



OKLAHOMA CITY
COMMUNITY COLLEGE



2025-2026

Drug-Free Schools and Communities Act

BIENNIAL REVIEW REPORT



**Police
Department**

Oklahoma City Community College

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I. INTRODUCTION AND OVERVIEW

Oklahoma City Community College (OCCC) traces its beginning to March 20, 1969. A committee of the South Oklahoma City Chamber of Commerce was organized to circulate petitions asking the Oklahoma State Regents for Higher Education to act to establish a junior college in the area. In the spring of 1974, the College became part of the state system for higher education and a new Board of Regents was appointed as the governing unit for the school. In 1983 the name of the College was changed to Oklahoma City Community College, reflecting its purpose as a college for the entire Oklahoma City metro area community.

The College has grown to serve over 24,500 people each year. It offers a full range of associate degree programs that prepare students to transfer to baccalaureate institutions. The College offers a high-quality affordable education for academic advancement, workforce training, and career development. OCCC is a non-residential community college located in the largest city in Oklahoma.

OCCC is committed to providing its students and employees a drug and alcohol-free workplace and learning environment to promote the reputation of OCCC and its employees as responsible citizens of public trust, and to provide a consistent model of substance-free behavior for students. OCCC, including all of its campuses, shall provide a safe, responsive environment for all students and employees.

Federal drug-free schools and campuses' regulations require institutions of higher education to conduct a biennial review of their alcohol and other drugs programs and policies to determine program effectiveness and consistency of policy enforcement and to identify and implement any changes needed.

This review has the following objectives:

- Determine the presence and effectiveness of a Drug and Alcohol Abuse Prevention Program.
- Document the existence of procedures for distributing the annual notification to students, faculty, and staff and ensure they are followed.
- Ensure that disciplinary sanctions for violating standards of conduct are applied consistently.
- Recommend any necessary changes to the Drug and Alcohol Prevention Program and Policy.

II. ANNUAL NOTIFICATION PROCEDURE

At the beginning of each semester (Including 8-week semesters), after the last day to enroll, OCCC sends an email to all current students and employees containing College's Drug and Alcohol Prevention Program (DAAPP).

Additionally, the OCCC Student Community Guidelines, which is distributed to all incoming new students, contains all pertinent drug and alcohol policies.

New employee and new faculty orientations also serve to notify employees about OCCC's drug and alcohol policies. This annual notification is issued to all new employees as part of their new employee paperwork. This ensures any new employee who starts work after the emailed annual notification receives the required information.

The DAAPP certifies that programs exist at OCCC to prevent the abuse of alcohol and illicit drugs by both students and employees on the premises and as part of its activities. The following information is contained in the notice in more detail:

- Standards of conduct that prohibit the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees
- Description of the legal sanctions under local, state, or federal law for the unlawful possession or distribution of illicit drugs and alcohol
- Description of the health risks associated with the use of illicit drugs and alcohol abuse
- Description of any drug or alcohol counseling, treatment, rehabilitation, or reentry programs that are available to employees or students
- A clear statement that the institution will impose sanctions on students and employees and a description of these sanctions, up to and including expulsion or termination of employment and referral for prosecution for violations of the standards of conduct or law

III. PREVALENCE AND TREND DATA

OCCC continues to request information from our students regarding their views towards alcohol and drugs as well as their use of these substances and their overall well being. A survey was conducted and prepared by the Department of Institutional Effectiveness in 2026 and the following results were observed.

Student Alcohol and Drug Survey Results

I. INTRODUCTION

OCCC continues to request information from our students regarding their views toward alcohol and drugs as well as their use of these substances. This report contains the results from the fifth administration of the survey, conducted in Fall of 2025. Previous survey administrations occurred in Fall of 2016, Fall 2018, Fall 2020 and Fall 2022. This survey is scheduled to be conducted every other year.

II. METHODOLOGY

IOTA360 was used to reach out to the students to complete the survey. Students age 18 or older, who were not a concurrent high school and college student, who were taking at least one course in the Fall sixteen week and or late eight-week terms were invited to participate. Invitations were distributed in October 2025, and several follow-up reminder emails were sent to encourage participation. All students who completed the survey were automatically entered into a drawing for two \$50 Walmart gift cards.

The current survey was changed slightly from previous years to meet additional student response needs. The questions that were added will not have prior comparable data (some of the tables have N/A). The number of respondents who completed the survey may not have answered every question in the survey. Analysis by question included only the total number of students who responded to the question, so the denominator used to calculate the percentages and other findings could differ from item to item. Finally, there may be a reluctance by some students to complete the survey if they use alcohol in excess or use illegal drugs, or feel that their responses are not kept anonymous.

III. OVERVIEW OF RESPONDENTS

Several demographic questions are included in the survey, including age, race/ethnicity, gender, and living arrangements. A total of 744 students completed the Fall 2025 survey. The response rate is 8.2% based on a student sample of 9,047. The response rates for 2016, 2018, 2020 and 2022 were 18%, 14%, 12% and 8.1% respectively.

Respondents were distributed across the age groups as follows: 30.4% were between 18 to 20, 23.6% were between 21 to 25, and 45.4% over the age 26 or older. Less than one percent (0.7%) was self-reported to be under the age of 18. The percentage of Hispanic students responding to the survey

continued to increase, while the number of White students responding has gradually decreased over the time from the initial administration. This change in demographics reflects the changing demographics of the student population, where roughly half of the student body is now non-White.

When asked about living arrangements, the highest percentage of respondents (35.7%) living with their parents, 27.4% living with a spouse/partner/significant other. An additional 16.3% reported living with children, 8.4% with roommate(s) and 8.2% reported living alone. The remaining 4.0% respondents selected “other”, or provided no answer. These percentages have remained fairly constant with prior administrations of this survey.

