

Life at Lehigh: Community and Well-being Survey 2023-24 Data Report

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Summary

This report provides survey results from the Life at Lehigh: Community and Well-being Survey from academic year 2023-24. The survey, which is administered to undergraduate students, includes various measures that are related to well-being. Included are measures of flourishing (positive mental health), anxiety, depression, loneliness, sense of belonging, and alcohol and other drug use. It also contains measures for specific Lehigh programs and interventions as well as university resource use. This summary report provides:

- An overview of the survey measures and corresponding responses
- Select trends over time
- Select national benchmark data

While select key measures are highlighted in this report, the appendix contains frequency distributions for all other questions included in the survey. Unless otherwise noted, data from the fall '23 and spring '24 are combined for the purpose of this report and results are unweighted.

About the Survey

The biannual Life at Lehigh: Community and Well-being Survey was administered to undergraduate students in November 2023 and April 2024. This survey evolved from a long-standing survey called the "Alcohol Use and Social Options Survey". As its name suggests, the focus of the survey was on alcohol use as well as interest and involvement in some alcohol-free social options at Lehigh. Beginning in Fall 2020, the survey was redesigned and expanded to include other measures related to students' wellbeing, while still including alcohol and other drug use measures. For this reason, some historical trends are available for earlier years (e.g., alcohol use) while other measures contain data starting in the year 2020. The overall response rate, including fall and spring responses, for the 2023-24 academic year was 21% (N = 880 in the fall; N= 354 in the spring).

Flourishing

In this survey, we used the Flourishing Scale, a widely used scale that was developed and validated by Diener, Wirtz, Kim-Prieto, Choi, and Biswas-Diener (2009). The Flourishing Scale is a "brief 8-item summary measure of the respondent's self-perceived success in important areas such as relationships, self-esteem, purpose, and optimism. The scale provides a single psychological well-being score." The eight survey items are on a 7-point Likert scale (strongly disagree=1 to strongly agree=7). Table 1 provides the survey items and the mean responses from our survey data. All mean scores fall between 5 and 6. This means, on average, students fall between "somewhat agreeing" and "agreeing" with these statements.

Table 1: Flourishing scale and results

Rate your agreement with following:	Mean score
I lead a purposeful and meaningful life	5.6
My social relationships are supportive and rewarding	5.8
I am engaged and interested in my daily activities	5.5
I actively contribute to the happiness and well-being of others	5.8
I am competent and capable in the activities that are important to me	5.8
I am a good person and live a good life	5.9
I am optimistic about my future	5.7
People respect me	5.7

Scale: 1 = Strongly disagree, 2 = Disagree, 3= Somewhat disagree, 4 = Neither agree nor disagree, 5 = Somewhat agree, 6 = Agree, 7 = Strongly agree

Several sources, including the American College Health Association, use the cutoff combined score of 48 (scores of individual items are summed) on the Flourishing Scale to define "Positive Mental Health". This score can be interpreted as, on average, at least agreeing ("Agree" or "Strongly Agree") with the statements above. By this definition, 51% of our surveyed students meet this threshold of "positive mental health".

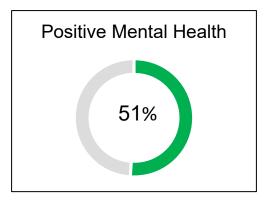


Figure 1: Flourishing/ Positive Mental Health

Depression and Anxiety

In this survey, the Patient Health Questionnaire-4 (PHQ-4) was used as a measure of anxiety and depression. This set of four questions was developed and validated by Kroenke, Spitzer, Williams, and Lowe (2009) as an ultra-brief screening tool for anxiety and depression. The measure has been used extensively in practice and research. The PHQ-4 consists of two subscales: a two-item measure of anxiety (GAD-2) and a two-item measure of depression (PHQ-2). The individual survey items and the frequency distributions for all survey respondents are provided in Table 2.

Table 2: PHQ-4 (Anxiety and Depression) scale and results

Over the past two weeks, how often have you been bothered by the following problems:	Not at all	Several Days	More than half the days	Nearly every day
Scores	0	1	2	3
Feeling nervous, anxious or on edge	16.5%	40.9%	22.6%	20.0%
Not being able to stop or control worrying	32.7%	33.1%	18.2%	16.0%
Little interest or pleasure in doing things	46.0%	33.2%	11.9%	8.8%
Feeling down, depressed, or hopeless	50.7%	30.8%	9.6%	8.9%

The overall PHQ-4 score and the individual sub-scores for anxiety and depression are calculated by summing the scores of the individual items (Not at all = 0 to Nearly every day =3). For the anxiety and depression sub-scales, prior research has established that scores \geq 3 are used to identify positive screenings for generalized anxiety disorder and major depression disorder, respectively. In our survey results, shown in Figure 2, 43.2% of students would screen positively for generalized anxiety disorder and 23.3% of students would screen positively for major depression disorder.

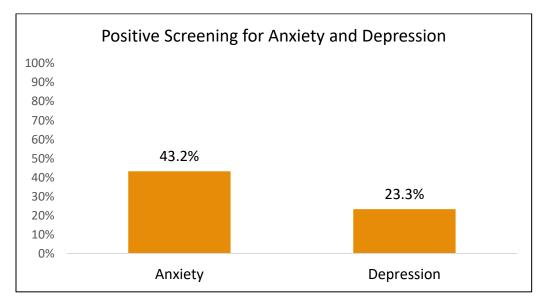


Figure 2: Positive Screenings for Anxiety and Depression

Research has shown that when anxiety and depression co-occur, the functional impairment caused by these conditions is even greater. Figure 3 shows that 19.6% of surveyed students had scores that would indicate positive screenings for both anxiety and depression. Nearly half of students, 46.9%, would screen positively for at least one of the two conditions.

