?ContextSurveyID=5V_7WJzGEnFvSExEXVf&ContextLibraryID=UR_byEmm3%...   6/15
What are any benefits or disadvantages you experience from drinking alcohol?

Do you feel any external or internal pressures to drink alcohol? If yes, please describe them here.

Do you feel that your alcohol use affects your mental health?

☐ Yes
☐ No

Drugs (General)

Part 3 of 5 - Drug Use

Have you ever used any of the following drugs? Select all that apply.

☐ Marijuana, hashish (blunt, boom, dope, gangster, ganja, grass, hash, hemp, herb, joint, bud, Mary Jane, pot, reefer, green, trees, smoke, sinsemilla, skunk, weed)
☐ Opioids (heroin, opium, prescription or OTC drugs)
☐ Cocaine (blow, bump, C, candy, Charlie, coke, crack, flake, rock, snow, toot)
☐ Amphetamine (bennies, black beauties, crosses, hearts, LA turnaround, speed, truck drivers, uppers)
- Methamphetamine (meth, ice, crank, chalk, crystal, fire, glass, go fast, speed)
- Methylenedioxymethamphetamine (MDMA, ecstasy, Adam, clarity, Eve, lovers' speed, Molly, peace, uppers)
- Flunitrazepam (rohypnol, forget-me pill, Mexican Valium, R2,roach, Roche, roofies, roofinol, rope, rophies)
- Gamma-hydroxybutyrate (GHB, G, Georgia home boy, grievous bodily harm, liquid ecstasy, soap, scoop, goop, liquid X)
- Ketamine (cat Valium, K, Special K, vitamin K)
- Phenycyclidine (PCP, angel dust, boat, hog, love boat, peace pill)
- Salvia Divinorum (Shepherdess's Herb, Maria Pastora, magic mint, Sally-D)
- Lysergic acid diethylamide (LSD, acid, blotter, cubes, microdot, yellow sunshine, blue heaven)
- Mescaline (buttons, cactus, mesc, peyote)
- Psilocybin (Magic mushrooms, purple passion, shrooms, little smoke)
- Anabolic steroids (Anadrol, Oxandrin, Durabolin, Depo-Testosterone, Equipoise: roids, juice, gym candy, pumpers)
- Inhalants: Solvents (paint thinners, gasoline, glues); gases (butane, propane, aerosol propellants, nitrous oxide); or nitrites (isopropyl, isobutyl, cyclohexyl, laughing gas, poppers, snappers, whippets)

Click to write the question text

<table>
<thead>
<tr>
<th>In My Home/Residence</th>
<th>At a party</th>
<th>At a bar/club</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marijuana, hashish (blunt, boom, dope, gangster, ganja, grass, hash, hemp, herb, joint, bud, Mary Jane, pot, reefer, green, trees, smoke, sinsemilla, skunk, weed)</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Opioids (heroin, opium, prescription or OTC drugs)</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Cocaine (blow, bup, C, candy, Charlie, coke, crack, flake, rock, snow, toot)</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

https://rowan.co1.qualtrics.com/QReditSection/Blocks/AjaxGetSurveyPrintPreview?ContextSurveyID=sV_jWFr9EEnFaxEv3V&ContextLibraryID=LR_byEMzm3... 8/15
<table>
<thead>
<tr>
<th>In My Home/Residence</th>
<th>At a party</th>
<th>At a bar/club</th>
<th>At other public events (sports or concert venues, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Amphetamine</strong> (bennies, black beauties, crosses, hearts, LA turnaround, speed, truck drivers, uppers)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Methamphetamine</strong> (meth, ice, crank, chalk, crystal, fire, glass, go fast, speed)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Methylenedioxyamphetamine</strong> (MDMA, ecstasy, Adam, clarity, Eve, lovers’ speed, Molly, peace, uppers)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Flunitrazepam (rohypnol, forget-me pill, Mexican Valium, R2, roach, Roche, roofies, roofinol, rope, rophies)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Gamma-hydroxybutyrate (GHB, G, Georgia home boy, grievous bodily harm, liquid ecstasy, soap, scoop, goop, liquid X)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Ketamine</strong> (cat Valium, K, Special K, vitamin K)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Phencyclidine (PCP, angel dust, boat, hog, love boat, peace pill)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Salvia Divinorum</strong> (Shepherdess’s Herb, Maria Pastora, magic mint, Sally-D)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Lysergic acid diethylamide (LSD, acid, blotter, cubes, microdot, yellow sunshine, blue heaven)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

https://rowan.co1.qualtrics.com/Q/editSection/Blocks/AjaxGetSurveyPrintPreview?ContextSurveyId=SV_TWjGErFvYV&ContentLibraryId=UR_6ygFm33... 9/15
<table>
<thead>
<tr>
<th>Drug Type</th>
<th>In My Home/Residence</th>
<th>At a party</th>
<th>At a bar/club</th>
<th>At other public events (sports or concert venues, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mescaline (buttons, cactus, mesc, peyote)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psilocybin (Magic mushrooms, purple passion, shrooms, little smoke)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anabolic steroids (Anadrol, Oxandrin, Durabolin, Depo-Testosterone, Equipoise: roids, juice, gym candy, pumpers)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inhalants: Solvents (paint thinners, gasoline, glues); gases (butane, propane, aerosol propellants, nitrous oxide); or nitrites (isoamyl, isobutyl, cyclohexyl, laughing gas, poppers, snappers, whippets)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

During the last 12 months, how often did you typically use drugs?

