

THE WHITE BOOK

CHAPTER 4

Student Support Services

Section 2

Campus Alcohol and Drug Information Center (CADIC)

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Author: Kevin M. Modglin M.A., M.P.H.

Position: Director, Campus Alcohol and Drug Information Center

- I. **Organization:** The Citadel established the Campus Alcohol and Drug Information Center (CADIC) in 2014 to provide a comprehensive alcohol, tobacco, and other drug (ATOD) misuse prevention program on campus.

Mission: CADIC is a unit within the Commandant's Department. **Its mission is to support student well-being** by providing evidenced-based services, programs, and events that prevent the misuse of alcohol, tobacco, and other drugs.

Terms: A list of common terms and abbreviations used in the field of ATOD misuse prevention is provided in **Appendix 1**.

A. Staff

1. **Director.** Kevin M. Modglin ("Mr. Kevin") is the Director of the Campus Alcohol and Drug Information Center (CADIC) at The Citadel. He brings over 30 years of public health experience in higher education, specializing in alcohol, tobacco, and other drug (ATOD) misuse prevention. He holds a Master of Public Health in Community Health and a Master of Arts in Psychology.
2. **Coordinator of Prevention and Recovery (Pending).** This position will expand the campus's capacity to address ATOD misuse by supporting the Director in delivering targeted programs and campus-wide prevention events. It will also play a key role in developing a comprehensive College Recovery Program (CRP) and establishing a visible, sustainable College Recovery Community (CRC).

B. Functions Areas

CADIC is organized around four core functional areas that define its scope and guide the delivery of its services. **These areas form the framework for planning, implementing, and evaluating all prevention and recovery initiatives, as described below.**

1. **Services: One-on-One Interactions.** Services are interventions *tailored* to the unique needs, experiences, and circumstances of each person. They are delivered one-on-one in a private, confidential, and safe setting and incorporate motivational interviewing, stages of change, and harm reduction approaches.
2. **Programs: Small Group Interactions.** Programs are interventions *targeted* at small groups or cohorts whose members share risk factors for ATOD misuse. Content is delivered through various modalities, including presentations, role-playing, self-reflection exercises, values clarification, group discussions, and journaling.
3. **Events: Large Group Interactions.** Events are campus-wide or cohort-specific outreach activities that promote healthy behaviors, provide information on low-risk choices, and connect participants with campus resources. They may include guest speakers, panels, simulations, or town halls, with an emphasis on broad education rather than individual or group interventions.
4. **CADIC Online.** 'CADIC Online' refers to a selection of ATOD educational programs available to students via the internet. These self-paced programs range in duration from 30 minutes to several hours.

C. Levels of Prevention

The levels of prevention define who a service or program is intended to reach and its intended purpose. **Together, they provide a framework for designing, implementing, and evaluating effective prevention and recovery initiatives (see Appendix 2).**

1. **Level One—Primary Prevention.** Primary prevention aims to prevent the onset of ATOD misuse by reducing risk factors and strengthening protective factors within defined populations, subpopulations, or individuals. It includes three subtypes:
(1) universal prevention, which targets a population with *no identified risk factors*,
(2) selective prevention, which targets a subpopulation with *known risk factors*,
and **(3) indicated prevention**, which targets individuals who have experienced negative consequences from ATOD use but do not meet criteria for a SUD.
 - a. Subtype 1 – Universal Prevention. Universal prevention strategies are designed to reach an entire population, regardless of individual risk factors, to prevent or delay ATOD misuse. The goal is to raise awareness about the risks associated with ATOD misuse and equip individuals with the knowledge and skills to avoid them. The underlying assumption is that all members of the population can benefit from the program.

b. Subtype 2 – Selective Prevention. Selective prevention strategies are designed to reach a defined subgroup that either shares common risk factors or is at higher-than-average risk for ATOD misuse. The goal is to mitigate those risks through *targeted* interventions.

c. Subtype 3 – Indicated Prevention. Indicated prevention strategies are designed to reach individuals showing signs of ATOD misuse but not necessarily meeting diagnostic criteria for a SUD. The goal is to prevent progression to a SUD through *tailored* motivational interventions.

2. Level Two—Secondary Prevention. Secondary prevention aims to reduce severity, limit progression, and prevent further harm in individuals with early-stage symptoms of a SUD. **Because there is overlap with indicated prevention, *screening, brief intervention, and referral to treatment (SBIRT)* is often used for both. The key distinction is that indicated prevention targets individuals misusing ATOD without a diagnosable SUD, while secondary prevention targets those who meet diagnostic criteria for a SUD.**

3. Level Three—Tertiary Prevention. Tertiary prevention aims to manage and reduce the impact of a SUD by improving quality of life and supporting recovery through treatment and relapse prevention.

D. Alignment with Best Practice Resources

A ‘*best practice*’ is an intervention that has demonstrated effectiveness in a specific setting and is expected to be effective in similar settings (Colombani & Ng, 2015). **Central to CADIC’s mission is a commitment to delivering evidence-based services and programs. The resources below describe best practices that guide their development, implementation, and evaluation.**

1. College-AIM. The College Alcohol Intervention Matrix (CollegeAIM) is a research-based tool that helps colleges and universities identify, evaluate, and compare strategies to reduce alcohol misuse and related harm (NIAAA, 2019). It provides a comprehensive menu of evidence-based interventions, along with ratings for effectiveness, cost, and feasibility of implementation.

