LIFE presents
PIECES OF THE PUZZLE
WASHINGTON AND LEE
2006 – 2007
CAMPUS

LIFE ................................................................. x4501
Dorm Counselors, Sam Wilmoth (Head), Davis 201 x4542
Dorm Counselor on call ...................................... 460-3055
Resident Assistants, Cynthia Cheatham (Head), Gaines 128B x4311
RA on call ...................................................... 460-3054
Peer Counselor on call ....................................... 461-0412
Security .......................................................... x8999
Traveller ......................................................... 458-8900
CAIR Information Line ........................................ 458-5800
Student Health Center (24/7) ............................ x8401
University Counseling ........................................ x8590
Office of Health Promotion ................................ x4501
Dean of Students ............................................. x8751
Dean of Freshman Program ............................... x8752
Student Activities Office ................................ x4111
Office of Leadership Development and Campus Chaplain x4045
University Mediator, Beth Belmont ....................... x8561
Training Room ................................................ x8689
Executive Committee ....................................... x4053
Student Judicial Council .................................... x4254

LEXINGTON/ROCKBRIDGE COUNTY

Emergency ....................................................... 911
Lexington Police ........................................... 463-2112
Rockbridge County Sheriff ............................... 463-7328
Stonewall Jackson Hospital ............................. 458-3300
Project Horizon (Domestic Violence and Sexual Assault) 463-2594
Rockbridge Area Free Clinic ............................ 464-8700
Rockbridge/Lexington Health Department ............. 463-3185
Rockbridge Mental Health Clinic ....................... 463-3141
Rockbridge Area Hospice (Grief Recovery) .......... 463-1848
Blue Ridge Poison Control ................................ 1-800-222-1222

NATIONAL

AIDS Hotline .................................................. 1-800-342-AIDS
Drug and Alcohol Information and Referral .......................... www.drughelp.org
STD Hotline .................................................. 1-800-227-8922
Mental Health Association ................................ 1-800-969-6642
Eating Disorders Awareness and Prevention .......................... 1-206-382-3587
National Health Information Center ...................... 1-800-336-4797
National Clearinghouse for Alcohol and Drug Information 1-800-729-6686
National Suicide Prevention Lifeline .......................... 1-800-273-TALK
LIFE (Lifestyle Information For Everyone) would like to welcome the class of 2010 to Freshman Orientation 2006!!! We hope you are just as excited as we are to be here and join our community. College life will present many new challenges and adjustments. We, the members of LIFE, would like you to know that we are here to answer any questions you may have. As members of LIFE we have been trained as peer educators on topics such as drugs, sexuality, sexual assault, alcohol, smoking, exercise, healthy eating habits, and stress management. Should you ever need help or advice about your well-being, LIFE members can either help you or provide you with professional resources to obtain the help you need. This handbook is a part of our effort to make your transition into college as smooth and successful as possible.

Good luck and enjoy the next four years!!!

Check out the LIFE web site at http://life.wlu.edu for more information, resources, and links on all of the health topics covered in this booklet. Visit us at http://life.wlu.edu for even more info and links to many more resources.
SELF-ESTEEM

Self-esteem is how you feel about yourself. This affects how you handle life, stress, successes and challenges. With positive self-esteem, you are able to bounce back more easily from disappointments in addition to having a more positive outlook about life.

WAYS TO GAIN AND KEEP POSITIVE SELF-ESTEEM

• Learn to accept yourself.
• Accept your strengths and weaknesses & build on strengths you already have as you continue to develop.
• Get comfortable with being yourself.
• Borrow positive traits from others.
• Recognize and reward your achievements.
• Accept, love, and respect yourself— because if you don’t, no one else will.
• Take control of your life.
• Learn to be assertive.
FITNESS AND EXERCISE

There are two components of any total body fitness program, cardiovascular exercise and musculoskeletal (weight training). There are many benefits associated with a physically active lifestyle. Some of the benefits include: improving fitness levels, muscular strength and endurance, flexibility, increased self-esteem, weight control and reduction of stress levels!

The old excuse, “But I don’t have the time” really doesn’t apply here. In college you set your own schedule and the W&L facilities (outlined in the last section in this booklet) are open a variety of hours to meet your needs. So get up, get moving and try out the state-of-the-art Fitness Center, aerobics classes or intermurals!!

When starting any exercise program it is good to consult with either a physician or a trainer. They can help you develop a program which will adequately meet your abilities and personal health goals. Generally speaking you should engage in some type of aerobic exercise (walking, biking, swimming, aerobics, jogging) 3 times a week for at least 30 minutes.
HEALTHY EATING

The United States Department of Agriculture recently introduced a new food pyramid which offers far more advice for healthy eating and exercise than we can address on this page so check out their website at http://www.mypyramid.gov. Want to know the amount of each food group you need daily? Enter your age, gender, and physical activity level to receive a personalized food guide.

Here are some general guidelines from the new food pyramid:

**Grains** – 6-8 ounces per day. Make half whole grains. Choose brown rice, oatmeal, whole wheat/rye bread/crackers, whole wheat pasta, popcorn, muesli or kashi cereals.

**Vegetables** – 2 ½-3 cups per day. Eat more dark green/orange/dry beans and peas. There are 5 subgroups of veggies:
- Dark green (broccoli, kale, spinach)
- Orange (sweet potatoes, butternut squash, carrots)
- Dry beans and peas (garbanzo, pinto and black beans, tofu, lentils)
- Starchy vegetables (corn, green peas, potatoes)
- Other vegetables (asparagus, cucumbers, tomatoes, eggplant, cauliflower, vegetable juices)

**Fruits** – 2 cups per day. Eat a variety of fruit every day. Choose fresh, frozen, canned or dried. Go easy on fruit juices.

**Oils** – 6-7 teaspoons per day. Make most of your fat sources from fish, nuts, and vegetable oils including avocados. Limit solid fats like butter, stick margarine, shortening and lard.

**Milk** – 3 cups per day. Choose low-fat or fat-free milk, yogurt, cheeses, pudding and ice cream. If you are lactose intolerant choose lactase or soy milks, and other calcium-fortified foods and beverages.

**Meats and Beans** – 5½-6½ ounces. Go lean on protein. Choose low-fat or lean meats/poultry. Bake, broil or grill it. Vary your choices with more fish, beans, nuts and seeds.

The new Food Pyramid emphasizes the importance of physical activity and exercise on a daily basis as an important ingredient in healthy eating. Remember to drink at least 6 glasses of water a day. Get up and get moving!

**HEALTHY SNACKS INCLUDE:** fresh fruits and vegetables (with low-fat dips), bread sticks, bagels, popcorn without butter, plain low-fat yogurt, rice cakes, pretzels, dried fruits, sherbet or sorbet, frozen low-fat yogurt, sparkling water and herbal teas.

**OTHER TIPS:** Choose baked potatoes rather than french fries, order pizza with extra vegetables rather than extra cheese, select BBQ, sweet and sour or honey sauces rather than ranch or tartar sauces, avoid “super size” and “value meals.”

**IF YOU NEED TO LOSE WEIGHT:** The sensible approach is to decrease portion sizes and increase exercise, eat balanced meals containing fewer calories, make sure you eat 5 servings of fruits and vegetables daily, establish a regular exercise routine, eat in response to your physical hunger—not your emotional state. Visit the Student Health Center for a Healthy Choices consultation ($25/visit).
ANOREXIA is self-imposed starvation. It is a serious disorder that may ultimately lead to death. It is often associated with underlying emotional causes. People with anorexia are obsessed with food although they continually deny their own hunger.


BULIMIA is a repeated cycle of out-of-control eating followed by some form of purging. Purging may be self-induced vomiting, use of laxatives and diuretics, or over-exercising.


BINGE EATING DISORDER is a repeated cycle of out-of-control eating, not accompanied by purging. Characterized by binge eating, night eating, and alternating periods of overeating and restrictive dieting.


DISORDERED EATING, although not a full-blown eating disorder, is very unhealthy. An example of disordered eating may be when a person eats the same foods all of the time, such as bagels and a diet soda, rather than eating a well-balanced diet.

TREATMENT: Adolescent and young women account for 90% of all eating disorders. Most eating disorders can be successfully treated—the earlier treatment is started the better. Treatment usually entails a team approach by physicians, counselors and nutritionists.