- [ ] Every day
- [ ] 5 to 6 days a week
- [ ] 3 to 4 days a week
- [ ] twice a week
- [ ] once a week
- [ ] 2 to 3 days a month
- [ ] once a month
- [ ] 1 or 2 days in the past year
Do you feel any external or internal pressures to use drugs? If yes, please describe them here.

Do you feel that your drug use affects your mental health?
- Yes
- No

Belonging

Part 4 of 5 - Campus Climate

Please indicate the extent to which you agree or disagree with each of the following statements.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neither Agree or Disagree</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel connected to the Rowan campus community</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel that I have a “place” in this community</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel welcome on Rowan University’s Glassboro campus</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I’m a leader and others often look to me for leadership</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School interferes with my social life</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Statement</td>
<td>Strongly Disagree</td>
<td>Disagree</td>
<td>Neither Agree or Disagree</td>
<td>Agree</td>
<td>Strongly agree</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------</td>
<td>-------------------</td>
<td>----------</td>
<td>---------------------------</td>
<td>-------</td>
<td>----------------</td>
</tr>
<tr>
<td>My family would not approve of my drinking/drug habits</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>For my family, drinking is/was part of having a good time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>For my family, drug use is/was part of having a good time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

How do you feel a sense of community among students at Rowan?

<table>
<thead>
<tr>
<th>Sense of Community</th>
<th>Very Weak Sense of Community</th>
<th>Weak Sense of Community</th>
<th>Neutral</th>
<th>Strong Sense of Community</th>
<th>Very Strong Sense of Community</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are you involved in any cultural organizations?</td>
<td>Yes, currently</td>
<td>I have been, but no longer</td>
<td>No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Do you belong to a social fraternity or sorority?

- Yes, NPHC (Divine Nine/National Pan-Hellenic Council)
- Yes, NPC sorority (National Panhellenic Conference)
- Yes, IFC fraternity (Interfraternity Council)
- Yes, GCOC fraternity/sorority (Greek Cultural Organizations Council)
- Yes, other fraternity/sorority affiliation
- No
Since you answered "other fraternity/sorority affiliation" previously, what type of fraternity/sorority are you affiliated with?

Mental Health

Last Part (5 of 5) - Well-being

Please indicate when you have had the following experiences (click all that apply):

<table>
<thead>
<tr>
<th>Experience</th>
<th>Never</th>
<th>Before starting college</th>
<th>After starting college</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attended counseling for mental health concerns</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Taken a prescribed medication for mental health concerns</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Been hospitalized for mental health concerns</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Felt the need to reduce your alcohol or drug use</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Others have expressed concern about your alcohol or drug use</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Received treatment for alcohol or drug use</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

Are you currently attending any regular meetings hosted by the wellness center? For example, counseling sessions (group or individual), “U Good Fam?”, etc.

☐ Yes
☐ No, but I have in the past
☐ No, never have
Do you practice self-care? If yes, in what way(s)?

How do you feel drug use has an effect on your mental health?

How do you feel that your alcohol use affects your mental health?

Powered by Qualtrics
Appendix B

Recruitment Email

SUBJECT LINE: Your Participation Needed for Research on Life at a Predominantly White Institution!

Thank you for your interest in participating in this important research study! Your thoughts and experiences are essential to the successful completion of this study on Black student life at a predominantly White institution. You will be asked some questions on your personal drinking/drug use habits, student involvement, and mental health in this survey. All of your answers are completely anonymous and your participation is voluntary. To participate in the study, you must be at least 18 years old and identify as a Black or African American undergraduate student at Rowan University.

With this research, we aim to evaluate the use of drugs and alcohol in the lives of Black or African American students at Rowan University, discover why these items are used by students, inquire about sense of belonging on campus, and uncover what effects these habits may have on mental health. Your answers will also be used to create better resources for Black or African American students at Rowan University in the future.

This study is in the form of a Qualtrics survey will take from 5 – 10 minutes to complete. Your participation in this survey is completely voluntary and you may withdraw from the study at any point, for any reason, and without prejudice. There will be zero pieces of identifiable information taken from this survey to keep your answers completely anonymous.

The link to participate in this survey is go.rowan.edu/PW12020. Thank you in advance for your participation.

You may contact Calvin Mahony (mahony93@rowan.edu) or Dr. Drew Tinnin (tinnin@rowan.edu) if you have questions about the research, and/or the Office of Research Compliance at (856) 256-4078 if you have any questions about your rights as a research subject.

This study has been approved by Rowan University’s IRB (#Pro2019000780)