2. PRECEDE-PROCEED Model. The PRECEDE–PROCEED model is a comprehensive framework for planning, implementing, and evaluating public health programs (Green et al., 2022; Green & Kreuter, 2005). It consists of two major phases: **(1) PRECEDE**, which assesses health needs, behavioral determinants, and environmental factors influencing health outcomes, and **(2) PROCEED**, which guides the design, implementation, and evaluation of targeted interventions based on PRECEDE’s diagnostic findings. This model is often used to address complex public health challenges that are resistant to change.

3. **Social Ecological Model.** The Social Ecological Model (SEM) is a public health approach that examines how individual, interpersonal, institutional, community, and societal factors interact to influence ATOD risk and protective factors (adapted from McLeroy et al., 1988). See **Appendix 3** for a detailed description of the model.
4. **Health Theory.** Health theories provide a science-based foundation for designing strategic interventions that reduce risky behaviors. They help explain the underlying causes of ATOD misuse and guide decisions about which behaviors to target and what outcomes to anticipate. See **Appendix 4** for CADIC's Logic Model, which illustrates how health theory is applied in program development.

E. Standards of Practice

CADIC follows the standards of practice and code of ethics for public health professionals and health educators, as outlined in the following documents.

1. **Council for the Advancement of Standards (CAS) in Higher Education—Alcohol and Other Drug Programs.** The Council for the Advancement of Standards (CAS) in Higher Education's Alcohol and Other Drug Programs provide guiding principles and performance criteria for designing, implementing, assessing, and improving campus-based ATOD prevention and intervention services.
<https://www.cas.edu/standards>
2. **Standards of Practice for Health Promotion in Higher Education.** The Standards of Practice for Health Promotion in Higher Education outline ethical and inclusive guidelines for professionals leading campus-wide health promotion efforts, emphasizing socioecological approaches, collaboration, and population-level strategies to support student well-being and institutional goals.
https://portal.acha.org/documents/resources/guidelines/ACHA_Standards_of_Practice_for_Health_Promotion_in_Higher_Education_October2019.pdf
3. **Principles of the Ethical Practice of Public Health.** The Principles of the Ethical Practice of Public Health outline core responsibilities for public health professionals, including respect for individual rights, protection of confidentiality, equity, evidence-based decision-making, and the promotion of social justice.
https://www.apha.org/-/media/files/pdf/membergroups/ethics/code_of_ethics.ashx
4. **Code of Ethics for the Health Education Profession.** The Code of Ethics for the Health Education Profession defines the ethical responsibilities of health educators, emphasizing confidentiality, autonomy, equity, and cultural inclusivity in promoting health.
<https://assets.speakcdn.com/assets/2251/CodeofEthicsfull2020.pdf>

F. Partners in Prevention

CADIC works in collaboration with both on and off campus partners to fulfill its mission. **These partnerships enhance prevention and recovery efforts by integrating expertise, resources, and coordinated strategies.**

1. On-Campus Partners.

- Academic Affairs and Student Services
- Assistant Commandant for Standards and Discipline
- Cadet Activities
- Cadet Leadership
- CARE
- Citadel Police Department
- Counseling Services

2. Off-Campus Partners.

- Charleston County Sheriff's Department
- Charleston Police Department
- College of Charleston
- Higher Education Center for Alcohol and Drug Misuse Prevention and Recovery (HECAOD)
- North Charleston Drug Task Force (NCDTF)
- Prevention Research Institute (PRI)
- South Carolina Department of Alcohol and Other Drug Abuse Services (DAODAS)
- Southeastern Chapter, National Safety Council
- Tri-County Intergroup Office (TCIO) for Support Groups

G. **Assessment** and Evaluation

CADIC uses assessment and evaluation as complementary processes to support continuous improvement and accountability. **Assessment** defines how success is measured at both the learner level (e.g., student outcomes) and the departmental level (e.g., program outcomes), determining the extent to which those outcomes are achieved. **Evaluation** builds on assessment to examine the overall effectiveness, value, and impact of programs and initiatives.

1. Process Evaluation. Process evaluation measures the type, quantity, and quality of an intervention delivered to a target audience. Its purpose is to determine whether implementation occurred as intended and in alignment with established best practices.

2. Impact Evaluation. Impact evaluation measures changes in awareness, knowledge, attitudes, skills, or behaviors immediately following a program. Its purpose is to determine whether the program achieved its intended objectives.

3. Outcome Evaluation. Outcome evaluation measures long-term changes in the health status of a population (e.g., fewer accidents and injuries) or sustained changes in behavior (e.g., annual number of alcohol violations) resulting from the totality of completed services and programs. It serves as an indirect measure of the department's progress toward its mission and goals.

II. Procedures

A. Services: One on One Interactions

Services are interventions tailored to the unique needs, experiences, and circumstances of each person. They are always delivered one-on-one in a private, confidential, and safe setting.

1. Mandated. Students who violate The Citadel's *Alcohol and Other Drugs Policy* or *Tobacco-Free Campus Policy* must participate in remediation through CADIC. **Each violation and its corresponding intervention will incur a \$175 fee, charged automatically to the cadet's account at the end of each term.**

- i. **Purpose.** The mandated program promotes positive behavior change by delivering information and feedback *tailored* to the specific needs of each person. **It addresses the behaviors that led to the violation, increases awareness of associated risks, and supports the development of healthier decision-making strategies.**

Many students choose to voluntarily continue meeting after completing the mandated program. This ongoing engagement helps strengthen harm reduction and other decision-making strategies and, when needed, supports the development of essential life skills such as stress management, time management, effective communication, and healthy peer relationships.