IV. SURVEY RESULTS

1. Your Age:

Answer Options	2016	2018	2020	2022	2025
Under 18	5.1%	0.5%	0.8%	1.9%	0.7%
18-20	25.8%	33.4%	30.9%	31.1%	30.4%
21-25	24.8%	27.8%	24.4%	22.5%	23.6%
26+	44.3%	38.9%	43.4%	44.5%	45.4%

2. Ethnic Origin:

Answer Options	2016	2018	2020	2022	2025
American Indian/Alaskan Native	5.5%	7.1%	6.5%	6.1%	5.0%
Hispanic	11.1%	14.0%	16.0%	18.4%	23.0%
Asian/Pacific Islander	5.9%	6.5%	5.9%	5.8%	7.8%
White	59.1%	52.3%	50.8%	48.3%	43.4%
Black	8.0%	10.0%	9.6%	11.8%	11.2%
Two or more	10.3%	10.1%	9.3%	9.6%	9.7%

3. Gender:

Answer Options	2016	2018	2020	2022	2025
Female	72.0%	71.5%	74.2%	70.8%	76.2%
Male	27.6%	27.8%	21.3%	22.9%	21.4%
Other	0.5%	0.7%	0.8%	6.3%	1.8%
Prefer to describe*	N/A	N/A	N/A	N/A	0.7%

*Five students used the following descriptions: Agender (1), Non-binary (1), Transgender (3).

4. What is your current living arrangement?

Answer Options	2016	2018	2020	2022	2025
Live Alone	6.7%	7.8%	6.8%	8.2%	8.2%
With Roommate(s)	10.1%	12.5%	9.4%	8.7%	8.4%
With Parent(s)	37.0%	35.3%	32.8%	33.0%	35.7%
With Spouse/partner/significant other	28.9%	25.4%	27.0%	28.1%	27.4%
With Children	11.5%	12.2%	16.6%	13.2%	16.3%
Other	5.8%	6.8%	5.3%	6.6%	4.0%

5. Campus situation on alcohol and drugs:

Answer Options	Yes				No				I don't know			
	2018	2020	2022	2025	2018	2020	2022	2025	2018	2020	2022	2025
Does OCCC have alcohol and drug policies?	93.5%	88.7%	83.5%	82.2%	0.4%	0.8%	0.8%	0.6%	6.1%	10.5%	15.7%	17.2%
If so, are they enforced?	72.5%	61.1%	57.1%	53.6%	0.5%	1.2%	1.5%	1.0%	27.0%	37.7%	41.5%	45.4%
Does OCCC have a drug and alcohol prevention program?	62.4%	64.8%	50.3%	52.3%	0.3%	0.6%	1.3%	0.3%	37.3%	34.6%	48.4%	47.4%
Do you believe OCCC is proactive/concerned in the prevention of drug and alcohol use?	90.7%	88.7%	84.1%	86.7%	1.0%	1.4%	2.3%	2.3%	8.2%	9.9%	13.6%	11.0%
Are you actively involved in efforts to prevent drug and alcohol use problems at OCCC?	17.3%	13.2%	11.7%	6.5%	72.8%	78.1%	81.5%	80.8%	9.9%	8.7%	6.8%	12.6%

6. Have any of your family or friends had alcohol or other drug problems? Mark all that apply.

Answer Options	Response Count
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	2016	2018	2020	2022	2025
Mother	235	204	142	112	119
Father	414	371	208	162	210
Stepmother	43	34	26	20	21
Stepfather	68	89	54	38	41
Brothers/sisters	313	238	190	146	137
Mother's parents	207	168	107	82	100
Father's parents	163	156	96	74	98
Aunts/Uncles	444	405	259	204	202
Spouse/partner/significant other	99	53	44	37	74
Children	27	16	11	3	9
Friends	N/A	N/A	276	237	217
None	838	754	337	203	220

7. Please indicate how often you have experienced the following due to your drinking or drug use during the last year.

Answer Options	# of Times	Percent				
		2016	2018	2020	2022	2025
Had a hangover	Never	62.1%	61.7%	55.5%	57.7%	60.9%
	Once or Twice	23.6%	24.2%	24.0%	24.3%	24.8%
	3-5 Times	14.2%	14.1%	8.0%	7.7%	6.8%
	6-10 Times			2.6%	2.7%	2.6%
	More than 10			5.5%	7.7%	4.8%
Performed poorly on a test or important project	Never	89.5%	88.8%	66.3%	70.1%	71.9%
	Once or Twice	6.6%	7.1%	22.7%	20.3%	16.9%
	3-5 Times	3.9%	4.1%	6.0%	5.6%	6.1%
	6-10 Times			2.6%	2.2%	2.5%
	More than 10			2.4%	1.9%	2.7%
Been in trouble with police or other college authorities	Never	96.4%	96.8%	94.5%	96.2%	96.6%
	Once or Twice	2.9%	2.5%	4.4%	3.0%	2.4%
	3-5 Times	0.6%	0.7%	0.9%	0.3%	0.6%
	6-10 Times			0.0%	0.0%	0.1%
	More than 10			0.2%	0.5%	0.3%
Got into an argument or fight	Never	87.7%	85.7%	73.0%	77.1%	79.5%
	Once or Twice	8.2%	9.9%	19.5%	16.9%	13.8%
	3-5 Times	4.1%	4.4%	3.7%	3.7%	2.5%
	6-10 Times			1.7%	0.2%	1.2%
	More than 10			2.1%	2.2%	3.0%

Driven a car while under the influence	Never	88.8%	90.2%	89.7%	89.0%	89.5%
	Once or Twice	6.3%	6.1%	7.0%	7.1%	7.1%
	3-5 Times	4.9%	3.7%	1.8%	1.2%	1.3%
	6-10 Times			0.3%	1.2%	0.1%
	More than 10			1.2%	1.5%	1.9%
Missed class	Never	89.6%	90.3%	83.7%	86.0%	78.4%
	Once or Twice	6.1%	6.5%	10.6%	9.5%	16.0%
	3-5 Times	4.2%	3.2%	3.4%	1.9%	2.7%
	6-10 Times			1.0%	1.4%	1.0%
	More than 10			1.4%	1.2%	1.9%
Thought I might have a drinking or other drug problem	Never	93.5%	93.5%	91.5%	81.5%	88.8%
	Once or Twice	3.9%	4.5%	4.6%	6.5%	7.6%

