Measuring Drug and Alcohol Use Among College Student-Athletes*

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Objective. Few issues in athletics today receive more attention than drug and alcohol usage, especially when it comes to college athletics. We seek to address self-report biases related to drug usage and heavy drinking. *Methods.* We employ an experimental measurement technique. *Results.* Our results suggest that a greater percentage of student-athletes from a major conference knowingly engage in these two behaviors than self-reports indicate. Specifically, we find 37 percent of respondents seem to have taken banned performance-enhancing drugs (compared to 4.9 percent who directly admit to doing so when asked), and 46 percent seem to have consumed more than five drinks in a week (compared to about 3 percent who openly admit to doing so). *Conclusions.* We provide evidence for the extent of self-underreporting when it comes to drug and alcohol usage among college athletes. That said, future work is needed to accurately pinpoint specific substances and the frequency with which they are taken; for example, it could be the percentage of individuals using banned substances stems from consuming significant concentrations of caffeine (e.g., multiple cups of coffee).

Drug and alcohol use by college students is a frequently debated and often controversial topic. This subject has received particular attention when it comes to student-athletes. Evidence of the importance of assessing drug and alcohol usage among student-athletes is exemplified by a 2012 National Collegiate Athletic Association (NCAA) report whose "primary objective [was] to update NCAA policy makers with both current and historical information concerning levels of drug and alcohol use by student-athletes within college athletics" (2012: 4). In this article, we employ an experimental technique that allows us to offer a more accurate assessment of usage than extant studies provide. We begin in the next section with a literature review that leads us to an explication of our approach. We then present results from our survey. Our evidence demonstrates that the commonly used self-report method for estimating drug and alcohol use found in existing studies, including in the aforementioned NCAA report, seem to understate usage.

The Challenge of Measuring Drug and Alcohol Usage

To our knowledge, there is surprisingly little written on drug use among college studentathletes and, when it comes to student-athletes' own input on this controversial issue,

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SOCIAL SCIENCE QUARTERLY, Volume 96, Number 2, June 2015 © 2014 by the Southwestern Social Science Association DOI: 10.1111/ssqu.12135 the literature is scarce. We have identified those few instances in which student-athletes' attitudes are measured.¹ While existing studies on this subject are illustrative of college athletes in many ways, the nature of the samples used and the method for measuring usage limit what can be said about the extent of drug and alcohol use. For example, Buckman et al. (2008) find that among male student-athletes, 9.7 percent say they use "banned performance enhancers" and 55.8 percent say they used "performance-enhancing drugs" (which might include legal nutritional supplements). Among female student-athletes, no one said they use "banned performance enhancers" and 29.8 percent said they used "performanceenhancing drugs." While these are intriguing and important findings, the sample is of limited generalizability since it comes only from those who took part in a mandatory alcohol education program. Green et al. (2001) survey student-athletes in Divisions 1, 2, and 3 and find 80.5 percent use alcohol, but the specifics of the survey are unclear and the survey also was part of a NCAA-sponsored project, for which research teams conducted the survey at each participating school. While this result is clearly important evidence, the way the data were collected creates the possibility that demand effects influenced the validity of usage estimates. For instance, the presence of NCAA authorities during the administration of the survey may have had a substantial influence over respondents' candor, especially given usage was measured via self-reports (also see Wechsler et al., 1997 who similarly rely on self-reports in a study of alcohol use).²

Perhaps the most impressive and exhaustive survey of athlete drug use was done by the NCAA (2012) itself in 2009. It drew a stratified sample of institutions from all 1,076 active member institutions of the NCAA and surveyed three prespecified teams per school with an ultimate sample of 20,474 respondents. The survey took several steps to ensure anonymity, such as providing a preaddressed and stamped envelope for return to a third-party vendor, and it did not ask for identifying information from the respondent. The survey asked about a host of drug and alcohol behaviors, finding—for example—that only 0.4 percent of respondents report using anabolic steroids within the last 12 months and over 50 percent of respondents indicate using alcohol in the past year. The NCAA survey provides vital information. However, like the other studies described above, the NCAA's survey relied on self-reports of behavior that may lead to underreports even with the survey's efforts to ensure anonymity. Indeed, the report acknowledged that "Even with these measures to ensure anonymity, self-report data of this kind can be problematic due to the sensitive nature of the issues. Therefore, absolute levels of use might be underestimated in a study such as this" (2012:5).

