

# **The College Risk Behaviors Study Annual Report**

## **2022**

Prepared for Student Wellness and Health Promotion, University of Delaware



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## Introduction and Demographic Overview

### Introduction

The Delaware College Risk Behaviors Study (CRBS) has been administered at the University of Delaware for many years, beginning in 1993 as part of the Harvard School of Public Health College Alcohol Study. It continued from 1997 to 2004 as part of the University of Delaware's participation in the Robert Wood Johnson Foundation "A Matter of Degree" Program. From 2007 to 2018, the survey was funded through the federal Strategic Prevention Framework grants awarded to the Division of Substance Abuse and Mental Health, Delaware Department of Health and Social Services by the US Substance Abuse and Mental Health Services Administration. As of 2019, the survey is funded solely by the UD Office of Student Wellness and Health Promotion and is administered by researchers employed at the Center for Drug and Health Studies.

Over the years, the CRBS has evolved and expanded from focusing primarily on alcohol to including a wide range of topics such as: other substance use; mental health; interpersonal violence; sexual assault; sexual health knowledge and practices; more inclusive demographic indicators such as LGBTQ and disability status. The 2022 survey was administered online during the spring semester to a random sample of full-time, undergraduate students at the University of Delaware who had at least one credit hour of on-campus learning. Each was asked via email to follow an enclosed link and complete the online survey. These students were offered a \$5 Amazon gift card as compensation for their time. By the end of the data collection period in 2022, 3,000 students were contacted and 640 completed the survey, resulting in an approximate 21% response rate.

This report will provide an overview of some of the key findings from the 2022 CRBS and is structured similarly to previous reports. Following the demographic characteristics in this section is a chapter on substance use among UD students, with special focus given to vaping. Next is a section devoted to interpersonal violence and sexual assault among students. The final chapter highlights behaviors related to student health and safety, including suicide, health and behavior concerns, contraceptive use, and student responses to COVID-19 concerns. The pandemic still has an ongoing impact on the experiences of UD students and that is reflected in data throughout this report.

## Demographic Characteristics of the Sample

The sample is somewhat similar to the overall student body in distribution of gender and race/ethnicity<sup>2</sup>, with higher percentages of female students in the sample than in the total UD student population<sup>3</sup>. Due to the large difference in gender, the data reported in subsequent chapters of this report were all weighted to adjust the sample gender ratio to match that of the population. Unless otherwise noted, all reported findings are statistically significant at  $p < .05$ .

More than nearly three-quarters of the survey respondents were female and roughly two-thirds were white. More than 3% of respondents were international students. Because of the smaller raw number of students who participated in this year's survey, it was not possible to reliably report some statistics by race and ethnicity as in years prior; as such, in this year's report there are no prevalence estimates for substance use by race.

In 2022, while response rates were still lower than pre-pandemic years, student response by age, year in school, and residence type were distributed in a way that was more consistent with pre-pandemic patterns. This may be partially explained by widespread declines in enrollment and on-campus living during the first couple years of the pandemic when virtual learning was still widespread (Nadworny, 2022). In spring 2021, 5% of CRBS respondents were 18 years old; by spring 2022 that rate had more than doubled to 12.2%. Furthermore, in 2022 43.8% of respondents reported living on-campus in student housing, a sharp increase from 2021 when a little more than a quarter of students surveyed reported living on campus.

	Sample	UD
<b>Gender<sup>1</sup></b>		
Male	27.2%	41.0%
Female	72.2%	59.0%
<b>Race/Ethnicity</b>		
White	67.0%	68.9%
Black	7.3%	5.7%
Hispanic	8.4%	9.2%
Asian	10.7%	5.4%
Another race	6.4%	6.2%
<b>International Student</b>		
International	3.3%	4.6%

Figure 1 Gender, race/ethnicity, and international status

<sup>1</sup> The CRBS definition of women reported here includes trans and cisgender women and the category of men includes trans and cisgender men. Other genders include non-binary, gender nonconforming and self-describe categories, which were not captured in UD student demographics reported online. More detail on trans, gender-nonconforming, and other gender and sexual minority students in this report can be found on pages 7 and 8.

<sup>2</sup> International students are considered a distinct racial category in reported University statistics, but associated with their self-reported race in this study, which accounts for the difference seen here in race/ethnicity proportions.

<sup>3</sup> Information on the gender, race, and ethnicity of the 2021-2022 UD undergraduate student body is reported by the University of Delaware Office of Institutional Research and Effectiveness <https://ire.udel.edu/ir/facts-figures/>

Age		Class		Residence	
<b>18</b>	12.2%	<b>First Year</b>	24.9%	<b>On-campus</b>	43.8%
<b>19</b>	21.7%	<b>Second Year</b>	22.1%	<b>Off-campus (with family)</b>	12.1%
<b>20</b>	24.2%	<b>Third Year</b>	28.2%	<b>Off-campus (alone)</b>	1.7%
<b>21</b>	25.9%	<b>Fourth Year</b>	22.7%	<b>Off-campus (with roommates)</b>	42.4%
<b>22+</b>	16.1%	<b>Fifth or More</b>	2.0%		

Figure 2: Age, class, and place of residence of survey respondents

Many students surveyed were also affiliated with fraternities and sororities, athletic teams (both intercollegiate and intramural), and registered student organizations on campus. Students represented here may be affiliated with multiple groups or organizations.

Affiliation with Campus Organizations	
Sorority or Fraternity	25.6%
Intercollegiate Athletic Team	3.7%
Club sports or intramural sports	18.1%
Registered student organization	46.3%

Figure 3: Affiliation with campus organizations

As in 2021, in this year’s report we also pay closer attention to two demographic groups that are often rendered invisible in the data collection and analysis processes: LGBTQ<sup>4</sup> students and students with disabilities. With respect to the former demographic group, students are asked two questions, one regarding their sexual orientation and the other about their gender identity. While the majority of students reported that they are heterosexual, approximately 20.9% of respondents described their sexual orientation as lesbian, gay, bisexual, pansexual, asexual, or preferred to self-describe. The most commonly reported sexual orientation following heterosexual was bisexual (14.1%), with 3.2% of respondents identifying as gay or lesbian, less than 2% describing as asexual, and approximately 2.4% responding that they preferred to self-describe. Among the write-in responses, students described themselves as bi-curious, biromantic asexual, bisexual and demisexual, queer, or as “no label”. While 91% of students identified as cisgender (meaning that their gender identity aligns with their assigned sex at birth), roughly 9% of students responded that they were transgender men or women, non-binary or gender non-conforming or grey gender, or that they preferred not to answer.

<sup>4</sup> The acronym LGBTQ refers to lesbian, gay, bisexual, transgender, or queer individuals. The Q can also represent individuals who are questioning or unsure of their sexual orientation and/or gender identity, as well as those who do not feel represented by available labels. There are numerous sexual orientations and genders beyond what might be asked in a survey question; for this reason we also allow a “self-describe” option in the College Risk Behavior Survey. It is important to remember that the LGBTQ identifier may not be inclusive or exhaustive of all identities, and that variations of this acronym may be used by other data sources. The [Trevor Support Center](#) and [GLSEN](#) offer additional terminology resources on this topic.

In many instances, the number of students who identify as either gay, lesbian, bisexual, transgender, or questioning provide discrete subsets of data that are too small to conduct statistically reliable and ethical data analysis. As such, in this report this was aggregated into a larger LGBTQ category and compared against responses of their cisgender and heterosexual peers. The students in this LGBTQ group represent a range of sexual and gender diversity, and their identities are often overlapping; many of the transgender students also identify themselves as gay, lesbian, bisexual, or unsure of their sexual orientation as well. Overall, approximately more than a quarter of students identified themselves as LGBTQ as defined by these questions.

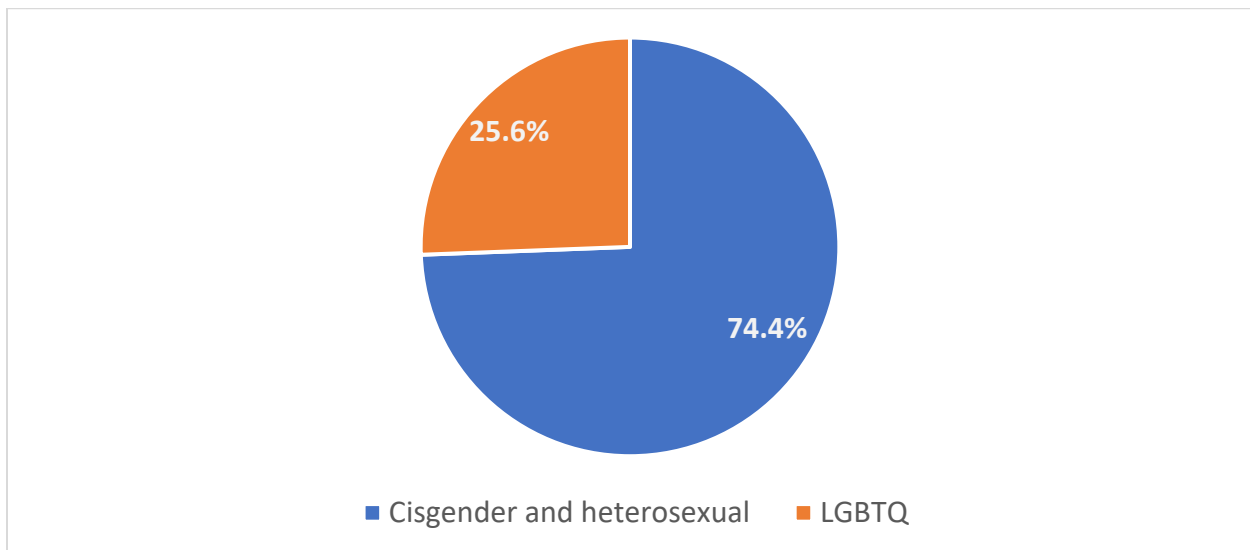


Figure 4: LGBTQ students in survey sample

We also considered students with disabilities as a demographic category. Students were asked if they: were deaf or had serious difficulty hearing (<1%); had serious difficulty seeing, even with glasses (<2%); had serious difficulty walking or climbing stairs (2%); had difficulty dressing or bathing (<1%); or if because of a physical, mental or emotional problem or condition, they had difficulty running errands alone (4.7%), or concentrating, remembering, or making decisions (17%)<sup>5</sup>. These six items represent the data collection standards for disability status as outlined by the [U.S. Department of Health and Human Services](#). If students responded yes to any of these questions, they were considered to have a disability. In the 2021 survey, 21.3% of respondents were students identified themselves with one or more disability.

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<sup>5</sup> Due to very low raw numbers of students reporting some of the above individual disabilities, we provide approximations of prevalence rather than the precise estimate. In this statement, >1% indicates just over 1% of surveyed students and <1% indicates just under 1%, and so on.



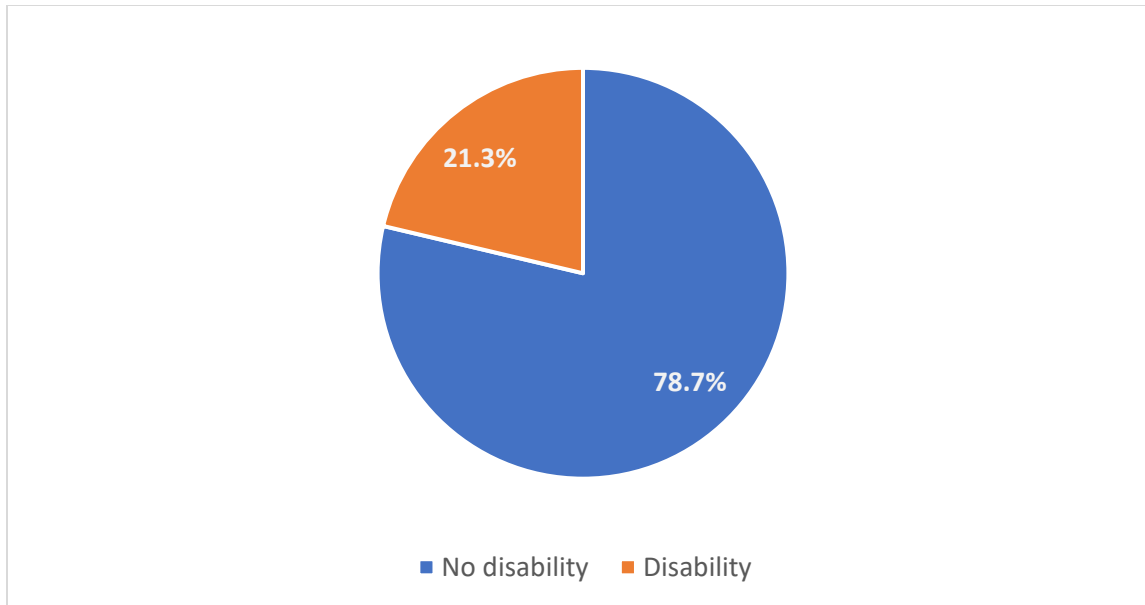


Figure 5: Disability prevalence

It is important to remember when referring to demographic groups, such as LGBTQ students or students with disabilities, that these categories are aggregates of many individual identities. Students may have vastly different individual experiences depending on their respective identities. Data aggregation is not meant to imply that membership in the LGBTQ or disability community is a monolithic experience; rather, in many cases, data aggregation is necessary to be able to make statistical claims and comparisons in cases where the individual categories yield relatively few responses.

Overall, the sample for the 2022 College Risk Behavior Survey is predominantly white and female. The biggest change in the 2022 sample of students compared to last year's data is the distribution of age and residence; there is a much higher percentage of 18- and 19-year-old students and students living on campus who responded to this year's survey compared to the 2021 survey respondents, representing close to a return to pre-pandemic levels of on-campus living and younger student enrollment. There is also a substantial proportion of LGBTQ students and students with disabilities within the sample. While the gender of respondents is more female than the overall student body, the remaining statistics are likely representative of the UD undergraduate student body. Because of this gender disparity in survey participation, the analysis in the remainder of this report is weighted by gender to make responses more representative of the study body as a whole.

## Substance Use Prevalence and Trends

### Overall Trends in Select Substance Use

As the trends below indicate<sup>6</sup>, past month cigarette use and binge drinking have both steadily declined over time for the most part, though in 2022 binge drinking increased to meet pre-pandemic levels. While marijuana use and vaping began to decrease after peaking in 2019, rates of both increased slightly again in 2022. Notably, since 2011 marijuana use has exceeded cigarette use among students. Vaping<sup>7</sup> has increased substantially among students since we began tracking it on this survey in 2013 and in 2017 rates of vaping among students surpassed rates of cigarette use. The numbers on past month prescription misuse remain too small to accurately trend, but further in this report we present data on lifetime prescription misuse among students. At this point, it is uncertain whether or how much the COVID-19 pandemic and subsequent shift to remote learning influenced any of the changes in substance use trends reported here.

