I. **Organization**: The Citadel encourages education as the first of many steps in assisting others to take responsibility for their behavior and to understand the consequences of current and future behavior as it relates to AOD use. In that regard, The Citadel founded the Campus Alcohol and Drug Information Center (CADIC) in 2014 with the intended purpose to develop and implement a comprehensive AOD prevention program on-campus.

CADIC is a unit within the Commandant’s Department. Its mission is “to increase the safety and health of cadets and students by providing best practice AOD prevention services, programs, and events.” CADIC achieves its mission by defining “what” services, programs, and events are provided, “how” they are provided, “why” they are provided, “who” receives them, and “how” they are evaluated.

A. **Staff**

1. **Director**. Kevin M. Modglin is the Director of the Campus Alcohol and Drug Information (CADIC) at The Citadel. He has over twenty-five years working in college settings providing public health services, especially in the area of AOD misuse prevention. In his capacity as a public health practitioner, he has worked with a variety of students (e.g., veterans, military, commuter, and ‘traditional’) in various college settings (e.g., military college, urban college, ‘traditional’ college). Additionally, he has also worked with diverse groups of students that are often marginalized or underrepresented on college campuses including students with substance use disorders, students with mental health and wellness concerns, and LGBTIQ students. Mr. Modglin holds a Master of Public Health in community health and a Master of Arts in psychology.
2. **Coordinator of Prevention (Pending).** The person in this position will assist the Director in providing AOD prevention programs on campus with an emphasis on evening undergraduate, graduate, and veteran students.

B. **Functions Areas**

CADIC has four functional areas that define “what” it does and “how” it achieves its mission.

1. **Services.** A service is a type of AOD intervention *tailored* to the unique needs and experiences of *each visitor*. Services are always one-on-one and are provided in a private, confidential, and safe environment.

2. **Programs.** A program is a type of AOD intervention *targeted* to a *group or cohort* who share similar health issues or have similar health needs (e.g., a program developed for ‘Alpha Company sophomores’ because they are receiving excessive alcohol violations). Programs can be facilitated in most settings (e.g., classroom, meeting room, outside), are usually small (e.g., 5-to-25 participants), and use multiple modalities in the delivery of the information (e.g., PowerPoint, role-playing, self-reflection, values clarification, group discussion, journal books).

3. **Events.** An event is a large, campus-wide (or cohort specific) social gathering used to increase the awareness of health issues (e.g., drinking and driving during spring break), promote social marketing messages (e.g., low-risk drinking tips), promote pro-health behaviors (e.g., call a taxi if intoxicated, don’t travel alone when partying, always monitor your beverage), or promote services available to cadets and students (e.g., Counseling Center provides..., CADIC provides..., CARE provides...).

4. **CADIC Online.** ‘CADIC Online’ is the name given to a modest selection of AOD educational programs available to cadets and students via the internet. These programs are self-paced and last from 30-minutes to several hours.

C. **Level and Focus Areas of Prevention (Describes the “Why” and the “Who”)**

The levels and focus areas of prevention describe “who” receives the service or program and “why” they are the recipient of the service or program.

1. **Level One—Primary Prevention.** The first level of prevention is called ‘*primary prevention.*’ It is used to (1) identify risk factors and protective factors that contribute to the development of an illness, disease, or disorder and (2) modify those risk and protective factors by minimizing the former and enhancing the later. The methods used in primary prevention can be individually or environmentally based. Individually-based methods include health education programs (e.g., Alcohol-Edu for freshmen). Environmentally-based methods include changing laws (e.g., must be 21 to purchase tobacco products), policies (e.g., tobacco-free campus policy), improving access to public health services (e.g., availability of CADIC to evening undergraduates) and social marketing campaigns (e.g., low-risk drinking tips).