In sum, while research to date provides valuable information, it is plagued by the nontrivial threat of arriving at substantial understatements of usage. Reliance on self-reports leads to underreporting due to social desirability and threat of disclosure influences (Tourangeau and Smith, 1996; Tourangeau et al., 2000). The former refers to respondents' hesitation to provide an answer that may be deemed as socially unacceptable (e.g., that violates expectations or norms). The latter, meanwhile, occurs when there are "concerns about the possible consequences of giving a truthful answer should the information become known to a third party ... [Such a] question ... raises fears about the likelihood or consequences of disclosure of the answers to agencies or individuals not directly involved in the survey. For example, a question about use of marijuana is sensitive to teenagers when

¹Some of this work looks at other drugs that we do not study, such as chewing tobacco and marijuana, so we do not discuss those studies here.

²Other studies, such as those by Lisha and Sussman (2010), Terry and Overman (1991), Ford (2007), and Tricker and Connolly (1997), explore drug and/or alcohol use among athletes (and some nonathletes), but they do not look directly at distinct types of behaviors as we do below.

their parents might overhear their answers" (Tourangeau and Yan, 2007:860). Questions about drug or alcohol usage in general have long been noted as carrying with them social desirability and threat of disclosure problems. For example, Tourangeau and Yan state: "To cite just one line of research ... studies that compared self-reports about illicit drug use with results from urinalyses ... found that some 30%–70% of those who test positive for cocaine or opiates deny having used drugs recently. The urinalyses have very low false positive rates ... so those deniers who test positive are virtually all misreporting" (2007:859).

When it comes to student-athletes and drug/alcohol usage, there is undoubtedly a threat of disclosure issue such that if these student-athletes were discovered to be using banned substances or drinking heavily, they could be prevented from participating in their sport according to NCAA rules. Specifically, the NCAA bans a number of substances, including anabolic agents, stimulants, street drugs, and even large amounts of caffeine; individuals identified as using such substances are banned from participation.³ While the NCAA only has a limited ban on alcohol usage, it explicitly warns against overusage in stating the following: "The following is a list of substances that are commonly abused, and how they can impact a student-athlete's performance and eligibility. Alcohol: Alcohol is a nervous system depressant. At high dosages, effects include mood swings, impaired judgment and inability to control motor functions. Alcohol can impair an athlete's performance through dehydration, depleting vital nutrients and interfering with restful sleep and recovery."⁴ This statement makes reporting use socially undesirable (e.g., it would be violating a possible norm of avoiding any product that may harm performance). Moreover, it may be potentially threatening for athletes to overdrink since their individual school or conference may enforce distinct policies that could put caps on alcohol usage. It is for these reasons that the literature on underreporting often accentuates biases in self-reported drug and alcohol usage, as the aforementioned NCAA report explicitly recognizes (Tourangeau and Yan, 2007:860). Our goal is to remedy this underreporting problem and identify more accurate rates of usage by employing a procedure that has been shown to overcome underreporting challenges.[>]

There are various ways to elicit more accurate responses (e.g., minimize underreporting), including the previously discussed anonymity approach employed by the NCAA (for a fuller discussion, see Traugott and Lavrakas, 2008). However, perhaps the most powerful approach, and the one we pursue, is called the list experiment or item count technique. This approach has been employed to gauge racial prejudice, homophobia, and substance abuse in other populations than our focus, where it has not been used (e.g., Kuklinski et al., 1997; Druckman and Lupia, 2012; Coffman et al., 2013). The technique provides a solid estimate of aggregate responses, although it does not allow for individual-level analyses (and again we are unaware of it being employed as we do below when it comes to college athletics).