Answer Options	# of Times	Percent				
		2016	2018	2020	2022	2025
	3-5 Times			1.2%	1.4%	0.9%
	6-10 Times	2.6%	2.0%	0.6%	0.8%	0.1%
	More than 10			2.0%	1.7%	2.5%

Been arrested for DWI/DUI	Never	98.6%	98.4%	98.5%	98.6%	98.2%
	Once or Twice	1.4%	1.4%	1.1%	1.2%	1.6%
	3-5 Times			0.1%	0.2%	0.1%
	6-10 Times	0.9%	0.2%	0.2%	0.0%	0.0%
	More than 10			0.0%	0.0%	0.0%
Have been taken advantage of sexually	Never	94.8%	92.5%	87.1%	87.7%	86.9%
	Once or Twice	4.3%	6.0%	10.6%	9.7%	9.9%
	3-5 Times			3.4%	1.9%	1.8%
	6-10 Times	0.9%	1.4%	11.0%	0.4%	0.5%
	More than 10			1.4%	0.4%	0.9%
Tried unsuccessfully to stop using	Never	95.7%	96.5%	95.2%	94.2%	91.8%
	Once or Twice	2.8%	2.4%	3.1%	4.0%	5.2%
	3-5 Times			0.7%	0.7%	1.0%
	6-10 Times	1.5%	1.2%	0.6%	0.2%	0.6%
	More than 10			0.5%	0.9%	1.3%
Seriously thought about suicide	Never	93.5%	90.5%	84.0%	85.8%	83.8%
	Once or Twice	3.7%	5.9%	10.8%	10.1%	9.6%
	3-5 Times			2.3%	1.7%	2.3%
	6-10 Times	2.7%	3.6%	0.8%	0.9%	0.9%
	More than 10			2.1%	1.4%	3.5%
Seriously tried to commit suicide	Never	97.7%	96.1%	94.6%	94.3%	93.8%
	Once or Twice	1.8%	3.3%	4.5%	5.1%	5.0%
	3-5 Times			0.7%	0.2%	1.2%
	6-10 Times	0.5%	0.5%	0.2%	0.3%	0.0%
	More than 10			0.0%	0.2%	0.0%

8. To what extent has your alcohol use changed within the last 12 months?

Answer Options	2016	2018	2020	2022	2025
Increased	5.3%	3.9%	8.9%	8.4%	7.2%
About the same	26.5%	25.4%	18.7%	17.8%	15.3%
Decreased	25.1%	27.6%	20.3%	21.6%	24.4%
I have not used alcohol	43.1%	43.2%	52.0%	52.2%	53.1%

9. To what extent has your illegal drug use changed within the last 12 months?

Answer Options	2016	2018	2020	2022	2025
Increased	2.6%	1.5%	2.1%	3.2%	2.1%
About the same	4.9%	3.4%	3.6%	4.6%	3.2%
Decreased	7.0%	8.7%	4.4%	6.0%	4.4%
I have not used illegal drugs	85.5%	86.5%	89.9%	86.2%	90.3%

10. Have you engaged in any of the following behaviors in the past month?

Answer Options	Response	2016	2018	2020	2022	2025
Refused an offer of alcohol or other drugs	Yes	50.4%	54.0%	61.0%	55.7%	57.4%
	No	44.0%	41.5%	33.2%	40.6%	38.2%
	I don't know	5.7%	4.5%	5.8%	3.7%	4.4%
Heard someone else brag about alcohol or drug use	Yes	41.3%	41.7%	42.6%	42.4%	39.8%
	No	54.4%	54.7%	53.6%	54.3%	54.9%
	I don't know	4.4%	3.6%	3.8%	3.4%	5.3%
Experienced peer pressure to drink or use drugs	Yes	13.3%	16.7%	22.2%	21.7%	22.4%
	No	84.4%	81.5%	75.9%	76.9%	75.3%
	I don't know	2.4%	1.8%	1.9%	1.4%	2.3%

11. In your life, which of the following substances have you ever used?

	2025		
	Yes	No	Percent
Tobacco or nicotine delivery products (cigarettes, e- cigarettes, etc.)	245	408	37.5%
Alcoholic beverages (beer, wine, liquor, etc.)	380	161	70.2%
Cannabis (marijuana, weed, hash, edibles, vaped cannabis, etc.)	236	415	36.3%
Cocaine (coke, crack, etc.)	41	610	6.3%
Prescription stimulants (Ritalin, Adderall, diet pills, etc.)	51	597	7.9%
Methamphetamine (speed, crystal meth, ice, etc.)	28	623	4.3%
Inhalants (poppers, nitrous, glue, gas, paint thinner, etc.)	24	626	3.7%
Sedatives or Sleeping Pills (Valium, Ativan, Xanax, Klonopin, GHB, etc.)	48	602	7.4%
Hallucinogens (Ecstasy, MDMA, Molly, LSD, acid, mushrooms, etc.)	66	585	10.1%
Heroin	10	633	1.6%
Prescription opioids (morphine, codeine, fentanyl, methadone, etc.)	44	603	6.8%
Other (Specify below) *	8	601	1.3%

V. *Other drugs listed:

- Addiction runs in my family. Never touched any of it because I don't know if I'd be able to stop.
- Cannabis for medical reason; And I meant to hit no on the increasement of alcohol consumption.
- Drug Medicine that contains Iron something like that.
- DMT, DXM, Codiene
- Ibuprofen

- I am a addict in recovery from methamphetamine. 3-10-09. I was in active addiction for 10 years; I am 16 years clean!
- I don't take any of these.

