

## Addressing Alcohol Awareness with College Students with Intellectual Disability

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### Abstract

As a growing number of colleges and universities establish inclusive postsecondary education (ISPE) programs for students with intellectual disability, new questions arise about how to best support their full participation in all aspects of campus life. One issue that has received limited attention in the literature is alcohol use among young adults with intellectual disability. This qualitative study explored how seven inclusive higher education programs addressed alcohol education and the complexities of this important endeavor. Individual interviews with program staff identified a diversity of program policies, addressed how programs are addressing alcohol education, and revealed myriad challenges in doing this well. We offer practical recommendations for inclusive higher education programs and suggest areas for future research on this overlooked aspect of college life.

*Keywords:* intellectual disability, postsecondary education, alcohol education, inclusion

### Plain Language Summary

- As more and more colleges and universities start inclusive postsecondary education (ISPE) programs for students with intellectual disability, leaders wonder about how to support inclusion in all parts of campus life.
- **What we did in this study:** Our qualitative study looked at how seven programs addressed alcohol education and the issues that arise when they do so.
- **Findings:** The programs all had very different policies. Some were different from the policies for students without disabilities, others were the same. Programs spoke about the challenges and benefits of preparing students in this area.
- We offer practical ideas for inclusive postsecondary education programs and suggest areas for future research on this part of typical college life.
- **Conclusion:** To make good decisions about alcohol use, students with ID should take part in good alcohol education programs.

The rise in the number of inclusive postsecondary education (IPSE) programs has made it possible for more young adults with intellectual disability (ID) to access college experiences alongside fellow students without disabilities. Nearly 300 campuses in the United States now provide students with disabilities formal opportunities for inclusive higher education (O'Brien et al., 2019). This rise in the number of programs was spurred by the Higher Education Opportunity Act of 2008 and the establishment of a national technical assistance center (i.e., Think College). As this movement continues to expand, new questions arise as to what it means to support students enrolled in these programs to access all aspects of the college experience (Carter, 2018). This includes academic coursework, student organizations and clubs, internships and jobs, campus resources, and social events. Quality standards for this growing field emphasize the importance of supporting full access to the entirety of college life (Grigal et al., 2012).

As college students with ID participate more fully in the social dimensions of the college experience, opportunities for alcohol use are likely to become more available. Alcohol use is already extensive on many college campuses and is a common experience for students at some campus events, throughout Greek life, and within residential dorms. The abundance of unstructured time, the increased availability of alcohol, the inconsistent enforcement of drinking laws, and social pressures from peers can all coalesce to set the stage for alcohol use for any college student (National Institute on Alcohol Abuse and Alcoholism, 2021). Indeed, more than half (52.5%) of full-time college students (ages 18-22) reported drinking alcohol in the past month; one third (33.3%) reported binge drinking (Substance Abuse and Mental Health Services Administration [SAMSHA], 2021). Such widespread use of alcohol—sometimes with detrimental effects—has led most universities to undertake educational efforts to ensure that students are informed about existing policies and safe practices. The launch of IPSE programs on a growing number of campuses raises an important question: How are programs addressing alcohol education for students with ID?

Unfortunately, little is known about alcohol education and use among college students with ID. To date, most studies addressing the IPSE movement have focused on policies and practices related to academics, career development, relationships, and residential life (e.g., Whirley et al., 2020). Yet, a core premise of this burgeoning movement is that students with ID should have access to the same breadth of experiences, information, and supports as their same-age peers without disabilities. Given that both alcohol education and alcohol use are common experiences on most postsecondary campuses, the ways in which each is addressed for students with ID warrant careful consideration. For example, Think College's newest draft of Standards for Inclusive Higher Education (2020) affirms that programs should facilitate authentic and inclusive campus membership for its students, which includes both social organizations and campus-affiliated housing (Standard 8). Moreover, they emphasize that information and support related to the colleges' codes of conduct should be provided to all students (Standard 1.1c).

Careful consideration should be given to what it means to provide effective alcohol education for college students with ID. Although there are risks associated with alcohol use for any person, individuals who have cognitive impairments may require additional

guidance and support to ensure that it is used in safe and allowable ways. ISPE programs must make decisions about where and from whom their students will access this education, how it will be made accessible, and whether their policies will align or diverge from those of their institution. Unfortunately, the broader literature includes little guidance on the most effective ways of preparing individuals with ID in this area (Kerr et al., 2016). It is unclear whether and how alcohol education programs designed for the general population may need to be adapted or augmented for adults with ID.

The purpose of this qualitative study was to examine the ways in which different IPSE programs address alcohol education with their students with ID and the issues that arise when addressing this topic. The following research questions were addressed:

RQ1: What are the alcohol policies of inclusive postsecondary education programs?

RQ2: How is alcohol education currently being addressed for students with ID?

RQ3: What are issues that programs face when addressing alcohol education?