In this approach, the researcher randomly divides respondents into two groups: one treatment and one control. The respondents in the treatment count the number of arguments with which they agree (or disagree/cause them to be upset) among the (for example) *four* arguments listed in the questionnaire. Of those four arguments provided, one addresses

³See (http://www.ncaa.org/wps/wcm/connect/public/NCAA/Health+and+Safety/Drug+Testing/ Resources/).

⁴See (http://www.ncaa.org/wps/wcm/connect/public/NCAA/Health+and+Safety/Drug+Testing/ Resources/Commonly+Abused+Substances).

⁵The problem of underreporting also occurs in the related areas of mental illness (e.g., Calhoun et al., 2000) and morbidity and healthcare (e.g., Ansah and Powell-Jackson, 2013; Khantzian, 1997; Mountjoy et al., 2010).

an item of social undesirability (e.g., racism or, in our case, drug usage). By contrast, respondents in the control group are provided with the same question, except that their argument pool is only composed of, for example, *three* arguments (e.g., all but the socially undesirable item). Random assignment to the control and treatment groups means that the two groups should be equivalent, on average, in how they answer the items presented on both forms. In turn, this allows for an unbiased estimate for the proportion of respondents who have the socially undesirable trait by subtracting the average number of agreement in the control group from the treatment group.

One notable application is Kuklinski et al. (1997), who employ a list experiment to elicit the extent to which citizens are willing to admit racial anxiety or animus. In the experiment, subjects are presented with a list of items and are asked: "How many of them upset you?" Some subjects randomly were assigned to assess a total of three items (e.g., increased gasoline tax, athletes receiving millions of dollars, corporations polluting the environment). Others receive a four-item list where the added item is "a black family moving in next door." Kuklinski et al. report that, among white survey respondents in the American South, the four-item group reported that an average 2.37 items made them upset, compared to 1.95 items in the three-item group. Since the groups are otherwise identical, the implication is that 42 percent of these respondents (i.e., $(2.37 - 1.95) \times$ 100) are upset by the thought of a black neighbor. By contrast, when subjects were asked this question directly, only 19 percent of respondents claimed to be upset. More recently, the National Bureau of Economic Research released a list experiment regarding sexual orientation among Americans (Coffman et al., 2013). It reports that the use of a list experiment indicates "substantial underestimation" of nonheterosexuality in conventional surveys. Survey experiments such as these can help us observe opinions that citizens do not readily express due to social desirability and/or threat of disclosure problems. Also note that the experimental (random assignment) nature of this measure means that multivariate analyses are not needed as the groups are, on average, equivalent, and thus the focus is on average percentage differences.

Considerable research shows that list experiments reveal a clear *causal* dynamic of underreporting. Indeed, differences between the groups have been found to not stem from *measurement error*. This argument is supported by three types of evidence. First, studies that have available validation data show that reliance on self-reports, even when coupled with assurances of anonymity as found in the NCAA report cited earlier, generate substantial underreporting of behaviors in comparison to estimates generated by list experiments; this difference is substantial and is on the order of 40 percent (see Tourangeau et al., 2000). Second, this argument is consistent with Tourangeau and Yan's (2007:872) finding that "the use of item count techniques [i.e., list experiments] generally elicits more reports of socially undesirable behaviors than direct questions" (also see Blair and Imai, 2012:47-48, for a long list of examples that employ this approach in other domains). Finally, Kiewiet de Jonge and Nickerson (2014) directly investigate the possibility that the added item found in the treatment version of the list experiment by itself leads to a higher number of responses. Their results "imply that the ICT [item count technique] does not overestimate socially undesirable attitudes and behaviors and may even provide conservative estimates" (2014: 661). In short, they find that there is no evidence that the differing lengths of the lists generate any measurement bias, and instead, differences come only from the experimental treatment of the added "undesirable" item (also see Himmelfarb and Lickteig, 1982; Tourangeau et al., 2000:278; Lensvelt-Mulders et al., 2005; Tourangeau and Yan 2007:872 for more confirmatory evidence along these lines). Finally, we will later provide direct evidence that measurement error is unlikely since the two groups responded to direct

self-report questions in proportions that do not significantly differ and thus the treatment group was not per se more likely to count the extra item.