VI. (Comments Continued):

- I have been clean and sober for 7 years now. I have tried everything, including things that didn't even have names yet.
- I had a drug and alcohol addiction for 20 years but became sober in 2019. Some of the questions were cut off so I'm not sure if I answered correctly. No drug or alcohol use since that time.
- I have a few drinks on new years
- I never saw a point to get high...
- I have been in recovery for over 12 years.
- I have tried marijuana before. I am a social drinker.
- I have not had any drugs or alcohol.
- I have only ever used prescriptions such as Zoloft, Lexapro, insulin as prescribed medically.
- I have not used alcohol is a long time. If I do it's in a social setting but never outside of that.
- used alcohol and tried pot my first time in college in the 1990s and stopped in the 2000 and have not used and a am not using this second time in college. College is too important this time to use alcohol or drugs
- I'm not much of a drinker. Occasionally, I will have 1-2 drinks for special occasions, such as a party or celebration.
- I was never addicted to these drugs, only was used recreationally as a teenager. I was fortunate and grateful to not have gotten addicted, experience withdraws, or need rehab.
- Kratom
- Ketamine, a friend had an analogue version that made the drug last over eight hours. Please don't offer help, I'm scheduled with a mental evaluation with the Veteran Administration. U.S.S. Antietam ran aground in 2017, and I got out after.
- Mushrooms, rufees, ghb
- Never
- NA
- None used in past 12 months
- salvia, DXM
- When I was 11-15, I would smoke weed, hit my mom or dads' nicotine, and I tried drinking once but I hated it.
- When I was a kid around the age of 8 and 9 I mistaken an alcoholic beverage (Coor light) for coke-cola, I only took a sip and spit it out because it tasted bad, I had never tasted Alcohol before that day and after that day, simply because we don't drink in our family. (I don't remember what setting this too place but I believe it was a Mexican cookout my family had been invited to.)

12. In the past 3 months, how often have you used the substance(s) you mentioned in question 12? (Responses only includes students that answered 'Yes' one or more times in question 12.)

Answer Options	# of Times	Percent
Tobacco (smoke, chew, snuff, vape)	Never	71.2%
	Once or Twice	9.2%
	Monthly	2.4%
	Weekly	1.5%
	Daily or almost daily	15.7%
Alcohol (beer, wine, liquor)	Never	43.4%
	Once or Twice	33.7%
	Monthly	15.8%
	Weekly	5.9%
	Daily or almost daily	1.3%
Answer Options	# of Times	Percent
Marijuana (pot, hash, hash oil)	Never	78.3%
	Once or Twice	9.7%
	Monthly	2.8%
	Weekly	3.0%
	Daily or almost daily	6.2%
Cocaine (coke, crack, etc.)	Never	99.1%
	Once or Twice	0.6%
	Monthly	0.2%
	Weekly	0.2%
	Daily or almost daily	0.0%
Prescription stimulants (Ritalin, Adderall, Diet Pills, etc.) *	Never	98.9%
	Once or Twice	0.6%
	Monthly	0.2%
	Weekly	0.2%
	Daily or almost daily	0.2%
Sedatives or Sleeping Pills (Valium, Xanax, GHB, etc.)	Never	97.7%
	Once or Twice	1.1%
	Monthly	0.6%
	Weekly	0.4%
	Daily or almost daily	0.2%
Methamphetamines (crystal meth, ice, etc.)	Never	99.1%
	Once or Twice	0.6%
	Monthly	0.0%
	Weekly	0.0%
	Daily or almost daily	0.4%
Opiates (heroin, smack, etc.)	Never	100.0%
	Once or Twice	0.0%
	Monthly	0.0%
	Weekly	0.0%
	Daily or almost daily	0.0%
Hallucinogens (Ecstasy, MDMA, LSD, PCP, etc.)	Never	97.9%
	Once or Twice	2.1%
	Monthly	0.0%
	Weekly	0.0%
	Daily or almost daily	0.0%

Inhalants (glue, solvents, nitrous gas, etc.)	Never	99.4%
	Once or Twice	0.6%
	Monthly	0.0%
	Weekly	0.0%
	Daily or almost daily	0.0%
Prescription opioids (morphine, codeine, fentanyl, etc.) **	Never	98.3%
	Once or Twice	1.3%
	Monthly	0.2%
	Weekly	0.2%
	Daily or almost daily	0.0%
Answer Options	# of Times	Percent
Other illegal drugs (provide comments)	Never	99.8%
	Once or Twice	0.0%
	Monthly	0.0%
	Weekly	0.0%
	Daily or almost daily	0.2%

VII. *Other drugs listed:

- I have never had any drugs or alcohol.
- I do not drink or do any drugs
- NA
- None
- I have never used alcohol or nonmedical drugs
- I drank in my twenties, but I am in my 40's now and don't drink at all
- I have not used alcohol or substances ever in my life
- I have never used any of the above-mentioned drugs. I have only drunk some wine.
- Moved from Las Vegas, NV to make changes. I drink once a month or less, and have stopped marijuana use daily to enjoy my brains concentration. Was having marijuana dementia from daily use for the past 13 years.
- Never thought of it.
- I have been clean from meth for 2 years
- I never use since 2019.
- I do smoke cannabis almost every day, but I have a medical card, so it is a medical use drug, but I feel like I am not being honest answering that way.
- social drinker here.
- Tried poppers only once within the last year.
- This survey is legit repeating same questions and the "please specify" option doesn't show a question at all like what am I gonna specify
- Sober since October 19, 2021.

13. During the past 30 days on how many days did you have:

Coding Key

Not at All	1 to 9 Days	10 to 19 Days	20 to 30 Days
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Answer Options	Responses	2016	2018	2020	2022	2025
Enhances social activity	Yes	52.4%	54.6%	42.9%	47.0%	49.6%
	No	47.6%	45.4%	57.1%	53.0%	50.4%
Makes it easier to deal with stress	Yes	33.7%	33.6%	30.2%	32.5%	26.4%
	No	66.3%	66.4%	69.8%	67.5%	73.6%
Facilitates a connection with peers	Yes	35.2%	38.0%	30.7%	31.3%	38.4%
	No	64.8%	62.0%	69.3%	68.7%	61.6%