2. **Focus Area One—Universal Prevention.** The focus of universal prevention is the *entire population* (e.g., all cadets) or *subpopulation* (e.g., sophomore cadets) assumed to be at risk for experiencing negative health or social consequences from *AOD use* (e.g., cadet seniors during Ring Week; cadet freshmen during Recognition Week).
3. **Level Two—Secondary Prevention.** The second level of prevention is called ‘secondary prevention.’ It is used to reduce the progression of an illness, disease, or disorder via targeted programs (small groups), tailored meetings (one-on-one), risk-reduction plans, health screenings, early identification of disorders, and brief treatments. An excellent example of a secondary prevention strategy used on many college campuses is the ‘Brief Alcohol Screening and Intervention for College Students’ (BASICS). BASICS is an evidenced-based program that uses a non-confrontational and non-judgmental format to help cadets and students identify and evaluate their own risk and protective factors and provides them with tailored feedback for self-improvement and safer choices (Dimeff, et al., 1999; see also Walters & Baer, 2006).

4. **Focus Area Two—Selective Prevention.** The focus of selective prevention is to provide programs or services to **individuals, groups, or cohorts** within a population who *(1)* have experienced a negative health or social consequence from *AOD use* (e.g., a cadet who has lost rank from an alcohol violation; a group of underage cadets caught drinking) or *(2)* are known to have risk factors associated with *misuse* (e.g., cadets with poor grades; cadets who are frequent violators of the ‘code of conduct’).

5. **Level Three—Tertiary Prevention.** The third level of prevention is called tertiary prevention. It is used to reduce the negative aspects of a diagnosed illness, disease, or disorder by improving coping skills, minimizing the impact of the condition on daily life, and preventing further deterioration in health and well-being. Said another way, the goal of tertiary prevention is to improve both the quality of life and the life expectancy of a person diagnosed with a life altering condition. Tertiary care includes hospitalizations, inpatient or outpatient treatment, rehabilitative or convalescent services (e.g., psychotherapy, physical therapy, occupational therapy, speech therapy) and support services (e.g., AA, NA, Al-Anon, Smart Recovery).

6. **Focus Area Three—Indicated Prevention.** The focus of indicated prevention is to provide programs or services to **individuals** within a population who *(1)* have risk factors associated with *AOD abuse* (e.g., increase in tolerance, repeat offenders of the ‘AOD Policy’; incarceration, undiagnosed mental health disorder) or *(2)* are exhibiting early signs of a SUD (e.g., preoccupation, craving, interpersonal problems, unable to stop or cut down).

**D. Alignment with Best Practice Resources**

A best practice is an intervention that has evidence for its effectiveness in a particular setting and is likely to be replicated in similar settings (Colombani & Ng, 2015). CADIC uses the following best practices throughout program development, implementation, and evaluation.

1. **College-AIM.** The College Alcohol Intervention Matrix is a resource to help colleges evaluate their environmental and individual level interventions. ([https://www.collegedrinkingprevention.gov/CollegeAIM/](https://www.collegedrinkingprevention.gov/CollegeAIM/)).

2. **Precede-Proceed Model.** The PRECEDE-PROCEED model provides a comprehensive structure for assessing health (the “precede” phase) and the subsequent development, implementation, and evaluation of an intervention (the “proceed” phase) (Green & Kreuter, 1999). It is frequently used with public health issues that are highly resistant to change (see Appendix 1 for an illustration of this model).

3. **Social Ecological Model.** The social ecological model was developed based on evidence that no single factor can explain the variability in health behavior within individuals and between groups (McLeroy et al., 1988). The model views health behavior as the interaction between individual and environmental factors across five levels—*(1)* **intrapersonal** (e.g., knowledge, attitudes, and
behavior), (2) interpersonal (e.g., family and peer relationships), (3) institutional (e.g., campus policies and norms), (4) the community (e.g., laws and statutes, community norms), and (5) society (e.g., public policy, socioeconomic inequalities, social and cultural norms). Using health theory to modify the outcomes within each level is illustrated in Appendix 2.

E. Standards of Practice

CADIC follows the standards of practice for public health professionals and health educators as promulgated in the following documents.

1. (PENDING) Council for the Advancement of Standards (CAS) in Higher Education—Alcohol and Other Drug Programs.
   https://www.cas.edu/standards

2. Standards of Practice for Health Promotion in Higher Education.


F. Partners in Prevention

To help fulfill its mission, CADIC partners with many departments, agencies, and people on and off campus.

