

Windward Community College Drug and Alcohol Abuse Prevention Program and Procedures

- I. Effective Date:**
June 5, 2019
- II. Office of Primary Responsibility:**
Windward Community College (WCC) – Chancellor's Office
- III. WCC Position Assigned with Oversight:**
Title IX Coordinator under the Chancellor's Office
- IV. Purpose:**
WCC is committed to providing and maintaining a safe, healthy and productive environment for Students, Employees, and Visitors, free from hazards associated with Drug and Alcohol abuse in accordance with the Drug-Free Workplace Act of 1988 and the Drug-Free Schools and Communities Act of 1989. This program is also intended to ensure compliance with the University of Hawaii Executive Policy (EP 11.201, Illegal Drugs, Alcohol and Substance Abuse).

University of Hawaii Policy on Illegal Drugs and Alcohol Abuse

The University expects its employees and students to carry out their responsibilities free of intoxication by any illegal drugs or alcohol. Employees and students are not permitted to manufacture, distribute, possess, use, dispense or be under the influence of illegal drugs as prohibited by state and federal law, at University-sponsored or approved events or on University property or in buildings used by the University for education, research and recreational programs. The University expects lawful behavior by employees and students, during their presence on University premises and at University events. Within the constraints of its mission, the University encourages cooperation with law enforcement agencies in enforcing statutes regarding the use of illegal drugs.

The University of Hawaii Executive Policy (EP 11.201) recognizes that substance abuse is a complex problem that is not easily resolved solely by personal effort and may require professional assistance and/or treatment. Employees and students with substance abuse problems are encouraged to take advantage of available diagnostic, referral counseling and prevention services. Therefore, campus, community and drug and alcohol educational resources will be made available to students and employees.

V. Goals

Through consistent enforcement of sanctions, awareness and prevention trainings, counseling, campus support services and referrals to community resources and services, WCC will maintain a safe, healthy and productive environment for students, employees and visitors, free from hazards associated with drug and alcohol abuse in accordance with the Drug-Free Workplace Act of 1988 and the Drug-Free Schools and Communities Act of 1989 and the University of Hawaii Executive Policy EP 11.201. The target number of violations per year is ZERO, but no more than 1% of the total number of appropriated employees and students headcount for the Fall semester.

VI. Sanctions

Employees and students who violate the policy will be subject to disciplinary sanctions, including, but not limited to, expulsion, or termination.

A. Sanctions for Students

The UH Student Conduct Code may be found in the UH Executive Policy, EP 7.208 (March 2019). Sanctions which may be imposed on violators of the alcohol and drug-related sections of the UH Student Conduct Code include:

1. **Written Warning** - A notice in writing to the student that the student is violating or has violated institutional regulations and a copy of the warning letter is placed in the student's disciplinary file.
2. **Probation** - Probation is for a designated period of time (which may include the remainder of their enrollment at WCC) and includes the probability of more severe disciplinary sanctions if the student is found to violate any institutional regulation(s) during the probationary period. This sanction may require the student to meet with the VCSA (or his or her designee) upon request.
3. **Loss of Privileges** - Denial of specified privileges for a designated period of time.
4. **Restitution** - Compensation for loss, damage, or injury. This may take the form of appropriate service and/or monetary or material replacement.
5. **Discretionary Sanctions** - Work assignments, essays, service to WCC, Community Service or other related discretionary or educational related assignments.
6. **WCC No Contact Orders** - No unnecessary contact between the Respondent and the Complainant, witnesses, or other individuals (when appropriate).
7. **Suspension** - Separation of the student from WCC for a definite period of time (usually 1 year or less) after which the student is eligible to return. Conditions for readmission may be specified. Suspensions may be effective immediately or deferred.
8. **Dismissal** - Separation of the student from WCC for more than 1 year. The student may be eligible for return. Conditions for readmission may be specified. Dismissals will be effective immediately unless otherwise stated.

9. Expulsion - Separation of the student from WCC permanently. Expulsions will be effective immediately, unless otherwise stated.

10. Revocation of Admission and/or Degree - Admission to or a degree awarded from WCC may be revoked for fraud, misrepresentation, or other violation of WCC standards in obtaining the degree, or for other serious violations committed by a student prior to graduation.