MEN AND EATING DISORDERS: Men do experience eating disorders. Men are more frequently involved in obsessive and excessive exercise. In addition, men can play a supportive role for their female friends in helping to identify an eating disorder or in the treatment aspect. Remarks made by men about women’s bodies or eating habits may trigger an eating disorder in women.
# Eating Issues and Body Image Continuum

- **Well**
  - Eat whenever/whatever their body tells them
  - Feel comfortable with body shape and size
  - Trust their body to identify right food choices at right times
  - Don’t tie self-esteem to food and weight
  - Accept the role of food for social and emotional needs

- **Worried Well**
  - Feel they need to change some eating and exercising habits to be healthy
  - Have a healthy body image and don’t feel they need to lose or gain weight to look good
  - Balance any need to change body shape or size or choose certain foods with a sense of moderation

- **Food/Body Preoccupied Behaviors**
  - Think about food, or body shape and size on a daily basis
  - Feel guilty if they can’t exercise on a regular basis, even when they are sick or injured
  - Feel guilty if they eat too much or don’t exercise enough
  - Feel shame if they don’t look right in their clothes

- **Dangerous Eating**
  - Use laxatives, diuretics, vomiting, or restricting when stressed to feel more in control
  - Fast or avoid food to change body shape/size
  - Feel shame after eating, or when looking in the mirror
  - Feel out of control with food and weight
  - Feel a sense of power/strength when they restrict or limit food

- **Eating Disordered**
  - ANOREXIA
    - Refuse to maintain body weight at or above a minimally normal weight for age and height
    - Fear gaining weight or becoming fat, even though underweight
    - Loss of menstrual periods
  - BULIMIA
    - Binge eat and purge, on average at least twice a week for 3 months

---

Adapted from “When a Student Needs Help,” University of Arizona
As college students, you will be faced with choices every day including the decision whether or not to drink, how much to drink and how often to drink. Now, you are the boss—you are responsible for your own choices.

You do not have to drink alcohol in order to have fun here. Remember not drinking at all or on a specific day is always a low-risk drinking choice. If you decide to drink, then you need to drink legally (21 and older) and responsibly—which means in a low-risk manner so intoxication does not compromise your ability to make clear, well-thought-out decisions. It’s as easy as 1, 2, 3—no more than 1 drink per hour, no more than 2 times per week, and no more than 3 drinks per occasion.

**SOME OF THE NEGATIVE CONSEQUENCES THAT DRINKING CAN HAVE, BOTH AS A RESULT OF YOUR DRINKING AND OTHERS’ DRINKING:**

- hangovers
- academic problems - missed classes, getting behind in school work
- arguing with friends
- engaging in unwanted and/or unprotected sexual activity
- getting injured / assaulted / sexually assaulted
- damaging property or having your property damaged
- requiring treatment for alcohol poisoning
- trouble on campus or with police
- being insulted or humiliated
- having your study or sleep interrupted
- death
- weight gain—the “Freshman 15” isn’t all due to campus dining!

All of these things have happened to W&L students. Neuroscience research shows that alcohol impairs the formation of new memories and learning, especially in the developing brain - and as college-aged students, your brains are still developing.

Alcohol use can cause both short-term and long-term problems for those who choose to use it. Alcohol is a central nervous system depressant whose effects depend on how much you drink. These effects may range from loss of inhibition with only one drink to making someone “stumbling drunk” to acute alcohol poisoning with loss of consciousness and difficulty breathing. **Acute alcohol poisoning** usually occurs in situations of **rapid alcohol intake** such as shots, funneling, keg stands and drinking games.
Even after someone passes out their BAC (blood alcohol concentration) can continue to rise from the alcohol still in their stomach. Medical attention is critical to prevent serious injury or death. Alcohol is addictive and regular use can lead to dependence and alcoholism even in college-age students.

Remember that **WOMEN ARE AFFECTED BY ALCOHOL TO A GREATER DEGREE THAN MEN.** They become more impaired than men when drinking the same amount of alcohol due to their higher percentage of body fat - alcohol is water soluble, so there is a greater concentration of alcohol in a woman’s bloodstream after drinking. Because women tend to be smaller than men, alcohol is less diluted upon reaching the brain than in larger individuals. Women also become intoxicated more easily 1-3 days before their menstrual periods. Finally, women absorb more alcohol into their bloodstreams because they lack the enzyme alcohol dehydrogenase in their stomach, which in men breaks down some alcohol before it is absorbed.

**SO IF / WHEN YOU CHOOSE TO DRINK, KNOW THE RISKS AND YOUR OWN LIMITATIONS AND MAKE LOW-RISK DECISIONS:**

- make a plan before you go out
- think about whether you will drink today
- think about how much you will drink
- think about how you will get home
- think about your responsibility to take care of yourself and friends
- if you choose to drink, have no more than 1 drink per hour, 2 times per week, 3 drinks per occasion
- eat first, drink second
- alternate bottled water with your alcoholic beverage
- drink only when you want to and when you feel in control
- not drinking at all or on a specific occasion is always an option
- and NEVER drink and drive—instead use the Traveller Safe Ride Service—check the maps and website [traveller.wlu.edu](http://traveller.wlu.edu) for routes and times. Bus System-Wednesday, Friday and Saturday 10p.m.-2a.m. and a dispatch system 7 nights a week 10p.m.-2a.m. Call 458-8900.
- [www.friendsdrivesober.org](http://www.friendsdrivesober.org) has lots of information on steps you can take to prevent drunk driving and what you can do to make a positive difference.
Here are some tips for **TAKING CARE OF AN INTOXICATED PERSON** if you find yourself in that situation:

- Get help from the Student Health Center or Stonewall Jackson Hospital. Seeking medical attention for alcohol related problems will not result in notification of parents or the University administration except in emergency situations. These are safe havens from the strike policy.
- Stay with the person or call a dorm counselor or another individual to stay with the person.
- Turn person on their side and do not give them coffee, ibuprofen, aspirin, or put them in a shower. If the person is not vomiting give them water to drink.

**HOW TO SPOT DANGER**—if they have passed out, *don’t leave them alone*. If they are taking fewer than 8 breaths per minute or if there is more than 10 seconds between breaths they are in danger of respiratory failure. Their skin may be pale and ashen in color and clammy to the touch. The base of the fingernails and the lips may look bluish because the person is not getting enough oxygen. If you can’t rouse the person with a pinch or a shake the situation is serious. If you see someone drinking straight out of a liquor bottle or playing drinking games the person should be watched closely because the effects can come on quickly. GET HELP!
### STATE AND LOCAL ALCOHOL LAWS

Selective laws of the Commonwealth of Virginia. The minimum legal age for the PURCHASE, POSSESSION AND CONSUMPTION of alcoholic beverages is 21 years of age.

<table>
<thead>
<tr>
<th>LAW</th>
<th>PENALTIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>MIP—Minor in Possession</td>
<td>Misdemeanor—Mandatory loss of license for six months (up to 1 year) and mandatory minimum $500 fine or 50 hours community service.</td>
</tr>
<tr>
<td>Underage Consumption and Possession</td>
<td>Misdemeanor—Fine not to exceed $250</td>
</tr>
<tr>
<td>Drinking while Driving</td>
<td>Misdemeanor—Fine not to exceed $500 and loss of license for 6 months. Suspension of drivers license for 1 week. Attend VASAP educational program.</td>
</tr>
<tr>
<td>Underage Drinking and Driving Persons under 21 with a BAC of .02 or more; requires no signs of impaired driving.</td>
<td>Misdemeanor—Fine not to exceed $2,500 (mandatory minimum of $250) and/or jail for 12 months. Immediate impounding of car and loss of drivers license for 1 year. Ignition interlock system may be required for restricted license.</td>
</tr>
<tr>
<td>Drinking and Driving .08 presumes intoxication, but can be convicted on a lower BAC. Also includes specified levels of certain drugs.</td>
<td>Mandatory jail time of 5 days plus above fines and penalties. Ignition interlock system may be required for restricted license.</td>
</tr>
<tr>
<td>Drinking and Driving BAC is .15-.20</td>
<td>Mandatory jail time of 10 days plus above fines and penalties. Ignition interlock system may be required for restricted license.</td>
</tr>
<tr>
<td>Drinking and Driving BAC is over .20</td>
<td>Fine not to exceed $2,500 and/or jail time for 12 months, plus three-year license suspension.</td>
</tr>
<tr>
<td>Driving on a restricted license with BAC of .02 or more</td>
<td>Misdemeanor—Fines of $500-$1,000. Mandatory minimum 5 days in jail, beyond penalties for DUI.</td>
</tr>
<tr>
<td>Drinking and Drinking with a Passenger 17 years or younger</td>
<td>Loss of drivers license for 12 months.</td>
</tr>
<tr>
<td>Implied Consent for BAC Test—Unreasonable refusal to take a BAC test</td>
<td>Misdemeanor—Mandatory loss of license for six months (up to 1 year) AND $500 mandatory minimum fine or 50 hours community service.</td>
</tr>
<tr>
<td>Use a Fake ID to purchase alcohol beverages*</td>
<td>Misdemeanor—Fine not to exceed $250.</td>
</tr>
<tr>
<td>DIP—Drunk in Public</td>
<td></td>
</tr>
</tbody>
</table>

