

Policy Statement as a Drug-Free Institution

The University of Kentucky is committed to providing a healthy and safe environment for its students, faculty and staff. The University has defined conduct in relation to the unlawful possession, use, dispensation, distribution or manufacture of alcohol or illicit drugs. Conduct which is violative of this definition poses unacceptable risks and disregard for the health, safety, and welfare of members of the University community and shall result in disciplinary action up to and including suspension or termination.

As a recipient of federal grants and contracts, the University of Kentucky gives this notice to students, faculty and staff that it is in compliance with and shall continue to be in compliance with the Drug-Free Workplace Act of 1988 and the Drug-Free Communities Act Amendment of 1989. Students, faculty and staff are herein notified of the standards of conduct which shall be applicable while on University of Kentucky property, on University business, and/or at University sponsored activities.

Standards of Conduct

By University regulations, by federal law, by state law, and, in some instances, by local ordinance, students, faculty and staff are prohibited from the **unlawful** possession, use, dispensation, distribution, or manufacture of illicit drugs on University property, on University business and/or at University sponsored activities.

Under University regulations, students, faculty and staff are required to abide by state laws concerning alcoholic beverages. Basically, Kentucky laws state that if one is under the age of 21, it is unlawful to:

- (1) possess or consume alcoholic beverages,
- (2) misrepresent one's age for the purpose of purchasing alcoholic beverages, or
- (3) use a fake ID in an attempt to purchase alcoholic beverages.

No matter what one's age, Kentucky law states that it is unlawful to:

- (1) procure any alcoholic beverages for anyone under 21 years of age or
- (2) drink or to be drunk in a public place.

University campuses and buildings are considered as public places for purposes of these laws, except for a facility licensed to serve alcoholic beverages, and except for a facility used as a private residence, unless University regulations state otherwise.

Ordinances of the Lexington-Fayette Urban County Government basically parallel the state laws.

Any member of the University student body, faculty, or staff who violates these defined standards of conduct shall be subject to appropriate disciplinary action up to and including suspension and/or termination. The specifically defined standards of conduct, the disciplinary procedures, and the appropriate sanctions are detailed in the codes of student conduct and in the Administrative Regulations (AR II-1.1-4, AR II-1.1-10, AR II-1.1-11 and Human Resource Policy & Procedures Numbers 13.0 and 14.0).

In addition, it is a violation of state law to operate a motor vehicle while under the influence of any substance which may impair one's driving ability (drugs or alcoholic beverages).

Sanctions

Under University regulation, students who violate this standard of conduct are subject to disciplinary action from a minimum of a warning to a maximum of suspension from the University. Students who reside in University Housing are subject to further disciplinary action which may vary from a warning to termination of their housing contract.

Faculty and staff are subject to disciplinary action from a minimum of a warning to a maximum of termination from University employment.

Under state and federal drug laws, the gravity of the sanction depends on the classification of the controlled substance, the particular activity involved (possession or trafficking which includes manufacture, sale and possession with intent to sell), and whether or not multiple convictions are involved.

Under Kentucky law, the most severe penalty for a drug law violation involves trafficking. On a first offense conviction, one may receive a fine of up to \$10,000.00 and/or a sentence of up to ten (10) years in the penitentiary; for subsequent offenses, the penalties may be doubled.

Under federal laws, for simple possession of a controlled substance, one may be imprisoned for up to one (1) year and/or fined up to \$1,000.00. For subsequent offenses, one may be imprisoned for up to three (3) years and/or fined up to \$5,000.00. Under federal law, one may be fined up to \$8,000,000.00 and/or may be sentenced from not less than ten (10) years up to life in prison for trafficking in drugs. For violations of other federal drug laws, one may receive life in prison or the death penalty.

Under both state and federal laws, one may suffer the loss of whatever property (house, farm) or possessions (vehicle) which one may have used in the drug trade.

Specific penalties under federal laws for trafficking in various controlled substances are outlined in Appendix A to this policy.

Sanctions for violation of state alcohol laws vary from a fine of \$10.00 to \$2,000.00, a sentence of forty-eight (48) hours to twelve (12) months in jail, and/or suspension of one's operators license.

Notice of Drug-Related Conviction

In compliance with the Federal Drug-Free Workplace Act of 1988, **any** employee shall notify the immediate supervisor if the employee is convicted of a criminal drug offense occurring in the workplace or while on University business within five (5) days of the conviction. The University shall take appropriate sanction and remedies in accordance within its policies. The provisions of this section are applicable to students who are employees of the University. If the employee is under a federal contract or grant, the University shall notify the contracting or granting agency of the conviction and of its actions. This section of this policy is also applicable to students who receive a Pell grant (federal grant).

Health Risks

The scope and impact of health risks from alcohol and drug abuse are both alarming and well-documented, ranging from mood-altering to life-threatening, with consequences that extend beyond the individual to family, organizations and society at large. The University of Kentucky, therefore, conducts regular programs to educate its students, faculty and staff that consumption and use of drugs may alter behavior, distort perception, impair thinking, impede judgment, and lead to physical or psychological dependence.