- ii. **Process.** Students can schedule an appointment in one of the following ways: **(1) via Calendly, (2) email the Director, (3) text or call the Director's cell phone, (4) call CADIC directly, or (5) visit CADIC in Mark Clark Hall, Room 217 (above Starbucks).**

The types of mandated remediation services are described below.

Alcohol Violations

a. *First Alcohol Violation (AV-1)*

- **Step 1:** Completing (1) a 15-minute online screening using the Substance Abuse Subtle Screening Inventory (SASSI) and (2) signing the *Rights and Responsibilities* and *Confidentiality* forms.
- **Step 2:** SASSI results determine the next steps in the process.

- **A low SASSI score** will require one or more of the following: (1) completing a one-hour, self-paced online alcohol education program, (2) a referral to a senior military professional to discuss leadership development, and (3) one follow-up meeting. *Note: Referral to a senior military professional is reserved for cadets who hold or desire rank and plan to pursue a military career.*
 - **A moderate SASSI score** will require (1) completing the Brief Alcohol Screening and Intervention for College Students (BASICS), or a comparable intervention, and (2) one follow-up meeting.
 - **A high SASSI score** will require (1) completing the Brief Alcohol Screening and Intervention for College Students (BASICS), or a comparable intervention, and (2) two follow-up meetings. Additionally, it will include (3) a referral to an on- or off-campus support program, treatment program, psychologist, and/or psychiatrist.
 - Step 3: Remediation may also include additional assignments or meetings. Assignments could involve self-reflections, action plans, or educational modules, while meetings may address harm reduction strategies, setting personal limits, recognizing high-risk situations, and developing safety plans or health-oriented goals using the SMART format.
- b. *Second Alcohol Violation (AV-2)*
- Step 1: Completing the CADIC Behavioral Health Assessment.
 - Step 2: Completing (1) the Advanced BASICS (Brief Alcohol Screening and Intervention for College Students), or a comparable intervention, and (2) four follow-up meetings. Advanced BASICS builds on the standard BASICS program by adding (a) more intensive motivational interviewing to explore ambivalence about change, (b) a behavioral contract outlining future expectations and consequences, and (c) a referral to an on-or off-campus support program, treatment program, psychologist, and/or psychiatrist.
 - Step 3: Remediation may also include additional assignments or meetings. Assignments could involve self-reflections, action plans, or educational modules, while meetings may address harm reduction strategies, setting personal limits, recognizing high-risk situations, and developing safety plans or health-oriented goals using the SMART format.

c. *Third Alcohol Violation (AV-3)*

- Step 1: Three or more alcohol violations will result in a Conduct Review Board (see BLUE BOOK for additional information).
- Step 2: If discipline is held in abeyance, remediation will include (1) completing the full 12-hour MyPrime course (funded by CADIC) and (2) one follow-up meeting.

d. *DUI/Conduct Unbecoming (AV-CU)*

- Step 1: Conduct unbecoming for DUI will result in a Commandant's Board or a Class 1 Hearing (see BLUE BOOK for additional information).
- Step 2: If discipline is held in abeyance, remediation will include (1) completing the full 12-hour MyPrime course (funded by CADIC) and (2) one follow-up meeting.

Tobacco Violations (TVs)a. *First Tobacco Violation (TV-1)*

- Step 1: Receive a warning email with information on tobacco reduction and cessation services available on campus.

b. *Second Tobacco Violation (TV-2)*

- Step 1: Completing (1) a 15-minute online tobacco self-assessment, (2) the Tobacco Screening and Intervention for College Students (TOSICS) program, and (3) one follow-up meeting.

c. *Third Tobacco Violation (TV-3)*

- Step 1: Completing (1) a 4-hour, online, self-pay (\$45) tobacco education program and (2) one follow-up meeting.

d. *Fourth Tobacco Violation (TV-4)*

- Step 1: Four or more tobacco violations will result in a Conduct Review Board (see BLUE BOOK for additional information).
- Step 2: If discipline is held in abeyance, remediation will include completing a TBD tailored 6-hour tobacco intervention.

Drug Violations (DVs)a. *Any Drug Violation (DVs)*

- Step 1: Any drug violation will result in a Commandant's Board or a Class 1 Hearing (see BLUE BOOK for additional information).
- Step 2: *If discipline is held in abeyance*, remediation will follow the process for a first alcohol violation (AV-1) but will include (1) completing the *Brief Cannabis Screening and Intervention for College Students (CASICS)*, or a comparable intervention and (2) one follow-up meeting.
- Step 3: Remediation may also include additional assignments or meetings. Assignments could involve self-reflections, action plans, or educational modules, while meetings may address harm reduction strategies, setting personal limits, recognizing high-risk situations, and developing safety plans or health-oriented goals using the SMART format.

2. **Referrals.**¹ CADIC services are available to all students. Some students choose to meet with the director based on their own needs and personal goals, while others may be referred by on-campus sources such as coaches, Counseling Services, faculty, or TACs.

- i. Purpose. Referral-based services support positive behavior change by delivering information and feedback tailored to the specific needs of each person. Meetings may address harm reduction strategies, setting personal limits, recognizing high-risk situations, and developing safety plans or health-oriented goals using the SMART format. They may also address personal values, decision-making patterns, and the development of essential life skills such as stress management, time management, effective communication, and healthy peer relationships.
- ii. Process. Students can schedule an appointment in one of the following ways: (1) via Calendly, (2) email the Director, (3) text or call the Director's cell phone, (4) call CADIC directly, or (5) visit CADIC in Mark Clark Hall, Room 217 (above Starbucks).