B. Sanctions for Employees

The sanctions for employees in bargaining units 1 and 10 will be in accordance with the drug and alcohol testing provisions contained within the collective bargaining agreements. For all other employees, progressive discipline will be in accordance with the employee's applicable collective bargaining agreement: possible sanctions may include disciplinary action ranging from reprimand to termination, and may include suspension without pay, disciplinary reassignment, disciplinary transfer, and demotion.

C. Federal Sanctions:

FEDERAL TRAFFICKING PENALTIES

DRUG/SCHEDULE	QUANTITY	PENALTIES	QUANTITY	PENALTIES
Cocaine (Schedule II)	500–4999 grams mixture	First Offense: Not less than 5 yrs, and not more than 40 yrs. If death or serious injury, not less than 20 or more than life. Fine of not more than \$5 million if an individual, \$25 million if not an individual.	5 kgs or more mixture	First Offense: Not less than 10 yrs, and not more than life. If death or serious injury, not less than 20 or more than life. Fine of not more than \$10 million if an individual, \$50 million if not an individual.
Cocaine Base (Schedule II)	28–279 grams mixture		280 grams or more mixture	
Fentanyl (Schedule II)	40–399 grams mixture		400 grams or more mixture	
Fentanyl Analogue (Schedule I)	10–99 grams mixture		100 grams or more mixture	
Heroin (Schedule I)	100–999 grams mixture	Second Offense: Not less than 10 yrs, and not more than life. If death or serious injury, life imprisonment. Fine of not more than \$8 million if an individual, \$50 million if not an individual.	1 kg or more mixture	Second Offense: Not less than 20 yrs, and not more than life. If death or serious injury, life imprisonment. Fine of not more than \$20 million if an individual, \$75 million if not an individual.
LSD (Schedule I)	1–9 grams mixture		10 grams or more mixture	
Methamphetamine (Schedule II)	5–49 grams pure or 50–499 grams mixture		50 grams or more pure or 500 grams or more mixture	
PCP (Schedule II)	10–99 grams pure or 100–999 grams mixture		100 gm or more pure or 1 kg or more mixture	
2 or More Prior Offenses: Life imprisonment. Fine of not more than \$20 million if an individual, \$75 million if not an individual.				
PENALTIES				
Other Schedule I & II drugs (and any drug product containing Gamma Hydroxybutyric Acid)	Any amount	First Offense: Not more than 20 yrs. If death or serious injury, not less than 20 yrs, or more than life. Fine \$1 million if an individual, \$5 million if not an individual.		
Flunitrazepam (Schedule IV)	1 gram			
Other Schedule III drugs	Any amount	First Offense: Not more than 10 years. If death or serious injury, not more than 15 yrs. Fine not more than \$500,000 if an individual, \$2.5 million if not an individual.		
All other Schedule IV drugs	Any amount	First Offense: Not more than 5 yrs. Fine not more than \$250,000 if an individual, \$1 million if not an individual.		
Flunitrazepam (Schedule IV)	Other than 1 gram or more			
All Schedule V drugs	Any amount	First Offense: Not more than 1 yr. Fine not more than \$100,000 if an individual, \$250,000 if not an individual.		
		Second Offense: Not more than 4 yrs. Fine not more than \$200,000 if an individual, \$500,000 if not an individual.		

D. State of Hawaii Sanctions:

Under the Hawai'i Penal Code, crimes are of 3 grades according to their seriousness: felonies, misdemeanors and petty misdemeanors.

- Class A felony: fine not exceeding \$50,000 and/or an indeterminate term of imprisonment of 20 years without possibility of suspension of sentence or probation.
- Class B felony: fine not exceeding \$25,000 and/or imprisonment of not

- more than 10 years.
- Class C felony: fine not exceeding \$10,000 and/or imprisonment of not more than 5 years.
- Misdemeanor: fine not exceeding \$2,000 and/or imprisonment of not more than 1 year.
- Petty misdemeanor: fine not exceeding \$1,000 and/or imprisonment of not more than 30 days. §706-640,659,660,663, H.R.S.

In addition, promoting (possessing, distributing and manufacturing) drugs including marijuana) and intoxicating compounds can result in a Class A, B or C felony, misdemeanor or petty misdemeanor. §712-1241-1250, H.R.S.