## Method

### Participants

Staff working for seven inclusive higher education programs for students with intellectual and developmental disabilities (IDD) participated in this study. To be included in this study, participants had to hold a leadership position (i.e., program director, assistant director, instructor) in a program in which the majority of students had an intellectual disability. To sample diverse programs, we invited staff from programs at both faith-based and non-faith-based schools, from programs that were both residential and non-residential, and from programs located on both wet and dry campuses. The seven programs varied in length, size, and the undergraduate programs with which they were affiliated (see Table 1). We purposefully selected a wide variety of programs. The seven program staff ranged in age from 26 to 62 years ( $M = 39$ ). All were female; five were White and one was Latina. Five were directors of the IPSE program, one was an assistant director, and one was an instructor in the program. Their programs had existed between 1 and 12 years ( $M = 5$ ).

### Recruitment

We used the Think College database ([www.thinkcollege.net](http://www.thinkcollege.net)) to identify programs that met our inclusion criteria (i.e., a postsecondary education program that served students with intellectual disability). We identified an initial collection of 22 programs to approach that sampled these criteria (e.g., faith-based and non-faith-based, wet and dry campuses). We then reached out by email to the program staff member identified as the point of contact for each program. The recruitment email described the purpose of the study, the anticipated length of the interview, and the honorarium (\$50USD). Eight programs expressed interest and seven agreed to the interview. We asked to interview the staff member who was in charge of curriculum-related decisions or most familiar with how their program addressed alcohol education.

## Interview Procedures and Protocol

We conducted individual interviews with each participant. Because of the pandemic, all interviews took place using video conferencing (Zoom) over the course of the summer. Interviews averaged 47 minutes (range, 36-59 minutes) in length. All interviews were audio-recorded. All interviews were conducted by a graduate student majoring in special education and low-incidence disabilities. She had teacher certification in the area of multi-categorical special education K-12.

The research team—comprised of a graduate student and a faculty member with expertise in inclusive higher education—created a semi-structured interview protocol designed to address each of our research questions (see Appendix). At the beginning of the interview, she reminded participants that they could skip any question and that all references to people or places would be deidentified. The interview protocol included two background questions (*Tell me a little about your program and the students that you serve. Tell me about the college/university and which parts of the campus life your students' access.*) and two wrap-up questions (*What is the most important advice you could give to a program trying to navigate this issue? Is there anything else that you were hoping to share that I did not ask about?*). However, the bulk of the questions focused on how programs addressed alcohol education and the issues that arose when doing so. Some questions varied based on the type of program or campus.

## Data Analysis

All audio-recordings were professionally transcribed, reviewed for accuracy, and then deidentified. We used thematic analysis within a team-based approach. During the first stage of data analysis, the lead researcher coded two transcripts using thematic coding. For each of the research questions, she identified the sections of each transcript that had relevance to the topic. She then grouped similar policies (RQ1), educational approaches (RQ2), and challenges (RQ3) and tentatively named each theme. The initial coding for these two transcripts was shared and discussed with the faculty member, who served as a peer auditor. This process led to a slight refinement of the research questions and an additional coding framework. She used this framework to code the remaining five transcripts independently. New codes were added, as when participants discussed different approaches or considerations. The team met again to discuss the updated framework, make further revisions, and reached a consensus on the final codes. The graduate student then re-read all of the transcripts to ensure that the final framework of coding was consistently applied.

We took steps to promote the rigor of our findings by following recommended practices in qualitative research (Brantlinger et al., 2005). We debriefed at multiple points throughout the process as a way of checking our assumptions and conclusions. We also maintained an audit trail of coding framework iterations detailing our analytic decisions. We looked for and reported negative cases that contrasted with most other programs. Finally, we provided all participants with our findings and invited them to correct any errors, challenge any interpretations they considered to be inaccurate, and provide any further comments (member checking).

## Findings

### What are the Alcohol Policies of Inclusive Postsecondary Education Programs?

These seven IPSE programs each adopted varied policies around alcohol use to guide students with ID during their time within the program. However, we identified two primary policy approaches: policies aligned with university policy and program-specific policies.

#### *Policies Aligned with University Policy*

Three participants indicated that their alcohol policy was aligned with that of the university in which the IPSE program was housed. This was done to hold the students with ID to the same standards as all other students enrolled in the same university. Abby explained, “Our policy is just that they adhere to the university’s policy. They have to be of age. They just have to follow the university’s guidelines.” All three programs that aligned with university policy decided to do so because the staff felt as though students with ID should not be treated differently than any other student. Alex emphasized this alignment of policy, “It is the same as any student on campus. If they’re over age 21, it’s up to them.” She continued by explaining how their commitment to inclusion undergirded this policy:

We’ve talked with legal counsel about any of these sorts of things. And because our students are held to the code of student conduct, it doesn’t make sense to put in [additional policies]. For us, to put in extra rules when we’re an inclusive program—to say, “You’re not allowed to . . .”—then they couldn’t even go to a restaurant where they serve alcohol. Or where do you draw the lines? If other students who are under 21 are allowed to be at that function and . . . even though they’re serving alcohol, we just have to hope that our students . . . are educated and that they’re making the best choice.

If the students are truly in an inclusive program, program staff believed that they should have the option to make their own decisions just like the other students at the same university.

