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A dissertation

presented to

the faculty of the Educational Leadership & Policy Analysis

East Tennessee State University

In partial fulfillment

of the requirements for the degree

Doctor of Education in Educational Leadership

by

Mandi L. Walker

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Dr. Bethany Flora, Chair

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Keywords: Recovery, Substance Abuse, Community College, Postsecondary

ABSTRACT

Women in Recovery: Perceptions in Transition to Community College

by

Mandi L. Walker

Substance abuse is an area of concern for college administrators, and they have implemented campus programming in an attempt to address it. Additionally, prior researchers have studied substance abuse on college campuses in order to better understand how substance abuse affects student success. However, limited research exist that addresses the unique perspective of college students who are in recovery from substance abuse, and most studies were conducted in 4-year institutions rather than community colleges. This qualitative case study explored the transition experiences of female students in recovery who attend community college or have recently graduated. The sample included students from 3 community colleges. Participants were selected using prescreening surveys and interviews with 10 female participants.

Common themes emerged from the analysis of the interview data regarding reasons for enrolling, struggles, supports, and a definition of success as it relates to transition to community college. Participant responses indicated that common struggles revolve around financial stress, academic deficiencies, time management strategies, and the lack of a positive culture regarding substance abuse and recovery on their campuses. However, academic structures, social supports via friends, family, and faculty as well as group meetings, and a positive college culture also supported students through their various transitions.

Recommendations for practice include supporting faculty professional development by implementing campus professional development aimed at helping to create a positive campus culture where faculty better understand the implications of being in recovery from substance abuse and are prepared to support students. Another recommendation for practice is to implement collegiate recovery programs to support students in recovery that offer many of the supports participants indicated as effective in their success.

Using a collaborative approach, community members, students, college administrators, and faculty along with federal, state, and local policymakers have the unique opportunity to come together, problem solve, and apply recent research that may increase student retention and success while supporting the individual needs of students who are in recovery from substance abuse.

DEDICATION

To my husband Clint Walker, you have always sacrificed so that I can reach my goals and encouraged me to never give up. Thank you for working so hard so that I could pursue this degree. I am so thankful for your family that became mine when we got married. Mom Walker, Dad Walker, Julie, and Larry Koontz, thank you for your encouragement and support as I earned this doctorate degree. I also want to remember my mom and dad who sacrificed so much my entire life so that I could achieve all that I have. They worked so hard and loved me dearly. I am sure they would be so proud of my accomplishments.

Without the commitment of the Serenity women to their recovery and relationship with Jesus Christ, I may never have decided to pursue my dissertation topic. They continue to be an inspiration to me as an educator and researcher, and I am thankful to consider each one of them a personal friend.

Most of all, I want to thank Jesus Christ for providing the strength, power, and will to earn this degree. He has always been a constant source of support and provision, and I would not be where I am today without His amazing grace and faithful love.

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TABLE OF CONTENTS

	Page
ABSTRACT	2
DEDICATION	4
ACKNOWLEDGEMENTS	5
LIST OF TABLES	9
Chapter	
1. INTRODUCTION	10
Statement of the Purpose	16
Research Questions	17
Significance of the Study	17
Delimitations and Limitations.	18
Definitions of Terms	19
Overview of the Study	20
2. REVIEW of LITERATURE	21
Introduction	21
Academic and Student Affairs	23
Nontraditional Students	26
Defining Nontraditional Students	27
Key Barriers to Success in College	28
Retention as a Challenge	30
Individuals in Recovery	31
Recovery Defined	33
Transition Theories	34
Stress and Coping Theories	37

	Recovery Capital	39
	Women in Recovery	41
	Comorbidity and Mental Illness	42
	Collegiate Recovery Programs (CRPs)	44
	Conclusion	49
3.	RESEARCH METHODOLOGY	51
	Introduction	51
	Research Design	51
	Research Questions	51
	Case Study	52
	Setting	53
	Participants	54
	Data Collection	54
	Data Analysis	55
	Trustworthiness	56
	Ethical Considerations	57
	Summary	57
1.	RESULTS	58
	Participant Information	59
	Findings	63
	Introductory Question 1: How would you define someone in recovery?	64
	Research Question 1: What factors contribute to students choosing to attend college?	65
	Research Question 2: What challenges do students cite as influential in transitions?	67
	Research Question 3: What supports do students cite as critical for success?	74
	Research Question 4: How do female students in recovery define success?	79
5.	SUMMARY, CONCLUSIONS, RECOMMENDATIONS	87
	Summary	87

Conclusions	88
Recommendations for Future Research	94
Recommendations for Policy and Practice	95
REFERENCE	99
APPENDICES	119
Appendix A: Email Letter to Female Students	119
Appendix B: Pre-Screening Survey	121
Appendix C: Interview Protocol	123
VITA	124

LIST OF TABLES

Table		Page
1.	Participant Demographic	60
2.	Research Question 1: Reasons for Enrolling	67
3.	Research Question 2: Challenges and Stressors	73
4.	Research Question 3: Supports	79
5.	Research Ouestion 4: Definition of Success	83