Our causal claim, which is supported by a wealth of prior work as just discussed, is that social desirability and disclosure issues cause underreporting in direct self-reports relative to a list experiment. Again, this is so because the experimental (random assignment) nature of the approach means the groups are on average equivalent, so any difference in responses is due to distinctions in treatment (see Druckman et al., 2011 for details on the experimental approach and the need for only proportion or mean comparisons between groups and not multivariate analyses). In short, differences reveal a causal source of underreporting.

Data and Methodology

Our survey focuses on the NCAA Big Ten conference, which is located primarily in the Midwest, with Nebraska as the western-most point and Penn State to the east (circa 2013, which is relevant since the conference is expanding in 2014). Despite its name, the Big Ten included, at the time of our survey, 12 major universities, all of whom compete in Division I NCAA Athletics. While we recognize the limitations of restricting our sample to only one conference, the Big Ten conference is a strong starting point as it includes a large amount of variance among universities and includes schools that recruit nationally (for another fruitful study of a single conference, see Fountain and Finley, 2009).

In the spring of 2012, we accessed the athletic websites of all 12 Big Ten schools and obtained the full rosters for all sports at every school. We then accessed each school's website to locate and record the e-mail address of every student-athlete listed on those rosters. This information was publicly available at all schools except for the University of Nebraska. We contacted officials at the University of Nebraska to obtain directory information for their student-athletes but were declined and thus they are excluded from our sample.

Overall, we located 6,375 names on rosters. We found no e-mails for 479 student-athletes and subsequently we sent out 5,896 e-mails. Of them, 1,803 bounced back as no longer in service (which could be due to the students no longer being enrolled, database errors, website errors, or some other reason). Thus, we successfully sent a total of 4,093 e-mails that, to our knowledge, reached their intended targets. We also sent out one reminder to all respondents. Sample size varied across schools, in part due to variations in the number of sports each school sponsors (e.g., Ohio State fields 37 total teams, Michigan has 27 teams, while Northwestern has just 19 teams). We received 1,303 responses, leading to response rate of 1303/4093 = 31.8 percent. This rate exceeds the typical response rate in e-mail surveys of this length, especially those that do not employ incentives (see Couper, 2008:310; Shih and Fan, 2008; Sue and Ritter, 2007:36 for discussion of typical response rates on similar surveys).⁶

⁶While we found notable variance in the success of our e-mails reaching their targets (i.e., not bouncing back), of the 4,093 e-mails that were ostensibly received, we found near-identical response rates across universities with a minimum response rate of 29.59 percent at Michigan State, a maximum rate of 35.57 percent at Wisconsin, and an average response rate of 31.79 percent (SD = 0.018). In terms of the sample makeup, the following lists the number of respondents and the percentage of the sample that came from each university: Indiana (128; 9.82 percent), Ohio State (122; 9.36 percent), Illinois (104; 7.98 percent), Minnesota (120; 9.21 percent), Michigan State (100; 7.67 percent), Purdue (100; 7.67 percent), Iowa (110; 8.44 percent), Wisconsin (154; 11.82 percent), Northwestern (122; 9.36 percent), Pennsylvania State (116; 8.90 percent), and Michigan (127; 9.75 percent). Our responses came from over 24 different sports; the specific breakdown is available from the authors. The highest responding sport was track and field, which made up 15.12 percent of the respondents. All other sports consisted of less than 10 percent of the respondents.

While our sample may not be perfectly representative of Big Ten student-athletes, it provides a telling view of drug and alcohol use among student-athletes given the diversity of the schools sampled and given that we have no reason to suspect they differ in terms of reporting relative to other conferences/sports.⁷ Additionally, the experimental nature of our key measurement approach means that obtaining a perfectly representative sample is of much less importance than is the random assignment of our experimental treatment between groups (for an extended discussion why this is the case, see Druckman and Kam (2011), who show that given sufficient variance, which we have, experimental findings are robust sampling considerations aside). In short, our sample permits us, as far as we know, to carry out the first study of its kind.