3. **Confidentiality.** CADIC services are provided in a private, confidential setting. This ensures the protection of personal disclosures and provides a safe environment for honest discussion and positive behavior change.

¹ Only students formally mandated to CADIC through the official college process via CAS (Cadet Accountability System), as assigned by the Assistant Commandant for Standards and Discipline or the Deputy Assistant Commandant for Standards and Discipline, are required to complete CADIC remediation services. Participation through the referral process, regardless of source, is voluntary, and individuals may decline or discontinue at any time.

- i. **Purpose.** Confidentiality protects participant information from unauthorized disclosure, thereby upholding ethical and professional standards.
- ii. **Process.** Before any intervention, participants sign the *Rights and Responsibilities* and *Confidentiality* forms, which outline disclosure requirements and explain how to report a potential violation of confidentiality. Information is not disclosed without written consent, except when required by law (e.g., risk of harm to self or others, abuse, Title IX/sexual assault, or court orders). CADIC follows strict confidentiality protocols consistent with institutional policies and the professional code of ethics for public health practitioners and health educators. CADIC's confidentiality process has been reviewed and approved by The Citadel General Counsel.

B. Programs: Small Group Interactions

1. **Purpose.** Programs are interventions targeted at small groups or cohorts whose members share risk factors for ATOD misuse. Content is delivered through various modalities, including presentations, role-playing, self-reflection exercises, values clarification, group discussions, and journaling.
2. **Process.** Any student or employee can request a CADIC program. They can be scheduled in one of the following ways: (1) emailing the Director, (2) texting or calling the Director's cell phone, (3) calling CADIC directly, or (4) visiting CADIC in Mark Clark Hall, Room 217 (above Starbucks). Once contact is made, the Director will develop a programming proposal. Upon approval by the requester, the program will be added to the CADIC Calendar.

A list of available programs is provided in **Appendix 5**. If a desired program is not listed, a custom program can be developed to meet the needs of the target audience. ***Custom programs require a minimum of five business days for planning and preparation.***

C. Events: Large Group Interactions²

1. **Purpose.** Events are campus-wide or cohort-specific outreach activities that promote healthy behaviors, provide information on low-risk choices, and connect participants with campus resources. They may include guest speakers, panels, simulations, or town halls, with an emphasis on broad education rather than individual or group interventions.

² Large, untargeted events are not considered a best practice in the prevention field and are generally ineffective in producing behavior change (NIAAA, 2019; Crusto et al., 2003). Accordingly, CADIC prioritizes tailored services and targeted programs.

2. Process. Events sponsored by CADIC are typically coordinated through the Assistant Commandant of Operations. While many align with the timing and themes of national prevention campaigns, others are specifically tailored to address the unique environment and needs of students at The Citadel.

Effectively coordinating an event typically involves the following steps: (1) identify the need, theme, and resources, (2) develop an evaluation plan, (3) select the timing and format, (4) coordinate with partners, (5) implement and evaluate the event, (6) analyze evaluation results; and (7) complete an After Action Review (AAR) or post-event evaluation report.

While events have merit in supporting general ATOD education and social marketing, large-scale efforts require substantial planning and personnel. As a result, services and programs are prioritized over events because they can be delivered more efficiently with CADIC's limited resources.

D. CADIC Online

- 1. Purpose.** 'CADIC Online' refers to a selection of ATOD educational programs available to students via the internet. These self-paced programs range in duration from 30 minutes to several hours.
- 2. Process.** 'CADIC Online' programs are scheduled throughout the year, with some designated as required and others as optional. Guided by a student developmental model (Patton et al., 2016), the type, length, scope, and timing of each online program are aligned with students' evolving needs and responsibilities. For example, second-year cadets may be required to complete a DUI awareness module before being permitted to operate a vehicle on campus.

III. Policies

A. Alcohol and Other Drugs Policy

- 1. Purpose.** The Citadel is committed to maintaining a safe, drug-free environment and strictly prohibits the unlawful possession, use, or distribution of illicit drugs and alcohol by faculty, staff, students, and visitors. The institution supports only the legal use of alcohol and prescription drugs.

The purpose of The Citadel's Alcohol and Other Drugs (AOD) Policy is to assist members of the campus-community in their understanding of:

- The potentially harmful and addictive effects of alcohol and other drugs.
- Local, state, and federal laws and Citadel policy regarding the unlawful manufacture, alteration, deliver, distribution, dispensing, possession, or use illicit drugs and drug paraphernalia.

- The dangers associated with the possession of prescription drugs, as well as the damages resulting from their alteration or unlawful use and distribution.
 - The consequences of unlawful use, possession, and distribution of alcohol.
 - The benefits of adopting responsible and low-risk alcohol use.
 - Citadel programs assisting in preventing or changing substance misuse behavior.
2. **Process.** In compliance with the Department of Education's Drug-Free Schools and Communities Act (DFSCA), 34 CFR Part 86, all federally funded institutions of higher education must implement an Alcohol and Drug Abuse Prevention Program (ADAPP) and conduct a biennial review of its effectiveness. The ADAPP outlines The Citadel's alcohol and drug policies and prevention strategies and is distributed annually to students and employees. The Biennial Review Report (BRR) evaluates the ADAPP's effectiveness and compliance with DFSCA standards and must be kept on file for review by the U.S. Department of Education.

The Director of CADIC prepares both the ADAPP and the BRR. These documents must be reviewed and approved by the Commandant of Cadets, the Provost and Dean of the College, and the College President.

Please visit the following links for additional information: (1) [Citadel ADAPP](#), (2) [Citadel Alcohol and Other Drugs Policy](#).

