

THE BENEFITS OF CAMPUS PREVENTION PROGRAMS: IMPACTING STUDENT AWARENESS AND WELLNESS PERCEPTIONS

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ABSTRACT

This study examines college students' perceptions, behaviors, and experiences regarding substance use and prevention efforts through a non-experimental, cross-sectional research design. Data were collected via surveys administered at two university-hosted prevention events designed to engage students in harm reduction strategies and wellness initiatives. Participants were recruited through university-wide emails and provided anonymous survey responses via QR codes. The survey included measures that captured perceptions of prevention programs, peer substance use norms, and engagement with wellness activities. The university's prevention campaign, informed by the Strategic Prevention Framework and Dimensions of Wellness model, incorporated social norming messages, interactive wellness activities, and peer-led prevention efforts. Quantitative data were analyzed using descriptive statistics and comparative analyses, while qualitative data underwent thematic analysis to identify key trends in student experiences. Findings from this study provide insights into students' awareness, attitudes, and participation in prevention initiatives, with implications for enhancing campus-wide substance use prevention programs.

1.0 INTRODUCTION

Substance use and abuse are associated with an array of negative health outcomes (Welsh, 2109). Some of these negative outcomes and correlations include poor academic performance, increased missed classes, increased isolation, increased sexual assaults, less likely to be successful after completing college, and other negative outcomes such as poor overall health. Since many students are independent for the first time and are exposed to an array of triggers that require interventions that are evidence-based and specific to college students, college campuses have a unique problem. This is especially true when we consider the other challenges that college students often face as they experience this new level of freedom, at the same time they have increased exposure to parties, illicit substances, and risk-taking behaviors. Norming of substance use, particularly prescription stimulants and marijuana, has increased, with use doubling between 2007 and 2014 (Welsh, 2109), substantiating their increased risk of exposure.

College students are also at increased risk of opioid abuse, with 18–25-year-olds being the fastest-growing group of users (DEA, 2024). Factors that contribute to increased substance use include peer pressure, social norming, academic stressors, and low perception of harm (Welsh, 2019). Additionally, Rose et al. (2021) found that the COVID-19 pandemic also influenced an increase in substance use because of significant impacts on overall mental health and well-being. Many students reported having to move back home to unhealthy environments; 71% of students reported an increase in stress, anxiety, and depressive symptoms. Triggers for these symptoms included fears about their own, as well as their loved ones' health. Moreover, decreased concentration, sleep, social interactions, and fear about academic performance, as well as struggles with food insecurity and a decrease in physical as well as social activity, all affected the use of substances for college students (Rose, S. et. al., 2021). College students continue to use substances, and university administrators continue to maintain vigilance and services to aid in decreasing student drug use, increasing safety, and reducing harm. Some policies and programs are effective while others lack longitudinal efficacy.

Because of costly clean-up efforts, one university implemented a zero-tolerance policy specifically regarding nicotine (Clemons, 2018). However, use on campus did not stop. Before the zero-tolerance policy, only approximately 33% of students were found to comply. This increased to 74% once the policy, including incentives for not smoking, was enacted. However, once incentives were over, the compliance rate fell to approximately 54%. Providing incentives is one successful way to increase abstinence from substances (Clemons, 2018). Nevertheless, while there is historical data showing that many colleges have implemented zero-tolerance policies, they have mixed results (Teasley, 2014). One ten-year study conducted by the American Psychological Association (APA) concluded that zero-tolerance policies had been ineffective in improving safety in schools and were also associated with the expansion of the school-to-prison pipeline (Teasley, 2014).

The school-to-prison pipeline is a phrase used to describe students being immediately referred for suspensions and expulsions for a wide array of behaviors, but generally pertaining to violence or substance use while on campus, with many of these students being entered into the criminal justice system (ACLU, 2017). Although some universities opt to create zero-tolerance policies, there is also a historical acceptance of experimentation and use of illicit substances on campus (Fry, 1948, Kilmer, 2014). Such policies are intended to punish students caught using illegal substances on campus with immediate expulsion from school (Bell, 2015). Use of school expulsion was extended when the Clinton administration implemented the Gun Free Schools Act of 1994, which mandated a one-year, automatic expulsion if a student was found to be in possession of firearms on a school campus. Over time, zero-tolerance policies expanded to include additional behaviors, which in turn triggered more suspensions and expulsions of students (Bell, 2015). Researchers noted that students expelled or suspended from school were more likely to drop out of school (Johnson & Shelton, 2014) and later to be incarcerated (Tsui, 2014).