1. On-Campus Partners.
   - Academic Affairs
   - Assistant Commandant for Discipline
   - CARE
   - Chaplain/Religious Services
   - Citadel Police Department
   - Counseling Center
   - Infirmary
   - Ombudsperson
   - TAC Staff (Teach, Advise, Coach)

2. Off-Campus Partners.
   - Charleston County Sheriff’s Department
   - Charleston Police Department
   - College of Charleston
   - Everfi
   - MUSC
   - Southeastern Chapter, National Safety Council

G. Evaluation

Evaluation describes “how” success is measured both programmatically (e.g., Student Learning Outcomes or SLOs) and departmentally (e.g., Institutional Effectiveness Plans or IEPs). Specifically,
formative and summative evaluations are used to measure the progress, achievements, and changes that occur from participation in any of CADIC’s functional areas (see Appendix 3 and Appendix 4 for detailed logic models of these processes). Once the evaluation is completed, the results are then used to redefine the “what” (or the “why”, “how”, or “who”).

1. **Process Evaluation.** The purpose of the process evaluation is to measure the type, quantity, or quality of an intervention provided to a target audience. The process evaluation answers the questions, “Did you do what was planned?”, “Did you do it as it was planned?”, “Did you follow best practices?”, “Did you reach your target audience?”, and “Were the participants satisfied with the intervention?”

2. **Impact Evaluation.** The purpose of the impact evaluation is to measure the change in awareness, knowledge, attitudes, skills, or behaviors immediately following an intervention. The impact evaluation answers the questions, “Did you learn new information?”, “Did your attitude(s) about the issue change?”, “Did you learn a new skill?”, or “Did you modify your behavior or develop a new one?”

3. **Outcome Evaluation.** The purpose of the outcome evaluation is to measure long-term changes in the health status of a population (e.g., changes in mortality or morbidity rates) or the long-term changes in the behavior of a population (e.g., changes in the number of cadet alcohol and tobacco violations during the year). The outcome evaluation is an indirect measure of department goals and, subsequently, the achievement of its mission. It answers the questions, “Are we achieving our goals?” and “Are we achieving our mission?”

II. **Procedures**

A. **Services**

A service is a type of AOD intervention that focuses on the unique needs and experiences of each visitor. Services are always one-on-one and are provided in a private, confidential, and safe environment. CADIC provides two types of services as described below.

1. **Mandated.** Cadets and students who violate the campus ‘Alcohol and Other Drugs Policy’ or the ‘Tobacco-Free Campus Policy’ are required to participate in remediation services provided by CADIC (and The Citadel Counseling Center).

   i. **Purpose.** The intention of the mandated program is to facilitate behavior change by tailoring feedback and information to a person’s specific needs (e.g., a private meeting to facilitate behavior change in ‘cadet A’ based upon his or her unique knowledge, attitudes, and behaviors relative to other similarly aged cadets).

   Upon completion of the mandated program, many students voluntarily choose to continue participating in CADIC services to further develop or strengthen harm reduction strategies or life skills (e.g., stress management, time management, communication skills, or peer relationship skills).

   ii. **Process.** Cadets and students can schedule their appointments in four ways: (1) emailing the Director, (2) texting/calling the Director on his cell-phone, (3) calling CADIC directly, or (4) visiting CADIC in Mark Clark Hall, Room 217.

