Questions Asked During Live Webinar Broadcast on 03/01/2023

**Collegiate Recovery: Fostering Recovery-Supportive College Campuses**

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**Is there a difference in what is offered at Community Colleges vs 4 year schools?**

A: Given their core functions of providing identity-affirming and supportive student environments, collegiate recovery programs at Community Colleges and at 4-year Universities have similar theoretical foundations. There are some differences in program design- for example, a 4-year school might offer on-campus recovery-housing as a component of their collegiate recovery programming. Recovery Housing is uncommon in the community college setting, given that most schools are commuter schools.

Unfortunately, growth in the collegiate recovery movement has been slower among community colleges than at 4-year institutions. Most new programs are fueled by students and professionals moving from universities with collegiate recovery initiatives to those without them. Unfortunately for community colleges, students typically transfer out of these schools and on to four-year degree granting institutions. Student movement across institutions is not only a barrier to starting recovery programs at community colleges, it’s a barrier to maintaining them as well. Successful community college students may only spend a handful of semesters enrolled at the campus before graduating or transferring, thus every new semester is a new beginning, requiring re-recruitment and re-engagement for the recovery community to thrive. The public awareness, marketing, and recruitment work necessary to fill a collegiate recovery community’s ranks requires time, effort, and resources. Often this work is done by the student members and leaders within the collegiate recovery community, and these communities lose their best champions as their students graduate and transition out.

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**As a current undergraduate student in recovery, how could I get a program started at my school?**

A: Please reach out to our team via campuses@safeproject.us! We’re happy to help you start the process and compile a business case for your school. Additional resources include the Association of Recovery in Higher Education and Students Recover.

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**Is it common for a post-grad student seeking to get a master’s degree to start programs like this?**

A: Yes! Given that they’ve typically spent more time operating within higher education institutions, graduate students often have a strong understanding of how these systems work and have been successful in advocating for support. They also have strong faculty connections, such as thesis advisors and committees, they could leverage to build cross-departmental and cross-functional coalitions.

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**Which way to be involved with this would work as a Licensed Addiction Counselor in Denver, Co with a private practice? I would love to work with some of these students one-on-one, or with students and parents/family.**

A: First, I would say it’s important to plant the seed with your clients, so that they understand they don’t have to choose between their recovery and a college education. When working with your clients (and their families) to define their recovery, set goals, and improve their quality of life, it’s important to include conversations around education. Understanding the landscape of collegiate recovery can help clients select campuses that will be a good fit. The Association of Recovery in Higher Education maintains a list of schools with accredited recovery programming on their website. If a client has a specific school in mind and that campus does not currently offer recovery programming, SAFE Project is happy to consult with the student, campus staff, and/or practitioner to see if there are ways to kickstart the school’s support programming.
Would you suggest peer recovery programs and training?
A: Absolutely. Peer support is found to be effective in many health promotion initiatives and recovery pathways, including collegiate recovery programs. Whereas substance use disorder has historically been stigmatized—particularly on college campuses—peer recovery pathways allow students to build community, give and receive support, and learn from those with similar lived experiences. Not only do we recommend peer support programming and training within recovery programming, we recommend campus professionals consider peers in recovery for other health promotion efforts, such as prevention and educational programming.

Can you talk again about the differences between CRP and CRC?
A: In general, collegiate recovery programs (CRPs) include institution-supported programming, and programming is led by dedicated staff and counselors. The institution offers designated physical space on campus and commits resources for programming and events. Where CRPs are often institution-led, collegiate recovery communities (CRCs) are often student-led. CRCs may be comprised of registered student organizations, activities, or clubs, and while they may receive resources for events, the community is typically peer led rather than staff led. Both CRPs and CRCs may include mutual aid support groups.

As a treatment funder do you have any idea of what department on campuses, I should contact that would be best to reach out to give them free harm reduction products?
A: I recommend starting with the Office of Health Promotion, the Office of Student Life, or Counseling Services. You might also find allies among the faculty, particularly in departments such as Social Work, Human Services, Psychology, Sociology, or Pre-Med/Pharmacy.

I have been going to my school for about 3 years and I never even knew until now that programs like this existed, is there anything you would suggest to help spread awareness of these programs and communities?
A: If you have a program or are building a program on campus, reach out to other clubs, fraternities, sororities, and student organizations. Our students have also found success in leaving flyers and posters at harm reduction sites, around the university in general, and with local treatment providers. Ask faculty to share about the clubs in class or list as a resource on their syllabus. Engage in the program’s social media and make sure to have thoughtful (and fun!) events to drum up interest across campus. If you don’t have a program on campus already, I have shared a number of resources and ideas through the Q&A for where to get started.

As a Public Health Nurse in Shasta County California would you recommend that I work with students or my organization to promote Collegiate Recovery for our Community College and other private University?
A: I would perhaps start building a coalition of stakeholders connected to the campuses—this could be students in recovery, faculty in recovery, recovery allies, alumni—and going from there. It is important to get an idea of who our audience is and what support they are looking for before building or scaling programs: in our experience at SAFE, the adage “if you build it they will come” does not always apply! Once established, the coalition or working group can start by asset mapping: what sort of resources, allies, and processes already exist on the campuses, and what strengths can your community leverage to fill any gaps? It doesn’t have to be as formal as an advisory board either, something as informal as a lunch-and-learn workshop on or near campus can get the ball rolling!