Results

Before turning to our list experiments, we first compare some of our own self-report measures with those from the annual College Senior Survey (sponsored by the UCLA Higher Education Research Institute; see Franke et al., 2010); the Senior Survey provides an important baseline of comparison between athletes (our survey) and a sample of largely nonathletes.⁸ Indeed, the vast majority of the UCLA respondents are, based on probability, nonvarsity athletes, given that the sample includes 24,457 individuals from 111 colleges and universities. For a baseline, we used *identical* questions to those employed by the UCLA survey.

In Table 1 (where we use the label "Ath" for our student-athlete survey and "Gen" for the general survey), the first column lists the question in both surveys. The other columns list the results from the general survey (Gen) and our survey (Ath), with N/A indicating that there were no other response categories on that question.⁹ What we clearly find is that, relative to the general student survey, student-athletes are substantially less likely—*in self-reports*—to drink beer, liquor (in general or over the two weeks preceding the survey), and to frequently "party," which can be defined as a social gathering that "typically involves eating, drinking, and entertainment" (Oxford Dictionaries). Nearly 75 percent of the general student population say they "frequently" or "occasionally" drink beer, whereas only 46 percent of our student-athlete sample say the same (z = 20.55; p < 0.01). Similarly, 84 percent of the general population report drinking wine or liquor "frequently" or "occasionally" over the previous year, but only about 36 percent of student-athletes do so (z = 39.58; p < 0.01). In the two weeks prior to the survey, about 53 percent of the general sample state they partied for three or more hours, whereas only 38 percent of student-athletes do (z = 9.05; p < 0.01).¹⁰

⁷The demographics of our sample are as follows: 60.94 percent female; 6.29 African American; 78.00 percent are underclassmen and 22.00 are seniors; 4 percent having family incomes below \$30,000, 16 percent between \$30,000 and 69,999, 26 percent between \$70,000 and \$99,999, 35.5 percent between \$100,000 and \$100,999, and 18.5 percent \$200,000 or over; and 51 percent on athletic scholarship.

⁸We use results from 2009, as these were the most recent available data. We did not use the freshmen survey as it would provide an incorrect point of comparison since nearly 75 percent of our respondents were not freshmen.

⁹In our survey, respondents always had the choice to not respond to a particular question and thus the sample size varies across different questions for this reason.

¹⁰Our main concern is with measuring overall levels of alcohol and drug use, but we also found some intriguing differences between male and female respondents on these items. Specifically, we find that male respondents reported significantly higher rates of drinking and partying and were significantly more likely to admit taking banned drugs (results available from authors). This is in line with Wechsler et al. (1997) and Buckman et al. (2008). For additional analyses on gender, see the online appendix at (http://faculty.wcas.northwestern.edu/~jnd260/publications.html).

		Student-Atl	hlete and Studen	Student-Athlete and Student Self-Reported Behaviors	3ehaviors		
Question				Response Categories	gories		
During the past academic year, how often have you drunk beer? (<i>N</i> for athletes = 1.041)	<u>Frequently</u> Ath.: 30.5% Gen: 33.4%	Occasionally Ath.: 15.9% Gen: 41.4%	<u>Not at all</u> Ath.: 53.7% Gen: 25.1%	N/A	N/A	N/A	N/A
During the past academic year, how often have you drunk wine or liquor? (N = 1035)	Frequently Ath.: 20.4% Gen: 31.5%	Occasionally Ath.: 15.56% Gen: 52.5%	<u>Not at all</u> Ath.: 64.06% Gen: 15.9%	N/A	N/A	N/A	N/A
Think back over the past two weeks. How many times in the past two weeks, if any, have you had five or more	<u>Never</u> Ath.: 53% Gen: 44.7%	<u>Once</u> Ath.: 20.6% Gen: 14.7%	<u>Twice</u> Ath.: 14.2% Gen: 13.6%	<u>3-5 times</u> Ath.: 9.3% Gen: 16.8%	<u>6-9 times</u> Ath.: 2.11% Gen: 6.8%	10 or more times Ath.: 0.7% Gen: 3.4%	N/A
Towards $(N = 1,042)$ During the past academic year, how much time did you spend during a typical week partying? (N = 1,042)	<u>None</u> Ath.:18.9% Gen: 19.7%	Less than 1 hour Ath.: 22% Gen: 11.3%	<u>1–2 hours</u> Ath.: 21% Gen: 16.4%	<u>3-5 hours</u> Ath.: 25.4% Gen: 24.7%	<u>6-10 hours</u> Ath.: 10.1% Gen: 17.2%	11–15 hours Ath.: 1.9% Gen: 6.1%	<u>16-20 hours</u> Ath.: 0.4% Gen: 2.3% Ath.: 0.5% Gen: 2.3%
^a The question continued with the following: "(A drink can be a 12-ounce beer or wine cooler, a 4 ounce glass of wine, or a shot of liquor either straight or in a mixed drink.)" drink.)" N/A, not a response category.	th the following: " y.	(A drink can be a 12	2-ounce beer or wi	ine cooler, a 4 ounc	e glass of wine, or a	t shot of liquor either st	raight or in a mixed