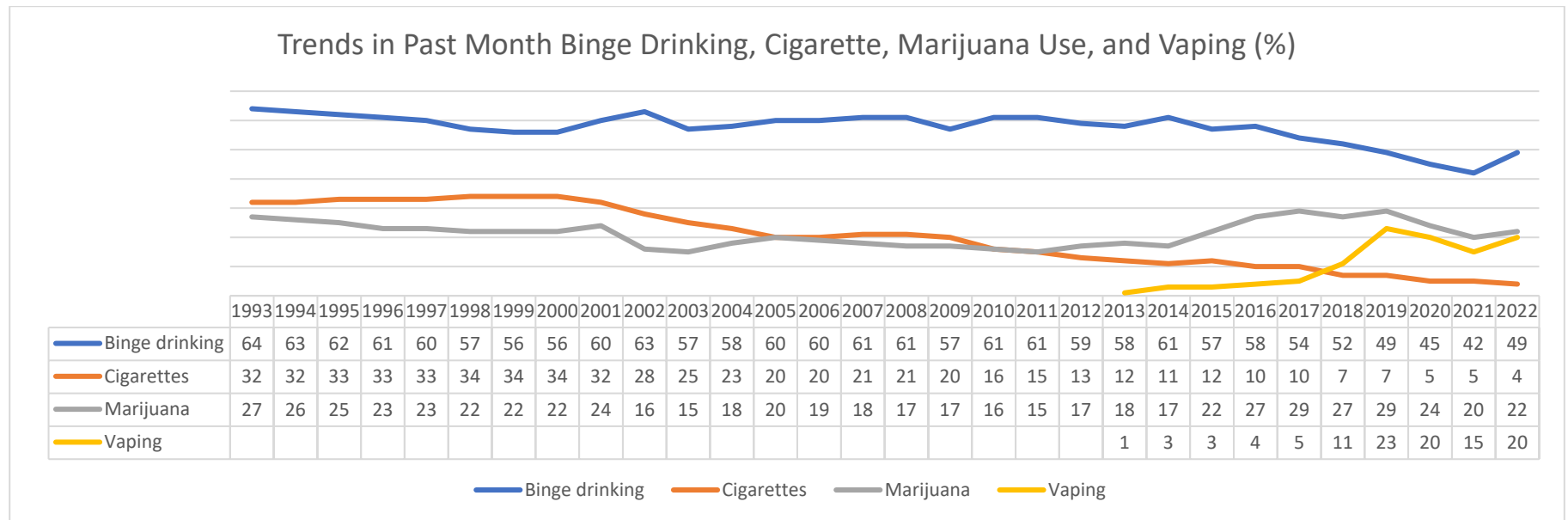


Figure 6: Trends in past month binge drinking, cigarette, marijuana use, and vaping, 1993 to present.<sup>8</sup>

<sup>6</sup> Data from 1993, 1997-2003, and 2005 are from the College Alcohol Study. Statistics for 1994-1996, 2004, and 2006-2007 are imputed by averaging adjacent years. Data beginning in 2008 are from the College Risk Behaviors Study. For these trend lines, the data from 2011 to the present were adjusted to include weights for gender.

<sup>7</sup> Students were asked how often they use e-cigarettes from 2013-2019. In 2020, this question was expanded to refer to specific brands/terms that fall under the broader category of vaping, and to include vaping of substances other than tobacco or nicotine.

## Alcohol Consumption Prevalence Rates

In general, the substance of choice among students was alcohol, with the majority of students (60%) reporting using alcohol in the past month, either alone or with other drugs. A little more than a third of surveyed students reported no substance use in the past month.

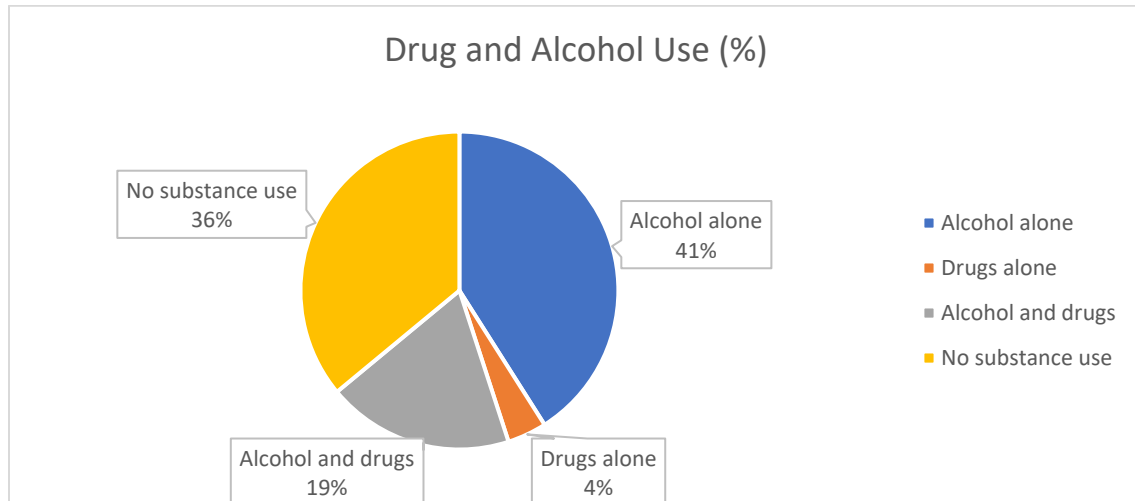


Figure 7: Past month drug and alcohol use among students

Among the surveyed students, 23% reported using drugs in the past month (19% used drugs and alcohol and 4% used drugs but no alcohol).<sup>9</sup> Among these students who reported drug use, the overwhelming majority (85%) reported only using marijuana and no other drugs. Close to 15% of students who used drugs reported using anything other than marijuana.<sup>10,11</sup>

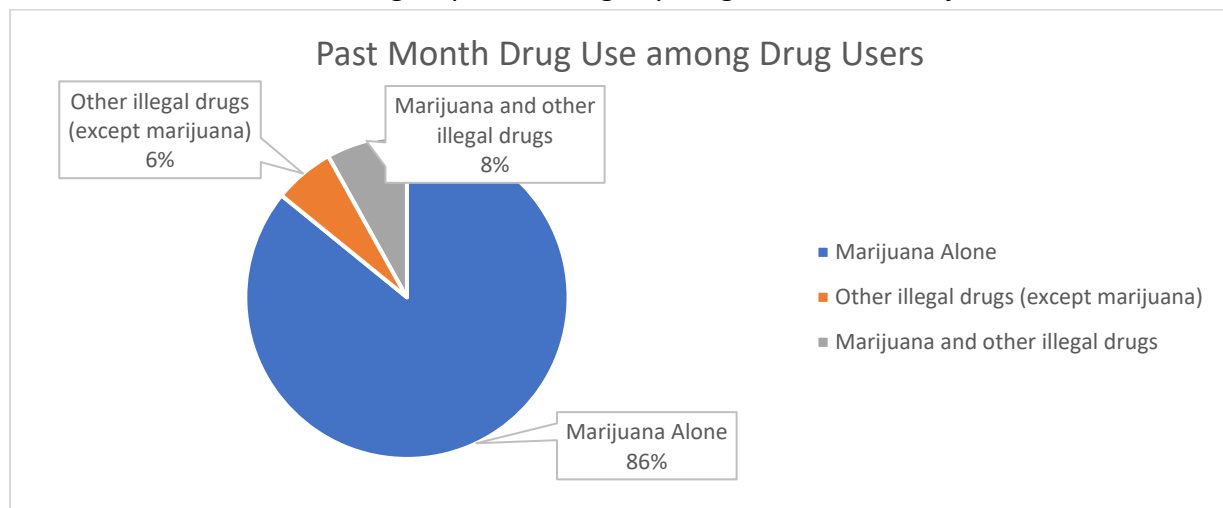


Figure 8: Type of drug use among students reporting past month drug use

<sup>9</sup> Drugs other than alcohol include marijuana, cocaine, hallucinogens, opiates and other narcotics, and any prescription drugs use in a way other than prescribed.

<sup>10</sup> Other illegal drugs include cocaine, hallucinogens, opiates and other narcotics, and any prescription drugs used in a way other than prescribed.

<sup>11</sup> Due to rounding differences, the figures in the pie chart labels may differ slightly from values described in text.

Almost two-thirds of female students reported drinking in the past month, a higher prevalence than drinking among male students.<sup>12</sup> Both binge drinking and any alcohol use were more prevalent among female students compared to male students. Slightly less than half of students reported binge drinking<sup>13</sup> in the past month overall.

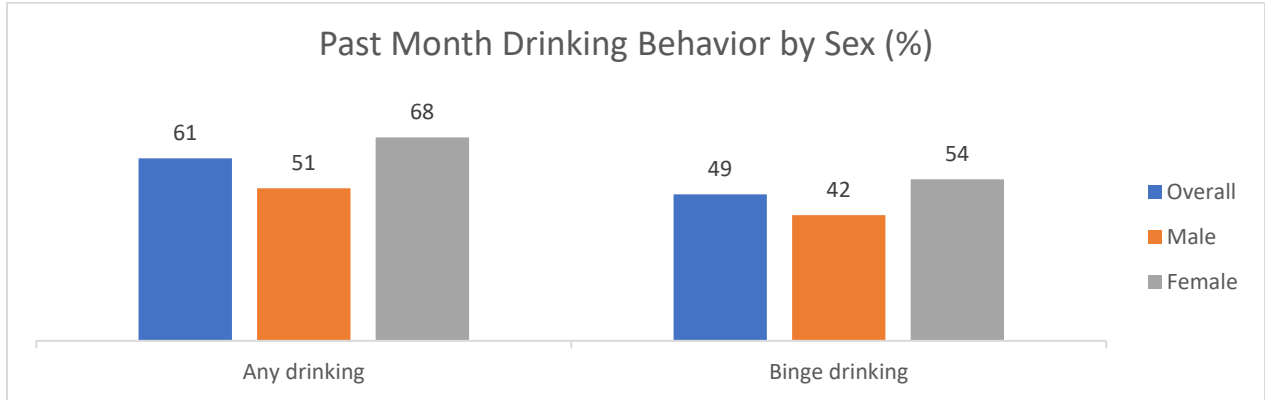


Figure 9: Past month drinking behaviors by sex<sup>14</sup>, in percentages

When looking at drinking patterns by age, 21-year-old students reported the highest frequency of past month binge drinking and any drinking in the past month.

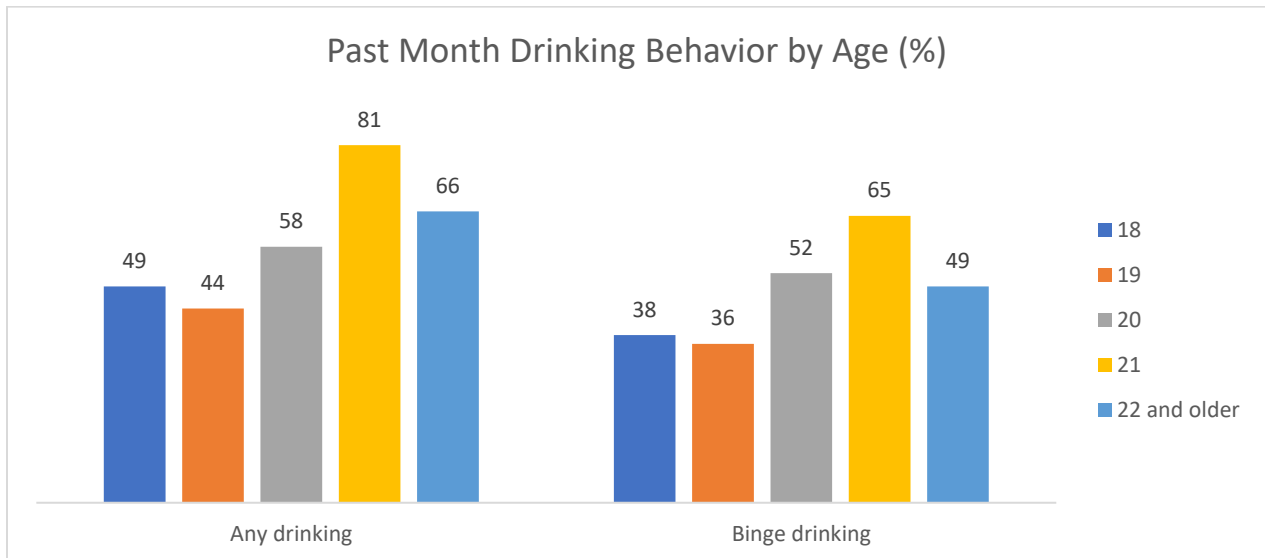


Figure 10: Past month drinking behavior by age

<sup>12</sup> The correlation between binge drinking and sex or past month alcohol use and sex was not statistically significant at the  $p < .05$  level.

<sup>13</sup> Binge drinking is defined in the CRBS as having five or more alcoholic drinks in a single sitting for men and four or more alcoholic drinks in a single sitting for women.

## Drug Use Prevalence Rates

The CRBS also collects information from students regarding the use of substance other than alcohol, such as marijuana, prescription drugs, and other illicit substances. After alcohol, marijuana is the most commonly used substance among students at UD, with more than one-fifth of surveyed students reporting that they used marijuana in the past month. Marijuana use is more common among male students than female students, with 26% of male students reporting past month marijuana use compared to only 19% of female students.

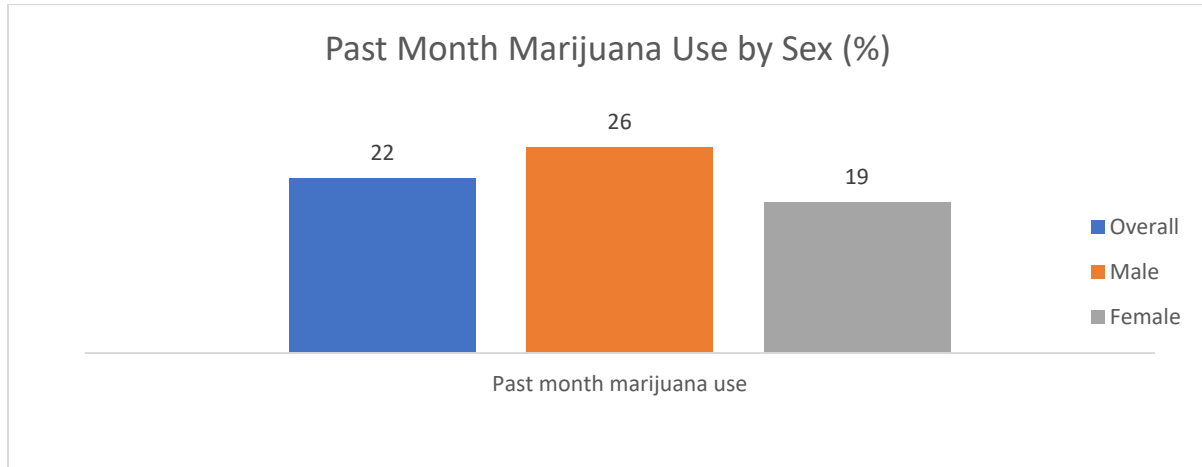


Figure 11: Past month marijuana use by sex

Among students who used marijuana in the past month, the most common route of administration was smoking the drug. More than half of the students who used marijuana in the past month also reported ingesting cannabis edibles, and approximately one-third reported using dabs, a highly-concentrated form of cannabis.