CHAPTER 1

INTRODUCTION

College success is at the forefront of public and private policy and discourse. Lower graduation rates coupled with a need for a skilled workforce has contributed to the emphasis on student success (Baum, Ma, & Payea, 2010; National Center for Public Policy and Higher Education, 2011). Of individuals who enroll in either 2 or 4-year colleges only 34% graduate (National Center for Public Policy and Higher Education, 2011). As a result, the United States ranks sixth compared to other countries in college attainment rates (College Board Advocacy and Policy Center, 2011). According to the Pathways to Success national report (2012) retention is the most significant challenge higher education institutions face. In response, President Barak Obama initiated a 2020 college completion goal stressing the importance of education in preparing individuals for future employment and leading the American workforce into the 21st century (Lederman, 2009). In 2014 Tennessee Governor Bill Haslam implemented the Tennessee Promise initiative offering all Tennessee graduating seniors last dollar funding resulting in 2 tuition-free years at either a community college or technical school (Tennessee Higher Education Commission & Student Assistance Corporation, 2016). In response to a federal law enacted in 2015 that replaces No Child Left Behind, Tennessee developed Tennessee Succeeds, a strategic plan emphasizing increased student success. One of the goals of Tennessee Succeeds is to ensure that most of the students graduating from high school in 2020 eventually earn a postsecondary degree (Tennessee Department of Education, 2016). Not only have national and state governmental officials taken interest in student success and completion, but multiple researchers have also embarked upon studies related to community college completion and the factors contributing to student success (Eren & Keeton, 2015; Goldrick-Rab, 2010). Despite the

increased scholarship in the field of student success, most research samples are 4-year universities and community colleges have not been studied extensively (Crawford, 1999; Rendon, 1994). Community colleges differ from 4-year institutions, most notably in student selectivity; the open access admissions policy of community colleges that leads to a more diversified student body (Eren & Keeton, 2015; Goldrick-Rab, 2010).

Historically community colleges have been considered open access based on their nonexclusive entrance requirements (Bryant, 2001; Goldrick-Rab, 2010). Enrollment in the community college sector has increased, creating a richly diversified student body with similar factors contributing to success (Eren & Keeton, 2015; Goldrick-Rab, 2010; Wall, Bailey, & McIntosh, 2012). As of 2011, 6.1 million students enrolled in community colleges compared to 3.9 million in 2000 (U.S. Census Bureau, 2011). Community college students are diversified economically, ethically, demographically, and in purposes for enrolling (Eren & Keeton, 2015; Goldrick-Rab, 2010). As of 2013, 46% of all undergraduate students attended community colleges, and a majority were considered nontraditional based on age as well as first generation and enrollment status (American Association of Community Colleges, 2015; Transforming Youth Recovery, 2016). Fifty-three percent of community college students are first-generation (Transforming Youth Recovery, 2016). Eighty-four percent of community college students work and attend college simultaneously with a majority of students enrolling part time. Consequently, part-time students may not be eligible for financial aid leading to financial constraints (Goldrick-Rab, 2010). Nontraditional students juggle life expectations with educational obligations and may experience stress navigating the traditional format of higher education institutions (Pelletier, 2010). However, scholars agree that an influx of traditional aged students will enroll in community colleges as a result of initiatives aimed at increasing degree attainment especially

those offering free tuition (Bryant, 2001; Cejda & Kaylor, 2001). Another factor to consider is the number of students requiring remedial courses to remediate academic deficiencies. More than 50% of students attending community colleges require these courses (Bailey, Jeong, & Cho, 2010). In addition, Goldrick-Rab (2010) reported that 61% of community college students take remedial courses. Other scholars found similar statistics regarding the numbers of students needing these support courses with 43% and 58% of students respectively taking at least one remedial course (Attewell, Lavin, Domina, & Levy, 2006; Horn & Nevill, 2006). Scholars assert that community college students are not successfully progressing toward completion (Bailey, Leinbach, & Jenkins, 2006; Calcagno, Bailey, Jenkins, Kienzle, & Leinbach, 2008). In fact, 25% of community college students drop out after 9 months (Goldrick-Rab, 2010). Based on these retention statistics, focus has been placed on identifying factors and supports that may impact student success. Despite the recent scholarship related to student success, abuse disorders have not been broadly examined. Because the definition of recovery is multifaceted, it is important to review how scholars have defined recovery.

Recovery Defined

Historically, the definition of recovery narrowly focused on abstinence from drugs and alcohol; however, a broader view of recovery has emerged adding to the understanding of the recovery process. Recovery, defined by multiple organizations, now encompasses more than an addict's nonuse (Kelly & Hoeppner, 2015). Recent scholars have highlighted recovery as a process rather than instantaneous. In addition, recovery scholars described the process as an ongoing journey (Best, Gow, Knox, Taylor, Groshkova, & White, 2012; Laudet & White, 2008). Recovery occurs over time and develops as individuals interact with others in their community. Learning to adapt to their new environment, recovering addicts begin to see themselves as active

members of society and work to meet societal expectations. White and Cloud (2008) and Best et al. (2012) stress recovery as a personal experience. Additionally, other scholars agreed that recovery is experienced as individual's transition through their lived circumstances day by day (Best & Laudet, 2010; White & Cloud, 2008). Therefore, recovery is multifaceted and reflects shared experiences still embedded differently according to individual perspectives.

According to the Substance Abuse and Mental Health Services Administration (2014), an estimated 21.5 million people over the age of 11 have substance abuse disorders. Substance abuse effects a diverse population in gender, age, ethnicity, and socioeconomic status. The 2013 National Survey on Drug Use and Health found that 2.5 million addicts underwent treatment at a residential treatment center (RTC), (Substance Abuse and Mental Health Services Administration, 2014). In relation to higher education substance abuse, 22% of college students ages 18-22 use illicit drugs. Additionally, 59% currently drink and 39% binge drink (Substance Abuse and Mental Health Services Administration, 2014). In response, researchers are investigating the causes of substance abuse and consequently how substance abuse affects students in relation to academic achievement, psychological stress, and social issues (Raskin & Rabiner, 2011; Van-Kim, Laska, Ehlinger, Lust, & Story, 2010; Wall, Bailey-Shea, & McIntosh, 2012). As mentioned before, these studies sampled students at 4-year institutions and did not address community college students in recovery (Chiauzzi et al., 2011; Sheffield, Darkes, Del Boca, & Goldman, 2005).