Like their counterparts from the early 20th century, college students are still consuming alcohol and more so than the rest of the population, which is correlated with other high-risk behaviors (DEA, 2024). College students are also more likely to abuse stimulants, usually beginning with prescription stimulants. While focus may be on high-risk students who struggle with socio-economic factors, students from high socio-economic backgrounds are more likely to engage

in substance use (DEA, 2024). Consequently, evidence-based alcohol and substance use prevention programs are in high demand. Literature on the topic of prevention on college campuses also indicates that students have negative academic performance when alcohol and marijuana are used. This is due to several factors, including skipping class due to substance use/misuse.

Risk factors at various levels in the developmental cascade include financial stressors, histories of depression, tendency toward sensation-seeking behaviors, and current use of alcohol or/and cannabis are individual risk factors (DEA, 2024). Interpersonal risk factors include a family history of depression, peer acceptance of use, and a family environment with perceived acceptance of substance use. Community factors include the college campus environment surrounding substance use, particularly since many students are living off campus and/or lack parental supervision. These risk factors were considered when developing on-campus prevention events, but protective factors are also important to incorporate. Some protective factors amongst the developmental cascade include a negative attitude about substances, possessing healthy coping skills, having spiritual support, involvement in extracurricular service, and participating in activities such as alcohol and drug-free events (DEA, 2024). Like Bolin et al., (2017), the authors found that prevention efforts provided by college campuses across the students' academic career were found to be the best indicators for academic success and decreased use of substances.

The above aspects should be considered when developing prevention campaigns and events. College students are in a unique situation as this is the first time many are away from their primary caregivers, living on their own with new responsibilities. Likewise, given these considerations, interventions should consider and include policy, community, institutional, interpersonal, and individual factors. This is utilizing the "developmental cascade," in which these factors are not approached in silos but overlap and influence one another over time, which can assist with holistic interventions that can benefit students from various backgrounds (DEA, 2024).

The purpose of this study was to obtain student feedback about substance use and misuse on campus and to utilize these findings to develop a research-informed prevention campaign. While the statistics are pertinent to the State, this campaign used data collected from students at the University of Central Arkansas, the Dean of Students' Office. Findings in the Arkansas Collegiate Substance Use Assessment indicated that most respondents overestimated their peers' substance use. While 90% of respondents reported having awareness of substance use policies on campus and 88% reported awareness of campus prevention policies and activities, 75% of respondents reported not being involved with these policies or programs. Our university's prevention campaign sought to improve these outcomes and better connect students to existing policies and programs.

2.0 METHODS

The purpose of this study was to obtain student feedback about substance use and misuse on campus and to utilize these findings to develop a research-informed prevention campaign. Our prevention campaign used existing social norming statistics regarding students overestimating their peers' use of illicit substances. These statistics were used to inform the development of prevention events that addressed both risks as well as protective factors. Previous research was

utilized to inform the prevention campaign with the use of positive, motivational interventions. Given the information provided, particularly that students do not feel connected to prevention and treatment services on campus (Slagle et al., 2022), this study sought to explore the experiences, behaviors, and opinions of UCA students regarding alcohol, drugs, and mental health services. The study hypothesized that the majority of UCA students have used alcohol and drugs, but do not:

- use the substances regularly,
- create a supportive environment for their peers, and
- encourage the use of mental health services.

The study aimed to explore the various characteristics of addiction and behaviors. College students engaging in alcohol use and abuse were associated with increased aggressive behaviors, as well as PTSD. This group also tended to be more isolative, have increased hospitalizations, anti-social behaviors, and other impulsive, high-risk behaviors. Students with higher ACES scores tended to have problematic addiction issues. Generally, this began as an attempt to cope with stressors, but it often leads to dependence and addiction (de Moura et al., 2023).