B. Tobacco Free Campus Policy

1. **Purpose.** The use of tobacco and nicotine-based products undermines The Citadel's commitment to a healthy educational environment. To support this commitment, the Tobacco-Free Campus Policy designates The Citadel as a tobacco-free campus and prohibits the use of tobacco and nicotine-based products in any form, except those approved by the U.S. Food and Drug Administration (FDA) for tobacco cessation.
2. **Process.** As part of the Alcohol and Drug Abuse Prevention Program (ADAPP), the Tobacco-Free Campus Policy is distributed annually to the campus community through official college communication channels, including email, policy handbooks, and the college website. Enforcement of the policy is a shared responsibility of all faculty, staff, and students. Violations are addressed through established disciplinary procedures outlined in the Blue Book, College Regulations, and other official college documents.

Please visit the following links for additional information: (1) [Citadel ADAPP](#), (2) [Citadel Alcohol and Other Drugs Policy](#), and (3) [Citadel Tobacco Free Campus Policy](#).

C. Drug Testing Policy

1. **Purpose.** As an Institution of Higher Education (IHE) whose purpose is to educate and develop principled leaders in a disciplined and intellectually challenging environment, The Citadel expressly prohibits the following by faculty, staff, students, and visitors on its property or as part of any of its activities:

- The unlawful manufacture, alteration, delivery, distribution, dispensing, possession, sale, or use of controlled substances regulated under South Carolina Code Sections 44-53-190, 44-53-210, 44-53-230, 44-53-250, 44-53-270, or 21 USC Section 812 unless legally prescribed or otherwise allowed by law.
- The possession of any item or piece of drug paraphernalia at any time and in any place, as defined by (but not limited to) items listed in South Carolina Code of Laws Section 44-53-110.
- Possession, purchase, manufacture, solicitation, distribution, sale, or use of any hallucinogenic substance.
- Providing financial assistance or otherwise aiding or abetting the purchase, sale, manufacture, or delivery of any prohibited drug, substance, or item.
- The appearance at work, in class, or at any College function under the influence of alcohol, illicit drugs, or legally prescribed drugs that result in altered behavior.

2. **Drug Testing Process for Cadets.** The Citadel conducts random drug testing of members of the SCCC as a condition of acceptance and continued enrollment. Cadets selected for testing must report to designated locations at specified times to provide observed specimens and must remain until acceptable samples are obtained. Testing may also be required when there is reasonable suspicion of drug use, as determined by the Commandant (or designee) or Public Safety, in consultation with the General Counsel. Refusal to provide an observed specimen is treated as a positive result and referred to the Commandant's Department for disciplinary action. If drug paraphernalia are found in a room or shared area, all residents and any suspected individuals are subject to disciplinary action, up to and including expulsion. Administrative hearings are conducted promptly and independently of criminal or civil proceedings to ensure due process.

Please visit the following links for additional information: **(1) Citadel ADAPP, (2) Citadel Alcohol and Other Drugs Policy.**

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Appendix 1
List of Common Terms in ATOD Misuse Prevention