According to Kelly, Magill, and Stout (2009), women are underrepresented in recent studies regarding substance abuse treatment. Historically more men than women received treatment for substance abuse disorders (Beckman & Amaro, 1984; Blume, 1990; Reed, 1985; Stevens, Arbiter, & Glider, 1989). However, the prevalence of women seeking treatment has

increased, and in 2014 the percentage of males and females seeking treatment differed by less than 1% (Substance Abuse and Mental Health Services Administration, 2014). Furthermore, it is common for women with substance abuse disorders to suffer from mental disorders such as depression, eating disorders, and posttraumatic stress disorder. More than a third of women have experienced physical abuse that may increase their risk for substance abuse (National Institute on Drug Abuse, 2016). Women also reported abusing drugs as a means to relieve emotional stress. Webster et al., (2007) encouraged drug abuse treatment providers to "pay particular attention to the needs of female clients, who may be in greater need of mental health services and increased vocational rehabilitation" (p. 264). A number of studies suggested that women's needs regarding treatment differ from men, and these differences impact components of their recovery (Negura & Maranda, 2008; Webster et al., 2007). While both research efforts and policy initiatives have aimed at increasing community college student success, there is limited research or policy responses related specifically to community college students in recovery from substance abuse (Chiauzzi et al. 2011). This lack of attention is unfortunate because substance abuse affects a large majority of people in the United States and students in particular (Eren & Keeton, 2015).

Due to the increase in community college student enrollment over the past century,
Baum, Ma, and Payea (2010) found the lack of attention given to community college students in
substance abuse recovery alarming. Researchers agree that community college students differ
significantly from those enrolled in 4-year institutions in regard to ethnicity, economic status,
housing, as well as other factors; as such, it may be challenging to apply current research
findings for 4-year university students to the community college student experience (Eren &
Keeton, 2015; Wall et al., 2012). Because of the differences in student composition, the

institutional supports that may benefit student success for community college students in recovery could be different from 4-year universities.

Scholars emphasize the value of education in supporting individuals in substance abuse recovery as they move beyond treatment and become contributing society members (Laudet & White, 2010). According to Kelly and Hoeppner (2015) recovery encompasses more than abstaining from substance abuse. The Substance Abuse and Mental Health Administration (SAMHSA) (2011) defines recovery as a process of change though which individuals improve both health and wellness and live independently in order to reach their full potential. Community involvement and finding purpose are two factors that support the recovery process along with managing sobriety (The Substance Abuse and Mental Health Administration, 2011). As individuals in recovery transition to higher education, they may struggle to process the stressors that result (Terrion, 2012). Recovery capital, defined as "external and internal supports necessary for continued recovery," contribute to the continued success recovering addicts experience (Kelly & Hoeppner, 2015, p. 7). Keane (2011) suggested that social, physical, and human resources impact recovering addicts as they take on new responsibilities. Physical capital focuses on financial resources whereas human capital relate to knowledge and education. The amount of human capital an individual possesses hinges on the education one attains. Education empowers those recovering from substance abuse to reach their full potential as society members. Recently higher education entities are realizing the special needs of this student population by implementing strategies to increase recovery capital (Transforming Youth Recovery, 2016).

Over 100 collegiate recovery programs (CRP's) currently operate in higher education institutions in the U.S. to address the complex needs of students (Caldwel & Hourigan, 2016).

However, most CRPs are in operation on the campuses of 4-year institutions with only six community colleges out of over 1200 operating a verified collegiate recovery program (Transforming Youth Recovery, 2016). Due to inadequate financial resources and subsequent inadequate faculty resources and development, community colleges lack the resources necessary to implement innovative support systems although most want to offer these supports (Goldrick-Rab, 2010; Transforming Youth Recovery, 2016). In addition, studies exclude the community college population when examining students in recovery and specifically CPRs (Eren & Keeton, 2015; Manning, Pring, & Glider, 2012). Transforming Youth Recovery(2016) examined current recovery supports offered by community colleges and found that many colleges have counseling centers where students are provided counseling services, social activities, and supportive meetings centered on reaching out to students in recovery to address their individualized recovery needs (Transforming Youth Recovery, 2016). Likewise, student-led organizations and community college CPRs with involved and dedicated staff experienced success (Transforming Youth Recovery, 2016). This present study examined the college transition experiences of students in recovery. Findings will provide higher education administrators, faculty, staff and others with detailed information related to the transition experiences of an important population in higher education.

Statement of the Purpose

The purpose of this qualitative case study is to better understand the experiences of women who are recovering from substance abuse disorders during their transition in community college. The purpose is to gain insight regarding student perceptions of successful collegiate recovery supports and how students experience enrollment and success in higher education.

Research Questions

The following questions were developed to examine the transition experiences of female students in recovery transitioning to community college.

- 1. What factors contribute to female students in recovery choosing to attend college?
- 2. What challenges and resulting stressors do females students in recovery cite as influential in their community college transition?
- 3. What support structures do female community college students in recovery cite as critical in order to achieve success in community college?
- 4. How do female community college students in recovery define success?

Significance of the Study

Numerous studies have been conducted that focus on nontraditional students and their experiences in higher education institutions (Willans & Seary, 2011). Students in recovery could be generally classified as nontraditional based on their work status, age, and other at risk factors. Limited research has been conducted to specifically address the perceptions of students in recovery attending community colleges (Eren & Keeton, 2015). However, a handful of studies have examined student perceptions in the context of 4-year universities (Bell et al., 2009). Additionally, few studies address the specific experiences of female students in recovery. Due to the overall lack of research examining the perceptions of female community college students in recovery, this study will contribute to the current body of knowledge presently available on this topic.