Participants also affirmed that students with ID should not be treated differently from any other students on the college campus. While students with ID attend an IPSE program, participants felt they should receive as much of a “typical” college experience as possible. One way to make this happen was to allow students the autonomy to make their own decisions. These three participants emphasized that this was very much part of the education of being a college student. Alex talked about how they affirm this autonomy among their students:

We believe that people . . . who have disabilities shouldn’t necessarily be eliminated from having the same experiences as everybody else. It’s also not something that we can take responsibility for any more than the whole campus can. We garner our campus supports, but we don’t have rules about [students in the program consuming alcohol].

Participants also talked about how students with ID will come into college with preconceived notions about alcohol, just like any other college student. Abby described this situation:

I've had some students come in and say, "No, drinking is bad. [I] can't participate in that." I've had other students who were like, "As soon as I turn 21, I'm going to go out for a drink." Their level of comfort with it and their exposure to it, it really just varies. Which I'm sure is typical to other college students.

### *Program-Specific Policies*

In contrast, three participants described having an alcohol policy that was unique to their program. One program has a zero-tolerance policy, which meant that their students could not take part in consuming alcohol while they are under the jurisdiction of the program, whether or not they were 21. Hannah described the origins of this decision, "Our Executive Director and Founder, he worked with legal. And they really came up with these parameters on basically the safety aspect and the risk management part." Hannah continued by describing the program's zero-tolerance policy further:

Another aspect is that the students absolutely cannot have alcohol under the realms of [the program]. And so they are not allowed to have alcohol any time when they are with [the program]. They're not allowed to attend events with alcohol. Like with a Greek event, with sororities or fraternities or anything. If it's a social in that room, they can't go. They aren't to be downtown. And you know what our downtown is like! . . . But, if they're there, they have to be gone around 10-ish, whenever food starts weaning and alcohol starts boosting. And that's really more safety. But that doesn't mean . . . I mean, they've been there, and we've had situations. So, with that being said, that's included for our staffing that live with them. Like no alcohol at all.

Another program's policy is that the family makes the decision on whether students will be allowed to consume alcohol while they are in the program. This decision was made because some students in the program were not their own guardian. Emily explained their alcohol consumption policy, "As far as our policy goes, the student has to be their own guardian to make the decision. If they're not their guardian, their parent has to give them permission." Getting the parent's permission was said to keep liability from falling on the IPSE program should something happen.

The third program allows students who are age 21 or older to drink while they are in the program. However, there are specific rules addressing with whom the students can drink. The rules address who they can buy alcohol for and the presence of alcohol in social media posts. Katie described the program's rules around safe alcohol consumption:

We also have some other policies just for [program] students. One, they're not allowed to buy alcohol for underage [students], such as our peer mentors. Not that we've had that happen or that I know that that has happened, but I have heard horror stories from other programs. So, they are not allowed to buy alcohol

for others, especially if they're under the age of 21. They could be dismissed from the program. And they follow the Residence Life as they can't have alcohol in the dorm if no one else in their suite is over the age of 21. In our policy, we have a statement that says that we encourage parents and students to have a conversation about alcohol before coming to the program, because our students will be around alcohol, especially on game days because of tailgates. They are not allowed to have alcohol in their social media posts, so that's one of our policies.

### **How is Alcohol Education Currently Being Addressed for Students with ID?**

Each of the participants addressed the distinct ways students in their programs were receiving alcohol education. The three primary approaches were: generic university programming, program-specific efforts (i.e., supplemental adaptations, peer supports, addressed as needed, authentic instruction), and family education.

#### *Generic University Programming*

Participants stated that one of the first introductions to alcohol education their students receive is when they attend the freshman orientation with their peers. Four participants explained that this orientation is mandatory for all incoming freshmen. The orientation addresses, in part, considerations related to drinking alcohol as a student. Ashley indicated that this may be the only introduction to alcohol that her students with ID receive, "Because the only thing we're doing is, we're completing the mandatory alcohol education training that all freshmen must do. I'm not aware that [the program] even offers anything else beyond that freshman orientation activity." The students may then have to complete modules related to what they heard during the orientation seminars. Although this generic university programming was valued, the four participants also talked about how it is not adapted to the cognitive level of the students in their program. They noted that they may have to provide supplemental supports or adaptations in order for their students to understand the material. As Abby described:

One support we provide is university wide. There's this program that all incoming freshmen or transfer students have to do their first year . . . it's called Alcohol Education and Sexual Assault Prevention. Freshmen and transfer students have to view a series of modules and they take an assessment about their understanding of it, their comfort level with alcohol. There's a 45-day in-between period before they can take Part 2. I think it's just to assess their understanding and comfort with alcohol at different points in their college experience. We incorporate that into our first-year coursework. So, they take the modules in the class with one of our instructors as a group, and then they take the assessment, and then in the spring they'll come back and finish off Part 2. That's really the extent of it.

Participants also noted that their universities hold trainings or "talks" about alcohol education throughout the year. Some programs had not yet had the opportunity to have

their students attend these talks, but they considered them important to the education of the students and they were trying to make it happen. Katie elaborated:

There are several trainings on campus that we haven't done with our students that we are thinking about giving to our students. We definitely want our students to have more lessons—not just from us—but from organizations on campus like the Counseling Center. I think it's Student Health that does an alcohol awareness training that I think would be really great for our students, so we're hoping to implement that this fall.