15. Do you think it would be safe to do the following?

Answer Options	Responses	2016	2018	2020	2022	2025
Smoke marijuana regularly	Yes	23.8%	25.4%	22.6%	24.0%	18.2%
	No	65.0%	60.9%	69.7%	68.0%	69.1%
	I don't know	11.1%	13.7%	7.7%	7.9%	12.6%
Take cocaine regularly	Yes	0.9%	0.7%	0.4%	0.2%	0.2%
	No	97.0%	97.2%	98.1%	98.1%	98.9%
	I don't know	2.2%	2.2%	1.6%	1.7%	1.0%
Take LSD regularly	Yes	1.4%	1.2%	1.2%	2.5%	0.6%
	No	95.9%	96.0%	96.3%	95.6%	98.1%
	I don't know	2.7%	2.8%	2.4%	1.9%	1.3%
Answer Options	Responses	2016	2018	2020	2022	2025
Take amphetamines regularly	Yes	1.8%	1.2%	1.1%	0.6%	0.5%
	No	95.9%	96.0%	96.3%	96.6%	97.1%
	I don't know	2.7%	2.8%	2.6%	2.8%	2.4%
Have five or more alcoholic drinks in one sitting	Yes	N/A	N/A	N/A	N/A	7.0%
	No	N/A	N/A	N/A	N/A	89.0%
	I don't know	N/A	N/A	N/A	N/A	4.0%
Take steroids for body building or improved athletic performance	Yes	N/A	N/A	N/A	N/A	1.3%
	No	N/A	N/A	N/A	N/A	94.4%
	I don't know	N/A	N/A	N/A	N/A	4.3%
Take prescription drugs as a recreational drug	Yes	N/A	N/A	N/A	N/A	0.6%
	No	N/A	N/A	N/A	N/A	96.7%
	I don't know	N/A	N/A	N/A	N/A	2.7%

16. Do you agree with the following statement?

“Regarding unused or left-over prescription drugs, people should safely dispose of their leftover or unused prescription drugs OR store them in a locked, secure cabinet or medicine box.”

Likert Scale Options	2025
	Percent
Strongly disagree	8.7%

Disagree	1.9%
Somewhat disagree	1.4%
Neither agree nor disagree	4.0%
Somewhat agree	6.4%
Agree	24.8%
Strongly agree	52.7%

17. How likely are you to share an opioid that you had a prescription for (e.g., morphine, codeine, fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine [Suboxone], etc.)?

Response Options	2025
	Percent
Definitely would not share	81.1%
Probably would not share	15.2%
Probably would share	2.6%
Definitely would share	1.1%

18. If you needed medical intervention for pain (injury, surgery, chronic pain, etc.) in the past year, did you discuss alternative pain management options with your provider?

Response Options	2025
	Percent
I did not need medical intervention for pain management in the past year	62.4%
Yes	22.7%
No	14.9%

19. Do you agree with the following statement?

“Within my campus community, most people think it is okay to take a prescription opioid (morphine, codeine, fentanyl, oxycodone, hydrocodone, methadone, buprenorphine, etc.) in any way a doctor did not direct it to be used.”

Likert Scale Options	2025
	Percent
Strongly disagree	38.4%
Disagree	19.2%
Somewhat disagree	4.6%

Neither agree nor disagree	34.4%
Somewhat agree	2.2%
Agree	0.8%
Strongly agree	0.3%

20. Do you agree with the following statement?

“Within my campus community, most people think it is okay to take a prescription stimulant (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.) in any way a doctor did not direct it to be used.”

Likert Scale Options	2025
	Percent
Strongly disagree	37.2%
Disagree	18.8%
Somewhat disagree	4.9%
Neither agree nor disagree	33.7%
Somewhat agree	3.1%
Agree	1.5%
Strongly agree	0.8%

21. Other comments/questions/concerns/program requests may be indicated below:

I have no concerns. I would like to state that several of the questions were repeated two or three times.
Can I get the Walmart card I need that cash man
I am not connected with my peers (I'm 35) so I don't know what they think, honestly. When I was 18-22, I think many of my friends would think these things were fine, but at my age now, I feel like a lot of younger people are smarter about drug and alcohol use.
No drug or alcohol use
no comment
Is drug and alcohol should have an age requirement when to drink? Like 18 or 21 years old?
Some of these questions are not clear in what its asking. So the back 50 i was less clear on what exactly the statement response was supposed to be.
I generally don't participate in drug related activities. I used to drink a lot some 4 years ago but in the last 4 years, I drink a glass of wine sometimes every 3 months or so. I have never done any form of drugs and have never had any family members with drug issues. I know of family friends who drink heavily and irresponsibly but they don't see it as problematic. I generally only make friends with like-minded people so I have never been coerced into doping drugs or smoking since my friends do not do them either.
I never take any type of drugs
I have not seen any drug or alcohol activity
none at the moment
I have not discussed this topic with anyone so I can not say