Attaining formal education is directly related to the occurrence of substance abuse, and increasing one's standard of living often correlates to increasing one's educational level, and many jobs require additional education (Substance Abuse and Mental Health Services

Administration, 2014). As individuals in recovery experience an increase in educational opportunities, self-efficacy rises and reinforces their ability to succeed in sobriety (Cloud & Granfield, 2008; Terrion, 2012). Postsecondary institutions have the opportunity to impact student success as they implement policies that target specific populations. Higher education admissions offices, counseling departments, and student life personnel directly interact with potential students to acclimate students to the campus and address individualized issues. Students in general and specifically those recovering from substance abuse will inevitably experience stress during their college years (Willans & Seary, 2011). Unfortunately, students in recovery may experience shame and fear because of their past choices and not self-identify as needing recovery support services (Laudet, Harris, Kimball, Winters, & Moberg, 2015). This study adds to the body of knowledge concerning female students in recovery and their transition to community college. The findings provide college faculty and staff, recovery center administrators, as well as other community service providers with valuable information related to college transition experiences.

Delimitations and Limitations

Because this qualitative case study is limited to adult women, ages 18+ in recovery who attended community college in one of three geographical areas, the results may not be transferable to women in recovery in other geographical areas. Furthermore, the results are based on female student perspectives. Based on the literature that identified differences in recovery experiences by gender, the researcher has made the decision to include women. While the findings may be applicable to male students in recovery, the aim of qualitative research is not to generalize to populations at-large but rather capture the essence of experience.

Definitions of Terms

A list of terms and definitions are provided to clarify the terms used in the study:

Collegiate recovery program (CRP). A supportive campus program that encourages recovery while providing the supports students need to both succeed academically in higher education without sacrificing their recovery goals (Association of Recovery in Higher Education, 2016).

Comorbidity. Co-occurring mood and substance abuse disorders (Quello, Brady, & Sonne, 2005).

Nontraditional student. A student who meets one or more characteristics: delayed enrollment into postsecondary education; attends college part time; works full time; is financially independent for financial aid purposes; has dependents other than a spouse; is a single parent; or does not have a high school diploma. These criteria fit a majority of today's college students (National Center for Educational Statistics, 2016).

Recovery. Recovery from mental disorders and substance use disorders is a process of change involving improved health and wellness while learning to independently direct oneself as you strive to obtain maximum potential (Substance Abuse and Mental Health Services Administration, 2012).

Sobriety. Not being intoxicated (Peele, 2012).

Substance Abuse Disorder (SAD). Substance use disorders occur when the recurrent use of alcohol and/or drugs causes clinically and functionally significant impairment such as health problems, disability, and failure to meet major responsibilities at work, school, or home (Substance Abuse and Mental Health Services Administration, 2014).

Overview of the Study

In Chapter 1 the purpose of the study is reviewed and research questions are presented. Furthermore, Chapter 1 describes the rationale for the study and provides a list of definitions. Chapter 2 contains a review of literature related to substance abuse disorders and their prevalence among women. This includes an overview of transition theories as well as other theories related to individuals in recovery and their transition to higher education. Prior research focusing on recovery capital as it pertains to individuals in recovery is addressed. Chapter 3 contains a description of the ethical protocol, procedures, and methodology used to collect and analyze the data. Chapter 4 presents the findings from data analyses. Chapter 5 includes the summary, conclusions, and recommendations for practice, policy, and future research.

CHAPTER 2

REVIEW OF LITERATURE

Introduction

As of 2013 over 12 million students attended community college in the United States (NCES, 2016). There were 1,123 community colleges in the United States as of 2015 (AACC, 2015). President Obama initiated the 2020 campaign as an effort to increase college graduation rates noting that the United States ranked sixth overall in college attainment (College Board Advocacy and Policy Center, 2011). Perez-Pena (2009) emphasized the importance of community colleges in the college completion agenda and predicted that more jobs would require at least an associate's degree in the future. In addition to federal efforts to address college completion, at the state level, Tennessee Governor Haslam implemented the Tennessee Promise Grant that provides last dollar funding to incentivize community college attendance and completion (Tennessee Higher Education Commission & Student Assistance Corporation, 2016). Further efforts are expected to offer free community college to every adult resident in the near future (Tamburin, 2017. These state-level policy initiatives to provide funding for community college enrollment coupled with the open access mission of community college enrollment offer educational opportunities to a vast number of students with diverse student characteristics (Eren & Keeton, 2015; Goldrick-Rab, 2010).

Community colleges are known for their open access enrollment policies that provide educational opportunities for students who might not attend college otherwise (Fusch, 1996; Rouse, 1995). Students often cite choosing to attend community college instead of a 4-year university because of the open access policies, lower tuition, and flexibility (Bryant, 2001; Calcagno et al., 2008; Eren & Keeton, 2015; Goldrick-Rab, 2010; Wall et al., 2012). Research

indicates that community college students are ethnically, economically, and demographically diversified to a greater degree than 4-year university students (Wall et al., 2012). Women comprised 57% of the population of community college enrollment (Eren & Keeton, 2015). Forty-one percent of community college students enrolled part time and worked full time while 84% worked either full time or part time while attending classes (NCES, 2016). Overall, 58% of community college students enrolled as part-time students (NCES, 2016). Hossler and Vesper (1993) suggested that students enrolling part time face financial challenges because they may not be eligible for financial aid. Additionally, 36% of community college students were first generation and may have less knowledge regarding financial aid resources and procedures (DesJardins, Ahlburg, & McCall, 2006; Goldrick-Rab, 2010; Roderick, Nagaoka, Coca, & Moeller, 2008).