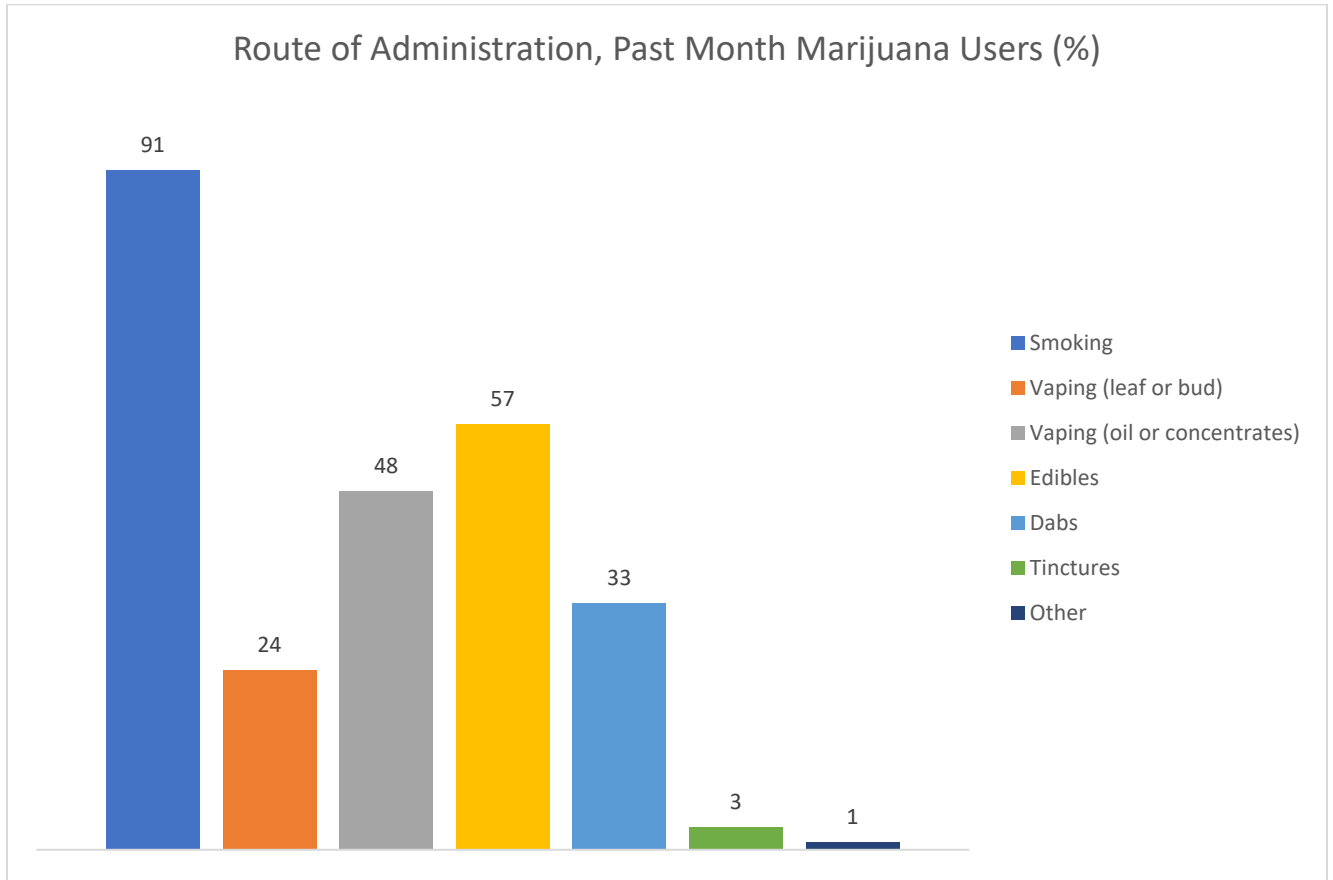


Figure 12: Most common routes of administration reported by past-month marijuana users

Students were also asked, if they used marijuana, to provide their reason for using. The vast majority (88%) of students who were current marijuana users responded that they used marijuana to get high. A small number (roughly 7%) of students used marijuana legally and medicinally with a medical marijuana card, and more than a third of students reported using marijuana to self-medicate for another reason even without access to medical marijuana.

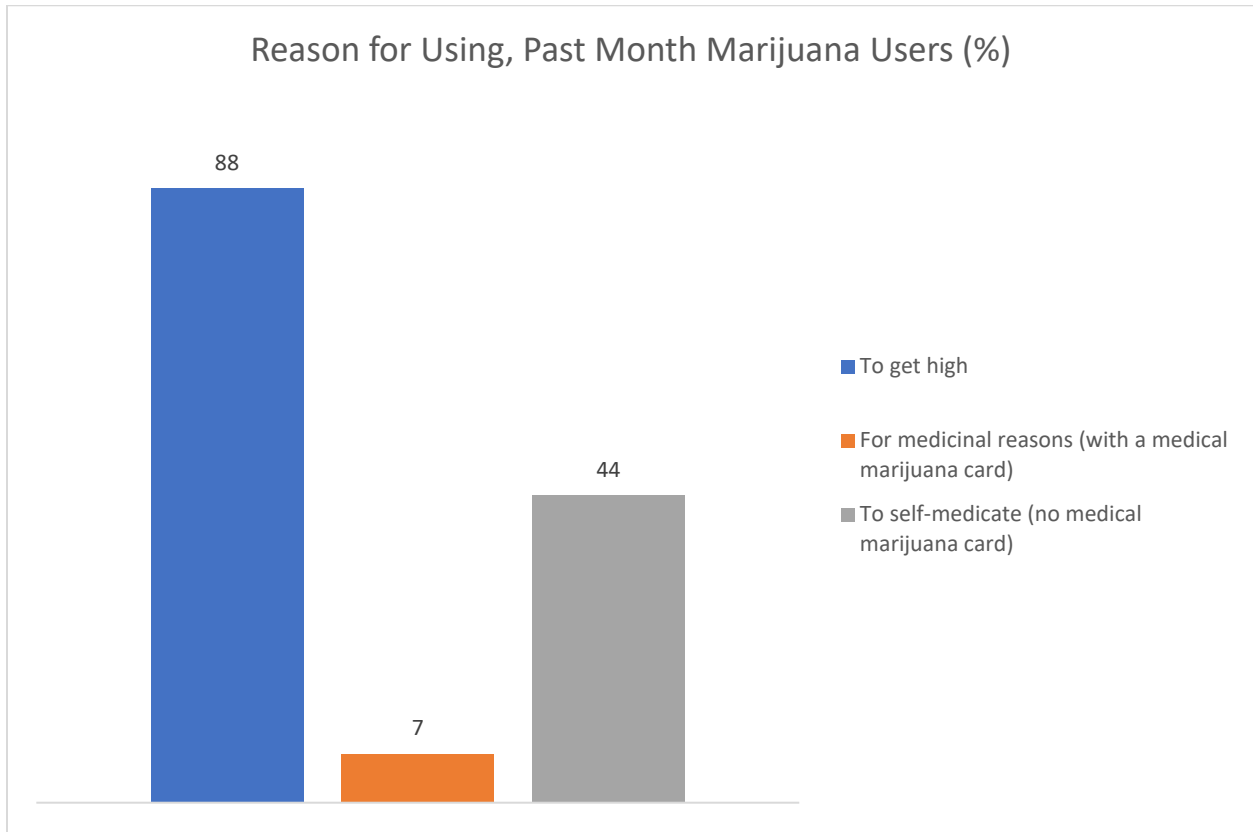


Figure 13: Reason for using among past month marijuana users

After marijuana, the use of prescription drugs without a prescription is the next most common substance used. One in ten students report ever using a prescription drug<sup>15</sup> not prescribed to them in their lifetime.<sup>16</sup> Students were also asked their reasons for misusing prescriptions; roughly 45% of students who report ever misusing a prescription medication say that they used the drug to help them study. Other responses include “to feel better” and “to get high”.

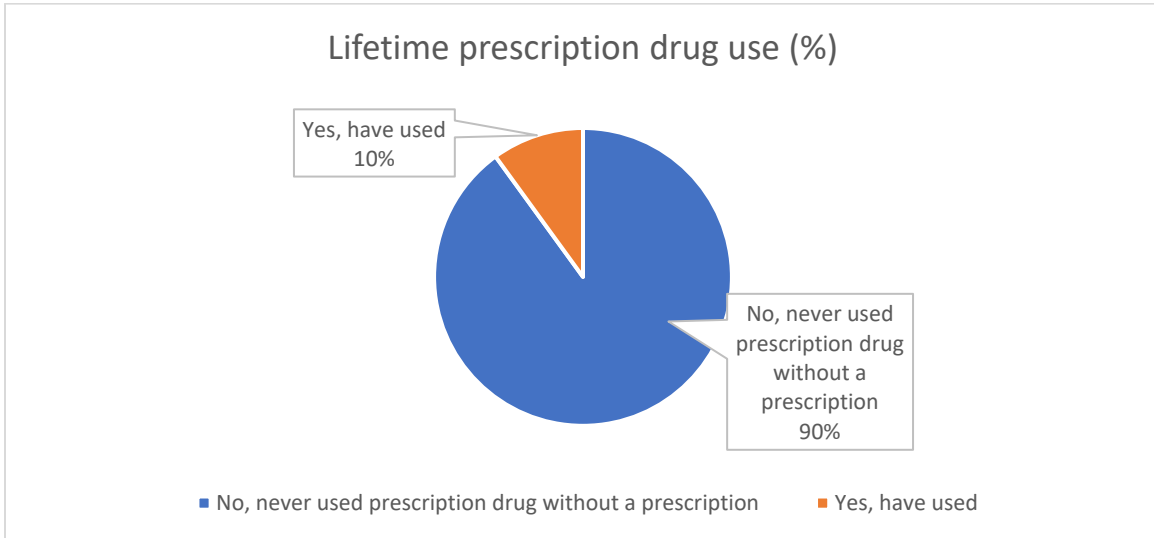


Figure 14: Lifetime prescription drug use without a prescription

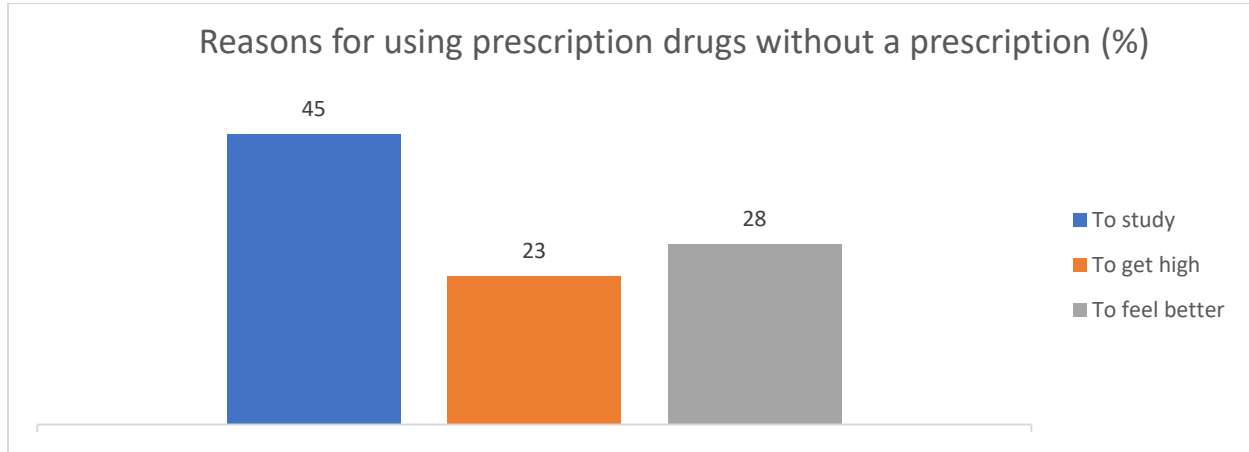


Figure 15: Reasons for using prescription drugs without a prescription.<sup>17</sup>

<sup>15</sup> This includes ADHD medications (such as Ritalin, Adderall, Concerta), other stimulant medications, painkillers, benzodiazepines, and other prescription drugs.

<sup>16</sup> For prescription misuse, lifetime use rather than past month use was estimated because past month use was too small of a figure.

<sup>17</sup> Among students who report ever using a prescription drug without a prescription



Among students who reported ever using prescription drugs without a prescription, the most common prescriptions used were stimulant ADHD medications such as Ritalin, Concerta, or Adderall. Close the three-quarters of all prescription drug misuse fell into this category of stimulant medications. This finding is unsurprising given the previous findings that half of students report misusing prescriptions to help study, and ADHD medications such as these are commonly used as “study drugs”. Approximately one in four students who use prescriptions not prescribed to them have used benzodiazepines, and a third have used painkillers without a prescription. Compared to data collected in 2021, prescription stimulant use without a prescription decreased slightly (from 72%) among this population of students and there were slight increases in painkiller use (from 25% in 2021) and benzodiazepines (from 21% in 2021).

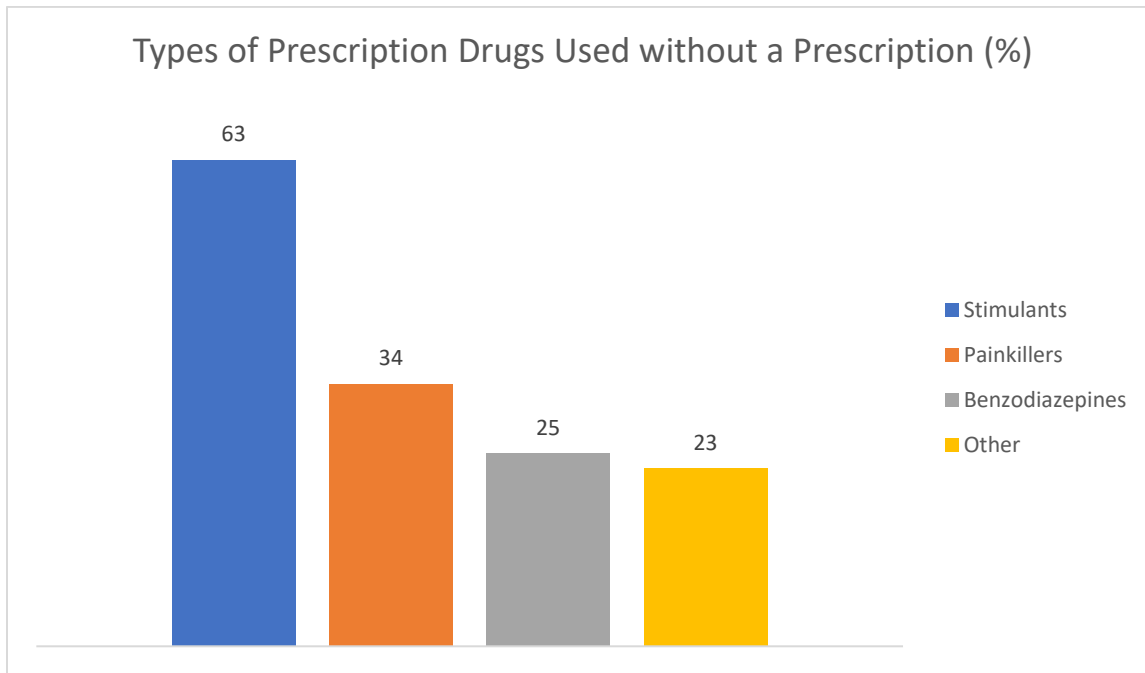


Figure 16: Types of prescriptions drugs used without a prescription.<sup>18</sup>

<sup>18</sup> Among students who report ever using a prescription drug without a prescription

## Vaping Prevalence

As seen in the substance use trend chart, use of e-cigarettes or vaping devices has risen greatly since the first year their use was monitored in the CRBS in 2013. While in previous years vaping devices were referred to in the survey only as e-cigarettes, in 2020 the survey was updated to encompass a greater breadth of terms used to refer to these devices. Respondents were shown the following definition, based on the definition used in the national [Monitoring the Future](#) survey: To “vape” is to use a device such as a vape pen, an e-cigarette, an e-hookah, or e-vaporizer (including products such as JUUL or Blu) to inhale mist or vapor into the lungs. Additionally, respondents were asked about their vaping behaviors across multiple substances: flavored e-liquids, nicotine, and marijuana.