Other participants indicated that their students are not required to go to these talks, but they make sure the students are aware of university talks so that they can receive more information on alcohol and other topics. They talked about how important it is for their students to have the opportunity to go to these talks, as the speakers are the real experts on the topic. The speakers are usually hosted by other organizations on campus, which allows students with ID to attend these experiences right alongside other college students. As Hannah explained:

The other exposure the students have again is anything the campus provides. So, I know a lot of the Greek Life hosts educational events. And one of them is alcohol safety and so our students have access to go to that as well. So, anything that's hosted on campus they have access to. So that's more of the informal because we don't mandate them to go, but it's optional.

### *Program-Specific Efforts*

The first way in which programs address alcohol education with their students is by supplementing the university-wide offerings. One example of this involved requiring students to complete modules that are part of freshman orientation. However, it sometimes took students with ID much longer to complete the modules. Abby elaborated on the need for this supplemental instruction:

I've had some conversations with the instructors that have taught the modules. It comes from the university. It's not something we designed, so it's a little dense. There's a lot to go through and because it is part of a larger curriculum, they have to move through it pretty quickly. I've never seen the assessment piece to it, so I don't know how much it accurately captures their understanding or their comfort with alcohol.

Second, alcohol education for students in some programs is supported in part by peer mentors. The peer mentors are volunteers who also attend the university and assist students with ID in a variety of ways (e.g., study strategies, workout tips, social support). Alex described how peer mentors (who they called "supports") helped students navigate alcohol use:

We guide our supports. So if a student is going somewhere with a support, we train our supports to know whether they're 21 or not and to take on a role of a



positive role model mentor in those situations. Usually, if we have a student that wants to drink, finding someone that we're connected with and have trained to be open and non-judgmental, but also aware of some things that might come up, then that turns out being something really strong. They have a safe person that they can drink with if they want to go have a beer.

The participants went on to talk about how having this network of peer mentor support helps students feel comfortable asking questions about alcohol.

The third way participants talked about how their programs address alcohol education is on a student-by-student basis. Two of the programs indicated that they do not provide alcohol education formally, but instead address the issue only when situations arise. One situation is when a student turns 21. Another situation is if the student has questions about something they saw on campus or downtown. Abby explained how they address individual needs:

[Alcohol education] is not formally addressed. I do know that in personal development—those one-on-one sessions with a coach—students have talked about turning 21 and wanting to drink. They have talked through what to do safely and responsibly. When we have our student orientation at the beginning of the year, we always make a point to tell them that they have to adhere to university policies when it comes to drinking and housing policies. We address it again individually as situations come up or if the student identifies that that's a conversation that they would like to have.

Finally, one of the programs addresses alcohol education through authentic instruction. For example, if a student is learning to order off a menu, the program takes them to a restaurant and shows them how to use a menu to order. While the program states they do not let their students drink during this instruction, they want their students to understand the transfer of what they are learning to an authentic environment. Hannah described their approach:

Sitting in a classroom talking about it and sitting in a dorm room with a peer mentor talking about it, you have two different aspects. There's not always that transference of skills. If you're sitting in a restaurant eating and they go, "Hey, what is that?" And they're pointing to the bar and they're asking, that's a perfect time for education. So, I'm very much about the authentic environment.

### *Family Education*

Some programs also rely on families to address alcohol education. When students first apply, all seven programs said parents are informed of the alcohol policy. This allows families to provide the student with information about alcohol use before they come to campus. Alex talked about how both the program and the families voice their values and expectations here:

We got that out of the way [conversations about alcohol policy] and try to be really honest with families. And we teach the code of student conduct too in our classes. And invite people to come in and talk to our students about the code of student conduct and alcohol and drug awareness and sexuality awareness and all of those things. My impression as they come in the door, it seems to me the families are actually doing a pretty good job of at least communicating their value system around it, or their concerns.

Even in programs that do not allow student drinking, Hannah noted that it is up to the family to decide if the student is allowed to consume alcohol at home. This requires the family to educate the students on alcohol use. She explained:

I mean when they're 21 and they go home, or if they go to an event like with their family, then that's fine. I mean I will say, "You're not under me at that point in time. You are under the realm of your parents." And so, like if a sorority's having a girl's weekend—like a Mother's Day thing—and obviously there's something's going to be served, then if the parents come, then they are under their realm and they can go. But the thing is they don't come back to campus if they have been drinking.

### **What are Issues Programs Face When Addressing Alcohol Education?**

Participants shared nine ways in which addressing alcohol education can be difficult for students with ID in their program: limited prior knowledge, negative association, dignity of risk, community attitudes, health concerns, family barriers, faith-based decisions, abstract content, and the need for curricula.