In addition to enrollment status and financial aid resources, the overall level of academic preparation of community college students differs from their 4-year counterparts. Sixty-one percent of community college students took remedial courses upon enrollment (Goldrick-Rab, 2010). Fifty-seven percent of community colleges administrators stated that students who enrolled in their institutions were academically challenged; furthermore, students who take these remedial courses were less likely to graduate (Bailey, Calcagno, Jenkins, Leinbach, & Kienzle, 2005; El-Khawas & Knopp, 1996). Many scholars found that community college students failed to progress successfully (Bailey et al., 2006; Calcagno, et al., 2008). After 9 months of enrollment, one in four community college students dropped out of school and only 16% earned a degree after 3 years (Godrick-Rab, 2010). Scholars concluded that students who enroll immediately after graduating from high school and attended college as full-time students were more likely to graduate (Adelman, 1999, 2005, 2006; Bailey & Alfonso, 2005; Cabrera, Burkum,

& La Nasa, 2005). Titus (2004) concluded that more selective community colleges may have higher persistence rates. However, community colleges are built upon a foundation that relies on their open-door admissions policy and the ability to offer students social and academic support based on their individualized needs (Cohen & Bawer, 1996). Community colleges differed from 4-year universities in many ways such as number of students, enrollment patterns, work status, and housing; therefore, the support strategies implemented varied (Gilley & Hawkes, 1989). Student affairs administrators in collaboration with other institutional departments and community counterparts may be in a position to influence community college student success. Although limited community college research exists related to student services on community college campuses, an analysis of current student affairs research may contribute to the current body of knowledge regarding student success.

Academic and Student Affairs

Although the student affairs movement accelerated in the 1920s, student affairs-type administrators were hired as early as the 1800s (Biddix & Schwartz, 2012; Certis, 2014; Herdlein, 2004, 2005; Sartorius, 2014). Because educational institutions were predominantly segregated between men and women, deans of women and men represented the present day student affairs officers with the main purpose to manage student welfare (Hevel, 2016). Historically, student affairs administrators handled two main divisions: discipline and housing (Caple, 1998; Schwartz, 1997) although many administrators desired to focus predominantly on advising and mentoring (Bashaw, 1999; Schwartz, 2010). Schwartz (2010) noted that student affairs administrative roles changed to include an array of increased responsibilities including sports, financial aid, student employment, orientation, and academic progress. With an emphasis on career planning, administrators further personalized their roles to

best meet the needs of students and investigated lack of student retention to determine strategies for future student success (Certis, 2014; Schwartz, 2010). An area of debate between student affairs personnel concerned the amount of personal attention that should be given to students. Some administrators, especially deans of men, believed that forming relationships with students may limit the effectiveness of student affairs as a science, while advocates of personal attention argued that building meaningful relationship with students would best support their individual needs (Chickering & Gamson, 1987; Schwartz, 2010). However, recent studies emphasized the role of social supports and personalized student affairs support in meeting the needs of marginalized individuals. A holistic approach to student support services may benefit marginalized students who are trying to navigate multiple aspects of community college campuses (Tinto, 1998).

Although prior research noted that academic affairs was typically managed by centralized student affairs personnel, there is a gap in the collaboration efforts of student affairs and academic affairs administrators presently that may be considered a barrier to student success (Jackson & Ebbers, 1999). Scholars agreed that this lack of collaboration between student services and academic services inhibited the quality of services students received (Chickering & Gamson, 1987; Tinto, 1998). Consequently institutions began to adopt a more holistic approach to student services by addressing the issues (Altizer, Glover, Seehafer, & Walch, 1996; Astin, 1996; Streit, 1993). Jackson and Ebbers (1999) studied the divide between academic and student affairs and found a lack of collaborative opportunities, limited time constraints, and low student involvement on community college campuses contributed to this divide. Findings from these studies of student services can be considered when discussing the student body of community colleges and resulting needs for student support services.

Community colleges are known for their large population of commuter students. With external family and work commitments, community college students have limited campus involvement that has been proven to affect retention (Astin & Scherrel, 1980; Bean, 1983; Tinto, 1998). Institutional organizational structure also created a divide between the academic and student supports necessary to enable students to meet their goals (Ender, Chand, & Thornton, 1996; Jackson & Ebbers, 1999); however, collaboration between support services has been found to effectively and efficiently promote student engagement and success (Carr & Johansson, 1995). With the focus on student support and policy efforts toward student success, scholars agreed that the definition of community college student success could not be based on traditional measures but rather on the individual goals of each student's educational agenda (Astin, 1982; Ender, Chand, & Thornton, 1996).

Student success should be a top priority and community colleges should focus on academic and student affairs issues that impact student success (Ender et al., 1996). Community college students were considered at-risk due to limited support, first generation status, and often low self-efficacy coupled with academic barriers (Ender et al., 1996; Roueche & Roueche, 1993). Ratcliff and Associates (1995) noted that academic deficiencies impacted subsequent validation essential for successful integration. Students needed help with locating academic resources before they were able to succeed. When student affairs administrators created environments where students became involved collaboratively within the campus persistence increased (Ender et al., 1996; Tinto & Kadel, 1994). Student affairs programs maximized student success when programs addressed multiple aspects of student college transition ranging from course placement, technology usage, and student socialization (Ender et al., 1996). Student affairs administrators advocate for students by providing comprehensive services tailored to

eliminate barriers to success and promote goal achievement (Helfgot & Culp, 1995; Kuh, Lyons, Miller, & Trow, 1994; O'Banion, 1987). Ender et al. (1996) concluded that students need to know that they matter to the institution and a holistic approach will be taken in every aspect of their educational experience. Faculty, administration, and student affairs staff can collaborate to ensure student success programs are put into place that created a holistic experience. In sum, the literature related to student services on community college campuses is scant; however, an exhaustive cannon of scholarship exists in the student affairs field. In general, these research findings can greatly inform the work of those community college administrators in units that work with and support recovery efforts within the community college environment.