Consuming or possessing intoxicating liquor while operating a motor vehicle or moped is fined not more than \$2,000 or imprisonment of not more than 30 days, or both. §291-3.1, H.R.S.

Consuming or possessing intoxicating liquor while a passenger in a motor vehicle is a petty misdemeanor. §291-3.2, H.R.S.

A person commits the offense of promoting intoxicating compounds if the person knowingly breathes, inhales or drinks any intoxicating compound or any other substance for the purpose of inducing a condition of intoxication, stupefaction, depression, giddiness, paralysis or irrational behavior, or in any manner changing, distorting or disturbing the auditory, visual or mental processes; or sells, offers, delivers or gives to any person under 18 years of age, unless upon written order of such person's parent or guardian, any intoxicating compound or any substance which will induce an intoxicated condition when the seller, offerer or deliverer knows or has reason to know that such compound is intended for use to induce such condition. This offense is a misdemeanor. §712-1250, H.R.S.

A person commits the offense of promoting intoxicating liquor to a person under the age of 21 if the person recklessly sells, offers, influences the sale, serves, delivers or gives a person under the age of 21 intoxicating liquor; or permits a person under the age of 21 to possess intoxicating liquor while on property under his control. This offense is a misdemeanor. §712-1250.5, H.R.S.

VII. Drug and Alcohol Testing

Employee Random Testing - United Public Workers (UPW), Bargaining Unit 01 employees are subject to random alcohol and controlled substances testing. Test is intended to keep the workplace free from the hazards resulting from the use of alcohol and controlled substances.

1. Employees are notified of test, time, and location. Tests are conducted during work time.
2. Employee presents a picture identification card to test site, if employee does not have an identification, the supervisor or management will escort employee to the test site.

Employee Reasonable Suspicion Testing - UPW, Bargaining Unit 01 and HGEA, bargaining Unit 03 & 04 employees are subject to reasonable suspicion alcohol and controlled substance testing. This alcohol and drug testing is intended to keep the workplace free from hazards of the use of alcohol and controlled substances.

1. Employees shall be subject to random testing, when a trained supervisor determines that reasonable suspicion exists. Supervisor shall have another witness observe the employee before directing employee to submit to an alcohol and or controlled substance test.

VIII. Campus Drug and Alcohol Awareness Campaign – Health Risks, Treatment and Resources

A. Health Risks: See Appendix A

B. Drug and Alcohol Awareness Training:

At least once a year and preferably during the Fall semester, WCC will have a drug and/or alcohol prevention presentation open to all staff, faculty and students. This training will be organized by the WCC Professional Development Coordinator in conjunction with the Vice Chancellor of Administrative Services Office. Documentation such as training materials and sign up lists will be archived for biennial review data and as evidence of the training.

C. Campus Resources:

1. **WCC Counseling:** WCC students dealing with drug and/or Alcohol problems are encouraged to seek help through their own resources. Individual counseling by a WCC Mental Health & Wellness Counselor is also available for students who need assistance with substance & alcohol abuse issues or referral services.
2. **Employee Assistance Program:** WCC employees dealing with drug and/or Alcohol problems are encouraged to seek help either through their own resources or through the University's Employee Assistance Program (EAP). This program provides confidential, short-term, professional counseling services to employees who may be experiencing personal problems that are affecting job performance. Eligible employees may receive up to a maximum of 3 hours of free counseling. All regular, temporary and exempt employees, casual hires and 89-day hires are

eligible for EAP services. WorkLife Hawai'i has been contracted to provide EAP services through a voluntary program that permits employees to seek help on their own. <http://worklifehawaii.org>