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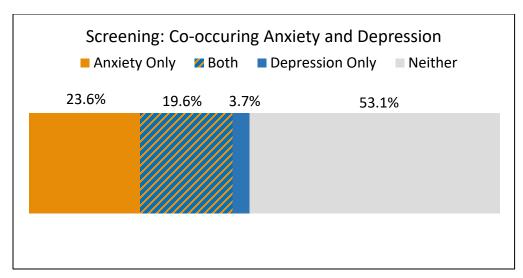


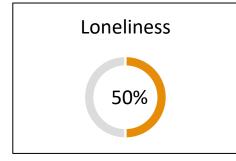
Figure 3: Positive screenings for co-occurring anxiety and depression

Loneliness

In this survey, we used the UCLA three-item loneliness scale (Hughes et al., 2004). The individual survey items and the frequency distributions for all survey respondents are provided in Table 3.

Table 3: UCLA 3-item loneliness scale and results

Loneliness Items How often do you feel:	Hardly ever	Some of the time	Often
that you lack companionship?	33.2%	50.9%	15.9%
left out?	35.1%	49.9%	15.0%
isolated from others?	38.8%	45.2%	16.0%



The total loneliness score is calculated by taking the sum of scores from the three questions above (From "hardly ever" = 1 to "often" = 3). Other sources, including the American College Health Association (ACHA), use the cutoff score of \geq 6 on this scale to indicate a positive screening for loneliness. This can be interpreted as, on average, feeling the above ways at least some of the time. By this definition, 50.1% of surveyed students experience these feelings of loneliness at least some of the time.

Figure 4: Positive Screening for Loneliness

Emotional Well-being Measures: Trends Over Time

Each of the emotional well-being and mental health measures described above was included in this survey for the first time in Fall 2020. While we do not have comparable data prior to the pandemic, we have seen favorable changes for each of these measures since we first started collecting the data.

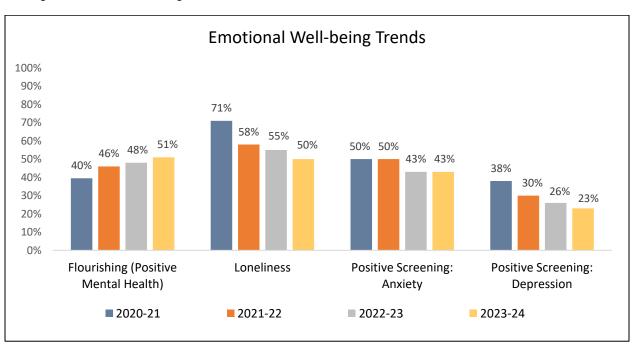


Figure 5: Emotional Well-being Trends

Sense of Community and Belonging

In this survey, we used an abbreviated and modified version of the Brief Sense of Community Scale (BSCS) developed by Peterson, Speer, and McMillan (2008). This scale uses the psychological sense of community conceptual framework of McMillan and Chavis (1986) by using the following four dimensions to assess sense of community: needs fulfillment, group membership, influence, and emotional connection. The individual items and their mean scores are provided in Table 4.

The trend in the overall combined mean score for Sense of Community is provided in Figure 6. This measure was also included in the survey for the first time in Fall 2020 and we have seen movement in a positive direction.

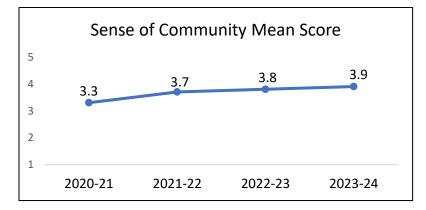
Also included in the survey are questions about students' sense of belonging in various campus settings (e.g., in classes, in clubs and organizations, etc.). These results are provided in the appendix.

Table 4: Sense of Community Individual Items and Mean Scores

Rate your agreement with following:	Mean score
The Lehigh community helps me fulfill my needs.	3.8
I feel like a member of the Lehigh community.	3.9
I belong in the Lehigh community.	3.9
I feel connected to the Lehigh community.	3.8
If I needed assistance with some practical problem, there would be someone from the Lehigh community who could help me.	4.0
There are many people from the Lehigh community whom I think I know well and I can talk to about almost anything.	3.8
I have several people from the Lehigh community who can give me real personal support to cope with the stresses and strains of life.	3.9

Scale: 1 = Strongly disagree, 2 = Disagree, 3 =Neither agree nor disagree, 4 =Agree, 5 = Strongly agree

Figure 6: Overall Sense of Community Combined Mean Score Trend



Alcohol and Other Drug Use

Because this survey evolved from a survey that was primarily focused on alcohol use and social options at Lehigh, there are several questions related to alcohol use. One measure that has been tracked for several years at Lehigh is the high-risk drinking rate (commonly referred to as "binge drinking rate"). This rate is defined by the percent of students who report having had five or more drinks in a row during the two weeks prior to being surveyed. This is a standard measure used in research and college prevention work. It is an important measure since students are more likely to experience harmful consequences when they engage in high-risk ("binge") drinking. Our survey data, shown in Figure 7, shows that there has been a steady downward trend in the high-risk drinking rate at Lehigh. A sharp decline was seen during the 2020-21 academic year, the height of the pandemic, when many activities were remote.