At the University of Delaware, more than a third of the respondents to the 2022 CRBS reported having vaped at some point in their life, more than a quarter reported vaping in the past year, and one in five reported vaping in the past month. When comparing prevalence rates by sex, men and women reported similar rates of vaping in the past month, and self-reported vaping overall has increased slightly from the 2021 survey.

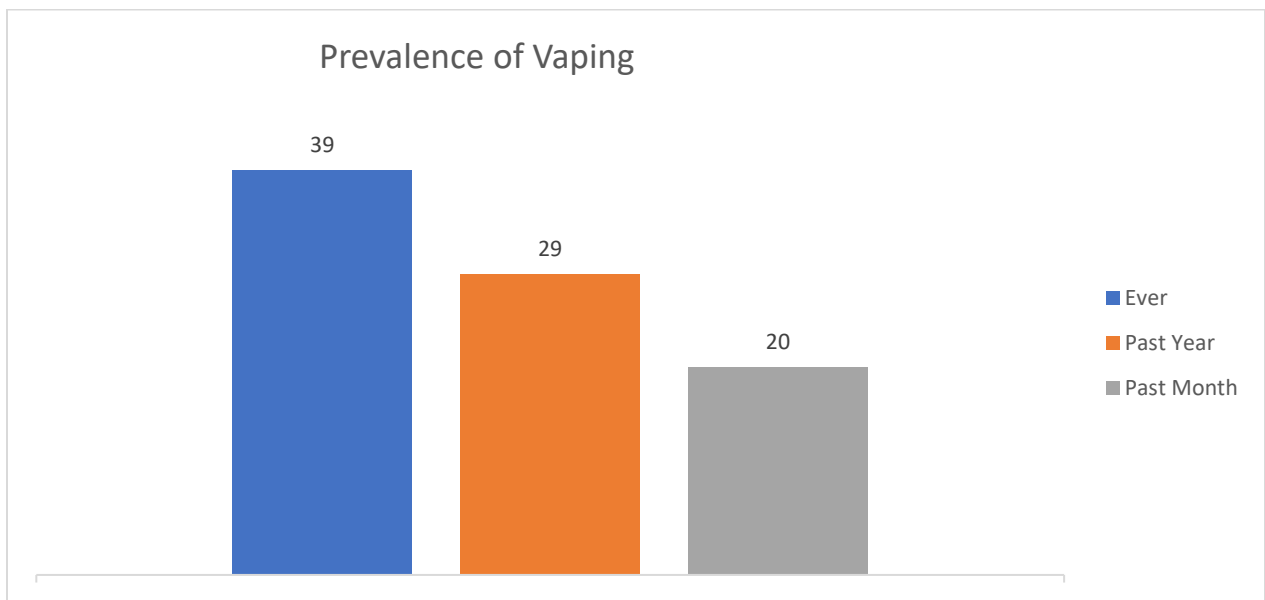


Figure 17: Vaping prevalence rates, in percentages

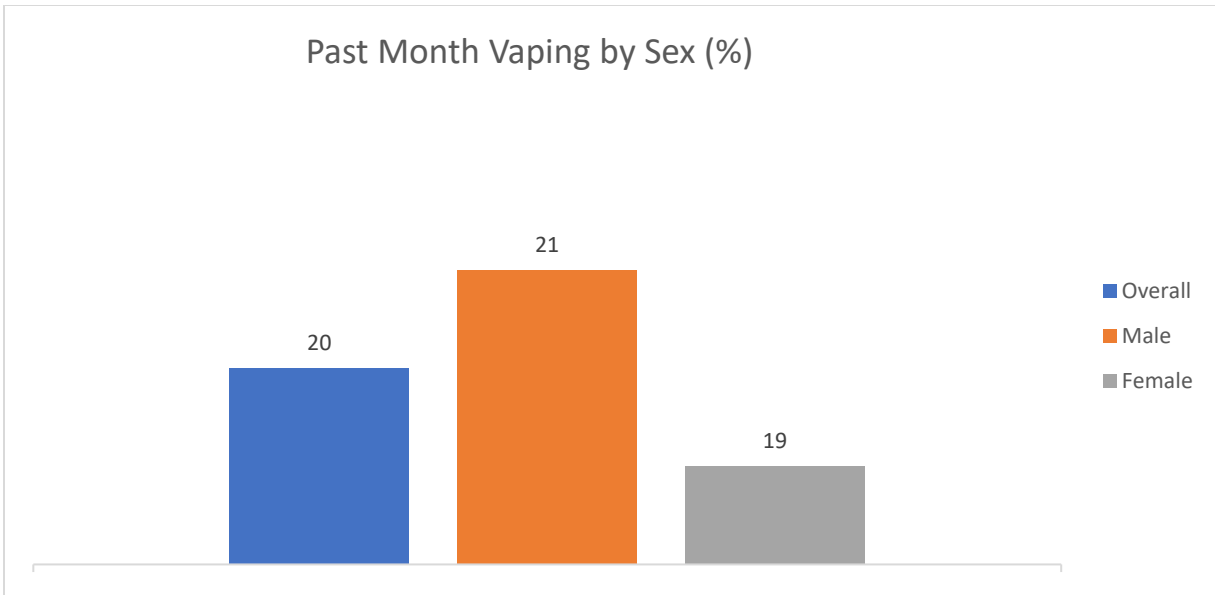


Figure 18: Past month vaping by sex.<sup>19</sup>, in percentages

When looking at vaping use in the past month by age, vaping was at its highest among 20-year-old students, followed by students aged 22 and older.<sup>20</sup> Vaping seems to be less common among the younger students.

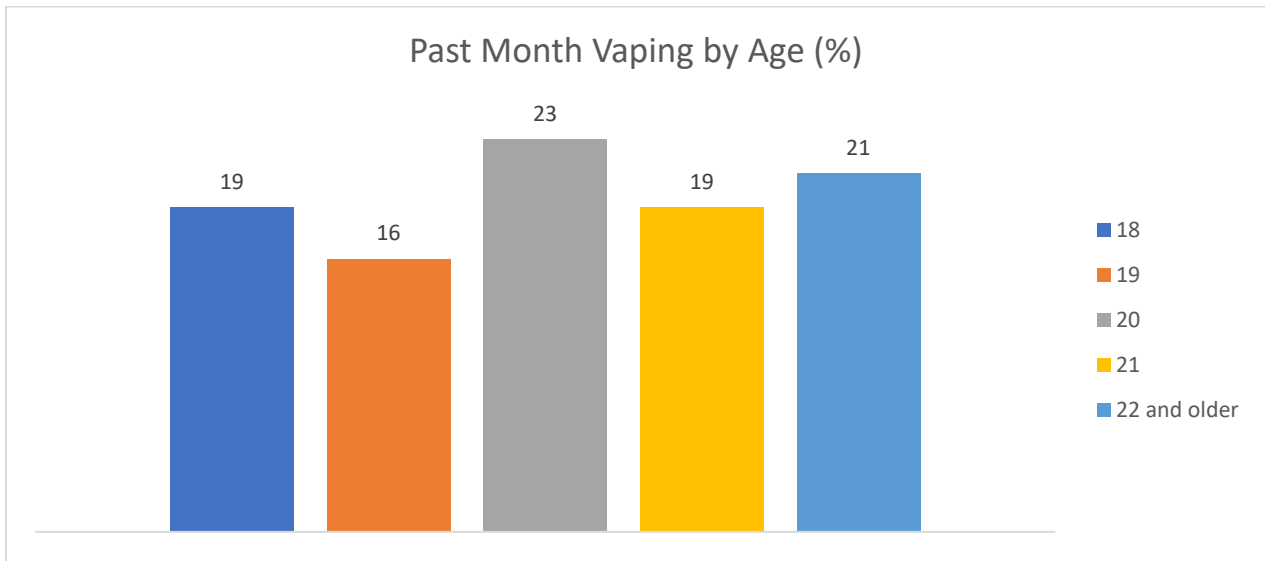


Figure 19: Past month vaping by age

<sup>20</sup> The associations between both sex and past month vaping and age and past month vaping were not statistically significant at the  $p < .05$  level.

### Cigarettes and Vaping: A Continuum of Tobacco Use

It has been noted in past CRBS reports that cigarette use had fallen in recent years, while the use of vaping devices has risen sharply. What has not been considered to this point is the relationship between these changes in behaviors. The below figure plots past year use of cigarettes and nicotine vaping against the percentage of individuals who used either substance. Initially, the line indicating use of either substance closely matches that of cigarette use – in 2018, vaping use rises sharply, and the line indicating use of either comes to match that of vaping. While cigarette use has fallen, overall use of nicotine products has actually risen since 2013 due to the significant increases in nicotine vaping. It should also be noted that up until 2018, the percentage of students who used either substance was close to the percentage of students who used cigarettes, suggesting that most students who vaped were also smoking cigarettes. Since 2018, however, the percentage of students who report vaping nicotine has exceeded the percentage of students who report smoking cigarettes. In 2022, while reported cigarette use remained constant compared to the previous year, rates of nicotine vaping showed an increase for the first time since 2019, and the rate of students reporting any nicotine use in the past year is now higher than ever, at roughly one in three surveyed students.

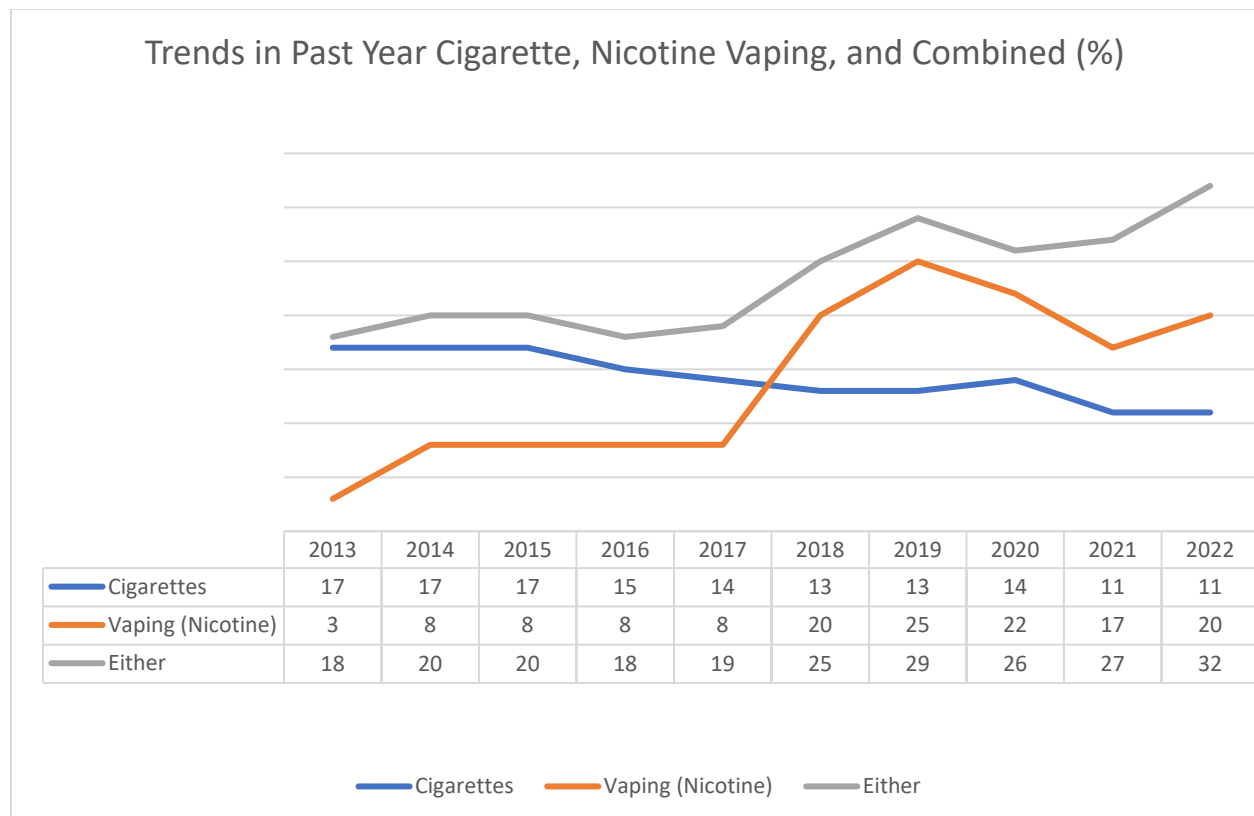


Figure 20: Trends in past year cigarette, nicotine vaping, and combined use

### Students Who Vape: A Closer Look

In response to the growing rate of vaping among UD students, the CRBS also includes several questions tailored around getting a better idea of the behaviors that students who vape engage in. The following analyses are based on a subsample of the students who reported having vaped in their life – students who have never vaped are excluded. The majority of students (54%) reported their first use of a vaping device at age 17 or younger.