3. **WCC Wellness Program:** WCC'S Mental Health & Wellness Program's mission is to transform our campus community into a better place to work and study. The program promotes and encourages employees and students to make small changes so they can enjoy healthy and happy lives.
4. **WCC CARE Team:** The CARE Team is an interdisciplinary group of WCC professionals that meet on a regular basis to discuss and implement proactive strategies for supporting individual students identified by their level of need. This forum enables the campus to support individual students in a more comprehensive and holistic manner. The team works to provide a coordinated and streamlined response to students who need access to services such as counseling, mental health support, and behavioral health support. This proactive approach to identify and address safety concerns on campus is based on recommendations for best practice by the American College Counseling Association.
5. **WCC ULifeLine:** ULifeline is a confidential online resource center where college students can seek help for all types of mental stress and depression, including alcoholism and drug addiction. ULifeline is a project of The Jed Foundation, a leading organization working to protect the emotional health of America's college students, and was developed with input from leading experts in mental health and higher education.
http://www.ulifeline.org/wcchawaii/get_help_now
6. **Alcoholics Anonymous:** The WCC TRiO Director coordinates Alcoholics Anonymous (AA) meetings on campus once per week. This resource is available for students, employees and members of the community.

D. Community Resources:

Agency	Phone	Website
Action with Aloha Services: *Adult Substance Abuse Treatment Services (outpatient services)	(808) 484-4489	http://www.actionwithaloha.com/

Alcoholic Rehabilitation Services of Hawaii, Inc. (ARSH) dba Hina Mauka Services: *Adult Substance Abuse Treatment Services (residential treatment, social detox, outpatient services) *Integrated Addiction Case Coordination and Substance Abuse Treatment Services	(808) 236-2600	http://www.hinamauka.org/
CARE Hawaii, Inc. Oahu (808) 533-3936 Also located on Maui, Hawaii and Kauai Services: *Adult Substance Abuse Treatment Services (outpatient services, clean & sober housing) *Integrated Addiction Case Coordination and Substance Abuse Treatment Services	(808) 533-3936	https://www.carehawaii.info/
Community Health Outreach Work to Prevent AIDS dba The CHOW Project Services: *Adult Substance Abuse Treatment Services (outpatient services)	(808) 853-3292	https://www.hhhrc.org/
Ku Aloha Ola Mau Services: *Adult Substance Abuse Treatment Services (outpatient services)	(808) 538-0704	https://www.kualoha.com/
Ho'omau Ke Ola Services: *Adult Substance Abuse Treatment Services (residential	(808) 696-4266	http://www.hoomaukeola.org/

treatment, outpatient services, clean & sober housing, therapeutic living program)		
Kline-Welsh Behavioral Health Foundation Services: *Adult Substance Abuse Treatment Services (residential treatment, social detox, outpatient services)	(808) 841-2319	http://www.sandisland.com/
Oxford House, Inc. Services: *Group Recovery Homes	(808) 957-0324	http://www.oxfordhousehi.org/
Po'ailani, Inc. Services: *Adult Substance Abuse Treatment Services (residential treatment, outpatient service)	(808) 263-3500	https://poailani.org/
The Queen's Medical Center Services: *Adult Substance Abuse Treatment Services (outpatient services)	(808) 547-4352	https://www.queens.org/services/behavioral-health/services/services-behavior-qmc
The Salvation Army – Addiction Treatment Services Services: *Adult Substance Abuse Treatment Services (residential treatment, social detox, outpatient services, clean & sober housing) *Integrated Addiction Case Coordination and Substance Abuse Treatment Services	(808) 595-6371	https://hawaii.salvationarmy.org/hawaii/ats
The Salvation Army – Family Treatment Services	(808) 732-2802	https://hawaii.salvationarmy.org/hawaii/fts

Services: *Adult Substance Abuse Treatment Services (residential treatment, outpatient services, clean & sober housing) *Integrated Addiction Case Coordination and Substance Abuse Treatment Services *Specialized Substance Abuse Treatment for Pregnant Women and women with Dependent Children (residential treatment, outpatient services, clean & sober housing, child care services)		
Waikiki Health Center Services: *Early Intervention Services for Human Immunodeficiency Virus	(808) 791-9302	https://waikikihc.org/
Women In Need Services: *Adult Substance Abuse Treatment Services (outpatient services, clean & sober housing)	(808) 486-1996	https://www.winhi.org/

IX. Program Effectiveness

The WCC Drug and Alcohol Program will be assessed based on several evidence based metrics:

1. Employee disciplinary sanctions imposed
2. Student disciplinary sanctions imposed
3. Annual Clery Report statistics
4. Campus Security incidents
5. Referrals for counseling or treatment
6. Employee random drug and alcohol testing results
7. Number of students, staff and faculty attending the WCC Drug and/or Alcohol training sessions
8. Number of approved campus events that alcohol will be served

X. Biennial Review

On every even numbered year (eg. 2020, 2022), WCC will conduct a biennial review to assess the effectiveness of its DAAPP and any changes needed will be implemented into the program. Another function of this review is to ensure the College is consistently enforcing the disciplinary sanctions for violating the standards of conduct.