Nontraditional Students

Individuals in recovery transitioning to community college may share multiple characteristics with students classified as nontraditional. As students in recovery return to college, they transition into roles experienced by other nontraditional students. Although there is limited research on individuals in recovery and their transition to higher education, researchers have focused on nontraditional students in the past (Terrion, 2012). Consequently, this research may aid community organizations, treatment centers, higher education institutions as well as policymakers as they determine how to meet the needs of all students on campus.

Although nontraditional students once represented a minority population in higher education, the prevalence of nontraditional students enrolled in higher education suggests they represent a majority (Pellietier, 2010). Nontraditional students represent a large percentage of the total undergraduate population (Philibert, Allen, & Elleven, 2008): therefore, a review of literature discussing nontraditional students begins with an analysis of popular definitions. Ross-Gordon (2011) and Pelletier (2010) referred to adult students as those 25 years and over. The

National Center for Education Statistics (NCES) (2009) found that 38% of over 18 million college students met this age requirement. The National Center for Education Statistics (2009) predicted the number of students in this age range to increase by 23% by 2019. Bell (2012) refers to nontraditional students as the "new majority" (p.1). Hurley (2010), American Association of State College and University's director of state relations and policy analysis concurred with Bell renaming nontraditional students as the "new traditional" (p.1). Because this population's presence in higher education continues to increase and their characteristics differ from traditional students, it is necessary to gain a better understanding of nontraditional student characteristics.

Defining Nontraditional Students

Traditionally, nontraditional students have been classified based on age; however, research has suggested that other factors define this population as well. When discussing nontraditional students and their transition to higher education, scholars often focus on an array of concerns that have little to do with age. The National Center for Education Statistics (2015) identified nontraditional students as those for whom one of the following seven criteria match their status:

- 1. Delayed enrollment
- 2. Part-time student
- 3. Full-time employment
- 4. Financially independent
- 5. Claim dependents other than their spouse
- 6. Single parent status
- 7. Did not obtain a traditional high school diploma.

Pathways to Success (2012) aligned its definition with the NCES by noting that nontraditional students have risk factors that include working full time, raising children as a

single parent, and having not earned a regular high school diploma. Taking into account this broader set of characteristics, 73% may be classified as nontraditional students (Choy, 2002). Students in recovery from Substance Abuse Disorders (SUD's) often exhibited multiple characteristics of those defined as nontraditional (Choy, 2002; Laudet et al., 2015; Perron et al., 2011). Treatment prevented individuals from initially enrolling or continuing their education. Some balanced their transition to higher education with full time employment. As a result, individuals in recovery may not be able to attend college full time (Perron et al., 2011). Although scholars disagreed concerning the impact that student status has on stress, Dill and Henley (1998) concluded that there was a significant difference between traditional and nontraditional student views related to stress with nontraditional students reporting higher levels of stress (Pierceall & Keim, 2007). Philibert et al., (2008) reported that nontraditional students more often chose to attend community college and that the number of nontraditional characteristics a student possessed increased the likelihood of choosing a community college over a 4-year institution. Research addressing the needs of nontraditional students may enlighten community colleges as to the specific needs of individuals in recovery as well.

Key Barriers to Success in College

Pathways to Success (2012) referenced three key barriers that include many central problems nontraditional students encounter while in college: situational, institutional, and dispositional. Situational barriers refer to cost and time constraints, whereas institutional barriers are the practices and procedures colleges and universities use in daily activities. Scholars noted that higher education institutions may want to analyze their current procedures to reflect nontraditional student needs (Bell, 2012; Pelletier, 2010; Ross-Gordon, 2011). Nontraditional students often benefit from accelerated courses, hybrid formats consisting of online and

traditional presentations, and support systems readily in place to address barriers to success (Bell, 2012; Pelletier, 2010; Ross-Gordon, 2001).

Fear, anxiety, and self-efficacy issues embody the realm of dispositional barriers.

Nontraditional students experienced anxiety when transitioning to higher education because they had not attended school in many years. Additionally, limited academic preparedness impacted self-esteem and overall attitudes regarding education and suitability for transition (Hyland-Russell & Groen, 2011). This insecurity about returning to college reflects a lack of self-efficacy often producing a fear of failure (Pelletier, 2010). Cross (1981) suggested that multiple barriers impacted students cumulatively. Cross (1981) and Bowl (2001) found that the numbers of barriers that students experienced affected their ability to begin and complete educational endeavors. Multiple scholars emphasized the negative impact that working full time, delayed enrollment, and academic deficits have on nontraditional student attitudes toward education (Margo, 2006-2007; Willans & Seary, 2011). As a result, nontraditional students may not perceive their transition to higher education in the same way traditional students do. Their success depends on support they receive that enables them to transition successfully despite barriers (Chao & Good, 2004).

Nontraditional students balance multiple roles as they transition to educational pursuits which include employee, student, and parent. Mohney and Anderson (1988) determined that these roles produced obstacles particularly for nontraditional women. According to Dill and Henley (1998) nontraditional students encountered more responsibilities at home than their counterparts. Balancing differing life responsibilities with academic pursuits impacted student enrollment, retention, and overall success. Horn (1996) divided the definition of nontraditional students into subgroups to take into account the number of criteria identifying them as such.

Students enrolling in higher education with two or three characteristics were considered moderate nontraditional students while those meeting four or more were labeled as highly nontraditional. Using Horn's labels, the U.S. Department of Education's National Postsecondary Student Aid Study (2000) determined that the number of highly nontraditional students almost parallels that of traditional students. Community colleges enrolled 64% of students considered moderately and highly nontraditional. Based on these data, tw2-year community colleges may want to consider the ways nontraditional students perceive their educational experiences.