TABLE 1

Drug and Alcohol Use Among College Student-Athletes

We speculate that the vast differences in self-report stem from two factors. First, studentathletes may genuinely spend less time engaging in these activities, perhaps due to the fact that they spend much of their time either in classes, practicing their sport, or receiving tutoring. Second, student-athletes may be increasingly aware of the negative influence that alcoholic consumption has on their athletic performance, particularly since on-campus education programs highlight the impact of drinking and other related behaviors on performance. They may share concerns about drugs or perhaps worry about being caught for using drugs banned by their university sports department, their conference, or the NCAA (i.e., threat of disclosure).¹¹ Of course, the lack of individual-level data from the UCLA survey prevents us from making causal claims about the difference between athletes and nonathletes. However, our evidence is suggestive.

Estimating Drug and Alcohol Use with List Experiments

We now turn to our list experiment to gauge the aggregate usage of drugs and alcohol; as explained, this approach is a fruitful one for addressing documented underreporting in these areas due to social desirability and threat of disclosure issues (e.g., Tourangeau and Smith, 1996). As far as we know, we are the first to apply this method to the domain of student-athlete drug use and drinking.

Drug Use¹²

We use the list experiment approach to estimate the percentage of student-athletes who knowingly take banned performance-enhancing drugs and consume over five alcoholic drinks per week—both behaviors to which student-athletes may be extremely hesitant to admit on a self-reported survey. We asked all respondents: "Below is a list of activities that you <u>may have engaged in over your time in college</u>. We are interested in <u>HOW MANY</u> of these activities you have engaged – <u>NOT</u> which ones. Thus, please simply choose the number at the end of the list." All respondents were provided the list of the following four items: "Sustained an injury during a practice or game that prevented you from playing at least one other game," "joined a social club whose majority of members did/does not include varsity athletes," "skipped a class because you felt so tired from a practice or game schedule." We randomly assigned respondents to receive either just those four items or that list with the following key fifth item: "knowingly took a drug banned by the NCAA that may improve your athletic performance." Thus, respondents who received the four-item list

¹¹We asked two other questions but only to our athletes. First, we asked how worried they were about complying with NCAA rules concerning drugs, and so on. We found that 48 percent were slightly, moderately, or extremely worried. Finally we asked about caffeine consumption, in part because NCAA rules on what is allowable is unclear on this question (as they give amounts in micrograms, which are contingent on BMI and other factors) and, as reflected by this reality, we found that nearly 70 percent of student-athletes seem to exceed what is allowable, even in self-reports.

 12 As is typical when any measure involves a sensitive behavior, there is an increase in item nonresponse (Tourangeau and Yan, 2007), and thus our *N* shrinks for the list experiments. Importantly, however, we found no significant differences in terms of respondents who did versus respondents who did not complete the list experiments in terms of income, gender, scholarship type, or party identification. The only variable that distinguished the two groups is year in school, which may reflect those toward the end of their college careers as being less concerned about disclosure and thus more likely to respond.