In this survey, we have also tracked drinking-related harms for several years. The exact question asks: Since the beginning of the academic year, have you experienced any of the following as a result of drinking alcohol? Like the high-risk drinking rate, we have seen a steady decrease in rates of drinkingrelated harms with a sharper decrease during the pandemic. The results for the most common drinkingrelated harms are provided in Figure 8. Also provided in the appendix are the rates of alcohol-related secondary harms, which are negative experiences that students report due to *other* students' drinking.

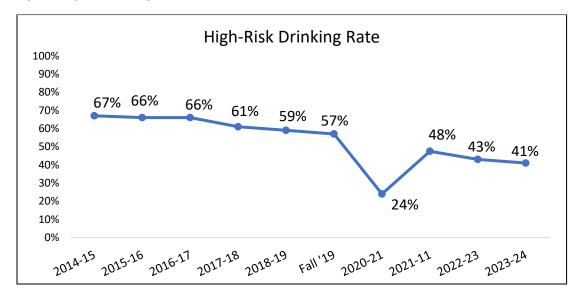
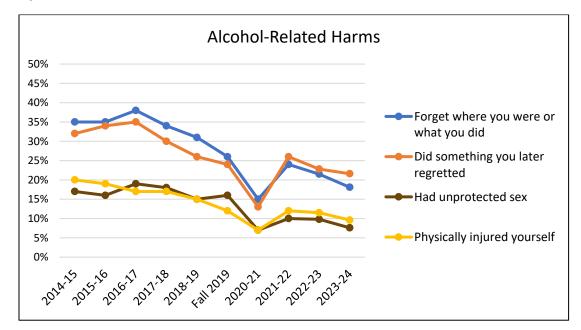


Figure 7: High-Risk Drinking Rate Trend

Figure 8: Trends in Alcohol-Related Harms



In the survey, students were asked about drug use since the beginning of the academic year. Results are provided in Table 5. Marijuana is the most commonly used drug at 27.2%. The percentage of respondents who reported non-medical use of *any* of the drugs listed below was 34.7%.

Table 5: Drug Use Since Beginning of the Academic Year

Since the beginning of the academic year, which of the following substances have you prescription medications, please report nonmedical use only.	used? For
Tobacco or nicotine delivery products (cigarettes, e-cigarettes, Juul or other vape products, water pipe or hookah, chewing tobacco, etc.)	19.6%
Cannabis (marijuana, weed, hash, edibles, vaped cannabis, etc.)	27.2%
Cocaine (coke, crack, etc.)	2.6%
Prescription stimulants (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.)	2.3%
Methamphetamine (speed, crystal meth, ice, etc.)	0.8%
Inhalants (poppers, nitrous, glue, gas, paint thinner, etc.)	1.6%
Sedatives or Sleeping Pills (Valium, Ativan, Xanax, Klonopin, Librium, Rohypnol, GHB, etc.)	1.5%
Hallucinogens (Ecstasy, MDMA, Molly, LSD, acid, mushrooms, PCP, Special K, etc.)	2.7%
Heroin	0.8%
Prescription opioids (e.g., morphine, codeine, fentanyl, oxycodone, etc.)	0.9%

"Nonmedical use" means taking prescription drugs just for the feeling or experience they cause or taking them more often or at higher doses than prescribed.

Other Select Highlights

Other survey highlights are provided below. See the appendix for more results.

- 38.7% of students agree or strongly agree with the statement "At Lehigh, students' mental and emotional health is a priority". 36.1% neither agrees nor disagrees with this statement.
- 54.3% of students agree or strongly agree with the statement "At Lehigh, there are adequate resources and services to support student mental health". 29.1% neither agrees nor disagrees with this statement.
- 44.4% of students agree or strongly agree with the statement "While at Lehigh, my mental health and emotional needs are being met". 35.4% neither agrees nor disagrees with this statement.
- 12% of survey respondents report using the Headspace app. Among Headspace users, 93% report being positively impacted by the app in one of the following ways: managing stress, improving sleep, increasing focus, learning to meditate, and increasing productivity.
- 52% of students report that they have attended at least one Lehigh After Dark (LAD) event since the beginning of the academic year. Among attendees, 48% reported that they have felt less

stressed by attending LAD, 69% reported that LAD has positively impacted their Lehigh experience, 50% reported that they met someone new at a LAD event, and 49% reported that they felt more connected to other students by attending LAD events.

- 62.4% of respondents reported that they were either moderately familiar or extremely familiar with Lehigh's Medical Amnesty Policy. This policy seeks to remove barriers that may prevent students from seeking the medical attention needed by themselves or their peers.
- Among survey respondents who reported being sexually active, 36% reported using safe sex supplies (e.g., condoms) every time they engage in sexual activity.

Comparing Lehigh with National Benchmark Data

Some of the survey scales that we use are also used in the Healthy Minds Study (HMS), an annual national survey. In the academic year 2022-23, over 75,000 students participated in the Healthy Minds Survey. While Lehigh has not participated in this survey, we can use the HMS reports and their publicly available data sets to compare our data on select measures. Figure 9 provides the comparison data for: positive mental health (flourishing), positive screenings for depression and anxiety, loneliness, and binge drinking.