* The Executive Committee has found in previous cases the use of a false ID constitutes a violation of the Honor System.
UNIVERSITY POLICY ON ALCOHOL

The University Policy on Alcohol and Other Drugs states that it is the responsibility of all members of the University community to abide by the laws of the Commonwealth of Virginia on the licensing, distribution and consumption of alcoholic beverages. A fundamental principle of the Washington and Lee University Policy on Alcohol is that students are adults who are personally responsible for conforming their behavior to state and local laws and University policy. In addition, alcoholic beverages are prohibited in all of the freshman residence halls.

An Alcohol Task Force was created in November 2000 and was charged to explore ways to change the culture of alcohol use at Washington and Lee, to develop new policies and procedures to reduce the harmful impact of substance abuse, and to implement new policies to hold individuals and groups accountable for behavior that violates University policy and Commonwealth law. The alcohol policy at Washington and Lee was approved by the faculty and Board of Trustees in May 2001 and further amended in 2006. Highlights include:

- a clear and unequivocal sanction for a conviction of driving under the influence of alcohol or drugs.
- 3 strike policy for alcohol violations for both individuals and organizations
- parental notification
- enhanced alcohol education, assessment and counseling

A strike is on your permanent student life record when applying for jobs or graduate school.

For the complete University Policy on Alcohol and the Policy on Illegal Drugs/Controlled Substances refer to the Student Handbook or University Policies web page.

BOARD OF TRUSTEES’ STATEMENT ON SUBSTANCE ABUSE

The Board of Trustees of Washington and Lee University condemns irresponsible alcohol distribution and consumption. High-risk consumption of alcohol and illegal drug use are inconsistent with the core values of Washington and Lee University. They compromise our students’ health, personal well-being and academic performance, and promote behavior that is inconsistent with time-honored traditions of civility and respect for the law.
## Alcohol or Other Drugs Continuum

<table>
<thead>
<tr>
<th>Reasons to Abstain</th>
<th>Social Use</th>
<th>Problem Use</th>
<th>Addictive Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Religion or personal values</td>
<td>• Maintains a “safe” BAC of ≤ .05</td>
<td>• Frequently becomes intoxicated/high</td>
<td>• Experiences frequent blackouts (alcohol)</td>
</tr>
<tr>
<td>• Caloric content of alcohol</td>
<td>• Uses substance to enhance an activity such as celebrations, meals, special events</td>
<td>• Attracts attention when using the substance</td>
<td>• Feels afraid to stop</td>
</tr>
<tr>
<td>• Taste</td>
<td>• Substance is not the main focus of the activity</td>
<td>• Becomes accident prone</td>
<td>• Experiences constant preoccupation with the substance</td>
</tr>
<tr>
<td>• Pregnancy</td>
<td>• Most W&amp;L students fit into this category</td>
<td>• Increased tolerance</td>
<td>• Loses control with the substance (can’t predict how many drinks or doses they will have after the first one)</td>
</tr>
<tr>
<td>• Allergies</td>
<td></td>
<td>• Needs increasing amounts to achieve desired effects</td>
<td>• Unsuccessfully attempts to stop or control use of substance</td>
</tr>
<tr>
<td>• Interactions with medications</td>
<td></td>
<td>• Uses substance in an attempt to cope with situations or change feelings</td>
<td>• Becomes dependent on the substance (continues to use even though it’s causing problems in their life)</td>
</tr>
<tr>
<td>• Friends don’t use the substance</td>
<td></td>
<td>• Begins to experience blackouts</td>
<td>• Continues to use the substance in order to feel “normal” or ease withdrawal pains</td>
</tr>
<tr>
<td>• Designated driver</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Interference with academic, athletic, and sexual performance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Physical, emotional, behavioral effects</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Previous negative experiences</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Family history of substance abuse</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• In recovery from addiction</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Adapted from “When a Student Needs Help,” University of Arizona
FEDERAL AND VIRGINIA LAWS AND PENALTIES GOVERNING ALCOHOL AND DRUGS CAN BE FOUND IN THE STUDENT HANDBOOK. You should be aware that violations of drug laws carry a penalty of loss of driver’s license for 6 months, and the possibility of imprisonment from 30 days (for simple possession of marijuana) to life (manufacture, sale, distribution, gift, or possession of heroin, cocaine, methamphetamine and other controlled substances) and fines up to $1,000,000. It is also a DUI violation to drive with specified levels of cocaine, methamphetamine, PCP, or ecstasy in your blood. Conviction becomes a part of your record which can impact future employment.

Use of illegal drugs and misuse of legal drugs can have social, academic, psychological, physical, financial and legal consequences. Combining drugs and/or using them with alcohol can be extremely dangerous.

**MARIJUANA** *(pot, grass, dope, weed)*, the illegal drug most often used by college students, can be much more potent than pot grown in the 60’s and 70’s, with higher levels of the mind-altering chemical THC. Pot contains 50% more carcinogens and irritants than tobacco, is addictive with frequent high doses and impairs learning even 24 hours after its use. Marijuana also increases pulse rate and blood pressure, slows physical reactions, causes loss of coordination, decreases memory, judgment, reasoning ability and mental acuity.

**COCAINE** *(coke, crack)* causes a brief sense of euphoria, increased energy and intense exhilaration. Cocaine is considered one of the most powerfully reinforcing drugs because people want to keep using it. Cocaine is very addictive and very dangerous because of its association with cardiac arrhythmias, seizures and death.

**ECSTACY** *(MDMA)* acts like a stimulant such as methamphetamine and a little like a hallucinogen such as LSD. A hit produces a warm, fuzzy sense of well being and the manic energy to dance till dawn. However, studies show that even light use could cause long-term harm to the brain. Users performed worse in complex tests related to attention.

**PSYCHEDELIC MUSHROOMS** *(‘shrooms)* produce illusions, delusions, hallucinations, an altered sense of time, space and visual perception and nausea. Users may experience an increased pulse rate and blood pressure, sweating and incoherent communications. Death can result from misidentification of psychedelic mushrooms with poisonous varieties.
METHAMPHETAMINE (crank, ice, meth, crystal, speed) is a very powerful stimulant that is almost as addicting as cocaine and just as dangerous. It causes euphoria, irritability, anxiety, confusion, paranoia and poor judgment, as well as elevated heart rate and blood pressure. It can cause seizures, heart arrhythmias, psychosis and death.

RITALIN is a prescription drug often misused and abused. It is also a stimulant and may have effects and risks similar to methamphetamine and Ecstasy. It is a felony offense to misuse/sell/share prescription medications.

EPHEDRINE is a fairly weak central nervous system (CNS) stimulant which is readily available over the counter in tablet or herbal form. It markedly raises heart rate and blood pressure and lowers seizure threshold in someone who ingests it. Ephedrine can cause anxiety, panic attacks, insomnia, palpitations and seizures at the same doses usually taken to increase energy or alertness.

INHALANTS such as Nitrous Oxide (whippets, laughing gas) are usually available in balloons. When the gas is inhaled it causes brief giddiness and ringing in the ears. If it is inhaled without a source of air or oxygen, it can cause loss of consciousness and possible nervous system damage. Other inhalants including glue, organic solvents and nitrates may cause similar effects and are quite toxic to the liver, brain and other organs.