<p>I think that schizophrenia is misdiagnosed among millions, because paranormal research has not been followed up on since the SKOLE reports / investigations.</p> <p>Being injected with anesthesia for births also cause a relapse effect or cravings for other substances due to that drugs that are inside of them.</p> <p>Microdosing mushrooms is safe; LSD overall can be microdosed but a non-natural chemical made by the CIA for mind wipes and control shouldn't be implemented what so ever.</p>
<p>Most people think it is acceptable to be allowed to smoke marijuana or vapes/e cigs even when they are below the age of ability.</p>
<p>I don't take any prescriptions or illegal drugs and neither do the people I associate myself with!</p>
<p>I take 100% virtual classes and rarely interact on campus. Interactions with my peers are purely academic discussions required for coursework.</p>
<p>I had to use the desktop version because the phone version was confusing on what the questions were.</p>
<p>No questions</p>
<p>I don't know what to do that wouldn't absolutely destroy my life by trying to get help.</p>
<p>Not sure what this survey is actually for but I could use the gift card for food :)</p>
<p>Never been offered drugs, and the driving was an extenuating circumstance that I did not expect due to an unforeseen physiological reaction where one usage had multiple chronologically spaced out intervals of effects over multiple days.</p>
<p>I have never used any substances other than marijuana and nictotine back in highschool, I have left those habits behind ever since.</p>
<p>Please be considerate of antidepressants or other mental health based medications that may be necessary for someone's productivity and livelihood.</p>
<p>In india you don't even need prescription to get a drugs it's like money talks and they sell their models and civic sense which i find it crazy for upcoming generation. I like how America is kinda of strict with drugs use and tries it's best to keep it in control.</p>
<p>A class mate that sits next to me is on fentynol and heroine. Often found knodding off in the middle of class and classmate has verbalized the addiction problem with both drugs.</p>
<p>more education on drugs</p>
<p>It might be because I'm on mobile but the format for this is wonky. A lot of the questions were cut off, so I had a lot of guessing to do. Also if a website addresses me by name I'd NEVERRR tell the truth. How can someone trust this is anonymous if a website uses your in real life name? How can someone trust this when there are strict drug policies at OCCC which can result in you getting kicked out or worse ending up in jail. I guarantee a lot of the responses you've gotten people either lied or clicked prefer not to answer. Professors and staff are mandatory reporters as well. Too much distrust and too much to lose.</p>
<p>I put neither agree nor disagree to question 19 and 20 as I have not been exposed to any prescription opioids or stimulants on campus at all. So, I cannot state whether people think its ok or not okay. Maybe it's happening and I'm just oblivious, I keep to myself for the most part. But I also don't come across students that I feel have any drug usage problems.</p>
<p>I believe following a doctor's prescription guidance should be adhered to religiously and not abused.</p>
<p>Drugs are indeed too rampant and easily accessible in the United States.</p>
<p>My answers to 15 pertain to medical usage and medical microdosing. I am a double amputee as well, so I have intimate knowledge of chronic pain and discomfort.</p>
<p>Since I am not an addict, after a major surgery, I did not mention alternative medication because it was unnecessary. I was given a Percocet, did not enjoy the feeling, and the rest are at the top of my closet almost a year later.</p>
<p>On campus interactions limited</p>
<p>I am not too involved with my campus community to the last two answers are not applicable to me.</p>

I think that spreading awareness for drinking and drug abuse and addiction is extremely important and something that should be taken very seriously especially on a college campus
Prescription pill use was between ages 15 and 18; drinking and dipping tobacco was early in the military; and marijuana was microdosed once I left the military. I am an online student, so I am very unsure of how this is around campus.
I feel this is a great opportunity to help those who struggle with addiction or at risk for addiction. I wish I had something like this 22yrs ago when I was exposed to things but thankfully a good friend of my family reappeared in our lives and unknowingly at that moment was my life saver.
I am an online student so do not visit campus very often.
I don't take drugs but if I did I would want to see what crack feels like
I think that medical marijuana is a great thing to use for physically distressed patients. I do not believe it should be used for mental health issues alone. I had a kidney stone that got stuck and I was given morphine at the hospital for 2 days.
I have only taken one on-course class. The people in that class would agree that taking prescription medication in a way not intended is not okay.
I hardly hear of anyone at school wanting to do drugs
I am an online student; I do not communicate with peers outside of class assignments.
I am not on campus so I don't know the habit or attitudes of the students.
I am an online student that has had little to no involvement in campus life or activities, so I don't have as much input for this survey.
I have not used any substances since October 13 2024. Save coffee and nicotine.
I am an online student, so I do not talk to anyone on campus.
I have encountered other weed smokers or drinkers that admitted to me that they do that regularly but we all agreed we don't allow ourselves to forget college is a privilege and we don't mix the two.
The people I met at college weren't users but they were pretty young. Perhaps older students may have used alcohol or drugs but I'm not sure.

IV. DISCIPLINARY SANCTIONS

OCCC abides by all drug and alcohol-related policies, regulations, and laws, and imposes consistent disciplinary sanctions under local, State, or Federal law.

In reviewing the offense listed below, there were no irregularities or inconsistencies found in the disciplinary action taken from past offenses. A complaint and grievance process is available for students and employees who feel any disciplinary process is unfair or unsubstantiated. The data below represents the number of drug and/or alcohol offenses committed by students and employees in 2025 and 2026.

Students

Year	Number of Offenses	Outcomes/Action Taken
2025	1	Unenrolled – Hold placed on account
2026	0	N/A