The DAAPP biennial review will be conducted by a committee comprised of a broad representation of campus constituents that have a stake in promoting the health and safety of the campus community. This biennial review will assess the current WCC Drug and Alcohol Abuse Prevention Program and Procedures and identify strengths, weaknesses and strategies for continuous improvement.

A. Committee Membership

The Biennial Review Committee is composed of the following Members or designee:

- Title IX Coordinator
- Vice Chancellor for Administrative Services
- Vice Chancellor for Student Affairs
- Vice Chancellor for Academic Affairs
- Safety & Security Manager
- Mental Health & Wellness Program Coordinator
- Student Life Coordinator
- Human Resources Specialist
- Counseling Department

B. Materials Reviewed

- Official Notice to Employees and Students Regarding Drug-Free Workplace Policies
- WCC General Catalog policies related to drug and alcohol use on campus and the sanctions imposed for failure to comply
- UH Executive Policy 11.201 – “Illegal Drugs, Alcohol and Substance Abuse”
- 2018 Annual Security Report
- WCC website
- Employee Handbook policies related to drug and alcohol use by WCC employees and the sanctions imposed for failure to comply
- Various resources available to students and employees regarding drug and alcohol abuse
- Incident reports related to possible infractions of the drug and alcohol policy
- Federal, state and local law

The EDGAR Part 86 publication, "Complying with the Drug-Free Schools and Campuses Regulations" was used as a resource guide for the biennial review.

XI. Distribution of the UH Official Notice to Employees and Students Regarding Drug-Free and Alcohol-Free Workplace Policies and the WCC DAAPP Procedures

The following procedure was developed to ensure WCC is compliant with the DFSCA distribution requirement. This procedure ensures active delivery of UH Annual Notice and the DAAPP disclosure materials to every member of the campus community. Delivery will be made to all students who enroll for academic credit and to all employees, regardless of when they are enrolled or hired, and irrespective of the duration of enrollment or employment. The distribution includes both the WCC DAAPP and the UH Official Notice to Employees and Students Regarding Drug-Free and Alcohol-Free Workplace Policies.

1. Campus website

- <https://windward.hawaii.edu/>

2. UH Broadcast Email

- The UH Official Notice to Employees and Students Regarding Drug-Free and Alcohol-Free Workplace Policies sent annually to all current faculty, staff and students by UH System Office on or around October 1st. In addition, the WCC DAAPP will be sent to all faculty and staff by the WCC Human Resource Specialist and to all students by the WCC Registrar on or around October 2nd. A copy of the emails will be archived for evidence of distribution.
- The UH Official Notice and the WCC DAAPP will be sent two additional times a year to all students by the WCC Registrar after the census date of the spring and summer terms. A copy of the email will be archived for evidence of distribution.

3. New employee orientation email

- The UH Official Notice and the WCC DAAPP will be sent by the WCC Human Resource Specialist to all new faculty and staff on the date of appointment. A copy of the email will be archived for evidence of distribution.

4. Printed copies

- All new employees will receive printed copies of the UH Annual Notice and the WCC DAAPP which will be included in all new hire packets.
- Employees may request printed copies from the WCC Human Resource Office by contacting (808) 235-7404 or email kcho@hawaii.edu.
- Students may request printed copies from the Office of the Vice Chancellor of Student Affairs by contacting (808) 235-7466.

XII. Approvals



Windward Community College Chancellor



Date

APPENDIX A

HEALTH RISKS of ALCOHOL

***Excerpted from National Institute on Drug Abuse, Alcohol's Effects on the Body**

www.niaaa.nih.gov/alcohol-health/alphabets-effects-body

Brain:

Alcohol interferes with the brain's communication pathways, and can affect the way the brain looks and works. These disruptions can change mood and behavior, and make it harder to think clearly and move with coordination.