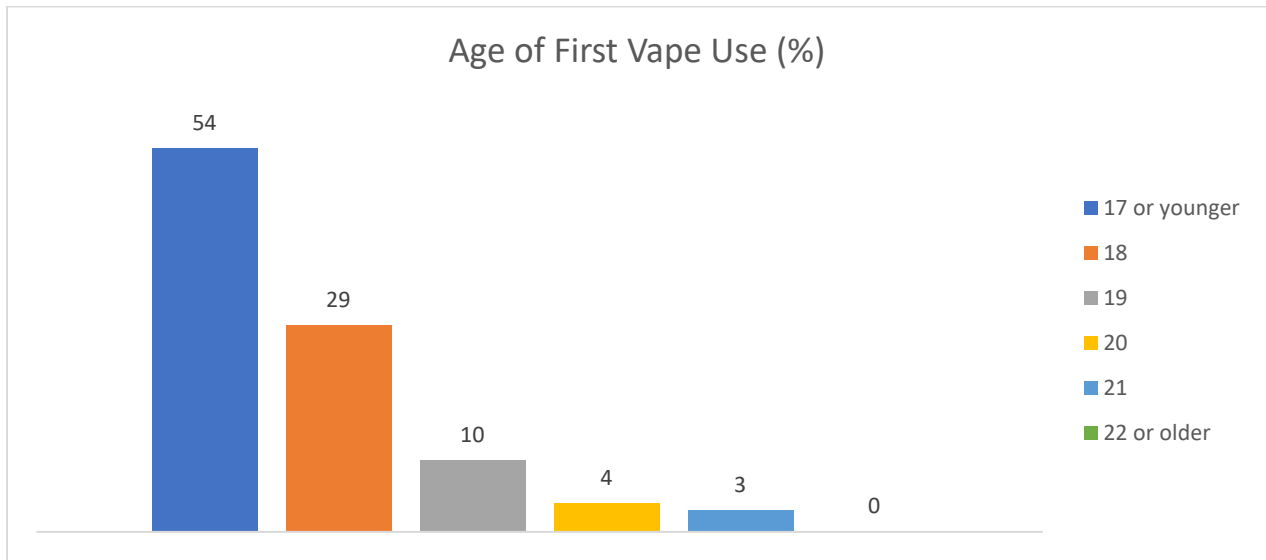


Figure 21: Age of first vape use

Students were also asked what they vaped in the past month. Roughly half of students who reported ever vaping in their lifetime were not currently vaping at the time of this survey (“currently” being considered past month use). Nicotine was the most common substance used in vapes (31%), while 17% of students who ever vaped reported using some form of e-liquid in their vaping device in the past month. Approximately 25% of students who ever vaped used marijuana in a vaping device in the past month. There are also overlaps in the types of substances used by students who vape and these are not mutually exclusive categories; it is not uncommon for a student who vapes nicotine to also vape marijuana and other e-liquids, for example.

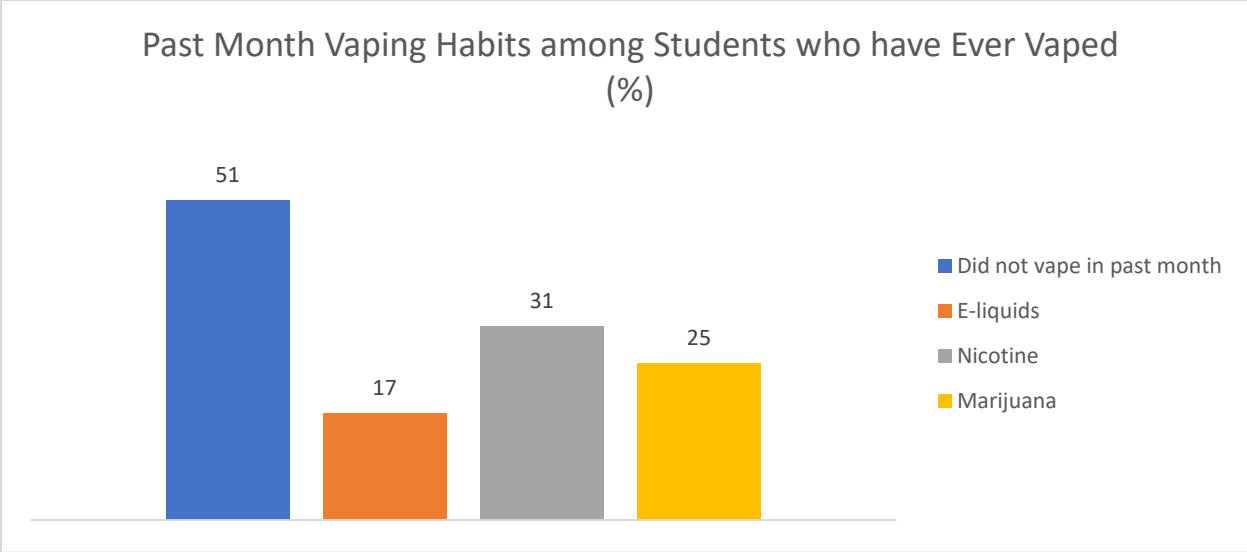


Figure 22: Past month vaping habits

Using questions adapted from Monitoring the Future, respondents were asked why they vape. The most common reasons for vaping reported by students were “to see what it’s like” and “to relax or relieve tension”. More than a quarter reported that they vape to feel good or get high. Very few reported that they are vaping specifically to quit using cigarettes or because cigarette smoking is not permitted. A few students who responded “Other” wrote in that they started because they liked doing tricks with the vapor or because they felt it helped them stay skinny.

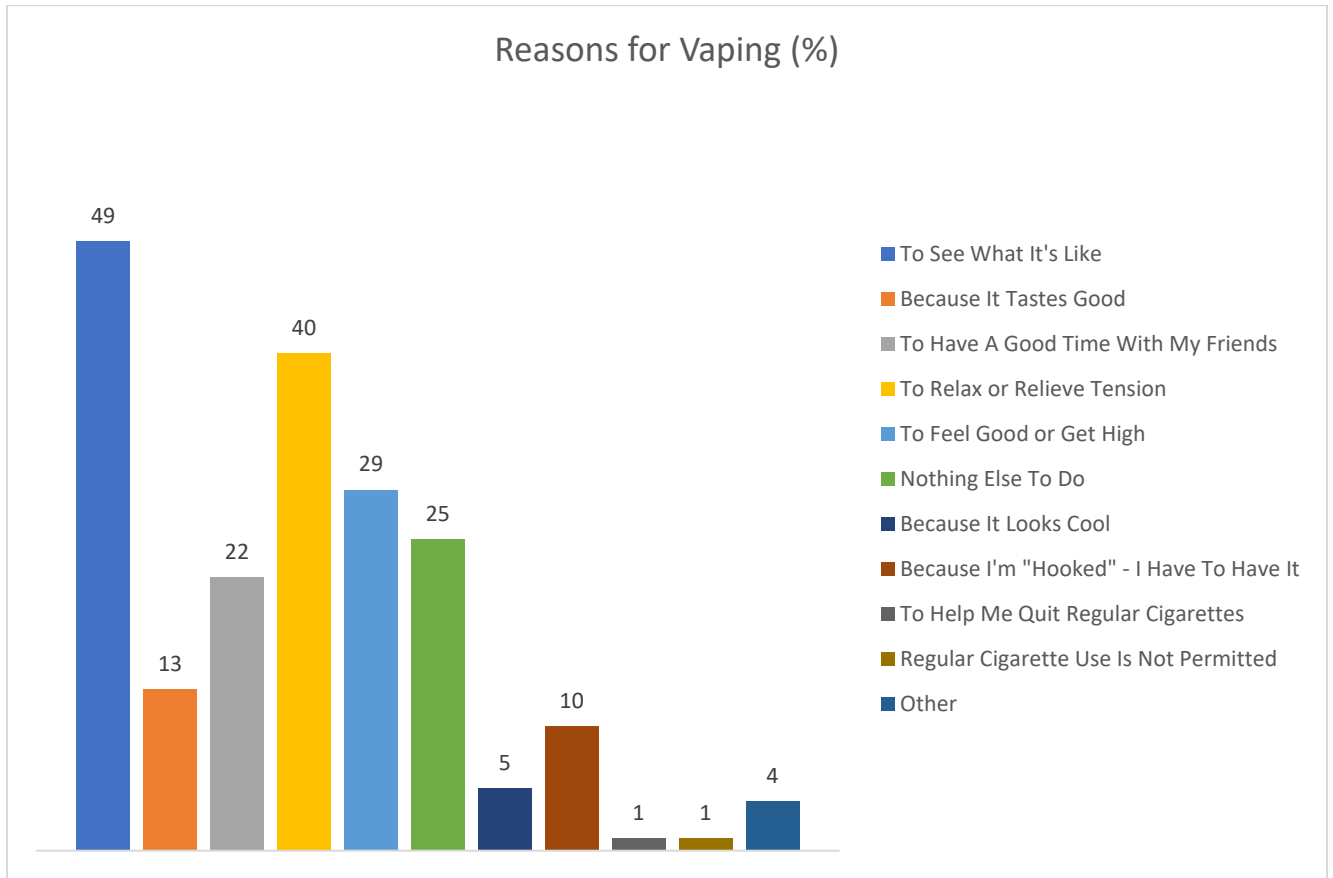


Figure 23: Reasons for vaping

Respondents were also asked where they would go to get e-liquids containing nicotine or marijuana. The most commonly reported way from students to obtain e-liquids containing nicotine was from the store, while students were most likely to get their e-liquids containing marijuana from a friend, acquaintance, or peer who sold it to them.

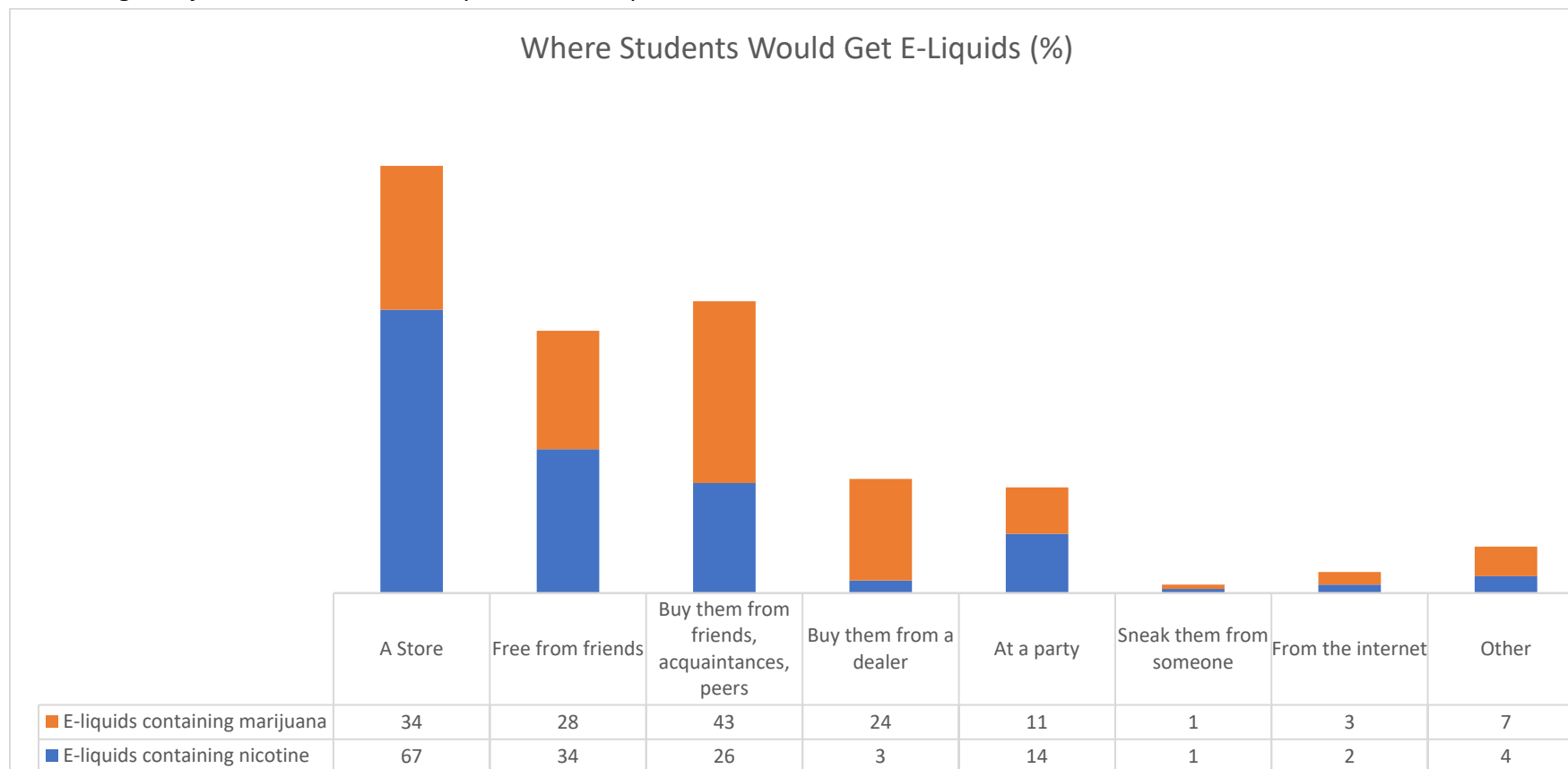


Figure 24: Where students get e-liquids



# Interpersonal Violence and Sexual Assault

## Introduction

Sexual violence on campus is a major social problem affecting the well-being and education of many students. Historically, research in two major areas, interpersonal violence and sexual assault, has focused on the use of force or assault that is facilitated by substance use. However, there are a range of non-physical ways that an individual can experience abuse, such as emotional and economic abuse in the case of interpersonal violence or more subtle coercive tactics used by perpetrators of sexual assault. The CRBS has historically tracked self-reported victimization and starting in 2020 added additional questions about experiences of interpersonal violence and sexual assault. These questions were designed to capture the range of possible experiences and drawn from a variety of existing research (Raghavan, Cohen, & Tamborra, 2015; Lehmann, Simmons, & Pillai, 2012; Camilleri, Quinsey, & Tapscott, 2009). The following subsections report in more detail the specific questions, including coercive and more subtle tactics not previously operationalized in the CRBS.

## Interpersonal Violence

For the interpersonal violence module in the survey, students were asked if, since starting college, anyone had ever done one or more of the following:

- Sent you unwanted texts/emails/DMs<sup>21</sup>
- Approached you when you didn't want
- Acted angry towards you in a dangerous way
- Insulted you, called names, etc. alone or in front of others
- Tried to keep you from family or friends
- Made threats to harm themselves or take their own life
- Refused to use a condom when you wanted them to

Close to half of surveyed students (47%) reported experiencing at least one of the above forms of interpersonal violence since starting college. The most frequently reported type was receiving unwanted texts/emails/direct messages (33%), and the second most reported form was being insulted and called names (19%). The next three most commonly reported were when a person: approached you when you didn't want to be approached (9%); acted angry towards you in a dangerous way (12%); and made threats to harm themselves or take their own life (9%). About 5% of students reported that someone had tried to keep them away from family or friends, and another 5% reported that a partner had refused to wear a condom when they wanted them to (or had refused to allow them to put a condom on themselves).

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<sup>21</sup> DMs refer to Direct Messages on social media platforms or other online accounts.



Figure 25: Most common forms of interpersonal violence reported

There are differences in experiences of interpersonal violence by gender, sexual orientation, and disability status as well. While approximately 47% of students report experiencing at least one of these types, that figure varies widely when disaggregating into these demographic subgroups. More than half (53%) of female students report at least one of seven responses from the interpersonal violence module, compared to approximately 39% of male students. Students who reported having a disability were also significantly more likely to report that they had experienced a form of interpersonal violence while at college; 62% of disabled students experienced at least one of the above forms of violence, compared to 43% of non-disabled students. Roughly half of students with a disability report experiencing interpersonal violence, compared to just over one-third of students who did not report having a disability.