(i.e., the control group) could provide an answer between 0 and 4, while those who received the five-item list (i.e., the treatment group) could provide an answer between 0 and 5^{13} .

Notice our focus is on using drugs that are *knowingly banned*. This differs from some prior work that looks at drug usage more generally or nutritional supplements that may not be banned. In light of the previously discussed work on this approach, if we find differences between the groups, then we will have *clear* evidence that self-reports *cause* underreporting. Further, as mentioned, the experimental measure means we need only comparable averages; indeed, we checked and confirmed the success of random assignment in both experiments, meaning any differences stem from the treatment and not another variable.¹⁴

The results are stark, with the control group registering a mean response of 3.31 (SD = 0.78; n = 553) while the treatment group offers a mean response of 3.68 (0.98; 510). This is a significantly marked difference ($t_{1061} = 6.90$; p < 0.01). Substantively, it suggests that 3.68 - 3.31 = 37 percent of respondents have knowingly taken banned drugs. Remarkably, we also asked at the end of the survey: "Since you started playing sports in the NCAA, have you ever knowingly taken a drug banned by the NCAA that may improve your athletic performance?" To this question, only 4.9 percent said that they had (with virtually no difference between experimental groups; note that this question was not asked directly in the UCLA survey, so it does not appear in Table 1).¹⁵ In short, this indicates substantial social desirability and/or threat of disclosure bias. Regardless of how one interprets the moral implications of this finding, if there are any, the central point is that self-reports of drug use among student-athletes are misleading and vastly understate usage.¹⁶ We have no way of knowing specifically what these banned drugs are, as they could range from something as serious as blood doping to something more innocuous such as high concentrations of caffeine (as asked about above, see footnote 11).¹⁷ We also do not know the frequency of usage, as it could be many individuals used a banned substance just once.

Alcohol Use

We used the exact same technique to explore heavy drinking—another behavior that student-athletes may tend to understate for potential reasons including the detrimental effects on athletic performance and the possible stigmatization by coaches, trainers, or

¹³The NCAA provides a list of banned drugs at (http://www.ncaa.org/wps/wcm/connect/public/NCAA/Health+and+Safety/Drug+Testing/Resources/NCAA+banned+drugs+list).

¹⁴Nonetheless, we did perform multivariate analyses and, as expected, for both our list experiments, the experimental condition was by far the most predictive element. We also checked for collinearity and found no variables (i.e., our demographic variables) coming even close to being collinear (e.g., they are not highly correlated).

¹⁵As mentioned above, empirical evidence of the difference not stemming from measurement error would come in the form of the two experimental groups not significantly differing in terms of self-reports. This is exactly what we find: 5.35 percent responded yes for the four-item group compared to 4.50 percent for the five-item group (z = 0.64; p < 0.30).

¹⁶We also looked specifically at sports where drugs have become an issue or there are ostensible advantages to building strength; these include football, wrestling, rowing, track and field, ice hockey, and water polo. We found larger differences in this subsample with a control mean of 3.20 (0.77; 216) and a treatment group mean of 3.77 (1.00; 196) ($t_{412} = 6.52$; p < 0.01). In short, 56 percent of those participating in football, wrestling, rowing, track and field, ice hockey, and water polo knowingly took banned drugs, 29 percent higher than among all athletes.

¹⁷Despite our prior point about, as is typical, not needing multivariate results, we did regress the count on all our demographic variables. We found the experimental condition had the strongest and most consistent effect with all other variables being insignificant other than those later in school tending to report a higher number of activities. Again, the nature of the experiment means these results should not be seen as causal per se; the experiment only allows us to make clear statements about underestimates.

fellow athletes. We follow the UCLA survey and define heavy drinking as consuming more than five drinks per week. For this experiment, we again began with the following: "Below is a list of activities that you may have engaged in over your time in college. We are interested in HOW MANY of these activities you have engaged – NOT which ones. Thus, please simply choose the number at the end of the list." The respondents randomly assigned to the four-item group received the following items: "Your choice of which University to attend was determined largely by the sports opportunities (e.g., it weighed in at least in 50% of your decision)"; "stayed up past 1 AM, on average, during the season of your sport(s)"; "plan to continue playing your sport after college, although not necessarily on the professional level"; and "play other sports during the school year at least once a month." The randomly assigned treatment group additionally received this item: "In the typical week during the past academic year, consumed more than five alcoholic drinks. (A drink can be a 12-ounce beer or wine cooler, a 4 ounce glass of wine, or a shot of liquor either straight or in a mixed drink.)"