Employees

Year	Number of Offenses	Outcomes/Action Taken
2025	0	N/A
2026	0	N/A

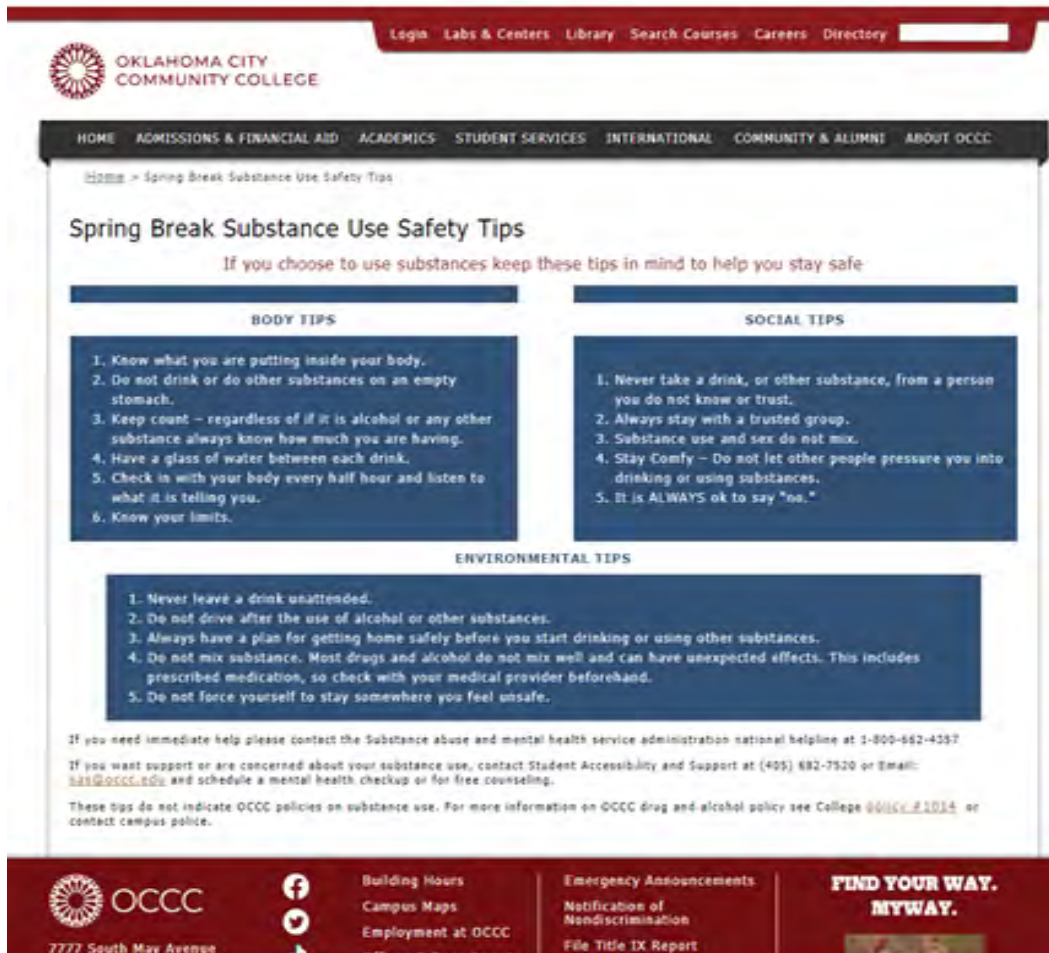
V. PROGRAMS, SERVICES, AND INITIATIVES

The Campus Police Department, including Higher Education Prevention Services, and community agencies created a partnership to provide co-curricular, educational programming to the OCCC community. These departments play an important role in educating students, faculty, and staff about alcohol and other drugs through awareness programs, displays of literature, health fairs, and other campus and area events.

All Oklahoma City Community College campuses received drug and alcohol prevention programming. Alcohol, marijuana, and smoking are the top three substances students reported using in the OCCC 2022 campus-wide student survey. OCCC counseling staff focus on these substances as well as opioid and stimulant use due to their statewide impact.

Below is a summary of events hosted during the review period (2025-2026) along with continually ongoing programs.

Passive Programming: Spring Break Substance Use Safety Tips – Web banner a week before spring break with a link to this page.



Annual Be Smart, Safe and Sober 2025 and 2026 – OCCC Main Campus –

Number of Participants: Unknown

This one-day interactive event consisted of five activities. The main purpose of this event was alcohol awareness. These included:

- “Drunk” video games – Participants played video games while wearing beer goggles. These goggles distort the participant’s perception to allow participants to experience the effect of alcohol on driving and other activities.
- "The Mule" – Outdoor-driving simulator – Students used beer goggles to drive a 4-wheeler, to help them understand the effects of alcohol on their driving.
- Sobriety Test – OCCC Campus Police taught students how drinking affects a person’s abilities by having them run through a series of sobriety tests while wearing beer goggles.
- How much is a drink? – Using shot glasses and party cups, participants learned how much alcohol they are consuming in a party cup.
- Check your Drinking – Participants filled out an online screening that helped them identify their alcohol risk. The participants had the option of emailing themselves a report.

To encourage participation, the students were able to enter to win a door prize if they completed 2 out of the 5 activities. Because of free donations from Braum’s, Sonic, Sam’s, and Walmart, we were able to provide food and freebies for the event.



Get ready for **Sober & Strong** — an event that highlights the benefits of a healthy, substance-free lifestyle.

Join us on **Today, March 11 from 10 a.m. - 2 p.m. on the Library Plaza!**

This event is dedicated to educating and engaging our campus about living sober lives. During the day, numerous booths and activities will be available!

Come for food and the chance to win amazing prizes that include AirPods Max, iPad and Apple Pen, and gift cards! See you there!



Get ready for **Sober & Strong** — an event that highlights the benefits of a healthy, substance-free lifestyle. **Come for food and the chance to win amazing prizes that include AirPods Max, iPad and Apple Pen, and gift cards! See you there!**

If you would like to volunteer at our event, click the button below!

Sign Up to Volunteer!

Tips for Teens – OCCC Main Campus, Capitol Hill Center, FACE Center

TIPS for TEENS

OPIOIDS

THE TRUTH ABOUT OPIOIDS

SLANG: O.C./OXY/PERCS/VIKE/M/MONKEY/
WHITE STUFF/LEAN/SCHOOLBOY/SIZZURP/
PURPLE DRANK/LOADS

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Opioid Prevention – OCCC Main Campus, Capitol Hill Center, FACE Center

SUBSTANCE DEFINITIONS

Substance Use The use of alcohol or drugs. This includes any kind of alcohol, marijuana, heroin, prescription opiates, or cocaine.

Substance Misuse The difference between healthy substance use (such as drinking in moderation) and unhealthy use (such as drinking in excess or "binge" drinking). "Misuse" can refer to various things such as using prescription drugs any way other than prescribed, using someone else's prescription, or repeated use of a substance to alleviate stress.

Substance Abuse Having severe Substance Use Disorder, or being unable to stop using a substance or substances no matter how bad the consequences. The key difference between misusing drugs and abusing drugs is the intent of use. Someone may misuse drugs to achieve a goal – staying awake longer, numbing pain, etc., but someone who abuses drugs is looking to induce certain feelings and fulfill a craving for substance.

HIGH VS. OVERDOSE

SIGNS OF BEING HIGH

- Pupils will contract and appear small
- Muscles are slack and droopy
- They might be out of it, but they will respond to outside stimulus like loud noise or a light shake
- Speech may be slurred
- Scratch a lot due to itchy skin

SIGNS OF AN OVERDOSE:

- Awake, but unable to talk
- Body is very limp
- Breathing is very slow and shallow, erratic, or has stopped
- Heartbeat is slow, erratic, or not there at all
- Vomiting
- Loss of consciousness
- Unresponsive to outside stimulus
- For lighter skin, the skin tone turns bluish purple.
- For darker skin, the skin tone turns grayish or ashen

IN THE CASE OF AN OVERDOSE



Call Campus Police at 405-682-7872 and give Naloxone. If no reaction in 3 minutes, give second Naloxone dose.