Heart:

Drinking a lot over a long time or too much on a single occasion can damage the heart, causing problems including:

- Cardiomyopathy – Stretching and drooping of heart muscle
- Arrhythmias – Irregular heart beat
- Stroke
- High blood pressure

Liver:

Heavy drinking takes a toll on the liver, and can lead to a variety of problems and liver inflammations including:

- Steatosis, or fatty liver
- Alcoholic hepatitis
- Fibrosis
- Cirrhosis

Pancreas:

Alcohol causes the pancreas to produce toxic substances that can eventually lead to pancreatitis, a dangerous inflammation and swelling of the blood vessels in the pancreas that prevents proper digestion.

Cancer:

Source: National Cancer Institute -- see

<https://www.cancer.gov/about-cancer/causes-prevention/risk/alcohol/alcohol-fact-sheet>:

Based on extensive reviews of research studies, there is a strong scientific consensus of an association between alcohol drinking and several types of cancer. In its Report on Carcinogens, the National Toxicology Program of the US Department of Health and Human Services lists consumption of alcoholic beverages as a known human carcinogen. The research evidence indicates that the more alcohol a person drinks—particularly the more alcohol a person drinks regularly over time—the higher his or her risk of developing an alcohol-associated cancer. Based on data from 2009, an estimated 3.5 percent of all cancer deaths in the United States (about 19,500 deaths) were alcohol related.

Clear patterns have emerged between alcohol consumption and the development of the following types of cancer:

- **Head and neck cancer:** Alcohol consumption is a major risk factor for certain head and neck cancers, particularly cancers of the oral cavity (excluding the lips), pharynx (throat), and larynx (voice box). People who consume 50 or more grams of alcohol per day (approximately 3.5 or more drinks per day) have at least a two to three times greater risk of developing these cancers than nondrinkers. Moreover, the risks of these cancers are substantially higher among persons who consume this amount of alcohol and also use tobacco.
- **Esophageal cancer:** Alcohol consumption is a major risk factor for a particular type of esophageal cancer called esophageal squamous cell carcinoma. In addition, people who inherit a deficiency in an enzyme that metabolizes alcohol have been found to have substantially increased risks of alcohol-related esophageal squamous cell carcinoma.
- **Liver cancer:** Alcohol consumption is an independent risk factor for, and a primary cause of, liver cancer (hepatocellular carcinoma). (Chronic infection with hepatitis B virus and hepatitis C virus are the other major causes of liver cancer.)
- **Breast cancer:** More than 100 epidemiologic studies have looked at the association between alcohol consumption and the risk of breast cancer in women. These studies have consistently found an increased risk of breast cancer associated with increasing alcohol intake. A meta-analysis of 53 of these studies (which included a total of 58,000 women with breast cancer) showed that women who drank more than 45 grams of alcohol per day (approximately three drinks) had 1.5 times the risk of developing breast cancer as nondrinkers (a modestly increased risk). The risk of breast cancer was higher across all levels of alcohol intake: for every 10 grams of alcohol consumed per day (slightly less than one drink), researchers observed a small (7 percent) increase in the risk of breast cancer.
- The Million Women Study in the United Kingdom (which included more than 28,000 women with breast cancer) provided a more recent, and slightly higher, estimate of breast cancer risk at low to moderate levels of alcohol consumption: every 10 grams of alcohol consumed per day was associated with a 12 percent increase in the risk of breast cancer.

- **Colorectal cancer:** Alcohol consumption is associated with a modestly increased risk of cancers of the colon and rectum. A meta-analysis of 57 cohort and case-control studies that examined the association between alcohol consumption and colorectal cancer risk showed that people who regularly drank 50 or more grams of alcohol per day (approximately 3.5 drinks) had 1.5 times the risk of developing colorectal cancer as nondrinkers or occasional drinkers. For every 10 grams of alcohol consumed per day, there was a small (7 percent) increase in the risk of colorectal cancer.

Immune System:

Drinking too much can weaken your immune system, making your body a much easier target for disease. Chronic drinkers are more liable to contract diseases like pneumonia and tuberculosis than people who do not drink too much. Drinking a lot on a single occasion slows your body's ability to ward off infections – even up to 24 hours after getting drunk.