ROHYPNOL or “roofies” is a cheap and powerful drug; a small white pill that dissolves quickly in alcoholic and other beverages. It is a sedative-hypnotic causing decreased inhibitions, sleepiness and memory loss which is enhanced by the consumption of alcohol. It has been called “the date rape drug” because it can be dropped into a drink leaving a woman open to suggestion, physically weak, and without memory of the events that follow. It can also incapacitate a man and make him vulnerable to assault or robbery.

GHB (gamma hydroxybutyrate) is another sedating drug which can be used in ways similar to Rohypnol.

If you think you may have ingested Rohypnol or GHB or that you may have been sexually assaulted and don’t remember it, come to the Student Health Center for evaluation as soon as possible. Testing for these drugs is available, but it must be done ASAP and within 60-72 hours of ingestion.

WHAT YOU CAN DO:

- BE INFORMED
- MONITOR YOUR USE OF ALCOHOL
- DO NOT ACCEPT AN OPEN DRINK FROM ANYONE OR LEAVE YOUR DRINK UNATTENDED
- MOST IMPORTANTLY POUR YOUR OWN DRINKS!
- DO NOT EXPLOIT OTHER PEOPLE OR PUT YOURSELF IN A POSITION TO BE EXPLOITED
TOBACCO PRODUCTS

Even though only a small percentage of students identify themselves as smokers on entry to W&L, that changes quickly. In a survey 38% of W&L undergraduates considered themselves smokers. Of these, 48% considered themselves “social smokers,” 40% felt they were addicted to nicotine, and 39% were interested in quitting. This proportion of smokers is almost twice the national average, and women equal men in their smoking.

IS SMOKING REALLY ADDICTIVE?

Yes! The nicotine in tobacco products causes addiction:

- Nicotine produces pleasurable feelings making the smoker want to smoke more
- Smokers become dependent and experience physical and psychological withdrawal
- Since nicotine affects the chemistry of the brain and central nervous system, it can affect the mood and temperament of the smoker

Smokeless tobacco (snuff, chewing, dipping) are not a safe alternative to cigarette smoking. In addition to causing oral cancer and other health problems, using tobacco products of any kind will greatly increase your risk of being turned down for a kiss. Smokeless tobacco is as addictive as smoking and causes cancer of the mouth and throat even in young adults.

TO STOP:

DEVELOP A PLAN, CHANGE SOME HABITS, DECIDE ON YOUR BOTTOM LINE, MAKE A COMMITMENT.

If you find yourself smoking, think about quitting. Some people are most comfortable quitting “cold turkey,” while others prefer to cut back gradually. Some helpful options include: nicotine patch or gum, stress management techniques or other cognitive approaches. Seek out advice from the Student Health Center or a University Counselor or visit www.tobaccofreeu.org. The good news about quitting is:

- **Within a few days** your lungs will begin to clear
- **Within a few weeks** circulation improves and you will be able to smell and taste more
- **Within a year** your risk of lung cancer begins to decrease
The decision to be sexually active is one that many students consider during their college years. It is a decision that should be made carefully to ensure both physical and emotional health. It should be made based on personal values and careful thought, and not decided in the “heat of the moment.”

Being sexually active carries with it the responsibility to consider the possibility of pregnancy and sexually transmitted infections (STIs) with every sexual encounter. You should use a reliable method of birth control every time you have sex, and protect yourself from STIs by using a lubricated latex condom before any genital contact even if you are using another method of birth control. **Being sexually responsible also means avoiding sex under the influence of alcohol to assure mutual consent.** It also means a relationship that is trusting, respectful and mutually satisfying. It means communicating your needs, desires and boundaries in a clear fashion.

If you decide that being sexually active is right for you, information and supplies for various methods of contraception are available at the Student Health Center (birth control pills, Depo shots, the patch, condoms, etc.). Women’s Health educational sessions, information and examinations with Pap tests are available at the Student Health Center. If you wish to schedule a women’s health exam or Pap and have never had one before, we will ask you to attend a small group session with one of our nurses to learn ahead of time what to expect during the exam, how to do breast self exam, what the Pap tests for, and general information about women’s sexual health. These sessions are also open to any student who wants to learn more about women’s sexual health issues. Confidential testing for pregnancy, HIV and other sexually transmitted infections is available at the Student Health Center, or at local and regional health department offices.

**Emergency contraception** medication is available at the Student Health Center for situations where contraceptive protection was compromised, such as condom failure, unprotected sex or sexual assault. Emergency contraception medication is effective at reducing the risk of pregnancy in such a situation if started within 72 hours, but should be started ASAP. The nurse on duty at the Student Health Center can assist you.

Check out [www.smartersex.org](http://www.smartersex.org) - with info just for college students on safe & smart sex, HIV & STIs, date rape, abstinence, contraception and healthy relationships.
STIS and AIDS

STIs are infections transmitted by intimate sexual contact. Many people with an STI have **NO SYMPTOMS** or may be unaware of mild symptoms. However, they can still transmit the infection to an unknowing sexual partner. Although treatment is available for all STIs, not all are curable. **General signs of STI’s** include: sores / blisters, rash, penile or vaginal discharge, painful urination, abdominal pain, or even none at all.

**Here are some facts about the most common STIs:**

**CHLAMYDIA: Bacterial infection**
- Affects 5-10% of sexually active college students
- 30% of men and 80% of women with chlamydia are asymptomatic
- Treatable with antibiotics given by mouth
- Can cause formation of scar tissue on reproductive organs and infertility

**HERPES: Viral infection**
- Affects 30 million (1 out of every 6) Americans
- Type I virus is oral. Type II virus affects the genital area.
- Initial outbreak - genital blisters and sores. Recurrent outbreaks are milder.
- Symptoms include painful sores in the genital area, enlarged lymph nodes in groin, itching, burning during urination, fatigue and flu-like symptoms.
- Can be transmitted by oral sex or genital contact without sexual intercourse
- **NO CURE!** Treated with anti-viral drugs.

**GENITAL WARTS (HPV): Viral infection**
- Fastest growing STI today
- Can only see 5% of warts
- 95% of abnormal Pap smears are related to genital warts.
- Can be transmitted by genital contact without sexual intercourse.
- **NO CURE!** Human papilloma virus remains in the body and can infect an unprotected sex partner. HPV is also a risk factor for cancers of the vulva, vagina, cervix, and penis, especially in combination with smoking. HPV infections do improve with time and can be treated topically.

**AIDS or HIV infection...**
Can become a reality if unprotected sex occurs. In the United States between one and two million people are believed to be infected with HIV. A national study of college students showed that approximately 1-2 per 1,000 students is HIV positive. Because of the long incubation period (up to 10 years) cases of HIV infection may not show up clinically until after an infected student has graduated. It is important to note
that the infected person can transmit the virus to others during this symptom-free time. Treatment early in the course of the infection may slow or prevent progression to AIDS.

**TESTS** for pregnancy, chlamydia and other STIs are all available at the Student Health Center. There is a lot of good information in brochures at the Student Health Center and in the Counseling Center as well. Confidential HIV testing/counseling is also available through the Student Health Center. These records are kept in a separate locked file and are not part of your permanent medical record. Anonymous HIV testing is available through Health Departments in Roanoke and Charlottesville.

---

**Things you can do to keep from contracting an STI:**

**ABSTINENCE:**
This is the ONLY way to protect yourself completely. Many college students are choosing **not** to have sex.

**MONOGAMY:**
Say NO! to casual sex. Having one partner for a short time and then moving on to another partner (serial monogamy) is high-risk behavior.

**COMMUNICATE:**
Be direct and honest with partners. TALK first!

**STAY SOBER:**
Alcohol and other drugs **lower your ability to make sensible self-protecting decisions.** Drunk sex is rarely safer sex.

**CONDOMS:**
Use a lubricated condom every time you have sex, even if you are using another form of birth control.

**CHOOSE LOWER RISK SEXUAL ACTIVITIES:**
Kissing, hugging, massaging and touching are generally safer activities than intercourse.
SEXUAL MISCONDUCT

What is Sexual Misconduct? The issue of sexual assault and other sexual misconduct on a college campus is very real. A relationship or an evening that starts out as fun and exciting could turn out to be devastating. “Sexual misconduct” is the general term for inappropriate physical or verbal conduct of a sexual nature which can range from sexual harassment to dating violence to unwanted or forced sexual contact or rape.