The Dimensions of Wellness and the Strategic Prevention Framework were used to inform the implementation of the study's program. Dimensions of Wellness informed wellness events, such as Wellpalooza, and health promotion campaigns that were designed to improve student outcomes and focused on considering the whole person and their overall health and well-being. Among college students, improving and maintaining health and wellness is important for achieving academic success, personal development, and lifelong wellness. The Substance Abuse and Mental Health Services Administration (SAMHSA, 2016) describes wellness as having good health in many dimensions of our lives. The core eight dimensions include physical, intellectual, spiritual, social, environmental, occupational, emotional, and financial aspects of health (SAMHSA, 2016). There is a mutual co-dependence or interconnection between the dimensions, but each dimension bears its own significance in health and well-being. If one or more dimensions are neglected over time, health, well-being, and quality of life can be adversely affected. A brief description of each core dimension illustrates its importance:

- Physical wellness focuses on the body: how well the body functions and how it is cared for. Positive physical health habits can include adequate physical activity, a healthy diet, sufficient sleep, and making responsible decisions about drinking and drugs. Students were exposed to several physical wellness activities, including the on-campus wellness center that hosts a variety of physical activities. We also had a pop-up yoga and mindfulness station for students to participate in.
- Intellectual wellness is marked by a willingness to expand knowledge, skills, and creativity. It also consists of efforts to take on new intellectual challenges and seek and create solutions. Several academic support departments that link students to tutoring, accommodations, and more.
- Spiritual wellness is influenced by one's core set of values and beliefs and how they inform and provide the foundation for a sense of purpose and meaning in life. Spiritual wellness can also serve as a source of support when facing life's challenges. Several

on-campus faith-based and spiritual services were present, including on-site yoga for meditation.

- Social wellness pertains to the ability to develop and maintain healthy, satisfying interpersonal relationships that result in a sense of connection. An ability to be a source of support for others and receive support in return is also important for social wellness. The Wellapalooza was a social health promotion event that brought students together for a common cause, but also linked students to many on-campus student organizations, activities, and resources. Check-in QR codes for students to sign up for future connection, attendance recording, and assessment purposes. Another part of this event was to have students directly meet with many of the people in these departments and groups to have an instant connection, which was identified as a barrier in the initial student data.
- Environmental wellness encompasses the quality of home, school, work, and social environments, as well as the ability to connect to the world around you and to choose a lifestyle that helps protect and preserve it. University groups inviting students to outdoor activities, healthy challenges, and overall adding a focus on one's overall environmental wellness was also included.
- Occupational wellness involves the quality of one's relationship to what is considered work (e.g., a paying job, academic studies, an athletic endeavor, or artistic pursuit) (Lynch et al., 2018). Balancing work and leisure time is also a hallmark trait. The key is engaging in meaningful, enjoyable work that aligns with personal values. Tables including resume-writing, interviewing skills, and work-life balance were addressed. Students were able to learn how they could easily connect to these services. Students were also informed about on-campus employment.
- Emotional wellness is the ability to express, acknowledge, and handle one's feelings and moods, while also successfully handling life's stresses, exhibiting compassion for others, and adapting to change and difficult situations. Addiction Studies, university counseling services, and student support all had a presence with interactive activities to assist students in practicing healthy coping skills and knowing how to access services. Students were also provided apps that connect them with various services should they need immediate or after-hours assistance.
- Financial wellness describes satisfaction with one's current financial circumstances and future prospects, along with knowledge and skills of financial planning and expense management (SAMHSA, 2016). A student organization held financial wellness planning sessions at the event. While these were brief, they provided students with an introduction to financial planning and wellness, as well as another link to services.

3.0 STUDY DESIGN

This event was conducted at a university in the Southern region of the United States that is considered to be a "backpack campus," in which a large majority of students live on campus. Findings were utilized from a prevention survey previously administered by the Dean of Students' office. This study utilized a non-experimental, cross-sectional research design to examine college students' perceptions, behaviors, and experiences regarding substance use and prevention efforts. Data collection was conducted through surveys administered at on-campus prevention events aimed at engaging students in substance use prevention and harm reduction strategies.

3.1 Participant Recruitment

To recruit subjects, all students received informational emails via their university email accounts about two on-campus prevention education events. The emails were sent via the Dean of Students, faculty, staff, and other student organizations. We also partnered with the university news channel to advertise the event. The first email was sent before the first prevention education event, which was a sober homecoming that included a sober homecoming tailgate event and Wellapalooza. Each student who attended was provided a QR code once they had gone through all of the stations. They completed a brief survey, weaving the dimensions of wellness with the prevention activity. Participants were recruited from a mid-south university through informational emails sent to all students via their university email accounts. These emails provided details about two on-campus prevention education events: a sober homecoming tailgate event and Wellapalooza. Students who attended the events were invited to participate in a brief survey via a QR code provided upon completion of the event activities. Participation in the survey was voluntary, and no identifying data were collected to maintain confidentiality.