#### *Limited Prior Knowledge*

A common point raised by three participants was that students in their IPSE program often had limited prior knowledge about alcohol use. This limited knowledge resulted from not being able to participate in alcohol awareness class during high school or not having it addressed at home. Sara addressed the lack of exposure her students had to alcohol education classes:

Some of my students took [high school alcohol education classes] and some of them didn't, which is always very upsetting to me when they didn't take that. But, I mean, one thing is a lot of students, the general population, have taken these classes. They've taken health in junior high. They've probably taken it in high school. They have a basic understanding about it. Some of my students haven't had the opportunities to take those. So sometimes this is the first time they're hearing it, which is huge, especially as an adult. That's a very new thing to bring up with no background.

Without access to these classes in high school, students' understanding of alcohol was said to be very general. Some students with ID were said to make decisions about the

effects of drinking alcohol based on opinions rather than on facts. Sara described this concern:

A lot of them have a general understanding, but I think they just think you drink it and you're going to get drunk. So, it's kind of like, "Oh, no, we stay away." . . . So, we talk about that a little bit, how it's okay to have a drink if it's up to you. But they definitely have that kind of... Most of them, is what I've found, have that extreme view that it's like if you're going to get drunk, it's going to be bad. So, a lot of them, that's why they have that . . . they want to stay away from it.

This limited understanding was said to make it harder to address alcohol education with students when they reach the college program because they lacked foundational skills.

### *Negative Association*

Two participants talked about the negative associations their students had with alcohol. In part, this was due to their limited prior knowledge. Some students with ID were said to have a negative association with alcohol because they have repeatedly been told in the past that it is bad or dangerous. As a result, students learned they should just stay away from alcohol altogether. Ashley speculated on the number of students in her program who had a negative association, "I think I would say 95% of them still have the thought of 'Alcohol is bad. We should stay away from alcohol.'" Participants felt that removing this connotation might make it easier to teach students the facts about consuming alcohol. It would also allow students to make more informed decisions regarding whether or not they would like to consume alcohol. Abby talked about the benefits of addressing this negative association:

I think the unique part for some—it might be kind of removing a negative connotation associated with drinking. I do think a lot of times for individuals with disabilities, there's this just assumption that they can't, or they shouldn't. Like I had mentioned earlier, I've worked with several students who are just like, "No." It's kind of this irrational fear of alcohol. Like, "I can't do that. That's bad. That's dangerous." And so, I think kind of helping them remove that because . . . I don't think with a typical young adult turning 21 that there's this should you drink? I don't think that it's taken to that extreme.

### *Dignity of Risk*

Three participants addressed the concept of dignity of risk. Dignity of risk was described as allowing the student to be an autonomous person and make their own decisions, even if it may lead to mistakes. Participants acknowledged that traditionally-enrolled college students are drinking and that students with ID want to be included in all aspects of college life. Having full access means that they will be placed in new situations that bring ordinary risks. Abby emphasized that these experiences should not be denied to students:

Dignity of risk is a great one to point out because that's one of the things that even when we are going through our interview process and accepting students,

we talk to families about that and how we're big proponents of that. You can't deny someone an experience or the opportunity to try and fail because they have a disability. Again, I think that's a big reason why we don't say, "Hey, your student said they want to drink. Can you sign this?" If they are of age and they're going to do something that's legal and responsible and okay, we're not going to just assume that because they have a disability, they shouldn't be doing that, or they can't be doing that.

However, these participants noted how dignity of risk can still be hard to address with students with ID. The students were described as having such a strong desire to fit in with other college students on their campus. This sometimes led them to overlook differences in their own support needs relative to fellow college students. Students with ID were said to learn best by trying something first and then reflecting on the consequences. As Hannah described:

They just truly don't understand the differences [between themselves and other college students], they can still do things, just take a different route to get there. They want so badly to fit in. And they want to be like what they see on social media. And this is what I see, so I'm going to do that. And so, I think that is a very difficult concept that you have to address. I mean you can't avoid that piece.

### *Community Attitudes*

Four participants mentioned the reactions of community members and fellow college students regarding alcohol among students with ID in their programs. They stated that attitudes about alcohol need to be addressed when teaching students to make informed decisions about its use. However, these attitudes were not typically addressed in the available curriculum, making it difficult for staff to address prevailing attitudes through instruction. Participants also said it was difficult to address because students with ID often did not recognize their own vulnerabilities. Alex emphasized the importance of addressing this issue:

It's hard for some of our students and anybody to recognize vulnerabilities. . . . It's trying to educate them as much as possible, as well as the people around them that can support them to make sure that they understand their own vulnerabilities and not to be ashamed of that. I think self-advocacy really can help.

Katie noted that people in the community may be especially protective of individuals with visible disabilities. She described how societal attitudes may impact the way people treat her students:

If I was an individual with Down syndrome and I was out at a bar drinking, I would probably get some looks because of that "safety" aspect of being someone with a disability. Our society likes to keep them safe.

Another vulnerability these students were said to face is an increase in peer pressure or bullying. Some community members may not be accustomed to seeing individuals with ID out in the community, particularly at a bar. Hannah suggested that not everyone is fully accepting of individuals with ID and some may even take advantage of them:

The other thing is look at peer pressure. Bullying. Like what about the people who think it's fun to pick on the student that has, or the individual that may have Down syndrome. "Oh, this will be fun. Let's tease them. Let's buy them all these drinks and see what they say. See what they do."