Note: For the depression and anxiety survey scales, we use shortened versions of longer survey scales. For depression, we use the PHQ-2 while HMS uses and reports the 9 question PHQ-9; for anxiety, we use the GAD-2 while the HMS uses and reports the 7 question GAD-7. While HMS reports on the longer version of the scales, we can calculate the comparable data points (the shorter scales) using their publicly available data sets. The more precise comparable data is presented here.

This will be updated with data from 2023-24 when it becomes available from HMS.

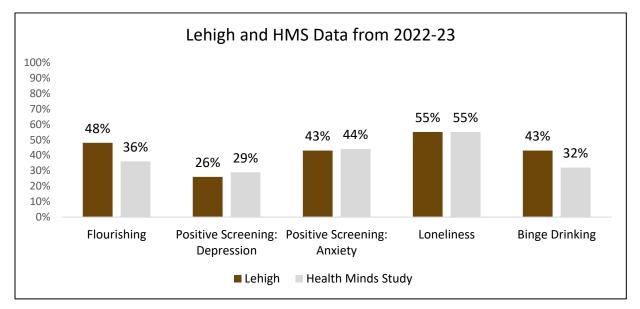


Figure 11: Comparing Lehigh with Data from the Healthy Minds Study

References

- Diener, E., Wirtz, D., Tov, W., Kim-Prieto, C., Choi, D., Oishi, S., & Biswas-Diener, R. (2009). New well-being measures: short scales to assess flourishing and positive and negative feelings. *Social Indicators Research*, *97*(2), 143–156. https://doi.org/10.1007/s11205-009-9493-y
- Hughes, M. E., Waite, L. J., Hawkley, L. C., & Cacioppo, J. T. (2004). A short scale for measuring loneliness in large surveys. *Research on Aging*, *26*(6), 655–672.

https://doi.org/10.1177/0164027504268574

- Kroenke, K., Spitzer, R. L., & Williams, J. B. W. (2003). The Patient Health Questionnaire-2. *Medical Care*, 41(11), 1284–1292. <u>https://doi.org/10.1097/01.mlr.0000093487.78664.3c</u>
- Kroenke, K., Spitzer, R. L., Williams, J. B., Monahan, P. O., & Löwe, B. (2007). Anxiety Disorders in Primary
 Care: Prevalence, impairment, comorbidity, and detection. *Annals of Internal Medicine*, *146*(5),
 317. <u>https://doi.org/10.7326/0003-4819-146-5-200703060-00004</u>
- Peterson, N. A., Speer, P. W., & McMillan, D. W. (2007). Validation of A brief sense of community scale:

Confirmation of the principal theory of sense of community. Journal of Community

Psychology, 36(1), 61-73. https://doi.org/10.1002/jcop.20217

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Appendix

This appendix provides the frequency distributions for the questions in this survey. Results are unweighted. Fall and spring responses are combined for the purposes of this report. As noted under select tables, some questions were only included in the fall or spring surveys.

Sense of Community Scale

	N	Strongly	Disagrap	Neither Agree or	A 7500	Strongly Agroo
	N	Disagree	Disagree	Disagree	Agree	Strongly Agree
The Lehigh community helps me fulfill my needs.	1233	2.3%	5.7%	15.8%	59.0%	17.2%
I feel like a member of the Lehigh community.	1233	2.8%	5.8%	11.0%	55.4%	25.0%
I belong in the Lehigh community.	1228	3.1%	6.5%	14.8%	51.0%	24.6%
I feel connected to the Lehigh community.	1224	3.6%	8.2%	18.2%	49.7%	20.3%
If I needed assistance with some practical problem, there would be someone from the Lehigh community who could help me.	1232	2.2%	4.1%	13.2%	53.1%	27.4%
There are many people from the Lehigh community whom I think I know well and I can talk to about almost anything.	1231	4.3%	9.3%	16.1%	43.3%	27.1%
I have several people from the Lehigh community who can give me real personal support to cope with the stresses and strains of life.	1230	4.6%	7.4%	13.6%	46.3%	28.1%

Adapted from Brief Sense of Community Scale (BSCS) developed by Peterson, Speer, and McMillan (2008)

Scale for Sense of Belonging in Classes

*Only included in the fall survey		Completely		Equally True and		
	Ν	Untrue	Mostly Untrue	untrue	Mostly True	Completely True
It is difficult to meet other students in class.	875	8.2%	34.1%	28.0%	24.1%	5.6%
I know very few people in my classes.	875	11.1%	29.7%	22.2%	28.6%	8.5%
I rarely talk to other students in my classes.	874	13.8%	32.5%	19.3%	25.6%	8.7%
No one in my classes knows anything personal about me	875	12.9%	31.2%	20.3%	24.3%	11.2%
If I miss class, I know students who I could get the notes from.	875	4.9%	13.5%	15.5%	42.7%	23.3%
Other students are helpful in reminding me when assignments are due or						
when tests are approaching	874	10.0%	19.8%	20.5%	33.4%	16.4%
assignment.	873	3.7%	9.0%	17.9%	43.0%	26.5%
I have met with classmates outside of class to study for an exam.	875	10.4%	13.8%	15.2%	30.5%	30.1%

Subset of Sense of Belonging Scale developed by Hoffman, Richmond, Morrow, and Salomone (2003)