3.2 Survey Development/Testing Instruments

The sample was assessed using the following measuring instruments. These instruments also assisted in developing the perception questions:

- The Life Events Checklist 5 (LEC-5): The LEC-5 is a self-report questionnaire designed to screen for potentially traumatic events in a person's lifetime. It includes 17 events (e.g., natural disaster, physical assault) and assesses the extent of exposure (e.g., happened to me, witnessed, learned about it). It is often used in conjunction with PTSD assessments.
- Post-traumatic Stress Disorder Checklist 5 (PLC-5): a 20-item self-report measure that assesses the presence and severity of PTSD symptoms based on DSM-5 criteria. It is used for screening, diagnosis, and monitoring symptom changes over time in individuals who have experienced trauma.
- Childhood History Questionnaire: This tool gathers detailed information about a person's early developmental history, including family environment, significant life events, relationships, and potential experiences of abuse or neglect. It helps clinicians understand early influences on current psychological functioning.
- Experiences in Close Relationships-Relationship Structures Scale (ECR-RS): a self-report measure used to assess adult attachment styles across different relationship types (e.g., romantic, parental, friendship). It evaluates dimensions of attachment anxiety and avoidance in close relationships.
- Buss-Perry Aggression Questionnaire: a 29-item self-report instrument that measures different dimensions of aggression: physical aggression, verbal aggression, anger, and hostility. It is widely used in psychological and behavioral research.
- Levenson Self-Report Psychopathy Scale (LSRPS): a 26-item self-report measure assessing psychopathic traits in non-institutionalized populations. It includes two factors: primary psychopathy (callousness, lack of empathy) and secondary psychopathy (impulsivity, emotional dysregulation).

- Alcohol Use Disorders Identification Test (AUDIT): a 10-item screening tool developed by the WHO to identify individuals with risky or harmful patterns of alcohol consumption. It assesses alcohol use, drinking behaviors, and alcohol-related problems.
- Alcohol, Smoking and Substance Involvement Screening Test (ASSIST): screens for use and risk related to alcohol, tobacco, and other substances. It identifies current and past use and associated problems, and provides risk scores to guide intervention.
- Internet Addiction Test (IAT): a 20-item self-report scale measuring the presence and severity of internet addiction. It evaluates the impact of internet use on daily routines, social life, productivity, and emotional functioning.

These instruments informed the development of questions by providing evidence-based frameworks and validated items, ensuring that the assessments were grounded in established research. Future data collection will further pull from these assessments to continue evidence-based practice with surveys.

3.3 Data Collection

Data were collected through a survey administered during the prevention events. Students completed the survey after attending designated stations that addressed various dimensions of wellness and substance use prevention. Students completed the questions after going through the overall event. The survey included both quantitative and qualitative questions designed to assess:

1. Awareness of existing prevention policies and programs on campus.
2. Perceptions of peer substance use.
3. Self-reported behaviors related to substance use and prevention.
4. Attitudes toward mental health services and harm reduction strategies.
5. Level of engagement with prevention activities.
6. Feedback on the effectiveness of the event and recommendations for improvement.

Additional survey questions were developed based on findings from the Arkansas Collegiate Substance Use Assessment (2022) to capture students' perspectives on substance use norms, prevention efforts, and engagement with available resources.

We used a non-experimental research design to complete the study at a mid-south university. To recruit subjects, all students received informational emails via their university email accounts about two on-campus prevention education events. The first email invitation to attend was sent before the first prevention education event, which was a sober homecoming that included a sober homecoming tailgate event and Wellapalooza. Students who attended and completed the event were provided a QR code to the survey regarding the event. No identifying data was collected as part of the survey responses. To best address substance, use and misuse on campus, data about attitudes on prevention norms were collected.