Retention as a Challenge

Pathways to Success (2012) and Pelletier (2010) both identified retention as a challenge for nontraditional students in higher education. Retention numbers affect higher education institutional budgets due to recent legislative measures in some states regarding performance based funding (Fike & Fike., 2008). Scholars called the seven characteristics identifying nontraditional students as risk factors due to the negative correlation to persistence (Horn 1996; Horn & Premo, 1995). Because nontraditional students often work full time, their attention is divided between their studies and their roles as employees. According to a NCES report entitled *Adult Work First, Study Second* (2003), 56% of students represented in a 1999-2000 study identified as employees first and students second. Working full time while taking classes and not being able to attend full time affected student success (Choy, 2002). Working while attending college limited the number of class choices and courses students took as well as negatively impacted grades for 47% of those students (Choy, 2002).

The U.S. Department of Education conducted a study titled *National Educational*Longitudinal Study of 1988 (1998) to gather statistics on nontraditional students and their retention success. Nontraditional students can be classified as either minimally, moderately, or

highly nontraditional based on their characteristics. Minimally nontraditional students have only one characteristic while moderately classified have two or three and highly nontraditional students possessed four or more characteristics (Horn, 1996). After 3 years, 50% of highly nontraditional students abandoned their pursuit of higher education. A continuation of the study determined that after 5 years, nontraditional students seeking a bachelor's degree were less likely than their traditional peers to earn a degree. The percentage of nontraditional students originally working toward an associate's degree who persisted after 5 years was even less. In a time when higher education institutions are placing time, energy, and funds on retention efforts, they may want to consider better ways to target nontraditional students and determine what they need in order to balance outside expectations with academic responsibilities (Coley, Coley, & Lynch-Holmes, 2016).

Choy (2002) and Ross-Gordon (2011) discussed the complex roles that work, school, and family have on nontraditional student needs. Merisotis (2016), president of the Lumina Foundation, suggested enlisting academic, social, and financial strategies in order to support nontraditional students. The Lumina Foundation's goal of increasing the numbers of adults with academic degrees to 60% by 2025 paralleled President Obama's 2020 goal of increasing the number of Americans identified as college graduates.

<u>Individuals in Recovery</u>

Literature related to the topic of individuals in recovery and their transition to higher education is limited. A review of the literature reveals statistics regarding the prevalence of substance abuse in the United States and those individuals seeking treatment as well as a conceptualization of the recovery construct. Additionally, relevant theories relating to transition experiences is included. Although limited studies have been conducted with community colleges

students in recovery, and their transition to higher education specifically, studies related to college students in recovery, women in recovery, and the needs of nontraditional students were reviewed. Finally, a review of the concept of recovery capital and its implications for higher education institutions as well as community service providers conclude the literature review.

A review of substance abuse statistics highlighted the prevalence of abuse in the United States. "An estimated 2.6 million people aged 12 or older had both an alcohol use disorder and an illicit drug use disorder in the past year" (Center for Behavioral Health Statistics and Quality, 2015, p. 22). While these numbers are alarming, a 2013 National Survey on Drug Use and Health found that 2.5 million addicts underwent treatment at a facility specifically organized to treat drug and alcohol problems (Substance Abuse and Mental Health Services Administration, 2014). However, once in recovery individuals struggled to find employment in order to earn a living that causes undue stress (Terrion, 2012).

As a result, the cycle of addiction many times repeats itself. The 2013 National Survey on Drug Use reported that the rate of drug use for adults 18 or older who are unemployed was 18.2%. Notably, the rate of drug use by college graduates is much lower at 6.7%, demonstrating that those who did not attend an educational institution after graduating from high school are more likely to use drugs (Substance Abuse and Mental Health Services Administration, 2014). A college degree may provide individuals with additional tools fostering recovery success.

However, some college campuses may discourage the recovery process due to their alcohol and substance abuse culture (Bell et al., 2009; Laudet, 2008; Moberg & Finch, 2008). Most recovery research focused on 4-year institutions where environmental risk factors such as on-campus housing, fraternities and sororities, and athletics may have contributed to alcohol and substance abuse (Chiauzzi et al., 2011; Cleveland, Harris, & Wiebe, 2010; Laudet, et al., 2015).

Compared to 4-year institutions where 40% of students binge drank, 25% of community college students engaged in this type of drinking (Shefield, Darkes, Del Boca, & Goodman, 2005). Thirty-nine percent of 4-year university students and 15% of students enrolled at community college either drank or used illegal substances to reduce stress (Eren & Keeton, 2015). In one comparative study Ryan (1998) concluded that there were higher levels of marijuana and cocaine users in community colleges than 4-year universities. Alcohol and substance abuse continue to be areas of concern in higher education as evidenced by recent federal efforts that initiated the expansion of recovery support services over multiple community-based environments resulting in an organized system of services based on recovery as a process rather than an instantaneous event (Clark, 2008; Laudet et al., 2015; Office of National Drug Control Policy, 2011. The definition of recovery has emerged to include recovery as a process that may contribute to a better understanding of students in recovery.

