

# Evaluating the Effectiveness of a Medical Amnesty Policy Change on College Students' Alcohol Consumption, Physiological Consequences, and Helping Behaviors

*Journal of Studies on Alcohol and Drugs*, 79(4), 523–531 (2018).

[Amie L. Haas](#), Ph.D.,<sup>a,\*</sup> [Robert E. Wickham](#), Ph.D.,<sup>a</sup> [Kevin McKenna](#), B.A.,<sup>a</sup> [Emily Morimoto](#), B.A.,<sup>a</sup> & [Lisa M. Brown](#), Ph.D.<sup>a</sup>

+ Affiliations

\*Correspondence may be sent to Amie L. Haas at Palo Alto University, 1791 Arastradero Rd., Palo Alto, CA94304, or via email at: [ahaas@paloaltou.edu](mailto:ahaas@paloaltou.edu).

<https://doi.org/10.15288/jsad.2018.79.523>

Received: April 16, 2017

Accepted: March 08, 2018

Published Online: August 08, 2018

## Objective:

This study summarizes the association between medical amnesty policy (MAP) implementation and drinking behaviors at a 4-year university.

## Method:

First-year students ( $N = 1,246$ ; 50.8% male) were assessed in the academic year pre- (2009–2010,  $n = 571$ ) and post-implementation (2010–2011,  $n = 675$ ). A cohort-sequential design was used. Students were assessed at college entry and end of year. Self-report measures assessed recent alcohol use, physiological consequences, and helping behaviors specific to alcohol-related medical emergencies.

## Results:

MAP implementation did not increase drinking, overall consumption, or the incidence of physiological consequences. Modest increases in contacting residence life staff in the event of an emergency were also found.

## Conclusions:

This study provides empirical support that MAP policies do not increase consumption or problems and may reduce barriers to seeking help in the event of an emergency. Additional research is needed to establish the effectiveness of MAPs as an environmental-level strategy to reduce harmful drinking on campus.