   The different level of remediation services for a ‘mandated intervention’ are described below.
a. First Alcohol Violation (AV-1)
   - **Step 1**: Complete a *one-hour* alcohol education program online. (Broad health education is called primary prevention.)
   - **Step 2**: Complete *two*, one-hour meetings in CADIC. (A tailored intervention is called secondary prevention.)
   - **Step 3**: Complete three, one-hour meetings in the Counseling Center. (A tailored counseling session (or a referral) is called tertiary prevention.)

b. Second Alcohol Violation (AV-2)
   - **Step 1**: Complete a *two-hour* alcohol education online (i.e., primary prevention).
   - **Step 2**: Complete *three*, one-hour meetings in CADIC (i.e., secondary prevention).
   - **Step 3**: Complete three, one-hour meetings in the Counseling Center (i.e., tertiary prevention).

c. Third Alcohol Violation (AV-3)
   - Commandant’s Board (for cadets only). For more information, see Blue Book [https://www.citadel.edu/root/images/commandant/blue-book.pdf](https://www.citadel.edu/root/images/commandant/blue-book.pdf);

d. First Tobacco Violation (TV-1)
   - **Step 1**: Complete a *4-hour* self-pay ($25) tobacco education program online (i.e., primary prevention).

e. Second Tobacco Violation (TV-2)
   - **Step 1**: Complete a *30-minute* tobacco self-assessment online (i.e., secondary prevention).
   - **Step 2**: Complete *two*, one-hour meetings in CADIC (i.e., secondary prevention).

f. Third Tobacco Violation (TV-3)
   - Commandant’s Board (for cadets only). For more information, see Blue Book [https://www.citadel.edu/root/images/commandant/blue-book.pdf](https://www.citadel.edu/root/images/commandant/blue-book.pdf);

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26 Counseling sessions can function as either, or both, secondary or tertiary prevention depending on the depth, focus, and type of counseling provided.
2. **Referrals.** CADIC services are available to all cadets and students regardless of reason. Some cadets and students choose to participate in CADIC services based upon their own unique needs (i.e., a self-referral) whereas other cadets and students are referred to CADIC from on-campus sources (e.g., coaches, Counseling Center, faculty, TACs).

i. **Purpose.** The intention of referral based services is to facilitate behavior change by tailoring feedback and information to a person’s specific needs (e.g., a private meeting to facilitate behavior change in ‘cadet A’ based upon his or her unique knowledge, attitudes, and behaviors relative to other similarly aged cadets).

In some instances, cadets and students referred to CADIC may receive supplemental information designed to develop or strengthen harm reduction strategies or life skills (e.g., stress management, time management, communication skills, or peer relationship skills).

ii. **Process.** Cadets and students can schedule an appointment in four ways: (1) emailing the Director, (2) texting/calling the Director on his cell-phone, (3) calling CADIC directly, or (4) visiting CADIC in Mark Clark Hall, Room 217.

**B. Programs**

1. **Purpose.** A program is a type intervention provided to a group or cohort who share similar risks or have experienced similar consequences from AOD use. Programs can be facilitated in most settings (e.g., classroom, meeting room, outside), are usually small (e.g., 5-to-25 participants), and use multiple modalities in the delivery of the information (e.g., PowerPoint, role-playing, self-reflection, values clarification, group discussion, journal books).

2. **Process.** Any cadet, student, or employee can request a CADIC program. They can be scheduled in four ways: (1) emailing the Director, (2) texting/calling the Director on his cell-phone, (3) calling CADIC directly, or (4) visiting CADIC in Mark Clark Hall, Room 217.

Once contacted, the Director will develop a program proposal. Upon approval of the proposal by the person requesting it, the program is then added to the “CADIC Calendar.”

**C. Events**

An event is a large, campus-wide (or cohort specific) social gathering used to increase the awareness of health issues (e.g., drinking and driving during spring break), promote social marketing messages (e.g., low-risk drinking tips), promote pro-health behaviors (e.g., call a taxi if intoxicated, don’t travel alone when partying, always monitor your beverage), or promote services available to cadets and students (e.g., Counseling Center provides..., CADIC provides..., CARE provides...).

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27 Only cadets and students mandated to CADIC through the official college process (i.e., mandated by the Assistant Commandant for Discipline and documented in CAS) are required to participate in, and complete, CADIC remediation services. Participation in CADIC services via self-referral or other referral sources (e.g., TACs, faculty, coaches) is optional: cadets and students can choose not to participate or can stop their participation at any time.