### *Health Concerns*

Three participants noted that some students enrolled in their programs have multiple health issues. Some of these health issues require that their students take a variety of different medications, which may cause their bodies to react differently (or negatively) to alcohol. This makes it difficult to prepare students to deal with this situation because the only way students would know what it felt like to have a complication is to actually experience that complication. Students would need to know which medications they take, whether they can drink while taking those medications, and whether there are potential side effects. Sara raised the complications of drinking while on medication and trusting guardians to release all the information about medications to the program:

So many students are on meds. Alcohol can react with meds in who knows what kind of ways. At my program, we don't always know all the meds they're taking. Some parents are very open about it and they know everything. Some parents, they're not required to tell us everything. So that's something that comes into play, I think, is you never know if a student drinks, how it's going to interact with their meds. I think that's one huge one. Then also definitely with health issues or different ways that their bodies work, I think it can affect them differently.

### *Family Barriers*

Six participants discussed the impact of family barriers when addressing alcohol use. Parents were said to want to assurances that their children would be safe when leaving home and attending college. Many parents had a long history of making the majority of the decisions for their daughters and sons with ID. This made it hard for students to understand that they do have a choice about whether to drink or not. This was a particular challenge when guardianship was considered. Abby talked about these challenges:

We have some students who are their own guardian and others who are not. I think that's where it becomes a challenge because programmatically, our philosophies kind of differ from a guardianship, especially for a student that is able to make their own decisions. Because you're on campus, you're living on your own, you are making your own decisions. And so, I guess, guardianship—it just makes it a more challenging situation to navigate.

When it comes to alcohol, students with ID were said to have received different degrees of instruction at home. Some parents were very open with their children about alcohol use, while others told their children to avoid alcohol at all costs. Katie talked about the struggle this presents when students first enter the IPSE program:

There are parents who have had explicit conversations about alcohol, who drink with their young adult with ID. And then there's parents who have not addressed it at all and think that it's just not going to come up. So, you have very two different extremes. And so, I think it is really important to talk about the student, about what to do in situations, if you're asked if you want alcohol, or what to do if your friend is throwing up and really sick from alcohol. Things like that, I mean, those are safety things that everyone needs to know.

Participants realized that they were only in their students' lives a short time and they did not want to overstep any boundaries established by families. At the same time, participants felt strongly that it was their job to prepare students for life after they leave the programs.

### *Faith-Based Decisions*

Two participants discussed how a student's faith can also influence whether he or she will want consume alcohol. For example, Sara addressed how being on a faith-based college campus relieves students' concerns about the presence of alcohol. However, she worried whether this provided an inaccurate depiction of life after graduation:

I think it helps develop their foundation of just being safe instead of being around the things that can be dangerous or lots of people partying a lot. The only thing that I could see it being a barrier is if they end up somehow being in a situation in the future where they're around a lot of people that are drunk, and they have never had that before. But to be honest, I don't think a lot of them would ever be in it. Like ever. Knowing where they're going to go in life. Maybe, but the only thing I can think of, like I mean, if there's a work party. If they work at a factory and people like to get together, there'll be drinks and stuff. So those are things that I wish they could experience more. It's like both. It's two-sided.

### *Abstract Content*

Two participants stated that alcohol use can be an abstract concept that is difficult to address consistently. Every time a person consumes alcohol, they noted, the effect may not be the same. Likewise, the effects of alcohol vary based on one's weight, the type of alcohol, the number of drinks, or any medication someone is taking. These concepts can be abstract and difficult to communicate clearly to some students with ID. Katie explained:

It's this abstract concept that is always different depending on who you are, where you are, what time of day, what day of the . . . I mean, it's completely different every time, so I think that's the struggle with teaching students with ID on this concept.

*Need for Curricula*

Three participants addressed the enduring need for curricula to help guide their alcohol instruction. They talked about their difficulties addressing this topic with students with ID in the absence of a specialized curriculum. Katie indicated that this made it hard to convince parents of the need for alcohol education. She explained:

“Oh, we’re teaching about sexuality education and we have this curriculum that’s designed for people with intellectual disabilities.” The parent’s like, “Oh, okay.” It’s another thing to say, “Oh, we’re going to teach about alcohol, but we don’t really have a curriculum and there isn’t really a curriculum, so we’re kind of making it up as we go,” which is basically what it is. I think it would be really, really cool if there was a curriculum.

Without such guidance, families are uncertain whether instruction will benefit their daughters and sons or whether it is an important topic to address. Each of these participants felt that having a curriculum developed specifically for these students would ensure that there are embedded adaptations and supports. Sara emphasized the value of having this type of curriculum:

I just feel like it might be good to have . . . I think we’ve made it just kind of out of our own ideas. I think it’d be nice to have a curriculum-based instruction to help. Like maybe not use the whole curriculum, but actually have something to base off of that actually has lessons and some resources involved that’s made for students with disabilities or even transition students to address that.