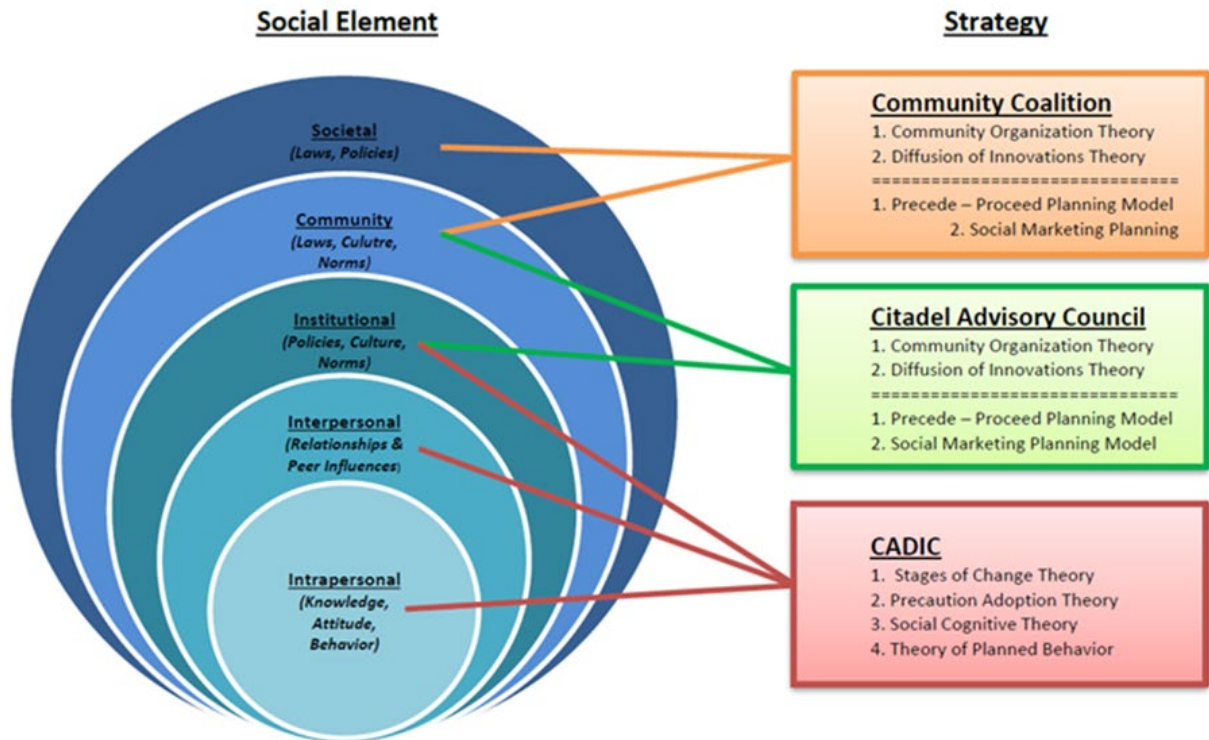
Term or Abbreviation	Definition
AOD	Abbreviation for ‘ <i>alcohol and other drugs</i> ’
ATOD	Abbreviation for ‘ <i>alcohol, tobacco, and other drugs</i> ’
Best Practice	A ‘best practice’ is an intervention that has demonstrated effectiveness in a specific setting and is expected to be effective in similar settings.
CADIC	Abbreviation for ‘ <i>Campus Alcohol and Drug Information Center</i> ’
Event	(Large Group Interactions) Events are campus-wide or cohort-specific outreach activities that educate students on ATOD issues, promote healthy behaviors, provide information on low-risk choices, and connect participants with campus resources.
Harm Reduction	Harm reduction is an evidence-based approach that addresses the health, social, and legal consequences of ATOD misuse and SUDs without requiring abstinence.
Health Protection	Health protection uses laws, policies, and enforcement to restrict ATOD access and exposure, helping to prevent misuse and to create safer environments.
IHE	Abbreviation for ‘ <i>Institution of Higher Education</i> ’
Indicated Prevention	Indicated prevention strategies are designed to reach individuals showing signs of ATOD misuse but not necessarily meeting diagnostic criteria for a SUD.
Interdiction	A sub-category of health protection, <i>interdiction</i> refers to the interception, restriction, or blocking of illegal or harmful substances before they can be distributed or used.
Intervention	An intervention is a structured action, service, or program designed to prevent or reduce ATOD misuse.
Prevention	Prevention aims to <i>delay or reduce</i> the occurrence, frequency, and severity of ATOD misuse or a SUD. Strategies are commonly categorized as <i>primary prevention</i> (e.g., education to prevent initiation or delay first use), <i>secondary prevention</i> (e.g., early intervention for risky or problematic use), and <i>tertiary prevention</i> (e.g., reducing the impact of a SUD and supporting recovery).
Primary Prevention	Primary prevention aims to prevent the onset of ATOD misuse by reducing risk factors and strengthening protective factors within defined populations, subpopulations, or individuals. It includes three subtypes: <i>(1) universal prevention</i> , which targets a population with <i>no identified risk factors</i> , <i>(2) selective prevention</i> , which targets a subpopulation with <i>known risk factors</i> , and <i>(3) indicated prevention</i> , which targets individuals who have <i>experienced negative consequences</i> from ATOD use but do not meet criteria for a SUD.
Primordial Prevention	Primordial prevention consists of actions that modify underlying environmental, economic, social, and behavioral conditions that contribute to ATOD misuse.
Program	(Small Group Interactions) Programs are interventions targeted at small groups or cohorts whose members share risk factors for ATOD misuse.
Protective Factor	A protective factor is any characteristic, attitude, condition, behavior, or environmental influence that decreases the likelihood of developing a SUD or experiencing negative outcomes from ATOD misuse.
Risk Factor	A risk factor is any characteristic, attitude, condition, behavior, or environmental influence that increases the likelihood of developing a SUD or experiencing negative outcomes from ATOD misuse.
Secondary Prevention	Secondary prevention aims to reduce severity, limit progression, and prevent further harm in individuals with early-stage symptoms of a SUD.
Selective Prevention	Selective prevention strategies are designed to reach a defined subgroup that either shares common risk factors or is at higher-than-average risk for ATOD misuse.

Term or Abbreviation	Definition
Service	(One-on-One Interactions) Services are interventions tailored to the unique needs, experiences, and circumstances of each person. They are delivered one-on-one in a private, confidential, and safe setting.
Social Ecological Model	The Social Ecological Model (SEM) is a public health approach that examines how individual, interpersonal, institutional, community, and societal factors interact to influence ATOD risk and protective factors.
SUD	Abbreviation for ' <i>substance use disorder</i> '
Tertiary Prevention	Tertiary prevention aims to manage and reduce the impact of a SUD by improving quality of life and supporting recovery through treatment and relapse prevention.
Treatment Intervention	Treatment interventions target individuals with significant ATOD symptoms or a diagnosable SUD by reducing risk factors and promoting long-term recovery through evidence-based therapies and coordinated support.
Universal Prevention	Universal prevention strategies are designed to reach an entire population, regardless of individual risk factors, to prevent or delay ATOD misuse. The goal is to raise awareness about the risks associated with ATOD misuse and equip individuals with the knowledge and skills to avoid them.