Sexual Harassment – a type of sex discrimination (1) by using a position of authority (ie: DC/RA/Professor) in an attempt to obtain sexual favors or (2) severe or pervasive unwelcome sex-based conduct creating a hostile work or academic environment. Examples may include: request for sexual favors, gender humiliation or intimidation, lewd remarks or whistles, persistent physical contact (touching, hugging, brushing against), obscene messages (voice mail, email, written), rating sexual attributes and attractiveness, sexual misuse or abuse of power and sexual assault.

Dating Violence – includes physical and/or psychological abuse. Examples may include: your partner telling you what to do and who to see, threat of physical harm, or actual physical harm including pushing or hitting you.

Unwanted or Forced Sexual Contact or Rape – forms of sexual assault, including inappropriate or unwanted touching, oral sex and nonconsensual sexual intercourse. Sexual assault occurs to both men and women; however, women are more often the victims.

Acquaintance Rape/Date Rape – forced, manipulated, coerced, or unwanted sexual intercourse with someone you know, constituting criminal rape in the state of Virginia. It is an act of violence, aggression and power. The victim may feel shame, guilt, betrayal, and fear. The effects can be long-term and psychologically devastating. Rape can occur male on male, female on male, and male on female, or female on male.

What should you do immediately in cases of sexual assault? If you or someone you know may have been sexually assaulted, it is critical that medical attention be sought as soon as possible for evaluation and treatment. This may include referral for medical evidence collection, possible pregnancy and STI/HIV evaluation and treatment, and psychological counseling. Prompt action is necessary not only for medical and psychological help, but also for criminal action if the individual decides to file charges. Delay in reporting may limit options within the criminal justice system. Encourage a victim to seek help with the resources listed on page 24, or to call the CAIR Information Line at 458-5800 for a description of options. Reports can be filed both at the Lexington Police Station and at the Rockbridge County Sheriff’s office by either the victim or by a third party such as a DC or friend. A student may decide to file an on-campus complaint with the Student Faculty Hearing Board.
RAPE MYTHS AND FACTS:

Myth: Most rapes are committed by strangers.
Fact: At least 2/3 of all rapes involve people who know each other; 1/4 of college women have been victims of rape or attempted rape; 90% of assaults are committed by someone known to the victim.

Myth: When a women says “no” she really means “try a little harder.”
Fact: If a women says “no” the man must respect her wishes. Pretending a “no” means “yes” does not constitute consent. We each have the right to set personal boundaries in every intimate situation. Previous sexual relations do not mean that future sex is a given. Alcohol makes it harder to give voluntary and informed consent and more difficult for the partner to hear a “no.”

Myth: Sexual assault happens to women who are “asking for it” by the way they dress or where they are.
Fact: No one asks to be assaulted. This myth shifts the blame from the perpetrator to the victim. Men who assault do not look for women who are sexy---they prey on women who are accessible and vulnerable. Neither of the above actions are consent to have sex. Rape is never the victim’s fault.

 VIRGINIA LAW AND SEXUAL OFFENSES

The use of threats, force or intimidation to engage in sexual intercourse or other sexual contact is illegal in Virginia. In addition, it is illegal to engage in sexual intercourse or other sexual contact or attempt to engage in these activities if the person (man or woman) is mentally incapable or physically helpless to consent to sexual activity. Mental incapacity is generally understood as a mental condition of the victim at the time of the incident which keeps the victim from understanding the nature or consequences of the sexual act and about which the accused knew or should have known. Physical helplessness is generally understood as a state of unconsciousness or certain other conditions on the part of the victim at the time of the event which makes the victim unable to communicate an unwillingness to engage in the sexual activity. Intimidation can be psychological pressure, and proof of physical resistance on the part of the victim is not required for criminal sanctions to be imposed.

The following are definitions and consequent criminal sanctions for some sexual offenses as defined by Virginia Law. Additional information about the sexual assault laws in Virginia is available in the Student Handbook.
<table>
<thead>
<tr>
<th>Crime</th>
<th>Definition</th>
<th>Penalty</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Rape</strong></td>
<td>Vaginal penetration against one's will by use of threat, force or intimidation or due to physical helplessness or mental incapacity of the victim</td>
<td>5 years to life imprisonment</td>
</tr>
<tr>
<td>** Forced Sodomy**</td>
<td>Oral sex (cunnilingus, fellatio, anilingus) or anal intercourse by the use of threat, force or intimidation or due to mental incapacity or physical helplessness of the victim</td>
<td>5 years to life imprisonment</td>
</tr>
<tr>
<td><strong>Sexual Battery</strong></td>
<td>Sexual abuse as defined by touching intimate parts or clothing covering intimate parts (genitalia, anus, groin, breasts, buttocks) by the use of force, threat, intimidation or ruse, or forcing the victim to touch intimate parts of the accused.</td>
<td>Up to a year in jail and/or a fine up to $2,500</td>
</tr>
<tr>
<td><strong>Aggravated Sexual Battery</strong></td>
<td>Sexual abuse (fondling): (1) through the victims mental incapacity or physical/helplessness or (2) by force, threat or intimidation or where either serious injury to the victim results or assailant uses or threatens to use a weapon</td>
<td>1-20 years imprisonment and a fine of up to $100,000</td>
</tr>
<tr>
<td><strong>Attempted Rape or other attempted sexual offenses</strong></td>
<td>An attempt to commit the above defined acts of sexual assault</td>
<td>2-10 years imprisonment and fines up to $100,000 for rape/forced sodomy attempts; lesser penalties for attempted sexual battery offences</td>
</tr>
<tr>
<td><strong>Infected Sexual Battery with Intent to Transmit Disease</strong></td>
<td>A person with HIV, syphilis or hepatitis B having intercourse or oral sex with the intent of transmitting the disease</td>
<td>1-5 years imprisonment OR 12 months jail and/or a fine of up to $2,500</td>
</tr>
<tr>
<td><strong>Infected Sexual Battery</strong></td>
<td>A person with HIV, syphilis or hepatitis B having intercourse or oral sex without disclosing that status</td>
<td>12 months in jail and/or up to $2,500</td>
</tr>
<tr>
<td><strong>Stalking</strong></td>
<td>Engaging in conduct repeatedly when the offender knowingly places the other person in reasonable fear of death, sexual assault or bodily injury to self or family</td>
<td>12 months jail and/or up to a $2,500 fine, plus a restraining order prohibiting contact; additionally the victim may bring a civil suit</td>
</tr>
<tr>
<td><strong>Statutory Rape</strong></td>
<td>Sexual intercourse with a 13 or 14 year old, with consent, when the offender is 3 years or more older</td>
<td>1 to 5 years imprisonment OR 12 months jail and/or a fine of up to $2,500</td>
</tr>
<tr>
<td><strong>Obscene Sexual Display</strong></td>
<td>Intentionally engaging in actual or simulated masturbation in public place in presence of others</td>
<td>Up to a year in jail and/or up to $2,500</td>
</tr>
<tr>
<td><strong>Abusive Language</strong></td>
<td>Curses, abuses or violent abuse language (includes e-mail and voice mail)</td>
<td>12 months jail and/or up to $2,500</td>
</tr>
<tr>
<td><strong>Harassment by Computer</strong></td>
<td>Use of a computer with intent to coerce, intimidate or harass by communicating obscene, vulgar, profane, lewd, lascivious or indecent language</td>
<td>12 months jail and/or up to $2,500, Additionally the victim may bring a civil suit.</td>
</tr>
</tbody>
</table>
In addition to circumstance of stalking, a victim of another criminal offense resulting in serious bodily injury may obtain a protective order prohibiting contact and other conditions necessary to prevent further violence. In addition to the criminal sanctions above, civil action may be undertaken in the state of Virginia. In criminal action proof is needed beyond a reasonable doubt, whereas in civil action there is a lesser standard of preponderance of the evidence.

The “Drug-Induced Rape Prevention and Punishment Act of 1996” makes it a crime to use controlled substances (Rohypnol, GHB) as a precursor to acquaintance rape. Both federal and state law include GHB as a controlled substance providing a penalty of up to 20 years in jail and a $100,000 fine for those who manufacture, possess, give or sell the drug.

| Slander or Libel | Falsely speaking, writing or publishing of a derogatory nature against a person's character or words meant to insult or use of grossly insulting language (includes e-mail and voice mail) | Fine of up to $500 |

**UNIVERSITY PROCEDURES FOR SEXUAL MISCONDUCT OR HARASSMENT**

If you have been the victim of sexual harassment or sexual misconduct, you have numerous options within the University community for dealing with the situation.