Again, we find a statistically and substantively large difference, with the control group reporting a mean of 2.76 (SD = 0.85; n = 544) and the treatment group a mean of 3.22 (1.10; 506; $t_{1048} = 7.61$; p < 0.01). Perhaps surprisingly, this is even a larger difference than our drug experiment. Substantively, it suggests that $(3.22 - 2.76) \times 100 = 46$ percent consumed more than five drinks a week. While our experimental item did not perfectly match the UCLA survey (see Table 1), those results suggest that less than 3 percent of athletes admitted to drinking over five times every *two weeks* (and the experimental groups do not reach significant difference between one another; p < 0.25). This is, again, *causal* evidence of underreporting given the work that shows this approach reveals clear causal underreporting of self-reports versus our approach (even with the four- vs. five-item comparison—as explained above).¹⁸

Conclusion

The magnitude of underreporting on drug and alcohol usage matches the percentages often found in self-reports versus list experiments on distinct topics. As mentioned, Kuklinski et al. (1997) find evidence that 42 percent of white southerners express prejudice using a list experiment compared to just 19 percent when asked directly, for a 23 percent swing. Similarly, Gonzalez-Ocantos et al. (2012:210) find a 24 percent swing in those admitting to receiving gifts or personal favors when it comes to Nicaraguan municipal elections. Given these similarly large shifts, we find our results to be credible.

We recognize the constraints of our survey in terms of a potentially limited sample that represents only one collegiate athletic conference at one time period. Nevertheless, the evidence is overwhelming in demonstrating substantial banned drug and alcohol usage (including heavy drinking) among college student-athletes. In short, our results show self-reports *cause* underreporting. That the percentage is greater than self-reports is not a surprise, but the pronounced gap is glaring and suggests usage may be much more widespread than many believe. This result should be troubling to readers, regardless of whether they view drug use as worrisome. For those readers who view drug use as problematic, these results suggest that the problem is direr than existing data based on self-reports reveal. On the other hand, if one does not see drug use as problematic,

¹⁸We again ran a regression with experimental condition being the strongest predictor; otherwise, women reported fewer activities, and higher income individuals reported more activities for the drinking list experiment. Details on this and the drug regression are available from the authors.

then our findings remain important as they provide a useful method for more accurately gauging drug use and for exploring other behaviors affected by social desirability and/or the threat of disclosure bias that could benefit from greater monitoring or education. Further research should try to correctly identify what explains the difference between self-reports and our results—for example, is there a lack of awareness regarding NCAA rules and regulations, or are students rather knowingly violating these terms? Also, what substances are being used: is consumption of caffeine the source of underreporting? And, how often are substances used? What is clear from this study is that measuring these trends requires subtle techniques to provide the most accurate information possible, if so desired.

We realize a drawback of our approach is that it only allows for aggregate rather than individual-level findings. Thus, the central point for future work is that the use of selfreports is problematic and that researchers need to take strides to address social desirability and threat of disclosure biases as otherwise estimates will be biased downward. While a list experiment is one powerful method for correcting for this downward bias, other techniques—such as normalization (i.e., telling respondents undesirable behaviors are common or not threatening to report), sealed booklets, and implicit measures—may also be attractive options for the more precise measurement of these behaviors (see Tourangeau et al., 2000 for greater discussion). The relative merits of these techniques for estimating drug and alcohol use, particularly among this population, are currently unknown; so, future work can fruitfully compare them against one another until the ideal tactic is discovered and can be put to use in tracking trends and arriving at accurate estimates.

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