Sense of Belonging within Different Campus Settings

	Ν	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
I feel a sense of belonging in my classes	1131	2.4%	9.5%	24.0%	49.0%	15.1%
I feel a sense of belonging in my living environment (e.g., residence hall, off-campus house, etc.)	1132	2.7%	8.4%	17.8%	44.5%	26.6%
I feel a sense of belonging in my clubs/organizations	1131	1.3%	4.9%	23.6%	44.7%	25.5%
I feel a sense of belonging in my group of friends	1126	1.6%	4.3%	12.3%	46.0%	35.9%
I feel a sense of belonging in the general Lehigh community	1131	3.0%	9.1%	24.8%	47.4%	15.7%
I feel a sense of belonging in the Bethlehem community	1128	7.0%	19.7%	35.3%	28.1%	9.9%

Club/Organization Involvement

How many campus clubs/organizations you are involved with?	Ν	Percent
1	211	18.8%
2	302	26.9%
3	266	23.7%
4	130	11.6%
5	56	5.0%
6	19	1.7%
7	8	0.7%
8	4	0.4%
9	1	0.1%
10 or more	3	0.3%
0 (none)	122	10.9%
All Respondents	1122	1

Flourishing Scale (Positive Mental Health)

		Strongly		Slightly	Neither			Strongly
	Ν	Disagree	Disagree	Disagree	Agree nor	Slightly Agree	Agree	Agree
I lead a purposeful and meaningful life	1156	1.9%	3.0%	3.6%	7.5%	17.3%	40.1%	26.6%
My social relationships are supportive and rewarding	1156	1.3%	2.0%	2.9%	6.6%	17.0%	42.0%	28.3%
I am engaged and interested in my daily activities	1155	1.3%	3.5%	5.3%	7.5%	20.1%	39.2%	23.1%
I actively contribute to the happiness and well-being of others	1154	1.0%	0.7%	2.1%	8.7%	17.7%	42.5%	27.3%
I am competent and capable in the activities that are important to me	1153	1.3%	1.1%	2.9%	6.0%	14.3%	44.9%	29.5%
I am a good person and live a good life	1152	1.6%	0.7%	1.9%	7.8%	12.7%	43.0%	32.4%
I am optimistic about my future	1155	1.7%	2.4%	4.2%	8.0%	17.4%	35.1%	31.3%
People respect me	1154	1.3%	1.1%	2.9%	9.1%	16.4%	45.1%	24.1%

Flourishing Scale developed by Diener, Wirtz, Kim-Prieto, Choi, and Biswas-Diener (2009)

Loneliness Scale

			Some of the	
	Ν	Hardly Ever	Time	Often
How often do you feel that you lack companionship?	1150	33.2%	50.9%	15.9%
How often do you feel left out?	1152	35.1%	49.9%	15.0%
How often do you feel isolated from others?	1149	38.8%	45.2%	16.0%
Longlingss Scale developed by Hughes Waite Hawkley and Cacion	no(2004)			

Loneliness Scale developed by Hughes, Waite, Hawkley, and Cacioppo (2004)

Anxiety and Depression Screenings (PHQ4)

Over the last 2 weeks, how often have you been bothered by the				More than	Nearly	
following problems?	Ν	Not at all	Several days	half the days	everyday	
Feeling nervous, anxious or on edge	1156	16.5%	40.9%	22.6%	20.0%	
Not being able to stop or control worrying	1154	32.7%	33.1%	18.2%	16.0%	
Little interest or pleasure in doing things	1155	46.0%	33.2%	11.9%	8.8%	
Feeling down, depressed, or hopeless	1153	50.7%	30.8%	9.6%	8.9%	

Ultra-brief screening scale for anxiety and depression (PHQ4) developed by Kroenke, Spitzer, Williams, and Lowe (2009)

Select Concerns

How concerned are you about the following?		Not at all		Somewhat	Quite a bit	Extremely
	Ν	concerned	Slightly concerned	concerned	concerned	concerned
My mental health	1155	27.9%	30.4%	22.2%	13.9%	5.6%
The mental health of friends or family	1152	25.7%	25.5%	25.2%	17.2%	6.4%
My personal finances	1154	21.0%	23.2%	21.1%	20.5%	14.1%
Being able to afford balanced meals	1149	41.2%	17.5%	17.0%	14.6%	9.7%
Getting adequate sleep	1151	18.3%	21.5%	23.9%	20.2%	16.1%

Perceptions of University Support for Student Well-being

To what extent do you agree with the following statements?	Neither agree nor						
	Ν	Strongly disagree	Disagree	disagree	Agree	Strongly agree	
At Lehigh, students' mental and emotional health is a priority.	1139	6.2%	19.1%	36.1%	30.6%	8.1%	
At Lehigh, there are adequate resources and services to support student mental health.	1139	4.0%	12.6%	29.1%	42.4%	11.9%	
While at Lehigh, my mental health and emotional needs are being met.	1137	5.3%	15.0%	35.4%	35.5%	8.9%	

Headspace Awareness, Use, and Impact			
Were you aware that Lehigh offers a free subscription to			
Headspace, a meditation-based app, to all students?	Ν	Y	Ν
	827	74.6%	25.4%

*Only included in the fall survey

Are you currently using the Headspace app?	Ν	Y	Ν
Among those aware of Headspace app availability	617	16.4%	83.6%
Among all survey respondents	827	12.2%	87.8%