For complaints against a faculty member, contact the Dean or Associate Dean of the College or School; for complaints against a staff member, contact the Director of Personnel. You can find the entire University policy on sexual harassment and other prohibited discrimination and harassment in the Student Handbook and on the Washington and Lee University Counsel web page, [http://counsel.wlu.edu](http://counsel.wlu.edu), under Policies and Notices.

For complaints against a student, contact a CAIR Resource, listed on page 24. CAIR Resources are appointed by the Provost to serve as Confidential and Impartial Resolution Resources (“CAIR”). These trained individuals serve both complainants and respondents by providing information about the filing and resolution of claims, including criminal charges if desired. If you are a complainant, you should contact a CAIR Resource soon after the incident to discuss the policies and procedures for various options. If you are the respondent alleged to have committed sexual misconduct, a separate CAIR Resource will be available to you, to provide information about claim resolution, and relevant policies and procedures. CAIR Resources also provide assistance in the informal...
resolution of complaints, including: for example, hearing a complaint without taking further action; speaking to a respondent on behalf of a complainant; performing shuttle diplomacy between a complainant and respondent; guiding a mediated discussion; and handling direct resolution between a complainant and respondent.

If a complaint against a student cannot be resolved informally, the Student Faculty Hearing Board (SFHB) is the judicial body charged with hearing allegations of prohibited student discrimination, harassment, sexual misconduct, and hazing. The SFHB may impose sanctions on a W&L student who is found to have engaged in sexual misconduct, including, but not limited to: counseling, probation, educational programming, suspension, or dismissal. The SFHB is not a court of law and therefore the standards of proof and sanctions may be different than those imposed by the legal system. You can find the entire University policy on Prohibited Student Discrimination, Harassment, and Sexual Misconduct, including the complete procedures for the SFHB, in the Student Handbook, and on the Washington and Lee University Counsel web page, http://counsel.wlu.edu, under Policies and Notices. More information is also available by calling the campus CAIR Information Line at 458-5800 or by visiting cair.wlu.edu.

Some Friendly Advice about Consent and Alcohol/Drugs
Consent in a SFHB case is an issue to be decided on a case-by-case basis. It is likely that the SFHB will hear two different versions of what happened. There is no clear boundary line, except at the extremes, to determine where impairment from drinking alcohol or taking drugs makes a victim incapacitated or physically helpless and thus unlikely to be able to give consent. Someone who has passed out or in a blackout cannot give consent. Someone who has been drinking enough to lower inhibitions and diminish the quality of their judgment is probably not incapacitated. Impaired judgment does not equate to the inability to give consent, nor is it the same thing as mental incapacity or physical helplessness. It is important to remember that the SFHB is called upon to gather all available evidence and to determine whether victim incapacity or consent existed, which is often a difficult task. The SFHB will decide if University policy was violated, not if Virginia law was violated.
RESOURCES FOR A VICTIM

If you or a friend become a victim of a sexual offense, sexual misconduct or sexual harassment, you should go immediately to (or take your friend to):

**STUDENT HEALTH CENTER** (Basement of Davis Dorm) x8401
Open 24 hours

**CONFIDENTIAL COUNSELING** x8590
After hours call the Student Health Center

**CAMPUS SECURITY —24 hours** x8999

**CAIR RESOURCES:** *(Confidential and Impartial Resolution Resources)*
For a listing of CAIR Resources please visit cair.wlu.edu or look for posters around campus.

**COMMUNITY RESOURCES**
- Emergency: 911
- Project Horizon: 463-2594 *(24 hour emergency service to all women and men in Rockbridge county)*
- Lexington Police Department: 463-2112 or 462-3705
- Rockbridge County Sheriff’s Office: 463-7328 *(Sexual Assault Investigation)*
- Stonewall Jackson Hospital: 458-3300

**STUDENTS WHO HAVE HAD TRAINING ON SEXUAL ASSAULT:**
- One in Four DC/RA’s
- SPEAK LIFE—Trained Peer Health Educators
- Peer Counselors Project Horizon Volunteers

**EDUCATIONAL PROGRAMMING:**
- Office of Health Promotion: x4501
- LIFE Peer Health Educators: x4501
- One in Four: x4501
- SPEAK: x8750
- Project Horizon: 463-2594

CAIR Information Line: 458-5800 -24 hrs.
http://cair.wlu.edu
HOW TO HELP THE
RAPE/ASSAULT SURVIVOR

After a rape or sexual assault, good friends are undoubtedly one of the best sources of comfort for the student reporting the assault. Close friends - female and male - provide immediate comfort, ranging from holding the person, providing a safe place to stay, taking the person to the Student Health Center or emergency room and standing by during the examination for evidence of the assault. Encouraging the student to get counseling help and legal help will also be possible roles.

Here are some guidelines that counseling professionals advise for helping someone you know recover from rape or sexual assault. Even though most rapes occur against women, in some incidents the survivor will be a male. The same basic guidelines apply to men who have been victimized.

☞ BELIEVE THE PERSON. The greatest fear of assault survivors is that they will not be believed or that their experience will be minimized as not important. Women are raped by men they know 4 times more often than they are raped by strangers. Accept what you are hearing, even if you know the accused. Sexual assault is often as traumatic as completed rape and the after-effects of the experience may be severe. Treat the victim of attempted rape with the same care as the victim of completed rape. Remember acquaintance rape/date rape = criminal rape, even though the student knew the perpetrator. The physical and emotional after effects may be more severe than after a stranger rape because trust has been violated.

☞ LISTEN. Let the person talk. Find a quiet place. Be patient. Allow the story to be told as the survivor feels like revealing it.

☞ COMFORT THE PERSON. Try to calm the student down if they are agitated, but do so in a soothing-not disapproving-way. They may want to be held or may not want to be touched. Offer tea, cocoa, a blanket, and a safe area to rest and regain control.

☞ REINFORCE THAT THE RAPE WAS NOT THE STUDENT’S FAULT. Avoid questions that seem to blame the student for their actions, such as, “Why didn’t you scream?” or “Why did you go to their room?” Allow the student to talk out feelings of self-blame if they want to, but help the survivor see that the rapist caused the rape, not the victim.

☞ PROVIDE PROTECTION. Offer a secure place to sleep and companionship once the survivor returns to their own living quarters.
☞ SUGGEST CALLING A PROFESSIONALLY TRAINED RAPE-CRISIS COUNSELOR OR ADVOCATE. During the day call the Counseling Service (x8590). After hours a Student Health Center nurse (x8401) can put you in touch with a University Counselor. If you prefer to talk to a student volunteer who is in recovery, or a community volunteer who is trained to respond to a sexual assault crisis, a counselor or nurse can help you. CAIR Resources and trained students—DC, RA, LIFE, Peer Counselors, One in Four and SPEAK—know the campus and community resources and can help you sort out your options. Project Horizon can also assist students (463-2594).

☞ ENCOURAGE THE PRESERVATION OF EVIDENCE. The sooner evidence can be collected (within 72 hours) and a rape/assault is reported, the better the likelihood if charges are filed the accused will be convicted. Many survivors fail to recognize their experience as rape until days, weeks, months and even years later, thereby losing vital evidence. Caution the person not to shower, eat, wash clothes or brush their teeth. During an official exam in the hospital, specimens will be taken to look for traces of blood, hair, saliva and semen, so it’s important that nothing be washed away. Take clean clothes to the hospital so the student can change after the exam. Clothes worn during the assault will be held for examination and returned several weeks later. The student does not have to decide at the time of evidence collection whether to make a formal charge.

☞ GET MEDICAL ASSISTANCE. The survivor may have bruises, cuts or other injuries. Some injuries may not become evident for several hours or a couple of days. Treatment for possible sexually transmitted infection and pregnancy is necessary. Go to the Student Health Center and/or the Emergency Room at Stonewall Jackson Hospital. SJH will contact a University Counselor or Project Horizon and they will stay during the exam if requested.