To collect some preliminary data, several events were held in settings where students were actively engaged in activities and easily accessible, including:

- at a campus event (Wellapalooza) with campus partners, the week before Spring Break. The results of the prevention survey (the one the Dean of Students sent out? Make this clear) were utilized for messaging via signage around the event location. These messages were placed on signs that were displayed throughout campus, and printed on shirts and other merchandise geared toward students. Furthermore, the university's Medical Amnesty Policy was shared with students, as well as other protective apps and resources, bystander intervention tactics, and overall safety was a focus.
- Other incentives include events on campus in which students can be in an environment with fun activities, such as a live D.J., free food, mocktails, CPR keychain masks, shirts with prevention messaging, condoms, sunscreen, umbrellas, ways to obtain free Naloxone, and other free merchandise. We also included a "pop-up" yoga station for students. On-campus clubs also joined to compete for the safest messaging campaign. Community stakeholders were identified and recruited to serve as honorary judges for each table. The event was held on campus before Spring Break to assist with enhancing students' connections with prevention messaging. Students were provided with a "passport" in which they collected stamps after attending designated tables and gathering educational materials. Students were given safe and prevention-associated merchandise, as well as safety apps that can be downloaded on their smartphones.

3.4 Prevention Campaign Implementation

The university's prevention campaign was informed by the Strategic Prevention Framework and the Dimensions of Wellness model. Prevention efforts were designed to address social norming statistics indicating that students overestimate their peers' substance use. Strategies included:

- Displaying prevention messaging on signage, merchandise, and digital platforms.
- Providing students with educational materials on harm reduction, medical amnesty policies, and available campus resources.
- Hosting interactive activities such as pop-up yoga and mindfulness stations to promote stress management.
- Distributing safety-related incentives such as Naloxone kits, condoms, CPR keychain masks, and prevention-themed merchandise.
- Encouraging student organizations to develop and present peer-led prevention messaging, with community stakeholders serving as judges for messaging campaigns.

These strategies were used to develop questions about student perceptions. Students were given a pretest before participating in the prevention activity and a post-test after they completed the sessions.

4.0 DATA ANALYSIS

Quantitative data from the surveys were analyzed using descriptive statistics to determine frequencies, percentages, and means related to students' substance use behaviors, awareness of prevention programs, and engagement with wellness initiatives. Comparative analyses (e.g., chi-square tests, t-tests) were conducted to assess differences in pre- and post-event survey responses. Qualitative responses were analyzed using thematic analysis to identify key themes

related to student experiences, perceptions, and recommendations for improving prevention efforts.

5.0 RESULTS/FINDINGS

We separated ourselves from existing literature in that we utilized a collegiate substance use survey pertinent to Arkansas. According to the Arkansas Collegiate Substance Use Assessment (2022), 16–20-year-olds, also 40% of respondents were the highest reported population to have tried alcohol for the first time, with 17% reporting thoughts of suicide within the last year. Further behaviors and related factors that respondents reported due to use and misuse of substances include 25% missing class, 11% reported suicide attempts, 19% reported memory loss, 18% had related injuries, and approximately 13% reported being taken advantage of sexually (Slagle, 2022). The post-COVID-19 era has exacerbated substance use and misuse among college students. For example, 16% reported an increase in alcohol use, while approximately 7% reported an increase in illicit substance use. Other types of usage reported were (10%) each for the use of opiates, methamphetamines, inhalants, and steroids within their lifetime (Slagle, 2022).

We focused on student perceptions of what the students felt they learned and obtained from attending the prevention event. We utilized a pre and post test to assess awareness of programs, resources, prevention and overall safety at their university. Program evaluation was built into the model so that students could easily share their experiences.

Figure 1

Survey Question 1: What was your level of Awareness Prior to the Event? (Beartruth, Bystander Intervention, Sexual Consent)

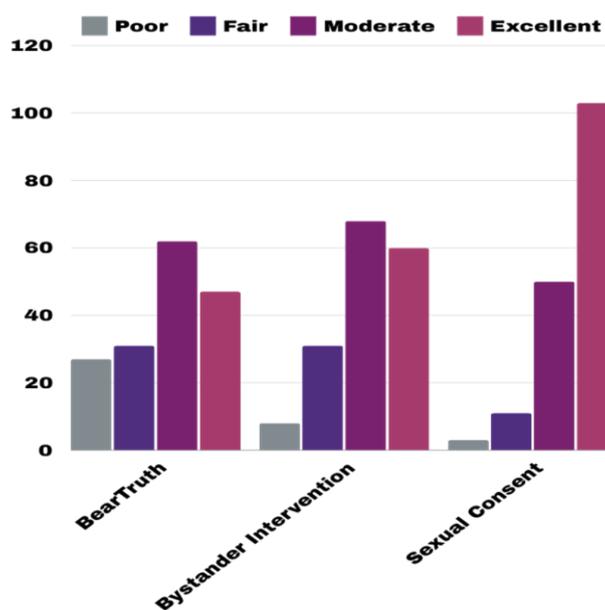


Figure 2

Survey Question 2: What was your Level of Awareness Post Event? (BearTruth, Bystander Intervention, Sexual Consent)