*Only included in the fall survey

Has using the Headspace app positively impacted you in the following ways? (Check all that apply)	N = 101	Percent "Yes" among Headspace Users	
Learning to meditate	59	58.4%	
Increasing focus	25	24.8%	
Managing stress	55	54.5%	
Improving sleep	40	39.6%	
Increasing productivity	16	15.8%	
Any of the above selected	94	93.1%	

*Only included in the fall survey

Reported Impact on Academic Performance

Since the beginning of the academic year, have any of the following negatively impacted your academic performance?	N	I have not experienced this issue	I have experienced this issue, but my academic performance has not been affected	I have experienced this issue, and it negatively affected my academic performance
Stress	1143	6.8%	43.4%	49.8%
Personal use of alcohol or drugs	1138	64.1%	28.7%	7.2%
Struggles in relationships (e.g., family, friends, romantic partners)	1142	39.5%	36.8%	23.7%
Financial concerns	1142	46.3%	38.8%	14.9%
Experiencing discrimination	1141	78.4%	16.4%	5.2%
Anxiety	1142	22.0%	39.1%	38.9%
Depression	1141	52.3%	23.8%	23.8%
Lack of quality sleep	1144	20.4%	35.8%	43.8%
Seasonal illness (colds, flu, covid, etc.)	1142	23.8%	36.5%	39.7%

High-Risk Drinking ("Binge Drinking")

Over the last two weeks, how many times have you had five or more drinks of alcohol at a sitting? (One drink or alcoholic beverage is defined as a 12 oz. beer, a 5 oz. glass of wine, a 1.5 oz. shot of liquor, or

[in] a mixed drink.)	N	Percent of Respondents
N/A, I Don't Drink	359	31.5%
Zero times	311	27.3%
1 time	170	14.9%
2 times	133	11.7%
3 times	48	4.2%
4 times	52	4.6%
5 times	25	2.2%
6 times	16	1.4%
7 times	12	1.1%
8 times	9	0.8%
9 times	1	0.1%
10 or more times	5	0.4%
All Respondents	1141	100.0%

Primary Type of Alcohol Consumed

	Р	ercent of Respondents	
Over the past two weeks, which type of alcohol have you primarily consumed?	N = 779	who Drink	
I have not consumed alcohol	162	20.8%	
Beer	142	18.2%	
Hard liquor	276	35.4%	
Wine	72	9.2%	
Hard seltzers (e.g., white claws, high noons)	112	14.4%	
Other	15	1.9%	

Reported Reasons for Drinking

Below is a list of reasons people sometimes give for drinking alcohol. Thinking of all the times you consumed alcohol in the past month, have you drank for any of the following reasons?	N = 782	Percent of Respondents who Drink	
To relax	255	32.6%	
Because I feel more self-confident or sure of myself	183	23.4%	
To reduce my anxiety	113	14.5%	
To forget my worries	102	13.0%	
To cheer me up when I'm in a bad mood	101	12.9%	
Because my friends pressure me to drink	25	3.2%	
To fit in with a group	78	10.0%	
So I won't feel left out	85	10.9%	

Alcohol Secondary Harms Since the beginning of the school year, have you experienced any of the following because of other

students' drinking ?	N = 1126	Percent "Yes"	
Been insulted or humiliated	141	12.6%	
Had a serious argument or quarrel	111	9.9%	
Been pushed, hit, or assaulted	53	4.7%	
Had your property damaged	72	6.4%	
Had to babysit or take care of another student who drank too much	424	37.8%	
Found vomit in the halls or bathroom of your residence	245	21.8%	
Found urine in an inappropriate place	137	12.2%	
Had your studying or sleep interrupted	429	38.2%	
Experienced an unwanted sexual advance	76	6.8%	
Been a victim of sexual assault or rape	15	1.3%	
Any of the above	716	63.6%	

The questions below were asked only to students who did not identify as abstainers/non-drinkers (i.e., students who drink). Percentages are reported for those who drink as well as for all respondents.

Alcohol Primary Harms Since the beginning of the academic year, have you experienced any of the following as a result of drinking alcohol?	Percent "Yes" of Students who Drink	Percent "Yes" of All Respondents
Did something you later regretted	31.6%	21.3%
Forgot where you were or what you did	26.8%	18.1%
Got in trouble with the police	2.6%	1.8%
Had unprotected sex	11.3%	7.6%
Physically injured yourself	13.3%	8.9%
Physically injured another person	1.4%	1.0%
Missed a class	20.4%	13.8%
My academic performance was negatively impacted	11.4%	7.7%
Had to be babysat or taken care of by other students	15.3%	10.3%
Vomited in a public space	8.8%	6.0%
Urinated in a public space	7.0%	4.7%
Any of the above	52.0%	35.7%

Sexual Assualt While Drinking	Percent "Yes" of Students	Percent "Yes" of All
Since the beginning of the academic year, have you experienced the following when drinking alcohol:	who Drink	Respondents
Someone took advantage of me sexually when I was too drunk to stop what was happening	6.4%	4.3%

This question is intentionally separated and rephrased from the question on primary harms above. Those who indicate that they have been sexually assaulted are provided with full information on university resources.

Alcohol Blackouts and Brownouts I have	Percent "Yes" of Students who Drink	Percent "Yes" of All Respondents
Experienced one or more blackouts (forgot where I was or what I did for a large period of time and cannot remember, even if someone reminds me)	14.7%	10.1%
Experienced one or more brownouts (forgot where I was or what I did for short periods of time, but can remember once someone reminds me)	21.0%	14.4%

These questions are asked to those who indicated that they have forgotten where they were or what they did as a result of drinking alcohol.