28 Generally speaking, large, untargeted events are not considered a best practice (see CollegeAim https://www.collegedrinkingprevention.gov/collegeaim/). In fact, there is a general consensus in the prevention field that large, untargeted events do not lead to substantive behavior change (Crusto, et al., 2003). Given the foregoing, CADIC’s focus will remain on tailored services (one-on-one) and targeted programs (small group). Events do serve the purpose of promoting social marketing messages; however, limited resources (e.g., budget and staff support) have hindered CADIC’s regular sponsorship of them. Furthermore, COVID 19 has created an additional barrier to the sponsorship of campus-wide events.
1. **Purpose.** The intention is to promote a specific prevention message, idea, or strategy (e.g., low-risk drinking strategies) on the campus.

2. **Process.** Events sponsored by CADIC are coordinated through the Assistance Commandant of Logistics with approval and support from the Commandant of Cadets. The type and time of an event usually follows the dates of national prevention campaigns. The most common national prevention campaigns and their corresponding month are presented in the table below.

<table>
<thead>
<tr>
<th>Name of Event</th>
<th>Focus</th>
<th>Month</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FALL EVENTS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>National Collegiate Alcohol</td>
<td>Alcohol misuse awareness and</td>
<td>October</td>
</tr>
<tr>
<td>Awareness Week</td>
<td>prevention</td>
<td></td>
</tr>
<tr>
<td>CHOICES (Citadel specific)</td>
<td>DUI prevention</td>
<td>October</td>
</tr>
<tr>
<td>Great American Smoke Out</td>
<td>Tobacco cessation</td>
<td>November</td>
</tr>
<tr>
<td><strong>SPRING EVENTS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safer Break Week</td>
<td>Alcohol misuse and DUI</td>
<td>March</td>
</tr>
<tr>
<td></td>
<td>prevention</td>
<td></td>
</tr>
<tr>
<td>National Alcohol Screening Day</td>
<td>Screening and referrals for</td>
<td>April</td>
</tr>
<tr>
<td></td>
<td>high-risk alcohol use</td>
<td></td>
</tr>
</tbody>
</table>

D. **CADIC Online**

‘CADIC Online’ is the name given to a modest selection of AOD educational programs available to cadets and students via the internet. These programs are self-paced and last from 30-minutes to several hours.

1. **Purpose.** Most of the modules focus on primary prevention (i.e., awareness and knowledge) in an effort to delay or reduce AOD misuse. However, some online programs also include secondary prevention concepts such as risk reduction techniques, personalized feedback information (PNI) (i.e., feedback unique to the person), or personalized normative feedback (PNF) (i.e., feedback related to the person compared with peers).

2. **Process.** Programs offered via ‘CADIC Online’ are scheduled throughout the year. Some programs are required and others are optional. The type, length, and breadth of the program provided—and the time of year it is provided—is based upon a ‘student developmental model’ (Patton et al., 2016). For example, freshmen programs are longer and more comprehensive than sophomore programs, which in turn are longer and more comprehensive than junior programs. The chart in Appendix 5 presents a layout of online programs offered to the campus.

III. **Policies**

A. **Alcohol and Other Drugs Policy**

1. **Purpose.** The Citadel prohibits the use of illegal drugs by students, and it supports only the legal use of prescription drugs and alcohol. The purpose of the policy is to assist members of The Citadel community in their understanding of:

   - The harmful and addictive potential effects associated with the use of alcohol and other drugs;

   - The consequences of the use, possession, manufacture, or distribution of 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 distribution;

• The consequences of the unlawful use and possession of alcohol, and the benefits of the development of acceptable and intelligent drinking behavior.

2. Process. In compliance with the Department of Education’s Drug-Free Schools and Communities Act (DFSCA), as articulated in the Education Department General Administrative Regulations (EDGAR) Part 86, all Institutions of Higher Education (IHEs) receiving any form of federal funding must review their alcohol and other drug (AOD) policy and prevention program and develop a written report on its effectiveness every two years.