☞ LET THE PERSON MAKE DECISIONS ABOUT HOW TO PROCEED. The survivor needs to regain the feeling of being in control. Allow the person to do that. Family/friends of a rape/assault survivor may want to press charges, but that might not be the best choice for the individual. If the person decides not to report it and you disagree with that, support the decision anyhow. It is alright if the person decides later to file charges or file a blind report.

☞ IF YOU ARE A SIGNIFICANT OTHER, WITH APPROVAL, USE APPROPRIATE TOUCHING AND LANGUAGE TO REESTABLISH FEELINGS OF SELF-ESTEEM. Let the person tell you how much physical contact they would like. Gentle touching may help the survivor understand that your connection with them is unbroken, that you do not value them less. Don’t pressure your partner for sexual activity out of the belief that you need to prove everything is “normal” between you.
OFFER TO HELP THE PERSON GET PSYCHOLOGICAL AND LEGAL ASSISTANCE. During the aftermath of a rape/assault, the survivor may not be able to seek out sources of help. Offer to accompany them to the police, to Campus Security and/or the University Counseling Service. Inform the person that CAIR Resources are available for sexual misconduct issues.

BE AVAILABLE. In the weeks and months following the rape/assault, reassure the survivor that you are available. Give your time and attention each time you are sought out. Do NOT tell the survivor to put it all behind and get on with life.

LEARN ABOUT RAPE-TRAUMA SYNDROME. Your friend’s recovery period will last a long time, during which moods and reactions may change radically from day to day. Know what to expect and share this with the survivor.

GET HELP FOR YOURSELF. You need to talk with someone else other than the survivor to discuss your feelings about the incident and to learn how to be supportive.

HAZING - The IFC and University do not tolerate hazing as a part of Greek life. Please refer any questions about hazing to the Office of Greek Life, Dean of Freshmen, or the Dean of Students. The SFHB hears cases of hazing. Refer to the Student Handbook for more information.
Everyone experiences stress at some point in his/her life. Stress can affect a person in a variety of ways—physically, emotionally and/or behaviorally. Anything that requires change or adaptation can cause stress, and college is both. Therefore, you could find yourself becoming stressed by the new school year or your new surroundings.

**SIGNS OF STRESS**

- Problems sleeping and/or eating
- Increased use of alcohol and/or drugs
- Problems making decisions
- Inability to be organized
- Difficulty concentrating
- Increased boredom and/or fatigue
- Anxiety attacks—weak, dizzy and short of breath
- Nightmares
- Hostility and/or frustration
- Changes in exercise habits
- Urges to cry and/or run away and hide
- Frequent colds and/or infections
- Frequent stomach problems—indigestion and/or diarrhea
- Frequent headaches, backaches, muscle aches
WAYS TO HANDLE STRESS

- Relax!!!
- Take a break for 15 or 20 minutes
- Exercise
- Get some fresh air
- Go somewhere private to yell or cry
- Make lists and manage time wisely
- Think positively
- Accept what you cannot change; make a plan to change what you can
- Live in the present
- Take care of yourself
- Keep expectations realistic
- Ask for help or talk to a friend
- Meditate or pray
- Laugh
- Ask a friend to give you a back or neck massage
- Listen to music, read a book, watch a movie

WATCH OUT FOR POTENTIAL SOURCES OF ROOMMATE CONFLICTS!

- Cleaning — Who will clean what and how often?
- Visitors — Should you consult your roommate before inviting guests? Can guests use your things?
- Study time — What hours are quiet time for studying?
- Equipment — What rules do you agree upon for sharing things?
- Privacy — Respect each other’s privacy and belongings.
- Sexual attitudes that differ may cause conflict.
- Differences in sleeping and rising schedules might also create problems.

IF A PROBLEM DOES ARISE...

- Discuss it with your roommate and try to compromise.
- Talk to your dorm counselor or peer counselor.
- Get help from a peer counselor or professional counselor in the University Counseling Center or from the University Mediator.
DEPRESSION

Prolonged feelings of the “blues” may indicate depression. Depression often occurs in college students who are adjusting to living alone for the first time, developing new relationships, and attending to the challenges of a rigorous academic life. Many factors “set the stage” for depression; however, the most common cause is the loss of personal worth and self-esteem.

Some physical signs of depression include changes in sleep, appetite, sex drive and energy level; restlessness; difficulty concentrating; a state of withdrawal or agitation. Some other symptoms may be feelings of helplessness and hopelessness; a pessimistic outlook; lack of joy and pleasure (especially in things that were previously exciting); and thoughts of suicide. A significant decline in academic performance may be a sign of depression. Depression is treatable with medications and/or counseling.

Grief is different from depression. Grief is not an illness, rather an emotional response to a loss. Signs of grief are: crying, preoccupation with loss, anger, guilt, sadness, exhaustion, and insomnia. Be patient—it takes time to heal—some days will be better than others. Talking helps!

If you feel like you may hurt or kill yourself GET IMMEDIATE HELP. Encourage a friend who is considering suicide to get professional help. All suicide talk or attempts are serious. Make an agreement with the person that they will not attempt suicide while you are finding them help. If you believe a student poses a suicide risk, we strongly encourage you to contact University Counseling, the Dean of Freshmen, or the Dean of Students. For more information visit www.stopasuicide.org.

Information about Counseling Services and how to help a friend are available at the back of this booklet. A good on-line self assessment is www.mentalhealthscreening.org/screening, Keyword= Washington.
FREQUENTLY ASKED QUESTIONS??

How often should I exercise??
You should exercise according to the new USDA guidelines for approximately 30-60 minutes every day. This can be done all at once or divided into segments throughout the day. Remember weight training is important as well.

Won’t I gain weight if I quit smoking/start taking the Pill?
Not if you eat right and increase your exercise level.

How can I eat healthy while at W&L?
It’s really all about the choices you make. If you only eat chicken nuggets, fries, and soda, you are going to feel unhealthy and probably gain weight. The options in the Marketplace are geared toward healthy eating--make sure to choose lots of veggies and fruits. Fruit juices, milk and water are good beverage options. Remember, you are in control of the choices you make.

My boyfriend says women can’t drink as much as men, is that true?
Actually, he is telling the truth. One reason is that women don’t have the same amount of an enzyme called alcohol dehydrogenase in the body that breaks down alcohol before it is absorbed.
Do I have mono if I am tired all of the time? If I do have mono, how long will I be sick, and what can I do to get well?

Other symptoms of mononucleosis include fever, sore throat, swollen lymph nodes, headaches, an enlarged spleen and liver, as well as fatigue. You should be examined by a doctor and have blood tests to be diagnosed. If you do have mono, the fever and sore throat usually last 7-10 days, and other symptoms should decrease over 2-4 weeks. You can treat the symptoms by getting bed rest, eating well, avoiding alcohol, gradually increasing your activity level over a 2-4 week period, and having a positive attitude about getting better.

If I smoke pot while drinking, will that stop me from feeling drunk?

No, the combination of the two drugs are additive and you will feel both stoned and drunk. Your judgment will be impaired no matter which drug you are using, possibly causing you to drink to excess. This may lead to a situation of drinking more than your body can metabolize and result in a case of alcohol poisoning.

Some of my friends snort ritalin or drink “energy drinks” and drink alcohol all night. Is this a good combination?

No, combining two drugs is never a good idea unless prescribed by a physician. Using ritalin as a recreational drug can be harmful and is illegal. Drinking all night can cause a high BAC and put you at risk for alcohol-related problems, including impaired judgment about safe, consensual sex.

My friend is drinking too much/doing drugs/ having unprotected sex/not eating right, what can I do?

Read the next section...
HELPING A FRIEND IN TROUBLE

☞ TALK TO YOUR FRIEND.
Organize the intervention by deciding where, when, and how you will approach your friend. Make sure you allow plenty of time with no interruptions. Try using a team approach. Choose a private location soon after an incident that worries you has occurred, and talk only when everyone involved is sober. Gather your data—have specific incidents that concern you in mind and their consequences. Focus on your concerns about your friend’s health. Explain how the problem is affecting academics, social interactions, or your relationship with that person. State the effect that your friend’s behavior had on you and the consequences to your relationship if your friend does not seek help.