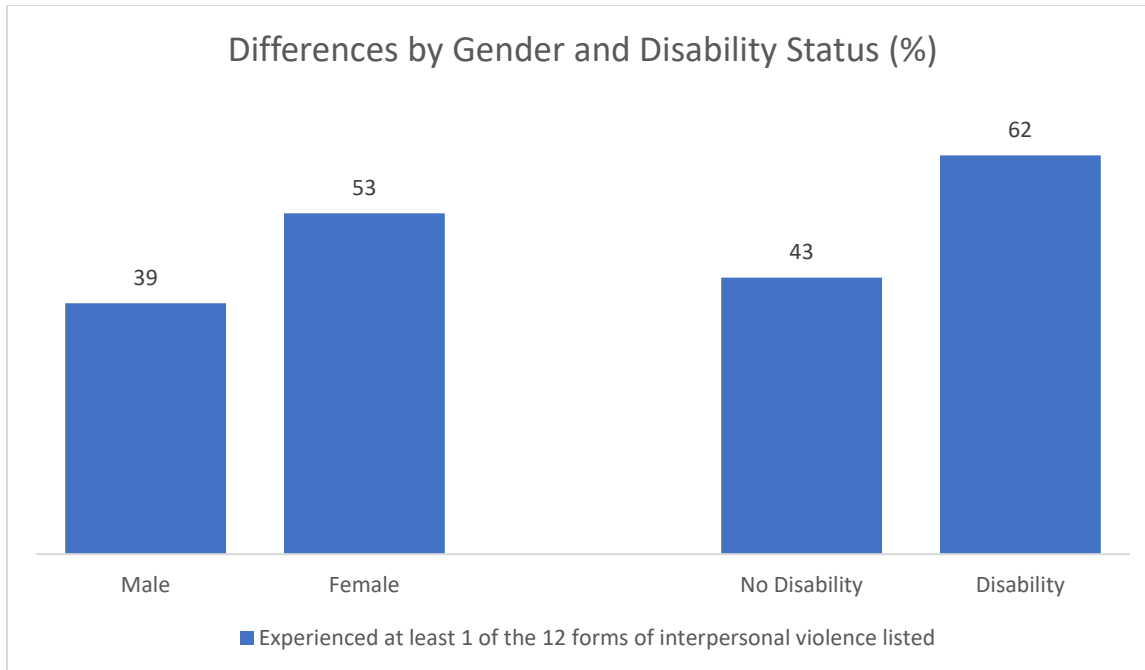


Figure 26: Differences in interpersonal violence experiences by gender and status

Among the students who experienced some sort of interpersonal violence, more than a third (36%) identified their harasser as an acquaintance or classmate not well known to them, more than a quarter (29%) identified the person as someone well known to them but never in an intimate relationship, and close to a quarter (26%) identified an intimate partner. Among the 13% of students who reported “Other”, the most common write-in responses were either strangers in person or strangers online.

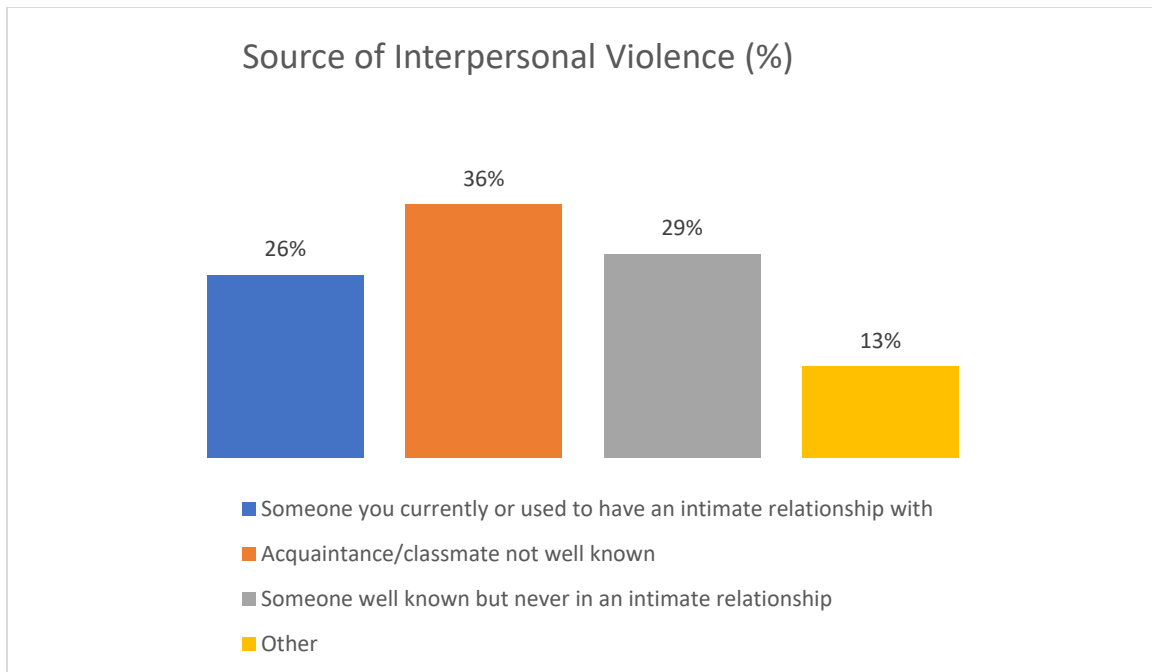


Figure 27: Perpetrators of interpersonal violence

### Sexual Assault

When asked if, in the past year, they have been forced or coerced into having unwanted sex, approximately 6% of surveyed students in 2021 responded yes. The team added a specific set of questions to the CRBS starting in 2020 to better capture the range of sexual assault experiences among students. These questions emphasize that a person may express non-consent in a variety of ways, both verbal and non-verbal. Students are asked if, after expressing non-consent, they have ever experienced any of the following coercive tactics from someone:

- Tried to get you to change your mind by repeatedly asking
- Tried to make you feel bad for saying “no” to them
- Made you feel that you could not say no to sex because you invited them over or you went to their place
- Ignored your verbal and non-verbal no’s or pretended they couldn’t hear you
- Took advantage of you when you were drunk or high
- Became angry or got really made at you
- Waited until you were asleep
- Used physical means to hold you down, block your exit, or harm you

Students were also asked whether sexual activity occurred following any of the above forms of coercion. Nearly one third (32%) of students reported that, since starting college, they had

experienced at least one of the above listed forms of coercion (regardless of whether sexual activity took place after the coercion). Of those surveyed, roughly 20% of students reported experiencing at least one coercion tactic that was followed by sexual activity, and 20% of students also reported experiencing a tactic that was not followed by sexual activity.

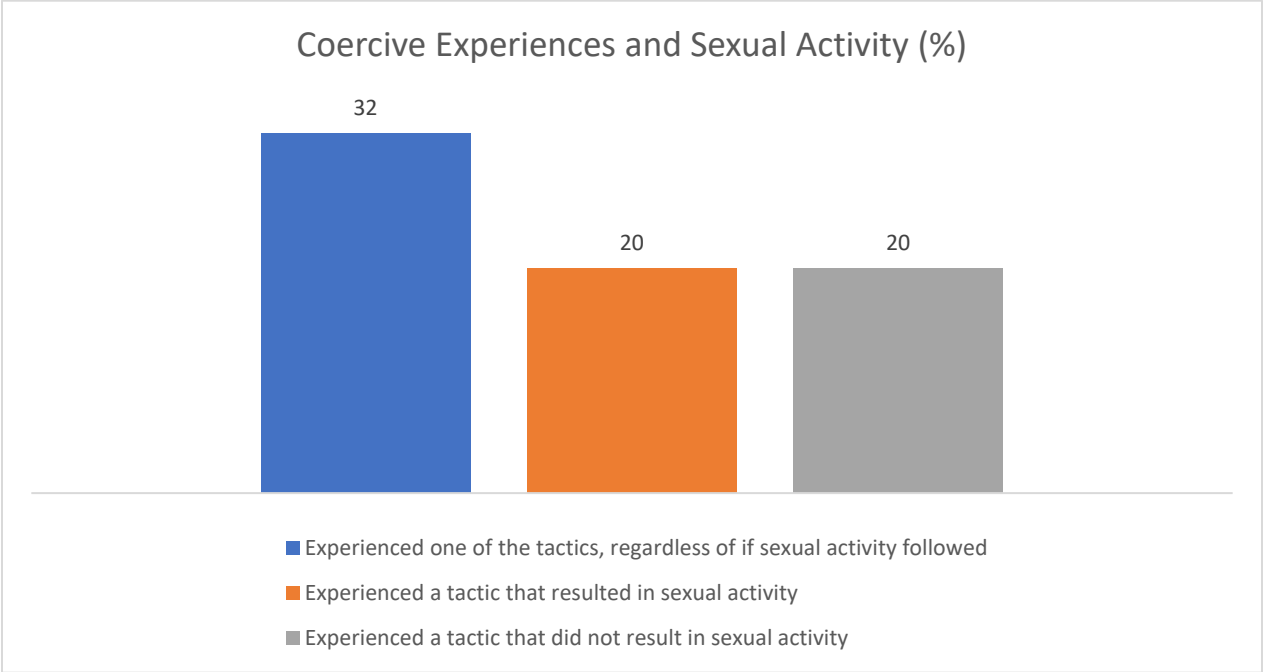


Figure 28: Coercive experiences and sexual activity

Students most commonly reported experiencing: someone trying to get them to change their mind by repeatedly asking (27%); someone trying to make them feel bad for saying “no” (24%). The next most common experiences were someone making them feel like they couldn’t say no because they had invited that person over or had willingly gone to their place (14%) and someone ignoring their nonverbal or verbal no’s or pretending that they didn’t hear (14%). Least common, approximately 5% of students reported that someone had waited until they fell asleep and approximately 4% said that they had used physical means to hold them down, harm them, or prevent them from leaving.

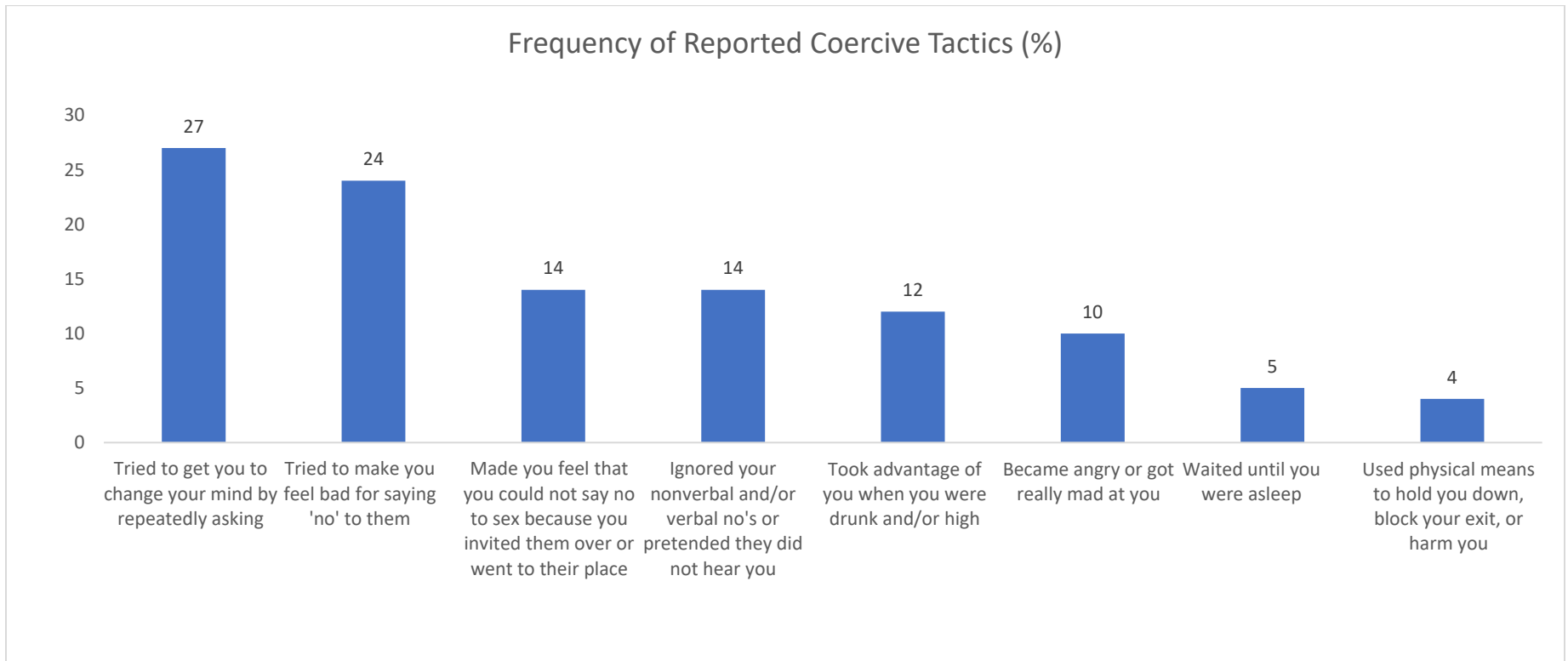


Figure 29: Most commonly reported coercive tactics

There are also substantial disparities in the prevalence of coercive experiences by sex and disability status. Female students report experiencing at least one of these eight forms of coercion nearly double the rate of male students. Students with disabilities report experiencing coercive tactics at a significantly higher rate compared to students without disabilities.

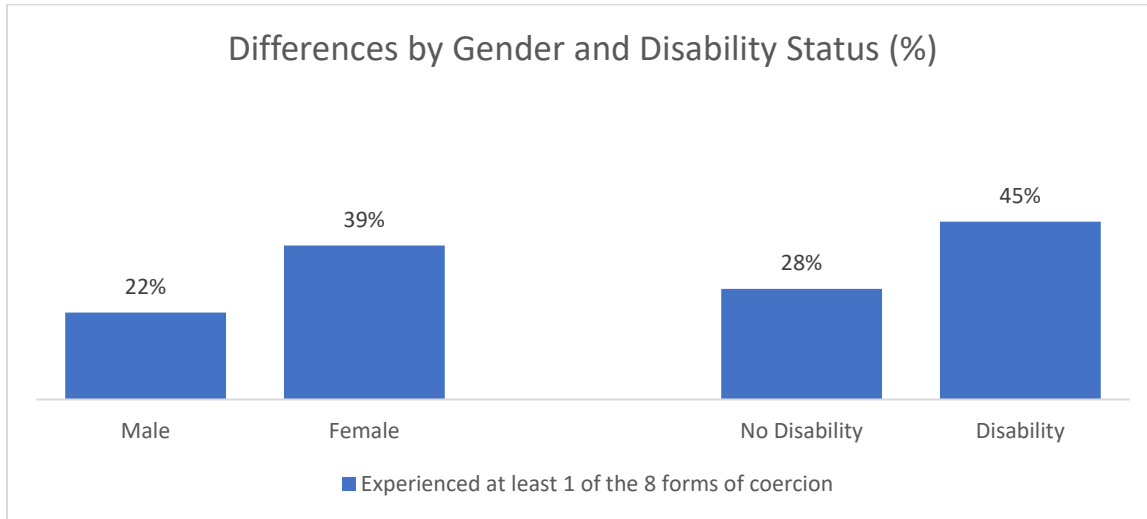


Figure 30: Differences in coercion prevalence by sex and disability status

Students were also asked who they would talk to if they were concerned about their relationship experiences. Students were provided 15 response options and allowed to select multiple answers. The vast majority of students reported that they would talk to their friends (92%), partner or significant other (87%), or someone in their family (73%). Close to half of students reported that they would talk to medical personnel off campus (49%), law enforcement (48%), or the Center for Counseling and Student Development (52%). Less than a quarter of students (24%) reported that they would talk to a family religious or spiritual leader, which was the least common response.