Do rescue breathing or chest compressions. Follow dispatcher instructions.



After Naloxone, stay with the person until help arrives. Naloxone does wear off.

OVERDOSE RECOGNITION

- If a person appears too high or on the verge of an overdose but is still conscious, walk them around, keep them awake, and monitor their breathing.
- If someone is high and making unfamiliar sounds while "sleeping", try to wake them up. Many loved ones of users have thought a person was snoring when they are overdosing.
- It is rare for someone to die immediately from an overdose. When people survive an overdose, it's because someone was there to respond. It's important to act right away.
- Always carry Naloxone to reverse an overdose if you or someone you know uses substances such as opioids.

Ripple Effect: Substance Abuse and Misuse – OCCC Main Campus

**RIPPLE EFFECT:
SUBSTANCE MISUSE**

STIMULANTS CAN NEGATIVELY IMPACT YOUR:

- HEART**
RHYTHM ISSUES, RISK OF HEART FAILURE
- RESPIRATORY SYSTEM**
SLOW/IRREGULAR BREATHING
- KIDNEYS**
KIDNEY FAILURE
- PANCREAS**
INCREASED CHANCE OF DIABETES

OPIOIDS CAN NEGATIVELY IMPACT YOUR:

- HEART**
RHYTHM ISSUES, RISK OF HEART FAILURE
- RESPIRATORY SYSTEM**
SLOW/IRREGULAR BREATHING
- GASTROINTESTINAL TRACT**
CHRONIC CONSTIPATION, STOMACH CRAMPS, NAUSEA AND DEPRESSION

VI. PROGRAM GOALS, EVALUATION, AND RECOMMENDATIONS

The committee created the following minimum goals for the Drug and Alcohol Prevention Program:

- Maintain policy, prevention strategies, and resources. Ensure that other drug and alcohol-related facts are readily available.
- Notify all employees and students that OCCC is a drug and alcohol-free campus and where to find the policy and other program-related information on the website.
- Utilize survey information gathered from the OCCC Core Survey for Alcohol and Drug Assessment to determine what substances students abuse the most and structure our programs accordingly.
- Provide programming for all OCCC Campuses.
- Create specific program reviews that include an analysis of the data collected from surveys from each of the programs provided.

GOALS	PROGRAM ACTIVITIES	EVALUATION	RECOMMENDATIONS
Maintain policy, prevention strategies, and resources. Ensure that other drug and alcohol-related facts are readily available.	OCCC Drug & Alcohol Abuse Prevention Program is found in the OCCC policies and the student handbook. Resources can be found on the Student Support Services webpage. New employees are notified about OCCC EAP.	100% Completed	Create a website or page on the OCCC website dedicated to the College's Alcohol and Drug policies, prevention strategies, upcoming programs, and resources.
Notify all employees and students that OCCC is a drug and alcohol-free campus, and where to find policy and other program-related information on the website.	The Annual Notification was sent at the beginning of each semester after the final drop date. Additionally, the Annual Notification was sent after the last drop date for each 8-week term.	100% Completed	Maintain a consistent message for each term. Ensure accountability with tracking each time the notification is sent out.
Utilize survey information gathered from the OCCC Core Survey for Alcohol and Drug Assessment to determine what substances students abuse the most and structure our programs accordingly.	Core Survey for Alcohol and Drug Assessment was distributed in the Fall of 2016, 2018, and 2020. Individual surveys are gathered from participants who attend a drug and alcohol prevention event, presentation, or program	100% Completed	Continue the Core Survey every two (2) years. Continue gathering surveys for each program to determine specific effectiveness.
Provide programming for all OCCC Campuses.	Programs were held at the Main Campus, the Family, and Community Education Center.	100% Completed	Continue to provide programs at all campuses.

Oklahoma City Community College (OCCC) 2025 - 2026 Drug and Alcohol Prevention Programming

Create specific program reviews that include an analysis of the data collected from surveys from each of the programs provided.	A survey was provided at each specific program which showed positive reviews for all programs.	100% Completed	Expansion of data relevant to OCCC and the community such as, but not limited to; stimulant and opioid use. Look at ways to increase student participation and responses.
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VII. PROGRAM STRENGTHS AND AREAS FOR IMPROVEMENT

The following are noted strengths and areas for improvement of the alcohol and drug program at OCCC.

Strengths

- Drug and Alcohol Prevention information is included in all New Employee Orientations.
- Employee Assistance Program (EAP) is available for employees and is widely known.
- Prevention programs focusing on drugs and alcohol are regularly planned and available to students, faculty, and staff throughout the year.
- The Survey for Alcohol and Drug Assessment was effective in determining specific topics/issues to target for programming.
- Effectiveness of the individual programs based on participant feedback.
In the last two years, only one arrest Drug arrest, and related referral to resources has occurred on campus involving students and no employees.

Areas for Improvement

- Engagement for the student population continuing to utilize virtual learning
- Continue to improve the alcohol and drug prevention programming and resources offered to all students and employees.
- Increase overall participation and completion rate of the survey
- Provide a resource link within the survey for those expressing a need (i.e. suicidal ideation and/or a substance use problem)

IV. Conclusion

The Oklahoma City Community College uses a comprehensive approach to address alcohol and other drug use on campus, focusing on policy, education, collaboration, enforcement, prevention, and intervention. All components work together to ensure that students and employees are provided information and resources that promote a safe and healthy environment that attempts to mitigate risk as it pertains to alcohol and other drug use.

The College will continue to develop, assess, and pursue the best practices for our campus community to create a safe and healthy learning and working environment for our students and employees.

Goals for Next Year:

- Consistently distribute the Annual Notification to all students and employees each semester.
- Continue to provide meaningful specific programs to all students and employees.
- Increase student and employee attendance and participation in programs offered by the college.