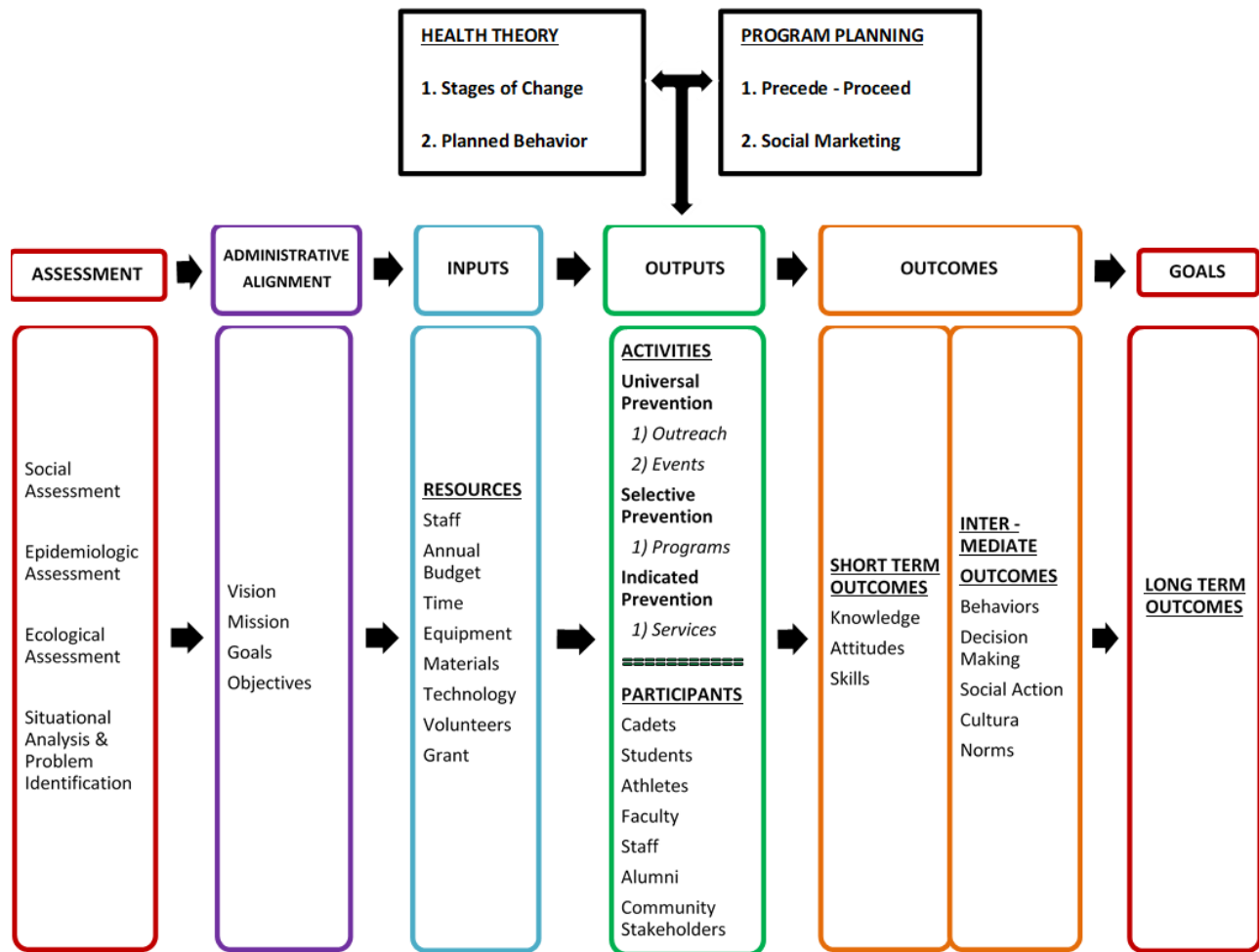
Appendix 2
Levels of Prevention

Prevention Level	Subtype	Target Population	SUD Symptom Status	Goal(s) of Prevention	Examples
Primary	Universal	Entire population or subpopulation	No symptoms of SUD	(1) Prevent or delay misuse	(1) Online alcohol education for all first-year students
- -	Selective	Subgroups with elevated risk (e.g., athletes, Greek life)	No symptoms of SUD but considered “at risk” for misuse	(1) Reduce risk of misuse	(1) Targeted vaping program for group of first-year students in X-company where several cadets were caught vaping
- -	Indicated	Individuals experimenting with ATOD and/or experiencing multiple negative consequences from their use	Misuse of ATOD but no diagnosable SUD	(1) Prevent escalation of misuse via SBIRT (<i>screening, brief intervention, and referral to treatment</i>)	(1) Tailored intervention for a student after being transported to the hospital for alcohol intoxication (2) Tailored intervention for student who tests positive for cannabis with a low metabolite level
Secondary	- -	Individuals with early-stage SUD	Early-stage SUD	(1) Prevent progression (2) Limit severity (3) Harm reduction	(1) Tailored intervention and harm reduction for a student with a pattern of overdrinking (2) Tailored intervention and harm reduction for a student who tests positive for cannabis with a high metabolite level
Tertiary	- -	Individuals with chronic or severe SUD	Diagnosed SUD	(1) Harm reduction (2) Intensive outpatient (3) Sobriety/recovery (4) Relapse prevention	(1) Peer mentoring program matching students in recovery with those in treatment to provide support and guidance (2) Participation in AA or Smart Recovery

Appendix 3 Social Ecological Model



Appendix 4 CADIC Logic Model



Appendix 5

List of CADIC Prevention and Recovery Programs

About CADIC: An overview of CADIC services and essential prevention guidelines (formerly called “CADIC 101”). Commonly used during Cadre Training Period and Challenge Week.

(**FORMAT:** *small or large group* | **TIME:** *45 minutes*)

Alcohol Skills Training Program: A program that provides information on alcohol misuse, along with exercises and training designed to help individuals identify personal drinking cues, develop alcohol refusal skills, and manage stress effectively.

(**FORMAT:** *small group* | **TIME:** *Session I: 90 minutes; Session II: 90 minutes*)

Alcohol Wise: An interactive, online course aimed at helping college students make responsible decisions about alcohol use, reduce high-risk drinking, and understand the effects of alcohol on health.