HEALTH RISKS of DRUGS

For complete information on drug health risks, download the latest edition of the 2017 Edition of Drugs of Abuse, DEA Resource Guide at: www.dea.gov/sites/default/files/drug_of_abuse.pdf

Cocaine: A powerfully addictive stimulant drug made from the leaves of the coca plant native to South America. Short term health risks include narrowed blood vessels; enlarged pupils; increased body temperature, heart rate, and blood pressure; headache; abdominal pain and nausea; euphoria; increased energy, alertness; insomnia, restlessness; anxiety; erratic and violent behavior, panic attacks, paranoia, psychosis; heart rhythm problems, heart attack; stroke, seizure, coma. Long term health risks include loss of sense of smell, nose bleeds, nasal damage and trouble swallowing from snorting; infection and death of bowel tissue from decreased blood flow; poor nutrition and weight loss from decreased appetite.

Heroin: An opioid drug made from morphine, a natural substance extracted from the seed pod of the Asian opium poppy plant. Short term health risks include euphoria; warm flushing of skin; dry mouth; heavy feeling in the hands and feet; clouded thinking; alternate wakeful and drowsy states; itching; nausea; vomiting; slowed breathing and heart rate. Long term health risks include collapsed veins; abscesses (swollen tissue with pus); infection of the lining and valves in the heart; constipation and stomach cramps; liver or kidney disease; pneumonia.

Ketamine: A dissociative drug used as an anesthetic in veterinary practice. Dissociative drugs are hallucinogens that cause the user to feel detached from reality. Short term health risks include problems with attention, learning, and memory; dreamlike states, hallucinations; sedation; confusion and problems speaking; loss of memory; problems moving, to the point of being immobile; raised blood

pressure; unconsciousness; slowed breathing that can lead to death. Long term health risks include ulcers and pain in the bladder; kidney problems; stomach pain; depression; poor memory.

LSD: A hallucinogen manufactured from lysergic acid, which is found in ergot, a fungus that grows on rye and other grains. LSD is an abbreviation of the scientific name lysergic acid diethylamide. Short term health risks include rapid emotional swings; distortion of a person's ability to recognize reality, think rationally, or communicate with others; raised blood pressure, heart rate, body temperature; dizziness and insomnia; loss of appetite; dry mouth; sweating; numbness; weakness; tremors; enlarged pupils. Long term health risks include frightening flashbacks (called Hallucinogen Persisting Perception Disorder [HPPD]); ongoing visual disturbances, disorganized thinking, paranoia, and mood swings.

Marijuana: Marijuana is made from the hemp plant, *Cannabis sativa*. The main psychoactive (mind-altering) chemical in marijuana is delta-9-tetrahydrocannabinol, or THC. Short term health risks include enhanced sensory perception and euphoria followed by drowsiness/relaxation; slowed reaction time; problems with balance and coordination; increased heart rate and appetite; problems with learning and memory; hallucinations; anxiety; panic attacks; psychosis. Long term health risks include mental health problems, chronic cough, frequent respiratory infections.

MDMA (Ecstasy/Molly): A synthetic, psychoactive drug that has similarities to both the stimulant amphetamine and the hallucinogen mescaline. MDMA is an abbreviation of the scientific name 3,4-methylenedioxymethamphetamine. Short term health risks include lowered inhibition; enhanced sensory perception; confusion; depression; sleep problems; anxiety; increased heart rate and blood pressure; muscle tension; teeth clenching; nausea; blurred vision; faintness; chills or sweating; sharp rise in body temperature leading to liver, kidney, or heart failure and death. Long term health risks include long-lasting confusion, depression, problems with attention, memory, and sleep; increased anxiety, impulsiveness, aggression; loss of appetite; less interest in sex.

Mescaline (Peyote): A hallucinogen found in disk-shaped "buttons" in the crown of several cacti, including peyote. Short term health risks include enhanced perception and feeling; hallucinations; euphoria; anxiety; increased body temperature, heart rate, blood pressure; sweating; problems with movement.

Methamphetamine: An extremely addictive stimulant amphetamine drug. Short term health risks include increased wakefulness and physical activity; decreased appetite; increased breathing, heart rate, blood pressure, temperature; irregular heartbeat. Long term health risks include anxiety, confusion, insomnia, mood problems, violent behavior, paranoia, hallucinations, delusions, weight loss, severe dental problems ("meth mouth"), intense itching leading to skin sores from scratching.