☞ REALIZE THAT YOU MAY BE REJECTED.
People often deny their problems because they are afraid to admit that they are out of control. Do not take rejection personally, and try to end the conversation in a way that will allow you to come back to the subject at another time. Do not hesitate to confront your friend again if the unhealthy behavior continues.

☞ KNOW YOUR LIMITS.
If you sense that you are getting angry or impatient, back off. And do not take on the role of monitor—it is ineffectual.

☞ DON’T JUDGE!
Be caring peers by listening and supporting. Stick to the facts without judging your friend’s values, making generalizations, or expressing your own subjective opinions. Do not accuse your friend or argue with him or her—stay calm and stick with your list of evidence.

☞ LEARN
Learn about the problem and available local resources.

☞ REFER TO APPROPRIATE RESOURCES
Provide written resources and referrals and offer to help the person further, such as by going to counseling with him or her.
ELROD UNIVERSITY COMMONS
The John W. Elrod University Commons is the center of campus life for students. The building houses a theatre, student organization workspace, campus eateries and a convenient mart, bookstore, game room, large screen TV, meeting rooms and lots of lounge space and computers! The programs in this building have been designed by students and staff to encourage active student use.
http://commons.wlu.edu

MARKETPLACE
Your favorite place for food your freshman year! This contemporary eatery in the University Commons offers customized food selections at four stations that are prepared just for you! These four stations - pasta/pizza, deli, grill, and international foods - will be open continuously 7 a.m.-7 p.m.. The Marketplace staff is more than willing to work with you on all your specific needs; they listen to your suggestions and will even pack boxed lunches if requested in advance, and vegetarian choices are always an option.
http://diningservices.wlu.edu

CAFÉ ’77- EMPORIUM
Students on full board plan have the option of taking their meal in the Marketplace or in the Café/Emporium after 7 p.m. for missed dinners only. The Café/Emporium is open until midnight for light meals and snacks using a food debit account which allows tax-free food and beverage purchases.
FITNESS CENTER
An 11,000 square foot, state-of-the-art facility located in Warner Gym with a cardio-area which includes treadmills, lifecycle bikes, elliptical trainers, stairmasters and rowers, a selectorized weight machine area, and a free weight area. It is open to all W&L students, faculty, and staff. M-F 7:00 a.m.-10:30 p.m., 9:00 a.m.-8:30 p.m. Saturday and 1:00 p.m.-9:00 p.m. Sunday. Aerobics, power yoga, and other cardioworkouts are offered in the dance studio.
http://athletics.wlu.edu/fitness_center

ROPE COURSE
The Ropes Challenge Course in the Piney Woods area beside the Pavilion adds another dimension to leadership training and alternative activities. Get your organization/hall to schedule a training early in the semester while the weather is still nice.
http://athletics.wlu.edu/leadership/

DUCHOSSOIS TENNIS CENTER
Indoor tennis courts available for students, faculty and staff. Call 458-8118 for hours and to make reservations.
http://athletics.wlu.edu/facilities/duchossois

GYM
Variety of facilities including pool, fitness center, training room, equipment room which loans out racquets, basketballs, etc. Aerobics classes are offered—check for days and times. Intramural sports are available—look for signs or ask for information!

DORM COUNSELORS
The Residence Life Staff is trained to help in many of these areas and is available to support the freshmen. Use the Academic Peer Mentoring Program the Dorm Counselors have developed.

RESIDENT ASSISTANTS
Residence Life staff members living in Gaines Hall, Woods Creek and University Theme Houses to provide support for residents.

SAB - Student Activities Board
The Student Activities Board at W&L exists to provide diverse entertainment to the W&L University community. We provide acts that range from hypnotists and illusionists, comedians, to a diverse spectrum of musical acts.

SAO - Student Activities Organization
The Student Activities Organization is an all inclusive student run organization that connects students of diverse backgrounds and organizes participation in activities in and around W&L.

LIFE
Feel free to ask us about your health concerns. None are too small! Or ask us to do a program or facilitate a discussion for your residence hall or Greek organization. Look for information tables, posters, and speakers we sponsor. Check out our website at life.wlu.edu for health information resources and helpful links. Contact us through the Office of Health Promotion for programs.
http://life.wlu.edu

ONE IN FOUR
One in Four, is a national organization of men dedicated to educating other men about sexual assault. Look for our programs, speakers and support our efforts to decrease violence.

SPEAK
Women educating other women about sexual assault at W&L.

PEER COUNSELORS
Need a listening ear?? If you have a problem you need to talk about, just give them a call. Look for posters around campus with names of Peer Counselors. They also have a peer counselor on call—so give them a ring if you want to talk about a problem. (461-0412)
**STUDENT ATHLETE MENTORS (SAMs)**
Trained students from each athletic team—both men’s and women’s—to help with any concerns you may have.

**EXECUTIVE COMMITTEE (EC)**
Hears complaints regarding honor violations.
http://ec.wlu.edu

**STUDENT JUDICIAL COUNCIL (SJC)**
Addresses alcohol and other drug related misconduct by students. See Student Handbook for other violations heard by the SJC.
http://sje.wlu.edu

**STUDENT FACULTY HEARING BOARD (SFHB)**
Hears complaints regarding student prohibited sexual misconduct, sexual or other prohibited harassment, discrimination and hazing.

**UNIVERSITY SECURITY**
Available 24/7. Your first line of assistance for any safety issues or concerns. Our officers are friendly, approachable, and eager to help you! Office is located in the Elrod University Commons.
http://studentaffairs.wlu.edu/public_safety

**STUDENT HEALTH CENTER**
Sick? Need medical advice? Stop by or make an appointment at this 24-hour facility located in the basement of Davis and Gilliam. The doctors and nurses are here to dispense medications, give allergy shots, and help you feel better. Visits are confidential except in accordance with law.
http://studentaffairs.wlu.edu/studenthealth

**UNIVERSITY COUNSELING CENTER**
Got a problem? Feel free to make an appointment to speak confidentially with a campus counselor. The counselors are trained to deal with fitting in, roommate problems, study skills, substance abuse, disordered eating, depression, sexual assault, and anything that is on your mind.
http://studentaffairs.wlu.edu/universitycounseling

**OFFICE OF HEALTH PROMOTION**
Located in the University Commons. If you have a question relating to a health topic stop by or call. This office facilitates campus-wide health programming and can assist you in scheduling a presentation by the LIFE peer health educators.
http://studentaffairs.wlu.edu/studenthealth/healthpromotion

**OFFICE OF LEADERSHIP DEVELOPMENT**
Burr Datz, Director of Leadership Development, offers programs and activities to develop effective leadership skills and capabilities for students and student organizations. Sign up for cool programs, the Ropes course or request training for your organization. Located in the University Commons.
http://studentaffairs.wlu.edu/leadership

**OFFICE OF STUDENT ACTIVITIES**
The Office of Student Activities works in conjunction with student organizations such as the General Activities Board to deliver programs and activities for all students. We hope you will join us this year for our exciting line up of free shows which include: hypnotists, psychics, and improv comedy groups and various concerts not to mention all the cool activities in the Elrod University Commons.
http://studentaffairs.wlu.edu/campusactivities/studentactivities

**CAMPUSS RECREATION**
Get out and involved with the Outing Club, fitness classes, join an organized club sport, or participate in an intramural activity.
http://studentaffairs.wlu.edu/campusactivities/campus_recreation
Notes
Student Health Center

Location: Lower level Davis
Phone #: x8401
Hours: Open 24 hours a day, 7 days a week when undergraduates are in session.
Staff: A nurse is available 24 hours a day for inpatient or outpatient care. A physician is available Monday - Friday for appointments, and on-call for after-hours care. PLEASE CALL FOR AN APPOINTMENT.

Security (x8999) is available to assist with transportation if needed.

Counseling Services

Location: Early-Fielding University Center
Phone #: x8590
Staff: Counseling psychologists are available for appointments. The Student Health Center is available for emergency or after hours care.

Office of Health Promotion

Location: University Commons
Phone #: Health Educator–x4501, LIFE–x4501
Staff: The professional Health Services staff and LIFE peer health educators are available to talk to your hall or organization about any health related topic. Call to schedule a program. Look for speakers on health issues and special awareness programs!

Sports Medicine

Location: Doremus Training Room
Phone #: x8689, x8690
Staff: Certified athletic trainers are available to assist with athletic injuries and recommend exercise programs.