Alcohol and/or drugs and/or drug abuse may lead to the deterioration of physical health by causing or contributing to various health conditions including but not limited to fatigue, nausea, personal injury, insomnia, pathological organ damage, some forms of cancer, pancreatitis, heart attack, respiratory depression, birth defects, convulsions, coma, and even death. Alcohol and drug abuse may also result in deterioration of mental health by causing or contributing to various conditions such as increased aggression, hallucinations, depression, disorientation, and psychosis.

A detailed list of the effects and health risks associated with the use of many specific drugs appears as Appendix B to this policy.

Alcohol consumption causes a number of marked changes in behavior. Even low doses significantly impair the judgment and coordination required to drive a car safely, increasing the likelihood that the driver will be involved in an accident.

Low to moderate doses of alcohol also increase the incidence of a variety of aggressive acts, including spouse and child abuse.

Moderate to high doses of alcohol cause marked impairments in higher mental functions, severely altering a person's ability to learn and remember information.

Very high doses cause respiratory depression and death. If combined with other depressants of the central nervous system, much lower doses of alcohol will produce the effects just described.

Repeated use of alcohol can lead to dependence. Sudden cessation of alcohol intake is likely to produce withdrawal symptoms, including severe anxiety, tremors, hallucinations, and convulsions. Alcohol withdrawal can be life-threatening. Long-term consumption of large quantities of alcohol, particularly when combined with poor nutrition, can also lead to permanent damage to vital organs such as the brain and the liver.

Mothers who drink alcohol during pregnancy may give birth to infants with fetal alcohol syndrome. These infants have irreversible physical abnormalities and mental retardation. In addition, research indicates that children of alcoholic parents are at greater risk than other youngsters of becoming alcoholics.

Training and Counseling Resources

Continuous efforts are made to make students, faculty and staff aware of the on-campus and off-campus programs which provide information and professional services on matters related to the abuse of alcohol and drugs.

Lists of sources for information and counseling for students are published in the *Kernel* regularly. Students are encouraged to contact the Dean of Students and/or the Office of Residence Life for information and appropriate referral.

Counseling is provided by such areas as the Testing and Counseling Center, the Department of Counseling and Psychology in the College of Education, the Medical Student Support Services program, and an In-resident counselor in the residence halls system.

For faculty and staff the Employee Assistance Program, REFER, specifically provides information as to resources available to employees.

Other counseling, treatment, and rehabilitation services are available in the Lexington community as well as communities throughout the state in which Lexington Community College and College of Agriculture employees are located.

- Comprehensive Care Centers offer both counseling and treatment.
- The toll free number for Drug Information Services for Kentucky (DISK) is 859-253-4695.
- In the Lexington area, the number for Alcoholics Anonymous (AA) is 859-276-2917; the number for Narcotics Anonymous is 859-253-4673. (Check local telephone directory for listings.)
- The Chrysalis House Inc. (859-225-9912) offers long term, half-way house residential treatment for recovering chemically dependent women.
- University of Kentucky Family Center 859-257-7755.
- University of Kentucky Employee Assistance Program (REFER) 859-257-1467.

Many other services are available and may be located by looking in the local telephone directory yellow pages under "Social Services" or "Alcohol Abuse & Addiction – Information & Treatment" or in the section at the front of the telephone directory.

Policy Review

This policy statement and any revisions thereto shall be distributed annually to students and employees. Distribution shall be the responsibility of the Provost for Student Affairs and the Director for Human Resources.

Annual Review Policy – The Associate Provost for Student Affairs and the Director for Human Resources shall review and interpret policies and procedures relevant to this policy statement. These two administrators shall jointly be responsible for maintaining records of the annual review of the policy statement.