PCP: A dissociative drug developed as an intravenous anesthetic that has been discontinued due to serious adverse effects. Dissociative drugs are hallucinogens that cause the user to feel detached from reality. PCP is an abbreviation of the scientific name, phencyclidine. Short term health risks include delusions, hallucinations, paranoia, problems thinking, a sense of distance from one's environment, anxiety. Low doses can cause slight increase in breathing rate; increased blood pressure and heart

rate; shallow breathing; face redness and sweating; numbness of the hands or feet; problems with movement. High doses can cause lower blood pressure, pulse rate, breathing rate; nausea; vomiting; blurred vision; flicking up and down of the eyes; drooling; loss of balance; dizziness; violence; suicidal thoughts; seizures, coma, and death. Long term health risks include memory loss, problems with speech and thinking, depression, weight loss, anxiety.

Prescription Opioids: Pain relievers with an origin similar to that of heroin. Opioids can cause euphoria and are often used non-medically, leading to overdose deaths. Short term health risks include pain relief, drowsiness, nausea, constipation, euphoria, confusion, slowed breathing, death.

Prescription Sedatives (Tranquilizers, Depressants): Medications that slow brain activity, which makes them useful for treating anxiety and sleep problems. Short term health risks include drowsiness, slurred speech, poor concentration, confusion, dizziness, problems with movement and memory, lowered blood pressure, slowed breathing.

Prescription Stimulants: Medications that increase alertness, attention, energy, blood pressure, heart rate, and breathing rate. Increased alertness, attention, energy; increased blood pressure and heart rate; narrowed blood vessels; increased blood sugar; opened-up breathing passages. Short term health risks include dangerously high body temperature and irregular heartbeat; heart failure; seizures. Long term health risks include heart problems, psychosis, anger, paranoia.

Psilocybin: A hallucinogen in certain types of mushrooms that grow in parts of South America, Mexico, and the United States.

Short term health risks include hallucinations, altered perception of time, inability to tell fantasy from reality, panic, muscle relaxation or weakness, problems with movement, enlarged pupils, nausea, vomiting, drowsiness.

Long term health risks include risk of flashbacks and memory problems.

Rohypnol® (Flunitrazepam): A benzodiazepine chemically similar to prescription sedatives such as Valium® and Xanax®. Teens and young adults tend to abuse this drug at bars, nightclubs, concerts, and parties. It has been used to commit sexual assaults due to its ability to sedate and incapacitate unsuspecting victims. Short term health risks include drowsiness, sedation, sleep; amnesia, blackout; decreased anxiety; muscle relaxation, impaired reaction time and motor coordination; impaired mental functioning and judgment; confusion; aggression; excitability; slurred speech; headache; slowed breathing and heart rate.

Steroids (Anabolic): Man-made substances used to treat conditions caused by low levels of steroid hormones in the body and abused to enhance athletic and sexual performance and physical appearance. Short term health risks include headache, acne, fluid retention (especially in the hands and feet), oily skin, yellowing of the skin and whites of the eyes, infection at the injection site. Long term health risks include kidney damage or failure; liver damage; high blood pressure, enlarged heart, or changes in cholesterol leading to increased risk of stroke or heart attack, even in young people; aggression; extreme mood swings; anger ("roid rage"); paranoid jealousy; extreme irritability; delusions; impaired judgement.



UNIVERSITY of HAWAII*
WINDWARD
COMMUNITY COLLEGE

Office of the Chancellor

May 29, 2019

MEMORANDUM

TO: Erika Lacro
Interim Vice President for Community Colleges

FROM: Ardis Eschenberg
Chancellor

A handwritten signature in black ink, appearing to be "Ardis Eschenberg", written over the printed name.

SUBJECT: SIGNING AUTHORITY DURING MY ABSENCE

I will be out of the office from Monday, June 3 through Friday, June 14. I will return to the office on Monday, June 17.

In my absence, VCAS Brian Pactol or his designee may act on my behalf and have signing authority as Chancellor or as grants Principal Investigator.

c: President David Lassner
CC Chancellors
WCC Administrative Team

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