Protective Behavioral Strategies

Listed below are strategies used to reduce the negative consequences of drinking. When you drink, how often do you do the following?

	Ν	Never	Rarely	Sometimes	Often	Always
Alternate non-alcoholic with alcoholic beverages	538	11.0%	15.6%	32.2%	24.9%	16.4%
Avoid drinking games	539	18.4%	21.7%	32.5%	18.2%	9.3%
Choose not to drink alcohol	538	6.9%	18.0%	43.9%	26.8%	4.5%
Determine in advance not to exceed a set number of drinks	537	14.5%	13.8%	28.7%	26.3%	16.8%
Eat before and/or during drinking	537	2.2%	0.6%	16.4%	32.8%	48.0%
Have a friend let you know when you have had enough	538	17.5%	15.4%	26.8%	20.8%	19.5%
Keep track of how many drinks being consumed	538	8.0%	8.4%	18.6%	28.4%	36.6%
Pace drinks to one or fewer an hour	538	15.8%	22.7%	28.8%	18.2%	14.5%
Stay with the same group of friends the entire time drinking	538	3.0%	3.3%	13.4%	31.8%	48.5%
Stick with only one kind of alcohol when drinking	538	7.8%	13.0%	32.0%	31.2%	16.0%
Use a designated driver	538	7.8%	2.8%	13.9%	12.1%	63.4%
This set of questions was only asked in the fall.						

Social Norms Comparisons	Perception	Reality
Behaviors	On average, students think this percent of Lehigh students engage in the following behaviors	Percent of students who report experiencing behaviors themselves
Drinking so much that one needs to be babysat or taken care of by other students?	35.8%	10.3%
Drinking so much that one gets into situations or behaves in a way that they later regret?	38.0%	21.3%
Drinking so much that one cannot remember where they were or what they did?	31.6%	18.1%
Drinking so much that one vomits in a public space?	26.4%	6.0%
Drinking so much that one urinates in a public space?	22.8%	4.7%

Drug Use

Since the beginning of the academic year, which of the following substances have you used? For prescription medications, please report nonmedical use only. "Nonmedical use" means taking prescription drugs just for the feeling or experience they cause or taking them more often or at higher doses than prescribed.

	Ν	Percent "Yes"
Tobacco or nicotine delivery products (cigarettes, e-cigarettes, Juul or other vape products, water pipe or hookah, chewing tobacco, etc.)	1098	19.6%
Cannabis (marijuana, weed, hash, edibles, vaped cannibis, etc.)	1096	27.2%
Cocaine (coke, crack, etc.)	1095	2.6%
Prescription stimulants (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.)	1097	2.3%
Methamphetamine (speed, crystal meth, ice, etc.)	1095	0.8%
Inhalants (poppers, nitrous, glue, gas, paint thinner, etc.)	1096	1.6%
Sedatives or Sleeping Pills (Valium, Ativan, Xanax, Klonopin, Librium, Rohypnol, GHB, etc.)	1097	1.5%
Hallucinogens (Ecstacy, MDMA, Molly, LSD, acid, mushrooms, PCP, Special K, etc.)	1095	2.7%
Heroin	1094	0.8%
Prescription opioids (e.g., morphine, codeine, fentanyl, oxycodone, etc.)	1096	0.9%
Any non-medical drug use listed above	1094	34.7%

Lehigh After Dark (LAD)

	Ν	Percent "Yes"	
Do you know where to find information on Lehigh After Dark activities?	1107	85.3%	
Since the beginning of the school year, have you attended any Lehigh After Dark Events?	1107	51.8%	

Lehigh After Dark (LAD) Impact			
		Among	
Which of the following are true of your experiences at Lehigh After Dark?	N	Attendees	
I met someone new at a Lehigh After Dark event	573	49.6%	
I have felt more connected to other students by attending Lehigh After Dark event(s)	573	48.7%	
I have felt less stressed by attending Lehigh After Dark event(s)	573	47.5%	
I will likely attend another Lehigh After Dark event	573	71.4%	
Attending Lehigh After Dark event(s) has positively impacted my Lehigh experience	573	68.6%	
Attending Lehigh After Dark event(s) has contributed to my sense of community at Lehigh	573	51.5%	
Lehigh After Dark provides late-night opportunities for me to thrive socially	573	48.3%	