Finally, two participants stated how participating in this study prompted them to rethink the alcohol education that they are currently providing to their students. Ashley described how the interview made her realize that they were only doing one thing to help support their students’ alcohol education. She described this by saying:

Well, when we put it in the spotlight that you’re focusing on, it makes me feel like we’re doing a really lousy job. Because the only thing we’re doing is, we’re completing the mandatory alcohol education training that all freshmen must do.

Ashley later stated how this lack of education in this subject could lead to negative effects after the students left their college program. She explained:

In light of that, I would say that we’re not giving the importance that we need to, because if they do gain all kinds of skills with our program and move out on their own and they become more and more part of the world, then these choices are going to become much more important to them.

At the end of her interview, Katie stated how participating in this study made her want more resources on this topic. She talked about the importance of other IPSE programs working together to develop curriculum that will be beneficial to their students. She

explained, “I do think your project’s really important, and I would love to see any resources after it’s over, as far as what you’ve found and what other programs are using.”

### Discussion

Alcohol education is important for every student on every college campus. As inclusive postsecondary education programs are becoming a more widely available option for students with ID after high school, access to this same education is equally important. Our study addressed three aspects of this issue: the policies programs have in place, the ways programs are addressing alcohol education, and the issues that arise when addressing this aspect of college life and adulthood. These findings offer new insights into the provision of alcohol instruction at the postsecondary level.

First, program staff stated that there is a substantial need for curriculum specifically for students with ID addressing alcohol education. This is important in light of the paucity of available curricula designed for this population of students. Research has focused on curriculum developed for students with learning disabilities (e.g., Forbat, 1999; Mendel & Hipkins, 2002). However, available curricula for students with ID is mostly online or computer-based, which may not meet the needs of all students (Kiewik et al., 2016 & 2017). Although technology-based alcohol education programs are useful, students with ID may benefit from also having additional opportunities to respond and actual chances to practice what they are learning. For some program staff we interviewed, addressing alcohol education required them to develop their own lessons or determine how existing material should best be presented. The participants were used to taking curriculum and changing it so that their students better understand what they are learning; however, when it comes to alcohol education, they would prefer a research-based guide to support their teaching.

Second, participants emphasized how important it is to utilize university supports in this area. These supports could include freshman orientation, university trainings, or inviting experts from the university to present to IPSE program-specific classes for students with ID. Involving students in existing freshman orientation sessions and university trainings may help students feel more included in the campus community (e.g., Schroeder et al., 2021), as they are accessed by all other students on the same campus. At the same time, this inclusive approach will require the university to learn how to better support the involvement of their students with ID in their school-wide events and offerings. University staff may need to embed research-based instructional practices and supports to ensure that learning is universally accessible to everyone.

Third, participants identified a variety of added barriers to teaching alcohol education to students with ID. Their perspectives highlighted ways in which such education might look different or distinct from what other students may access. Most college students without disabilities will have participated in alcohol education in a high school health class. However, students with ID may not have been included in those same general education classes (Brock, 2018). Moreover, students with ID may lack prior education about alcohol altogether and need to start the education from the beginning. To best understand what



students need, programs can ask both the students with ID and their parents about any prior preparation or background knowledge.

In each of the interviews, participants also offered tips for navigating alcohol awareness in an inclusive higher education setting (see Table 2). Most participants provided information on how the curriculum should be presented. For example, Ashley said, “They’re hands-on learners, they’re visual, in most every topic, they enjoy trying to do some role-playing. Some type of experiential, ‘Let’s try this conversation. Someone is pushing a drink on you, what are you going to do?’” Other participants emphasized how their programs cannot stop students from drinking. However, they can provide students with accurate and relevant facts in order to make wise decisions about whether and how much they will drink.

### **Limitations and Future Research**

Several limitations to this study should be addressed through future research. First, only seven program staff members provided information on what their IPSE education program was doing to address alcohol education. Future studies should recruit more programs to participate in the study to identify additional ways in which alcohol education is being addressed across the nation. A national survey of all IPSE programs could help identify additional policy or practice variations beyond what was shared in this study.

Second, we only interviewed one staff member from each program. This provided only one vantage point regarding the complexities and experiences of addressing alcohol education. Moreover, program leaders may not have known the full extent of the alcohol education available to all of their students. Future studies should interview more than one representative from each program to better understand the education and support each program and university provides.

Third, we did not interview students with ID. We chose to begin with program leaders in this first study as they are in the best position to discuss the priorities and practices of their programs and universities. Individual students would not have the same vantage point from which to speak in detail regarding prevailing policies and the decisions that led to them. However, limiting our study to program staff meant that staff might have sometimes been speculating about what their students learned through or thought about their alcohol education program. For example, when asked about students’ prior knowledge of alcohol, participants were limited in what they could share. Incorporating interviews with students could provide additional insights into the complexities of addressing alcohol education.

Fourth, we did not examine the impact of alcohol education efforts as part of this study. Although the participants felt strongly that instruction and support could positively impact student behavior, further studies are needed to determine whether this is actually the case. As noted previously, most university programs already provide alcohol education to their entire student body, yet large numbers of college students report binge drinking and other risky alcohol-related behaviors (SAMHSA, 2021). Additional research is needed to

examine what additional training or support is necessary to ensure that students with ID can make informed and wise decisions.