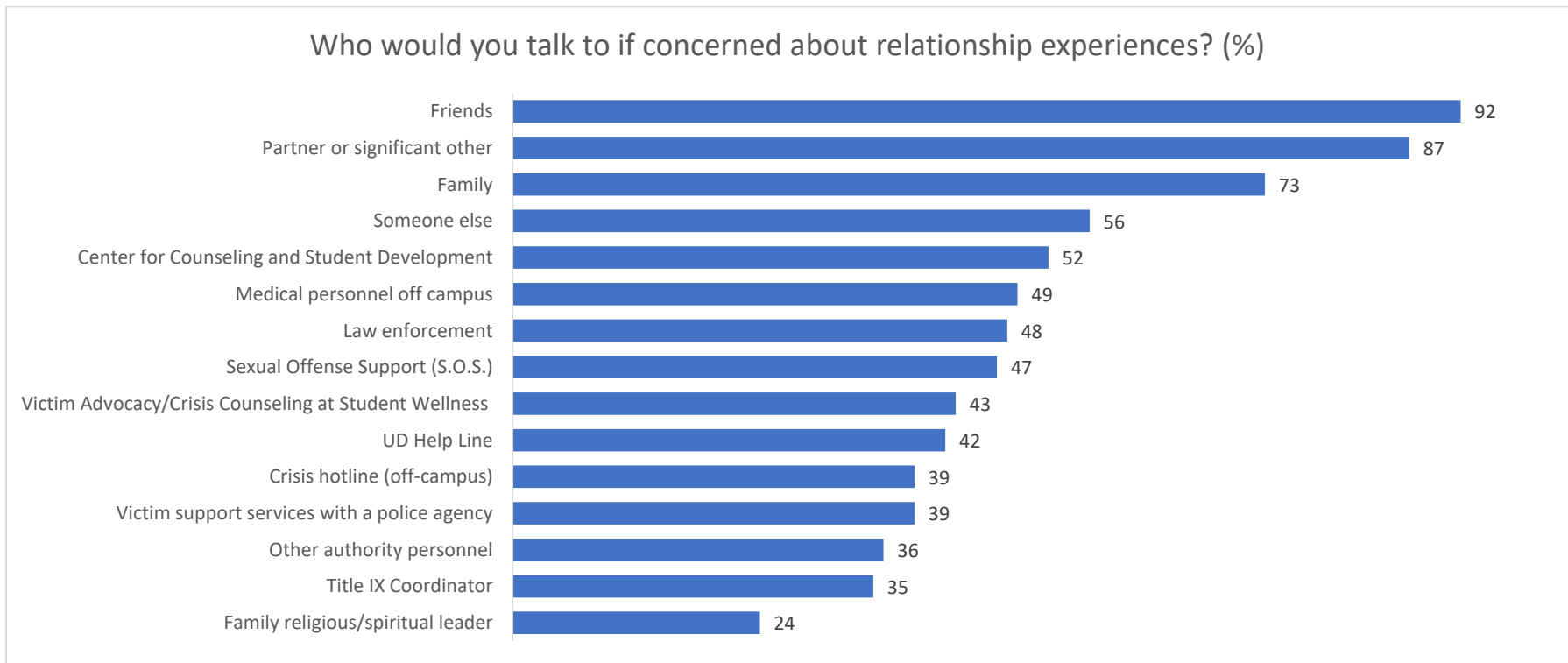


Figure 31: Who would talk to if concerned about relationships



## Health and Safety

In this last section of the report, we highlight behaviors related to the health and safety of University of Delaware undergraduate students. This includes other behavioral health indicators such as suicide prevalence, disordered eating, gambling, sleep habits, and self-reported health concerns of students. We also present data on help-seeking behaviors of students in case of a medical emergency and their sexual health and contraceptive knowledge. The 2022 survey also retained two questions about student’s educational experiences as a result of the pandemic, which are reported at the end of this section.

### Behavioral Health Concerns

Among students who responded to the CRBS this year, more than 13% reported that they had seriously considered suicide in the past 12 months, more than 4% reported that they had made a plan for suicide in the past 12 months, and close to 1% reported attempting suicide in the past 12 months. Compared to data collected prior to the start of the pandemic, the percentage of students who reported they had considered suicide in the past year has nearly doubled (from 6.9% in the 2020 CRBS), though reported rates of making plans and attempting suicide in the past year have not substantively changed.

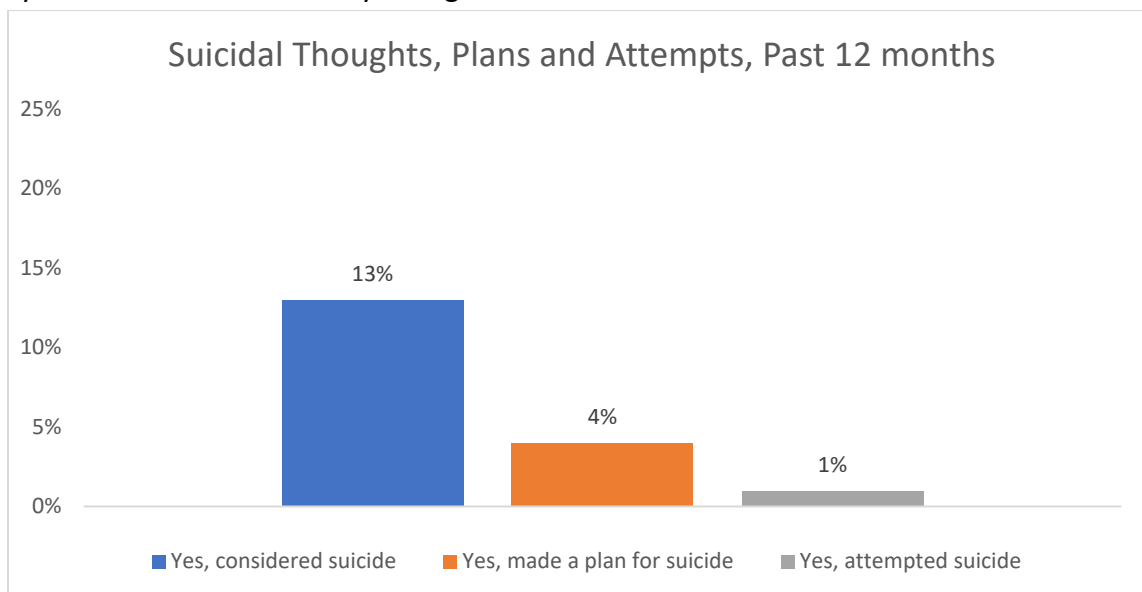


Figure 32: Suicidal thoughts, plans, and attempts, past 12 months

Students were also asked if they were concerned about their health and behavior related to a variety of topics, including the following: sleeping; anxiety; depression; stress; general wellbeing; drug use; alcohol use; eating; video games; gambling; social media use; and spending too much money. Notably, stress

(51%), anxiety (45%), spending too much money<sup>22</sup> (40%), and sleeping (36%) were the most commonly reported concerns among students. Approximately one out of five students (22%) reported being concerned about their social media use. Students less frequently reported drug use (4%), alcohol use (4%), video game use (3%), and gambling (<1%) as a problem.

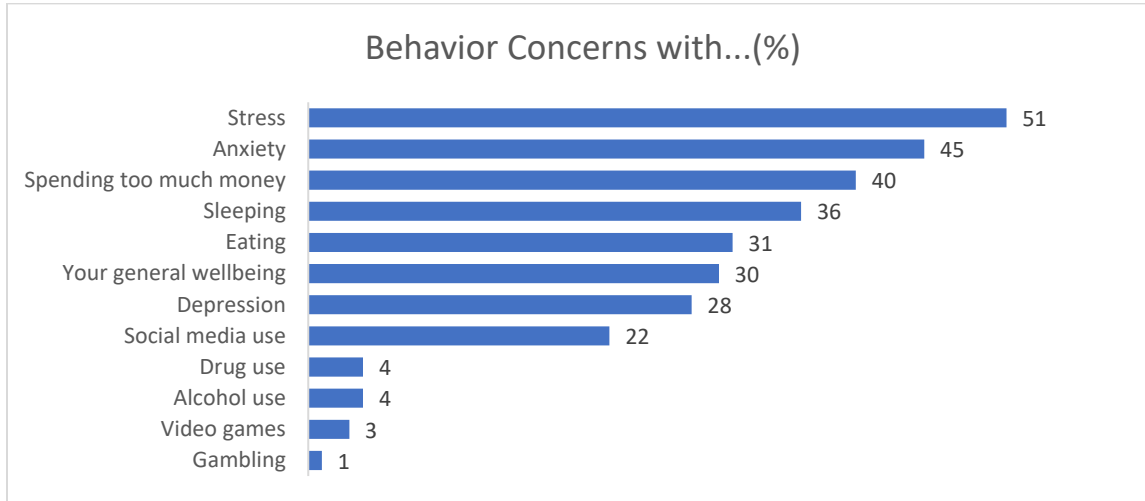


Figure 33: Self-reported health concerns of students

<sup>22</sup> “Spending too much money” was a new response category added to this question for the 2022 CRBS administration and has proven to be a substantial concern for students. As a new indicator, it is unknown how this compares with student concerns with spending in previous years.

## Sexual Health and Contraceptive Knowledge

More than a quarter of students (28%) report that they have never had sexual intercourse. Among those who have had sexual intercourse, 95% report using some method to prevent pregnancy or disease the last time they had sexual intercourse. Pregnancy prevention seems to be a greater concern among students than preventing sexually transmitted infection (STI) transmission; when asked what methods they used to prevent disease only, nearly a third of students reported that they did not use any methods the last time they had sexual intercourse.

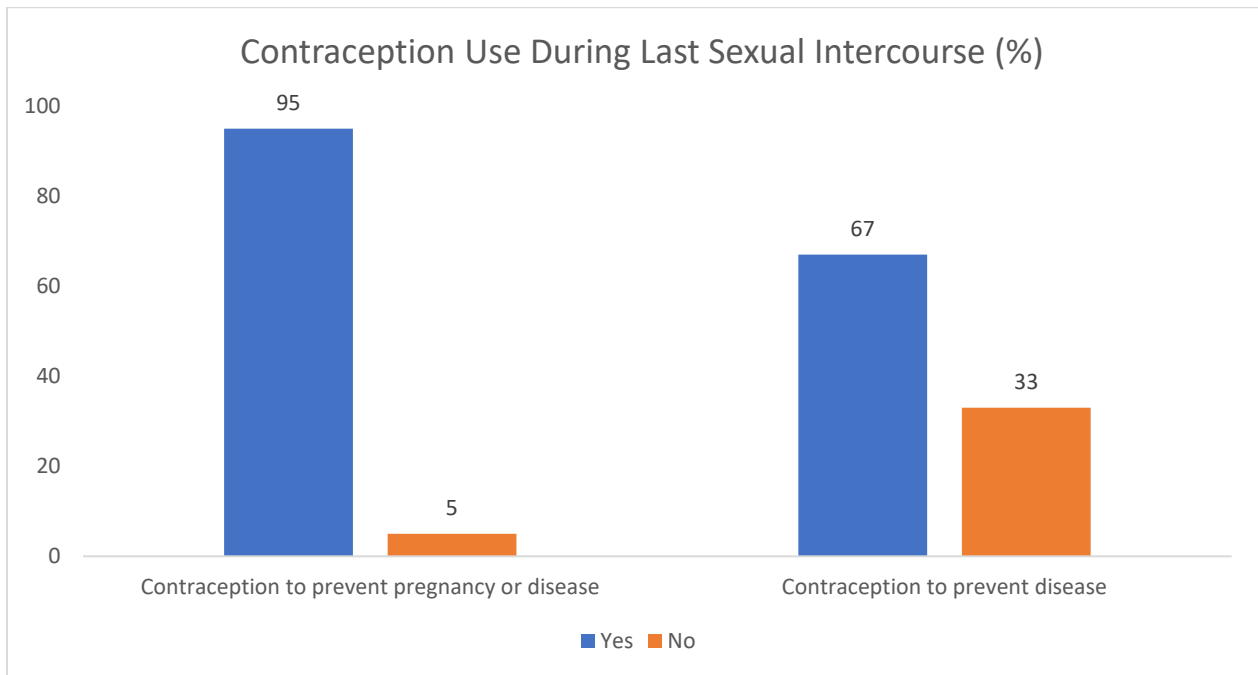


Figure 34: Contraception use during last sexual intercourse

The most popular reported methods of pregnancy prevention used by students who ever had sexual intercourse were birth control pills and condoms, followed by the withdrawal method. Roughly a quarter of students used withdrawal. A smaller percentage of students report using IUDs and the shot, and the remaining students were given the option to write in their method of contraception. Respondents also wrote in a variety of responses, including that they were in a same-sex relationship so pregnancy was not a concern, they had been sterilized, they used PrEP or Plan B, or that they had been actively trying for pregnancy. These responses emphasize the diversity of sexual experiences and reproductive goals of UD students.

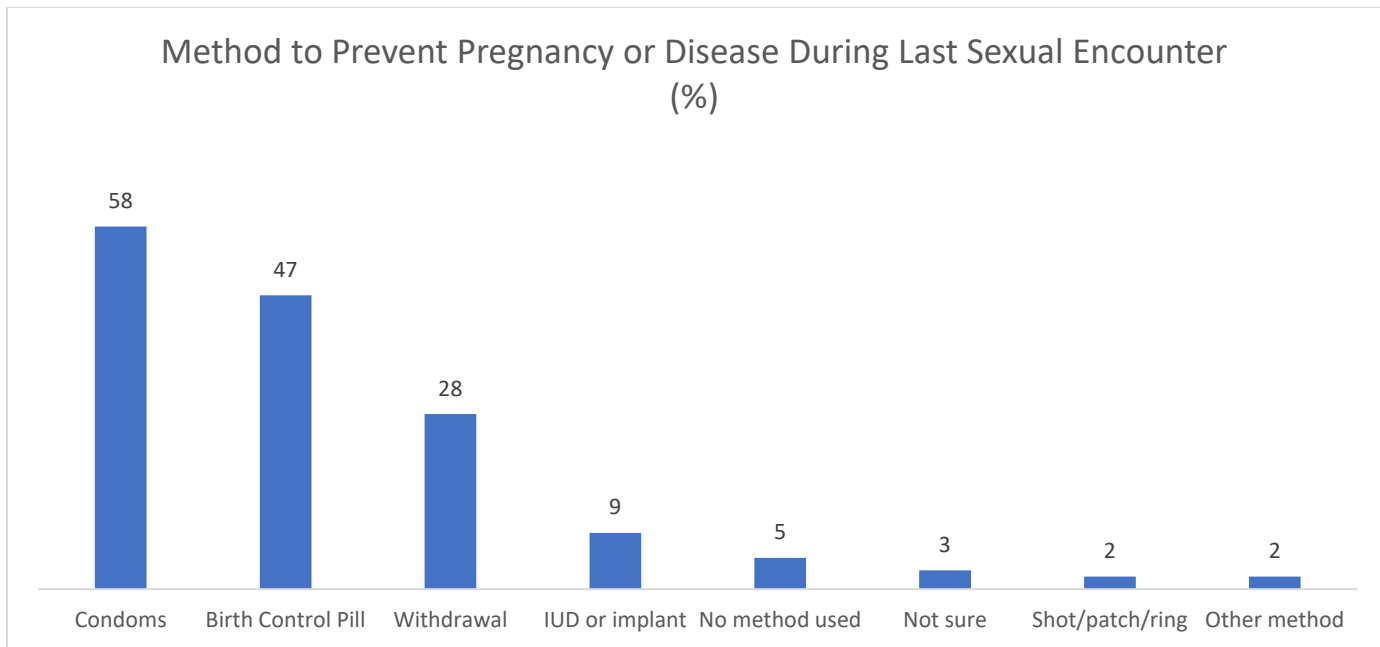


Figure 35: Pregnancy/disease prevention method used during last sexual encounter

Students less frequently report using contraceptive methods solely to prevent disease. Among students who have ever had sexual intercourse, nearly three out of five students report using a barrier method (condoms or dental dams) to prevent disease. Approximately one-third did not use a contraceptive method to prevent disease, though in the write-in responses a small number of students report not using a method of preventing disease because they are in monogamous relationships and/or get tested for STIs regularly.