Medical Amnesty Awareness						
					Moderately	
	Ν	Not at all familiar	Slightly familiar	Somewhat familiar	familiar	Extremely familiar
How familiar are you with Lehigh's Medical Amnesty Policy?	791	8.1%	12.1%	17.3%	33.2%	29.2%
*This set of questions was only asked in the fall.						
Feelings of Safety						
How safe do you feel	N	Not at all safe	Somewhat unsafe	Somewhat safe	Very safe	
On campus during the day?	792	0.4%	0.9%	14.3%	84.5%	
On campus at night?	790	1.4%	14.4%	54.3%	29.9%	
In the area surrounding campus during the day?	792	1.4%	12.0%	54.0%	32.6%	
In the area surrounding campus at night?	792	17.0%	44.8%	26.9%	11.2%	
*This set of questions was only asked in the fall.						
Choose Lehigh Again	N	Definitely not	Probably not	Maybe	Probably would	Definitely would
If given the choice to start over (with your college experience), would	4007	2.6%	0.7%	40.0%	26.49/	22.6%
you still choose to enroll at Lehigh?	1097	3.6%	8.7%	19.0%	36.1%	32.6%
University Resource Use						
What university resources have you used or plan to use this academic year?	N	not plan to use	Have not used, but plan to use	Have used		
Academic Tutoring	1096	40.9%	26.7%	32.4%		
Academic Coaching	1090	60.0%	24.2%	15.8%		
University athletic facilities (e.g., Taylor Gym)	1090	15.0%	13.3%	71.7%		
Counseling Center	1093	54.0%	24.7%	21.3%		
Health & Wellness Center	1091	27.5%	20.3%	52.2%		
Resources provided by Diversity, Equity, and Inclusion Offices (e.g.,	1071	27.370	20.370	52.270		
OMA, Center for Gender Equity, Pride Center, etc.)	1093	62.4%	20.9%	16.7%		
Food assistance (e.g., Swipe out Hunger)	1092	81.7%	14.4%	3.9%		

Food Security (USDA Scale Items) - <i>Added for the first time in Spring</i> 2024	N	I've had enough of the kinds of food I want to eat	I've had enough food but not always the kinds of food I want	Sometimes not enough to eat	Often not enough to eat
Which of the following best describes the food you have eaten since the beginning of the academic year?	302	30.8%	53.0%	10.9%	5.3%
The following are statements that people have made about their food situation. For these statements, please indicate how often these statements have been true for you since the beginning of this academic year.	N	Never true	Sometimes true	Often true	
I worried whether my food would run out before I got money to buy more	302	65.2%	23.2%	11.6%	
The food that I bought just didn't last, and I didn't have money to get more	302	74.5%	14.9%	10.6%	
I couldn't afford to eat balanced meals	302	65.6%	22.2%	12.3%	

Note: The following question set was only asked to respondents whose answers were affirmative (sometimes or often true) for any of the items in the previous question set. The percentages displayed here are based on all students who answered the food security questions (N = 302).

Since the beginning of the academic year:	Ν	Percent "Yes"	
Did you ever cut the size of your meals or skip meals because their wasn't enough food?	302	22.2%	
Did you ever eat less than you felt you should because there wasn't enough money for food?	302	21.2%	
Were you ever hungry but didn't eat because there wasn't enough money for food?	302	18.5%	
Did you lose weight because there wasn't enough money for food?	302	11.3%	
Did you ever not eat for a whole day because there was not enough money for food?	302	7.6%	
USDA 10-item Food Security Scale (2012)			
Additional Food Security Items - Added in Spring 2024	Ν	Percent "Yes"	
During this academic year, has there ever been a time when you were aware of another student (not yourself) who did not have enough food?	301	21.3%	

Lehigh Food Pantry	Ν	Very unlikely	unlikely	Unsure	Likely	Very likely	
If there was an occasion when you didn't have enough food, how likely would it be that you would use the university food pantry?	299	20.1%	13.7%	34.1%	20.7%	11.4%	
Lehigh Food Pantry	Ν	Percent "Yes"					
Have you ever used Lehigh's food pantry?	301	7.3%					
Lehigh Food Pantry	N	Yes	No	Unsure			
By getting food from the campus food pantry, were you	IN	103	No	onsure			
able to focus more of your time and energy on class-related activities?	22	63.6%	13.6%	22.7%			

* This question was only asked to those who indicated that they have used the campus food pantry.

Safe sex

		N/A, I am not					
	Ν	sexually active	Never	Rarely	Sometimes	Most of the time	Every time
How often do you use safe sex supplies during sexual							
activity (e.g., condoms, dental dams, finger cots)?	785	44.3%	7.0%	6.6%	6.9%	14.9%	20.3%

Use of Safe Sex Supplies	Percent "Yes"	
Which safe sex supplies do you use? (Check all that apply)		Among Sexually
	N = 437	Active
External condoms	343	78.5%
Internal condoms	19	4.3%
Dental dams	8	1.8%
Finger cots	2	0.5%
Other	23	5.3%

*This question was only asked to those who did not indicate that they are not sexually active.

Access of Safe Sex Supplies

Access of Sure Sex Supplies		
Where are you accessing safe sex supplies? (Check all that		Percent "Yes" Among
apply)	N = 437	Sexually Active
Purchasing off-campus or online	311	71.2%
Health & Wellness Center (HWC), on campus	124	28.4%
Health Advancement & Prevention Strategies Office (HAPS), on campus	7	1.6%
Office of Survivor Support & Intimacy Education (OSSIE), on campus	8	1.8%
Pride Center, on campus	25	5.7%
Lamberton Hall, on campus	4	0.9%
Other	22	5.0%

STI/HIV Testing

		Yes, more than 6	Yes, within the last 6		
	Ν	months ago	months	No	Unsure
Have you ever been tested for Sexually Transmitted Infections (STIs)?	427	18.7%	19.9%	59.0%	2.3%
Have you ever been tested for HIV?	427	9.8%	10.3%	67.9%	11.9%

STI/HIV Testing		Percent "Yes" Among
		Those Tested Within
Where are you accessing STI testing? (Check all that apply)	N = 85	the Last 6 Months
Free clinics on campus	24	28.2%
Appointments at the Health & Wellness Center (HWC)	24	28.2%
Off campus	55	64.7%