### **Summary**

With the rise in the number of IPSE programs comes the need to further educate students with ID. This education will ultimately make them more successful once they graduate from their program. To make informed decisions about alcohol after college, students with ID will benefit from having access to a comprehensive alcohol education program. We hope our initial study will spur additional scholarship addressing this often-overlooked area and prompt new thinking about what might constitute a strong alcohol education program that is both accessible to and effective for college students with ID.

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**Table 1***Inclusive Higher Education Program Characteristics*

Pseudonym	Number of students enrolled in the IPSE program	Percentage of students with intellectual disability	Admissions age range	Length of the program	Faith-based or secular	Approximate enrollment of affiliated university/college
Ashley	33	100%	18-26	4 year	Secular	10-15,000
Katie	5	100%	18-27	4 year	Secular	Above 50,000
Abby	23	N/A*	18+	4 year	Secular	30-35,000
Hannah	41	100%	18-26	2 year or 4 year	Secular	25-30,000
Sara	14	100%	18-26	4 year	Faith-based	Less than 5,000
Emily	15	100%	18-26	4 year	Secular	30-35,000
Alex	10	100%	18-26	2 year	Secular	20-25,000

IPSE = inclusive postsecondary education

\* Information was not provided

**Table 2***Summary of Recommendations from Participants*

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Area	Recommendations
Curriculum Presentation	<ul style="list-style-type: none"><li>• Understand students' background knowledge</li><li>• Develop goals to help collect data</li><li>• Incorporate repetition of content</li><li>• More through content at a different pace</li><li>• Teach safety (e.g., taking rideshares after drinking, talking with law enforcement)</li><li>• Represent content visually, tactile, and verbally</li><li>• Use explicit instruction</li></ul>
Developing Policy	<ul style="list-style-type: none"><li>• Collaborate with risk management team</li><li>• Collaborate with the University</li><li>• Honor local, federal, and state laws</li><li>• Collaborate with parents/caretakers</li><li>• Allow students to be autonomous and self-determined</li><li>• Communicate with community partners</li></ul>

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## Appendix

### *Semi-Structured Interview Protocol*

#### **Background Questions**

- Tell me a little about your program and the students you serve.
- Tell me about the college/university and which parts of the campus life your students access.

#### **Program Questions**

- What is your programs policy regarding the consumption of alcohol by students in your program? (ex. Policy about students not attending functions where alcohol is served)
  - To what extent are the students with intellectual disability you serve using alcohol—on campus or at home?
  - What barriers are presented when trying to address alcohol education?
  - How would you characterize what your students already know about alcohol use?
  - To what extent are there opportunities for your students to use alcohol on your campus?
  - Have there been instances or particular problems with alcohol usage among students in your program? To what extent do you and your staff have to address this each year?
  - [For programs on an alcohol-free campus] Do you think that there are benefits to having a post-secondary program on a dry campus? Is the fact that you are on a dry campus make it easier to address alcohol usage with your students?
  - Do you feel that students with ID are entitled to supplemental alcohol education?
  - To what extent does your program provide alcohol education to students with intellectual disability? What does your alcohol education look like? Is it formal or more informal? Is it provided to all students or individualized for some? How long do students have alcohol education?
  - What is unique about teaching this to your students as opposed to the rest of campus learning this? What are you doing similar to the rest of the campus alcohol programs?
  - If there is not alcohol education, why isn't there?
  - In what ways does your school address alcohol education for students without disabilities? Do students with intellectual disability participate in any of these activities? If so, what supports, or assistance do they receive?
  - What are your policies and rules around consuming alcohol? Are students allowed to partake in drinking if they are of age in your program?
  - How confident are you in being able to address these needs? What training and resources do you think are still needed to address these issues?
  - Do you think students are receptive to the program and understand the consequences of choosing to drink?
  - What makes this issue so complex to address with this population?
- \*\*\*Asked if only the program addresses alcohol education
- How important do you feel alcohol education is to your program?

- How do you evaluate the effectiveness of what you are doing?
- Who is delivering your alcohol education?
- Do you believe your program is doing a good job of addressing alcohol education?
- Do you feel that your students are better prepared for alcohol related decisions when they leave because of your alcohol education?
- Do you feel that providing your students with alcohol education has made them more included on campus?
- Do you think that your staff needs more training to deliver your alcohol education? What kind of training?

\*\*\* Asked only if the program does not address alcohol education

- Do you believe that having alcohol education would allow students to be better prepared for when they leave the program?
- Do you have faculty that would be willing to teach a program like this?
- Do you believe that having alcohol education would allow your students to more successfully live on campus?
- Do you believe having alcohol education would allow students to have the same amount of knowledge as their peers?
- Do you think not having alcohol education makes students with ID feel less included in the campus?
- What resources or training would help you feel more confident addressing the topic of alcohol education within your program?

### Wrap-Up Questions

- What is the most important advice you could give to a program trying to navigate this issue?
- Is there anything else you were hoping to share with me that I did not ask about?