(**FORMAT:** *online* | **TIME:** *90 minutes, self-paced*)

Brief Alcohol Screening and Intervention: A program designed to assess risk factors, develop a risk-reduction plan, and increase motivation for behavior change.

(**FORMAT:** *one-on-one* | **TIME:** *Session I: 50 minutes; Session II: 50 minutes*)

Brief Cannabis Screening and Intervention: A program designed to assess risk factors, develop a risk-reduction plan, and increase motivation for behavior change.

(**FORMAT:** *one-on-one* | **TIME:** *Session I: 50 minutes; Session II: 50 minutes*)

Brief Tobacco Screening and Intervention: A program designed to assess risk factors, develop a risk-reduction or cessation plan, and increase motivation for behavior change. This program incorporates material from the American Cancer Society’s “Fresh Start” program.

(**FORMAT:** *one-on-one or small group* | **TIME:** *Sessions I-III: 50 minutes each; Optional Sessions IV & V: 50 minutes each*)

CADIC Support Group: A support group for students that offers a safe space to share experiences, build resilience, and develop healthy coping strategies. While the group is not specifically tailored to students pursuing sobriety or recovery, they are encouraged to attend. Expected Fall 2025.

(**FORMAT:** *small group* | **TIME:** *50 minutes, bimonthly*)

CHOICES for Alcohol: An alcohol misuse prevention program that emphasizes self-reflection and uses journaling and group discussions to develop risk-reduction strategies.

(**FORMAT:** *small group* | **TIME:** *90 minutes*)

CHOICES for Cannabis: A cannabis misuse prevention program that emphasizes self-reflection and uses journaling and group discussions to develop risk-reduction strategies.

(**FORMAT:** *small group* | **TIME:** *90 minutes*)

Conflict Wise: An interactive online course that helps college students recognize the impact of their behaviors on others and develop skills in conflict resolution and anger management. The course is designed to be completed independently and then reviewed with a prevention specialist. ***Must be referred by ACSD or DACSD.***

(**FORMAT:** *online + one-on-one* | **TIME (ONLINE):** *90 minutes, self-paced*; **TIME (ONE-ON-ONE):** *50 minutes*)

e-Checkup for Alcohol: An online self-assessment that provides insight into a person's risk factors for developing an alcohol use disorder (AUD) and offers information on protective factors to reduce those risks. It is meant to be completed independently and then reviewed with a prevention specialist.

(**FORMAT:** *online + one-on-one* | **TIME (ONLINE):** *15 minutes, self-paced*; **TIME (ONE-ON-ONE):** *50 minutes*)

e-Checkup for Cannabis: An online self-assessment that provides insight into a person's risk factors for developing a cannabis use disorder (CUD) and offers information on protective factors to reduce those risks. It is meant to be completed independently and then reviewed with a prevention specialist.

(**FORMAT:** *online + one-on-one* | **TIME (ONLINE):** *15 minutes, self-paced*; **TIME (ONE-ON-ONE):** *50 minutes*)

e-Checkup for Tobacco: An online self-assessment that provides insight into a person's risk factors for developing a tobacco use disorder (TUD) and offers information on protective factors to reduce those risks. It is meant to be completed independently and then reviewed with a prevention specialist.

(**FORMAT:** *online + one-on-one* | **TIME (ONLINE):** *15 minutes, self-paced*; **TIME (ONE-ON-ONE):** *50 minutes*)

MyPrime Prevention: A self-paced intervention designed to help individuals assess their alcohol and drug-related behaviors, reflect on their risks, and develop strategies for healthier choices.

(**FORMAT:** *online* | **TIME:** *4 hours, self-paced*)

MyPrime Intervention (*The online version of 'Prime for Life' - see below*): An evidence-based prevention, intervention, and pretreatment program designed for individuals who make high-risk alcohol and drug choices.

(**FORMAT:** *online* | **TIME:** *12 hours, self-paced*)

Prime for Life: An evidence-based prevention, intervention, and pretreatment program designed for individuals who make high-risk alcohol and other drug choices.

(**FORMAT:** *small group* | **TIME:** *6 hours, divided into three, 2-hour sessions*)

Rethinking Drinking: A program developed by the National Institute on Alcohol Abuse and Alcoholism (NIAAA), used primarily with adults who want to reduce their alcohol use.

(**FORMAT:** *small group* | **TIME:** *90 minutes*)

Smart Recovery: An alternative to Alcoholics Anonymous, **SMART Recovery** is a science-based, secular program that supports individuals in managing addictive behaviors through self-empowerment and problem-solving techniques. The program emphasizes building motivation, coping with cravings, and developing personal responsibility, without requiring belief in a higher power. Expected Fall 2025.

(**FORMAT:** *small group* | **TIME:** *50 minutes, bimonthly*)

Substance Abuse Subtle Screening Inventory: An online screening instrument designed to assess the risk of a substance use disorder (SUD). It is meant to be completed independently and then reviewed with a prevention specialist.

(**FORMAT:** *online + one-on-one* | **TIME (ONLINE):** *10 minutes, self-paced*; **TIME (ONE-ON-ONE):** *50 minutes*)

Training for Intervention Procedures (called TIPS): Provides skills needed to prevent alcohol-related incidents and to intervene in high-risk situations.

(**FORMAT:** *small group* | **TIME:** *3 hours – includes a certification*)

Under the Influence: An online alcohol intervention course designed for those who have violated alcohol-related laws or college policies.

(**FORMAT:** *online* | **TIME:** *75 minutes, self-paced*)