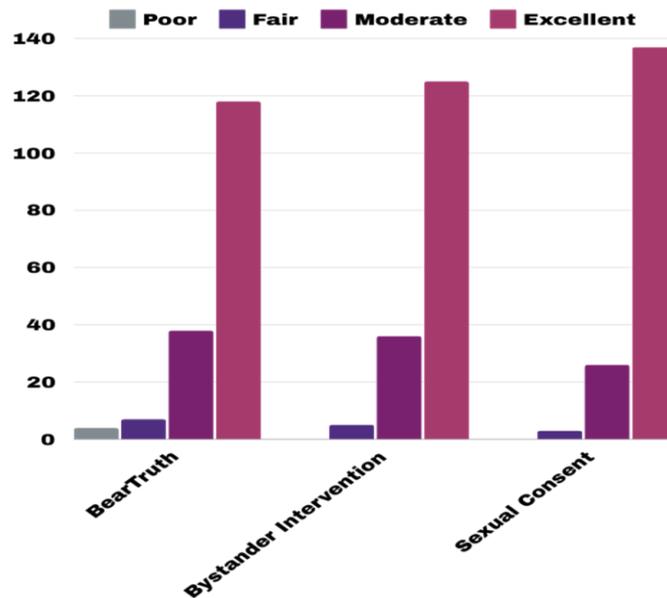


Figure 3

Question 3: I feel more connected to campus safety supports. (Dean of Students, Student Wellness, Counseling Center, Addiction Studies)

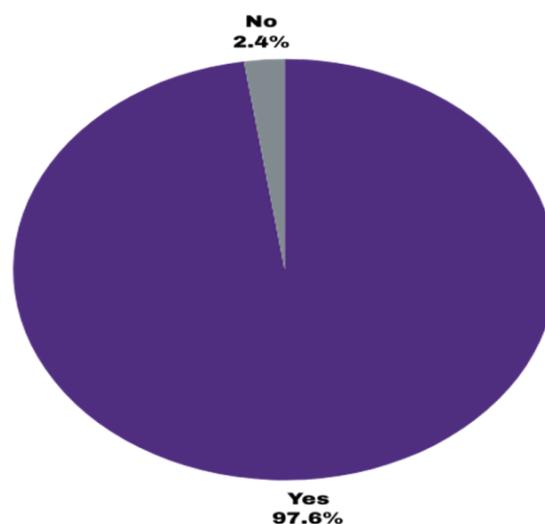


Figure 4

Question 4: Do you feel that the Bear Truth Campaign has helped you think about making safe decisions to prevent harm?



Figure 5

Question 5: Did this event help you learn more about campus safety and support resources, UCA's Medical Amnesty Policy, and/or UCA Prevention/Treatment Services?

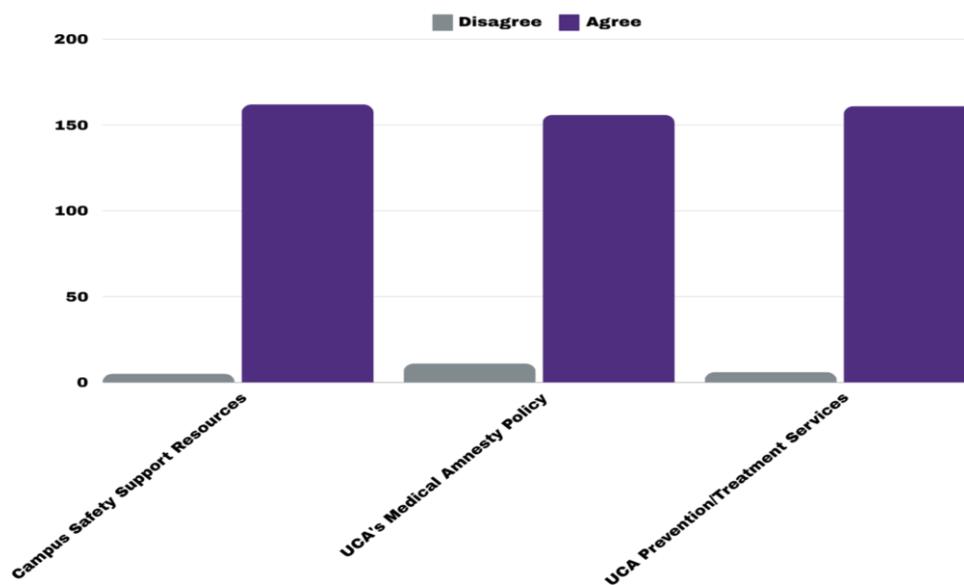


Figure 6

Question 6: Why did you come to Wellapalooza?