The Director of the Campus Alcohol and Drug Information Center (CADIC) at The Citadel is responsible for the biennial review and report. The review and writing process occurs every two years. Once the initial report is completed by the Director it is forwarded for review and approval, and then certified via signature from the following college officials:

• The Commandant of Cadets

• The Provost and Dean of the College

• The College President

The Citadel will punish violations of the ’AOD Policy’ in accordance with regulations applicable to the offender. Cadets will be subject to punishment as prescribed by the Blue Book, up to and including separation from the College (see Blue Book https://www.citadel.edu/root/images/commandant/blue-book.pdf).

B. Tobacco Free Campus Policy

1. Purpose. The Citadel is committed to providing a safe and healthy learning and working environment for cadets, students, faculty, staff and visitors and recognizes that tobacco use in any form, active or passive, is a significant health hazard. The “Tobacco Free Campus Policy,” establishes The Citadel as a tobacco-free campus.

2. Process. As of December 2020, The Citadel ‘Tobacco-Free Campus Policy’ has been under review by committee. Future reviews and revisions of the tobacco policy will be determined pending the outcome of the current review.

The Citadel will punish violations of this policy in accordance with regulations applicable to the offender. Cadets will be subject to punishment as prescribed by the Blue Book, up to and including separation from the College (see Blue Book https://www.citadel.edu/root/images/commandant/blue-book.pdf).

C. Drug Testing Policy

1. Purpose. As an IHE whose purpose is to educate and develop principled leaders in a disciplined and intellectually challenging environment, The Citadel expressly prohibits:

   • The unlawful manufacture, alteration, distribution, dispensing, possession, or use of any illicit drug;
- The unlawful possession or use of a controlled substance regulated under the provisions of South Carolina Code Sections 44-53-190, 44-53-210, 44-53-230 44-53-250 and 44-53-270, as amended or 21 USC Section 812; unless dispensed and used pursuant to prescription or otherwise allowed by law;

- The manufacture, alteration, delivery, distribution, dispensing, and/or sale of controlled substances;

- The possession by employees, cadets, and students, at any time in any place, of any item or piece of drug paraphernalia, as defined by, but not necessarily limited to those items in South Carolina Code of Laws Section 44-53-110;

- Providing financial assistance or otherwise aiding or abetting any other person in the purchase, sale, manufacture, or delivery of any prohibited drug, substance, or item;

- The unlawful purchase, possession, distribution and/or use of alcohol by employees, cadets, and students;

- The possession of alcohol on property owned or controlled by The Citadel (see Section 4.C. for exceptions);

- The use of alcohol off-campus when an employee, cadet, or student is acting as a representative of The Citadel, if such use, in the sole discretion of The Citadel, tends to bring discredit on The Citadel;

- The appearance by any employee, cadet or student at work, in class or any College function while under the influence of alcohol or any illicit drug;

- Possession, purchase, manufacture, solicitation, distribution, sale, or use of any hallucinogenic substance.

2. Process. The Citadel randomly tests members of the Corps of Cadets for the presence of illicit drugs and substances as outlined below.

- Participation in mandatory drug testing is a condition of acceptance and continued enrollment as a cadet.

- The Citadel will conduct unannounced, random drug tests periodically during the Academic Year. Cadets selected for random testing will be directed to report to a specified location at a specified time for the purpose of providing an observed specimen for testing. Each cadet will be briefed on the process and will remain at the designated location until an acceptable sample is provided for use by the testing laboratory.

- The Citadel will direct members of the Corps of Cadets to be tested when reasonable suspicion of drug use exists. "Reasonable suspicion" is defined as the existence of circumstances, reports, information or direct observation, which suggests that a violation of The Citadel ‘AOD Policy’ has occurred. Reasonable suspicion or probable cause will be determined only by the Commandant (or designee), in consultation with the General Counsel.
• Refusal to provide an observed specimen upon request, and in accordance with the provisions of the ‘AOD Policy,’ will be treated as the equivalent of a positive test. In such circumstances the cadet(s) who refused the drug test will be immediately referred to the Office of the Commandant for disciplinary action in accordance with this the ‘AOD Policy.’