Appendix B

Controlled Substances – Uses & Effects											
DRUGS CSA SCHEDULES	TRADE OR OTHER NAMES	MEDICAL USES	DEPENDENCE		TOLERANCE	DURATION (Hours)	USUAL METHODS OF ADMINIS- TRATION	POSSIBLE EFFECTS	EFFECTS OF OVERDOSE	WITHDRAWAL SYNDROME	
			Physical	Psycho- logical							
NARCOTICS											
Opium	II III V	Dover's Powder, Paragonic Parapetctolin	Analgesic, antidiarrheal	High	High	Yes	3-6	Oral, smoked	Euphoria, drowsiness, respiratory depression, constricted pupils, nausea	Slow and shallow breathing, clammy skin, convul- sions, coma, possible death	Watery eyes, runny nose, yawning, loss of appetite, irritability, tremors, panic, cramps, nausea, chills and sweating
Morphine	II III	Morphine, MS-Contin Roxanol, Roxanol-SR	Analgesic, antitussive	High	High	Yes	3-6	Oral, smoked, injected			
Codeine	II III V	Tylenol w/Cod., Empirin w/Cod., Robitussin A-C, Florinal w/Cod.	Analgesic, antitussive	Moderate	Moderate	Yes	3-6	Oral, injected			
Heroin	I	Diacetylmorphine, Horse, Smack	None	High	High	Yes	3-6	Injected, sniffed, smoked			
Hydromorphone	II	Dilaudid	Analgesic	High	High	Yes	3-6	Oral, injected			
Meperidine (Pethidine)	II	Demarol, Mepergan	Analgesic	High	High	Yes	3-6	Oral, injected			
Methadone	II	Dolophine, Methadone, Methadose	Analgesic	High	High-Low	Yes	12-24	Oral, injected			
Other Narcotics	I II III IV V	Numorphan, Percodan, Percocet, Tylox, Tussionex, Fentanyl, Darvon, Lomotil, Talwin ²	Analgesic, antidiarrheal antitussive	High-Low	High-Low	Yes	Variable	Oral, injected			
DEPRESSANTS											
Chloral Hydrate	IV	Noctec	Hypnotic	Moderate	Moderate	Yes	5-8	Oral	Slurred speech, disorienta- tion, drunken behavior without odor of alcohol	Shallow respiration, clammy skin, dilated pupils, weak and rapid pulse, coma, possible death	Anxiety, insomnia, tremors, delirium, convulsions, possible death
Barbiturates	II III IV	Amytal, Butisol, Florinal, Lotusate, Nembutal, Seconal, Tuinal, Phenobarbital	Anesthetic, anti- convulsant, sedative hypnotic, veterinary euthanasia agent	High-Mod.	High-Mod.	Yes	1-16	Oral			
Benzodiazepines	IV	Ativan, Dalmane, Diazepam, Librium, Xanax, Serax, Valium, Tranxex, Verstran, Versad Halcion, Paxipam, Restoril	Antianxiety, anti- convulsant, sedative, hypnotic	Low	Low	Yes	4-8	Oral			
Methaqualone	I	Quaalude	Sedative, hypnotic	High	High	Yes	4-8	Oral			
Glutethimide	III	Doriden	Sedative, hypnotic	High	Moderate	Yes	4-8	Oral			
Other Depressants	III IV	Equanil, Miltown, Noludar, Placidyl, Valmid	Antianxiety, sedative, hypnotic	Moderate	Moderate	Yes	4-8	Oral			
STIMULANTS											
Cocaine ¹	II	Coke, Flake, Snow, Crack	Local anesthetic	Possible	High	Yes	1-2	Sniffed, smoked, injected	Increased alertness, excitation, euphoria, increased pulse rate & blood pressure, insomnia, loss of appetite	Agitation, increase in body tempera- ture, hallucina- tions, convul- sions, possible death	Apathy, long periods of sleep, irritability, depression, disorienta- tion
Amphetamines	II	Biphetamine, Delcobese, Desoxyn, Dexedrine, Obetrol	Attention deficit disorders, narcolepsy, weight control	Possible	High	Yes	2-4	Oral, injected			
Phenmetrazine	II	Preludin	Weight control	Possible	High	Yes	2-4	Oral, injected			
Methylphenidate	II	Ritalin	Attention deficit disorders, narcolepsy	Possible	Moderate	Yes	2-4	Oral, injected			
Other Stimulants	III IV	Adipex, Cylert, Didrex, Ionamin, Melliet, Plegine, Sancrex, Tenuate, Tepanil, Prelu-2	Weight control	Possible	High	Yes	2-4	Oral, injected			
HALLUCINOGENS											
LSD	I	Acid, Microdot	None	None	Unknown	Yes	8-12	Oral	Illusions and hallucina- tions, poor perception of time and distance	Longer, more intense "trip" episodes, psychosis, possible death	Withdrawal syndrome not reported
Mescaline & Peyote	I	Mexc. Buttons, Cactus	None	None	Unknown	Yes	8-12	Oral			
Amphetamine Variants	I	2,5-DMA, PMA, STP, MDA, MDMA, TMA, DOM, DOB	None	Unknown	Unknown	Yes	Variable	Oral, injected			
Phencyclidine	II	PCP, Angel Dust, Hog	None	Unknown	High	Yes	Days	Smoked, oral, injected			
Phencyclidine Analogues	I	PCE, PCPy, TCP	None	Unknown	High	Yes	Days	Smoked, oral, injected			
Other Hallucinogens	I	Bufofenine, Ibogaine, DMT, DET, Psilocybin, Psilocyn	None	None	Unknown	Possible	Variable	Smoked, oral, injected, sniffed			
CANNABIS											
Marijuana	I	Pot, Acapulco Gold, Grass, Reefer, Sinsemilla, Thai Sticks	None	Unknown	Moderate	Yes	2-4	Smoked, oral	Euphoria, relaxed inhibitions, increased appetite, disoriented behavior	Fatigue, paranoia, possible psychosis	Insomnia, hyperactiv- ity, & decreased appetite occasionally reported
Tetrahydrocannabinol	I II	THC, Marinol	Cancer chemotherapy, antinauseant	Unknown	Moderate	Yes	2-4	Smoked, oral			
Hashish	I	Hash	None	Unknown	Moderate	Yes	2-4	Smoked, oral			
Hashish Oil	I	Hash Oil	None	Unknown	Moderate	Yes	2-4	Smoked, oral			

¹ Designated a narcotic under the CSA ² Not designated a narcotic under the CSA