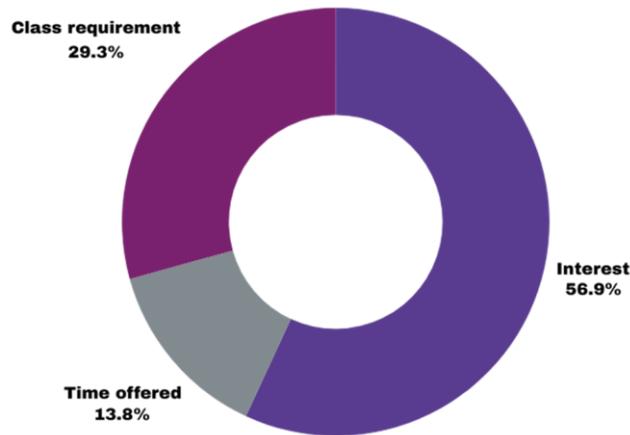
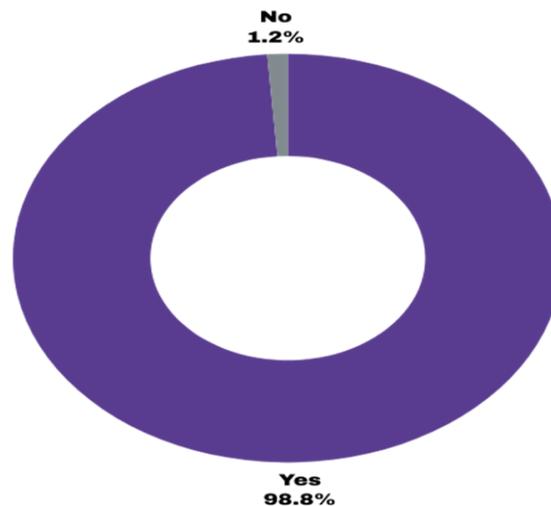


Figure 7

Question 7: Would you attend Wellapalooza again?



6.0 CONCLUSIONS

This study aimed to assess college students' substance use perceptions and prevention engagement, using findings to enhance campus prevention efforts. By leveraging evidence-based frameworks and student-centered approaches, the university sought to create a more effective and inclusive prevention campaign to reduce substance misuse and promote overall wellness among students.

7.0 DISCUSSION

While we had hundreds of students attend these events, we will continue to seek to better understand if these initiatives are indeed helpful for students to make informed decisions and feel more connected to prevention and treatment services on campus. The pre- and post-tests indicated that the majority of students did increase knowledge and felt more connected to services regarding the dimensions of wellness informed by the Developmental Cascade, a framework used to understand how early experiences, environmental factors, and biological influences interact over time to shape an individual's development (DEA, 2024).

7.1 Limitations and Implications for Future Research

As previously mentioned, a follow-up regarding students' perceptions of the event, as well as the Medical Amnesty Policy, will be imperative to collect. This information can assist with improving current programs and the development of newly identified program needs. Few studies examine the implications of the various risk factors that screeners identify, such as PTSD, the Levenson Self-Report and the Psychopathy Scale (LSRPS), Alcohol Use Disorders Identification Test (AUDIT). Furthermore, studies on attachment types concerning college substance use and abuse need more exploration (de Moura et al., 2023). Furthermore, studies that address special interventions for students considered high-risk should be explored. This can include a Greek affiliation, as those who are affiliated with a Greek-Life organization had higher rates and risk of substance use and misuse. Other factors and considerations include previous exposure to substance misuse, untreated medical issues, and isolation, to name a few. The screeners previously discussed in the literature can also be utilized to identify appropriate students who may need additional support (de Moura et al., 2023). Perceptions on the Medical Amnesty Policy could be helpful to collect to determine if it assists students in asking for help when warranted.

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