• The Citadel will consider a cadet conviction, admission, plea of nolo contendere, plea pursuant to North Carolina v Alford, or confession in any legal or administrative proceeding to the possession or use of any such drug, substance or item prohibited herein as possession of such drug, substance or item. A conviction is not necessary for The Citadel to proceed with an administrative hearing. The scheduling or timing of criminal or civil proceedings will not affect administrative proceedings conducted by the College. The College will schedule an administrative hearing as soon as feasible and with due process. For additional information on this process, cadets are encouraged to contact the Assistant Commandant for Discipline and Standards.

• The Citadel will also consider a positive finding of the presence of a prohibited substance pursuant to any generally accepted test, including but not limited to, a blood, urine, or hair follicle test for such substance, as possession of such drug substance or item.
APPENDIX 1

PRECEDE-PROCEED MODEL

Presents the interaction between assessment (i.e., the “precede” phase) and program development, implementation, and evaluation (i.e., the “proceed” phase) (Green & Kreuter, 1999).
APPENDIX 2

SOCIAL ECOLOGICAL MODEL

Presents a model that views health behavior as the interaction between individual and environmental factors across five levels and how health theory can be used to modify the outcomes within each of the levels.

Social Element

- Societal (Laws, Policies)
- Community (Laws, Culture, Norms)
- Institutional (Policies, Culture, Norms)
- Interpersonal (Relationships & Peer Influences)
- Intrapersonal (Knowledge, Attitude, Behavior)

Strategy

- **Community Coalition**
  - 1. Community Organization Theory
  - 2. Diffusion of Innovations Theory
  - Precede – Proceed Planning Model
  - Social Marketing Planning

- **Citadel Advisory Council**
  - 1. Community Organization Theory
  - 2. Diffusion of Innovations Theory
  - Precede – Proceed Planning Model
  - Social Marketing Planning Model

- **CADIC**
  - 1. Stages of Change Theory
  - 2. Precaution Adoption Theory
  - 3. Social Cognitive Theory
  - 4. Theory of Planned Behavior
APPENDIX 3

ASSESSMENT LOGIC MODEL

Presents a visual representation of the interaction between the various components of CADIC’s assessment and evaluation process.
APPENDIX 4

PROGRAM PLANNING LOGIC MODEL

Presents a visual representation of the development, implementation, and evaluation of CADIC services, programs, and events.
APPENDIX 5

PREVENTON PROGRAM MATRIX

Presents a table describing the developmental progression of AOD prevention programs available at The Citadel.

<table>
<thead>
<tr>
<th>PROGRAM</th>
<th>PRE</th>
<th>FRESH</th>
<th>SOPH</th>
<th>JR</th>
<th>SR</th>
<th>CGC</th>
<th>Fac/Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Alcohol Prevention</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. ONLINE: Alcohol (TBD)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Required</td>
</tr>
<tr>
<td>2. ONLINE: AlcoholEdu/Freshmen</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Required</td>
</tr>
<tr>
<td>3. ONLINE: AlcoholEdu/Refresher</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>Required</td>
</tr>
<tr>
<td>4. ONLINE: AlcoholEdu/Discipline</td>
<td>As Needed</td>
<td>As Needed</td>
<td>As Needed</td>
<td>As Needed</td>
<td>As Needed</td>
<td>As Needed</td>
<td>As Needed</td>
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<tr>
<td>5. ONLINE: MyStudentBody/Alcohol</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Required</td>
</tr>
<tr>
<td>6. ONLINE: MyStudentBody/Discipline</td>
<td>As Needed</td>
<td>As Needed</td>
<td>As Needed</td>
<td>As Needed</td>
<td>As Needed</td>
<td>As Needed</td>
<td>As Needed</td>
</tr>
<tr>
<td>7. ONLINE/IN-PERSON: Alcohol Checkup-To-Go</td>
<td>X</td>
<td></td>
<td>As Needed</td>
<td>As Needed</td>
<td>As Needed</td>
<td>As Needed</td>
<td>As Needed</td>
</tr>
<tr>
<td>8. IN-PERSON: BASICS I</td>
<td>As Needed</td>
<td>As Needed</td>
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REFERENCES