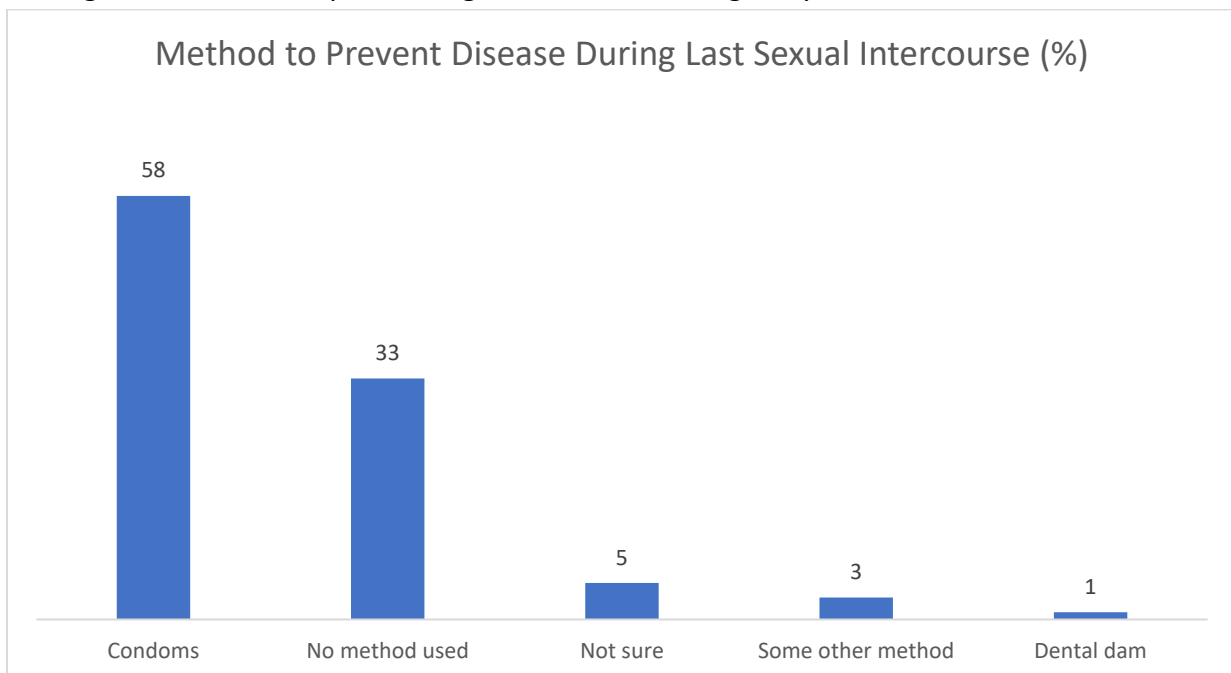


Figure 36: Method to prevent disease during last sexual intercourse

A number of students also report receiving information about birth control, including where they can go to get it, how much it costs, what types are most effective, and/or how a particular method works. Approximately 18% of students say that they have received information about where they can go to access birth control, but a majority of students still respond that they have not received any information about these topics.

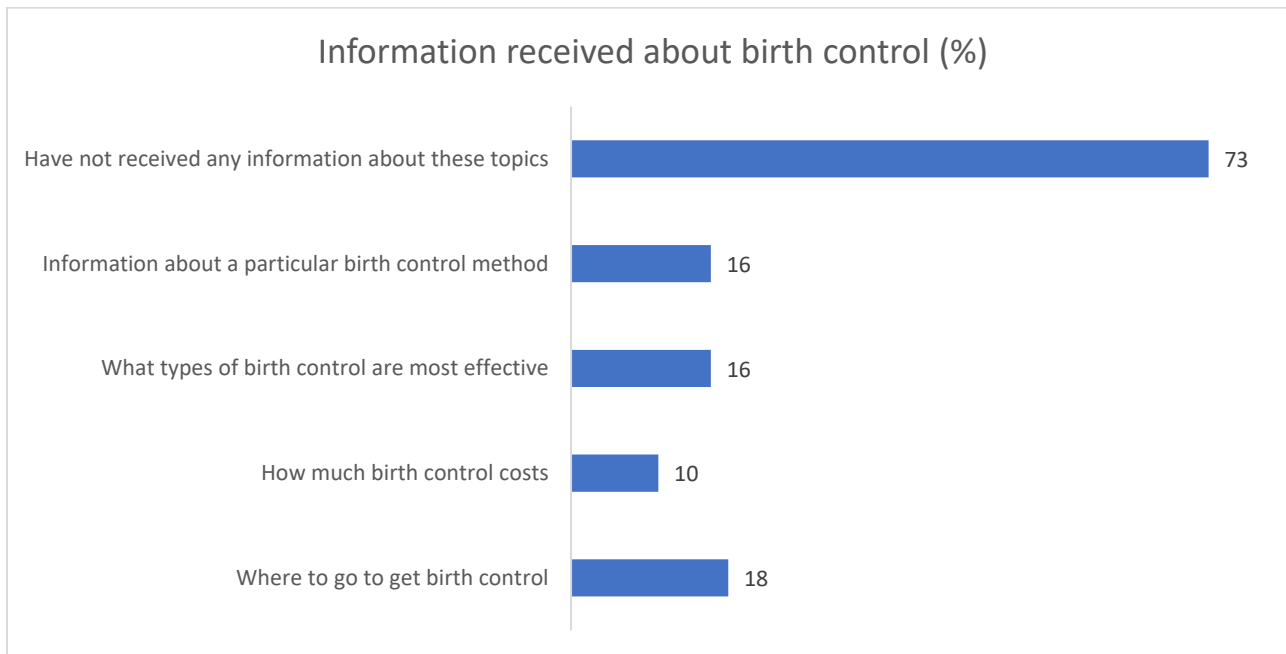


Figure 37: Information received about birth control

### Response to the COVID-19 Pandemic Public Health Measures

The University of Delaware and the City of Newark issued a number of safety messages, recommendations, and ordinances in response to the COVID-19 pandemic in 2020 and 2021. While many of these mitigation measures had been lifted by the end of the 2021-2022 school year, such as masking on campus, and widespread implementation of vaccines among the campus community, students still report negative outcomes related to the pandemic.

In the 2022 CRBS, students were asked about the extent to which they felt the pandemic had impacted their timeline for degree completion and their mental health. Roughly one out of five students felt that it was likely or very likely that the pandemic would negatively impact their degree completion. Approximately one-third of students (33%) reported that their mental health was not good for most of the time during the pandemic, and a smaller percent (8%) reported that their mental health was not good always. Poor mental health in the context of this question was defined as including feelings of stress, anxiety, and depression.

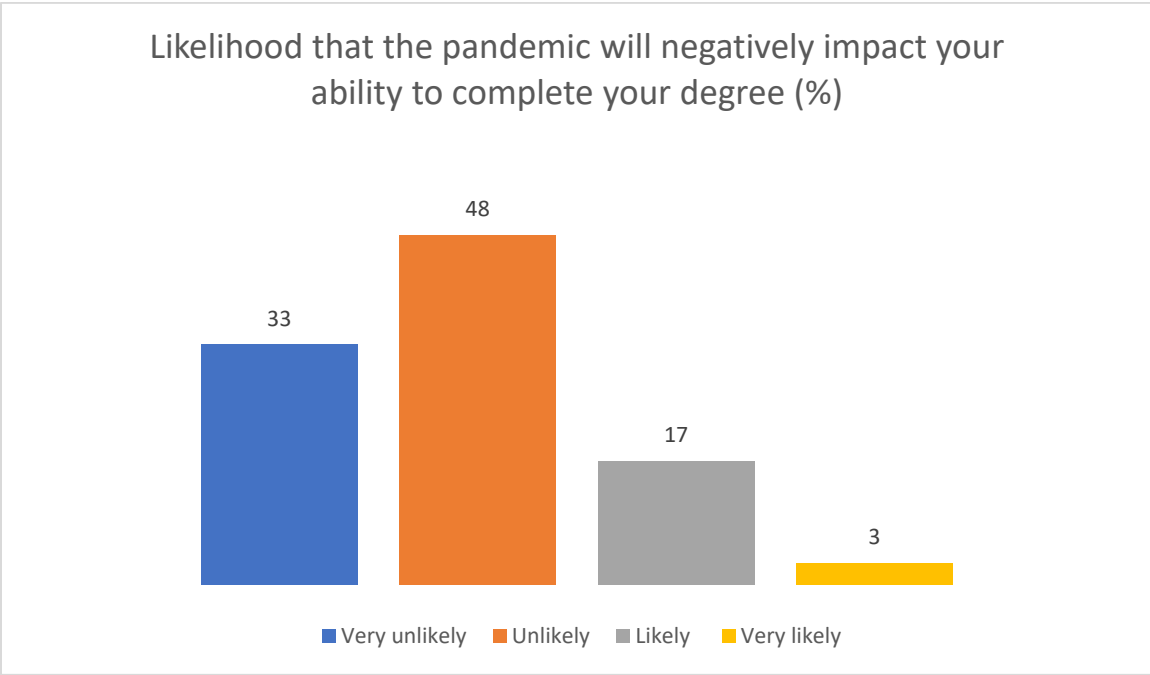


Figure 38: Likelihood that pandemic will impact degree completion

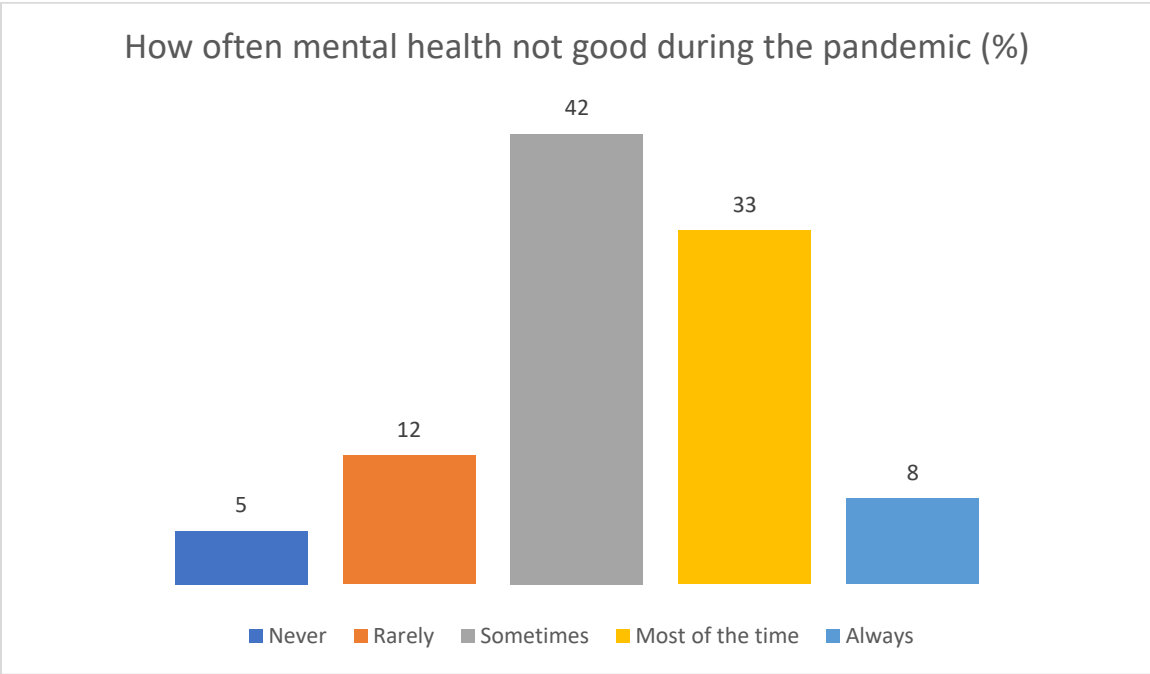


Figure 39: How often mental health was not good during the pandemic

## Key Takeaways from the 2022 CRBS

There are a number of important takeaways from the 2022 College Risk Behavior Survey . Alcohol remains the most used substance among UD undergraduates, followed by marijuana. While overall prevalence rates of any alcohol or other drug use remain stable this year, this year saw increases in binge drinking and vaping. Despite continued declines in cigarette use, past month nicotine consumption among students reached an all-time high when considering rises in nicotine vaping.

Similar to the 2020 and 2021 surveys, the overall student response rate to the survey was significantly lower than typical for pre-pandemic years. As a result, it is possible that those who chose to participate are in some way different from those who participated in previous years, or from those who may have participated this year if the pandemic had not occurred. For the Spring 2023 administration the survey team will be increasing the incentive amount for students from \$5 to \$10 in order to try and increase participation in the CRBS.

The CRBS continues to evolve to take a more comprehensive look at risks and behaviors of students beyond substance use. In recent years we have expanded how we capture information about sexual assault and interpersonal violence, as well as two important but historically marginalized demographic categories, disabled and LGBTQ students. Compared to data collected prior to the start of the pandemic, the percentage of students who reported they had considered suicide in the past year has nearly doubled, though reported rates of making plans and attempting suicide have not substantively changed.

In 2022 the majority of COVID-related questions were removed from the CRBS questionnaire because restrictions on student behavior had largely been lifted at UD and there was a vaccine mandate in place by the time of data collection. While only two questions related to pandemic impacts on student wellbeing were retained for this year's study, these responses indicate that a substantial proportion of students are still feeling the negative impacts of the pandemic on their mental health and their degree completion. At this crucial point in time, the CRBS continues to be a valuable tool for measuring the well-being of students and identifying areas where there are opportunities for greater intervention and support to enhance student success.

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