Recovery Defined

Historically the definition of recovery narrowly focused on abstinence from drugs and alcohol; however, a broader view of recovery has emerged adding to the understanding of the recovery construct. Recovery, defined by multiple organizations, now encompasses more than nonuse (Kelly & Hoeppner, 2015). The Center for Substance Abuse Treatment and U.S. Substance Abuse and Mental Health Services Administration (SAMHSA) describe recovery as a process rather than instantaneous. In addition, recovery scholars described the process as an ongoing journey (Best et al., 2012; Laudet & White, 2008). Addicts may not reach a distinct moment of absolute recovery, but these individuals engage in a process of recovery that never fully ends. Unlike the Center for Substance Abuse Treatment or SAMHSA, the Betty Ford Institute Consensus Panel provided a definition of recovery that includes community and social

participation (Kelly & Hoeppner, 2015). Recovery occurs over time and develops as individuals interact with others in their community. White (2001) and Best et al. (2012) stress recovery as a personal experience. Additionally, scholars agreed that recovery is experienced as individual's transition through their lived circumstances day by day (Best & Laudet, 2010; White & Cloud, 2008). Therefore, recovery is multifaceted and reflects shared experiences still embedded differently according to individual perspectives. A tailored package of services reflect the diversity of individualized experiences with recovery (Kelly & Hoeppner, 2015; White & Cloud, 2008). As a result, recovery may include a multiple array of choices recovering addicts face during this process. Education is only one component in the recovery process, and it is important to focus on its successful implementation as individuals continue their recovery. Furthermore, White and Cloud (2008) suggested linking "clients and families to other individuals, families, and community institutions rich in recovery capital" (p. 7). Institutions of higher education can become a part of the link that contributes to success in recovery through the recovery capital gained. Granfield and Cloud (1999) defined recovery capital as "...internal and external resources that can be drawn uptown to initiate and sustain recovery" (p.1). Individuals in recovery, like all college students, go through a process of access and transition to higher education. As such, it is important to understand transition theory and the college student experience. Furthermore, additional theories relevant to community college students in recovery may shed light on the student experience.

Transition Theories

Schlossberg, Waters, and Goodman (1995) defined transition as "any event or non-event that results in changed relationships, routines, assumptions, and roles" (p. 27-28). Parkes (1971) identified psychosocial transitions as those that require the individual to abandon current

assumptions and to develop a new set that assist in coping with the current situation experienced by the individual. The implication is that individuals in recovery choose to flee from one environment with its own set of assumptions and expectations to another environment that may have conflicting values. Both Schlossberg et al. (1995) and Parkes (1971) focused on a central theme: transition includes changes that require complex coping skills. Therefore, exploring the various transition experiences of individuals in recovery provides a better understanding of the recovery support structures that may lead to success while in college. Individuals in recovery experience multiple transitions after graduating from treatment such as finding employment, pursuing a purpose, and balancing family responsibilities. Coupled with these transitions, pursuing a degree may result in unexpected challenges for these students (Sober College, Rehab Defined, 2015). Academic expectations as well as drug and alcohol temptation may cause unexpected stress during this transition (Sober College, Rehab Defined, 2015). Balancing multiple educational, family, and work roles, students in recovery encountered stress and often experienced increased anxiety which impacted this transition (Skowron, Wester, & Azen, 2004). It is essential that these students develop coping strategies to successfully transition in a supportive environment to prevent relapse (Pierceall & Keim, 2007). Schlossberg et al. (1995) emphasized the role of understanding individual perceptions as key to successfully transitioning. Individuals must decide which events constitute a transition (Schlossberg et al., 1995). Once a transition is identified, sharing personal experiences about the transition offered insight into the supply of transition resources. Without these resources, individuals in recovery may begin reusing drugs and alcohol to handle the stress experienced while in college (Pierceall & Keim, 2007).

Schlossberg et al. (1995) emphasized that coping with transitions correlates with an individual's transition capital in four areas. Someone who successfully assesses his or her current transitional situation, self supports, such as personal and psychological factors and strategies, increased the ability to cope increased. Student academic efficacy, the belief that one has the ability to contribute to their own success, positively correlates to college success (Zajacova, Lynch, & Espenshade, 2005). According to Zajacova et al. (2005) self-efficacy affected how one approached perceived stressors. Students in recovery may need assistance as they take inventory of their current resources and attempt to acquire more supports (Laudet et al. 2013).

Both Schlossberg's transition theory as well as Lazarus's stress theory, referenced in the next section, highlighted the use of analysis and coping strategies as integral to navigating change (Folkman, 1984). Therefore, higher education administrators in collaboration with therapeutic communities have the opportunity to support students through these transitions (Bell et al. 2009).

Based on Schlossberg's (1989) marginality and mattering theory and Tinto's (1987, 1993) interactionist theory, students coped with expectations more successfully when they felt their involvement served a purpose. Additionally, both classroom and campus wide interaction impacted successful integration (Astin, 1984; Tinto, 1993). When students merged their academic and social interactions within the campus, commitment levels increased (Tinto, 1987). Additionally, Rendon, Jalomo, and Nora (2000) found that continued persistence was contingent upon social interaction. Female students in particular tended to be more relational and interdependent, which contributed to college integration differently from men (Belenky, Clinchy, Goldberger, & Tarule, 1997). Based on these relevant theories, institutional supports warranted consideration so that marginalized students persist in both recovery and academic endeavors (Schlossberg, 1989). Consequently, effective institutional programming in 4-year universities

correlated to increased student involvement (Astin, 1984). Furthermore, environmental supports such as collegiate recovery programs aided student learning and validated student purpose (Astin, 1984; Rendon, 1994; Sanford, 1966; Schlossberg, 1989). Additionally, these supports may benefit students in recovery in their transitions by reduced stress levels and increased coping skills (Lazarus & Folkman, 1986). College transition experiences for students in recovery can be informed by theories related to stress and coping theories.

Stress and Coping Theories

Lazarus's Stress Theory explains how stress affects individuals and how individuals cope with perceived stress. Lazarus (1993) discussed psychological stress theory as the role that stress can have on an individual. Stress was defined as a relationship between an individual and his or her environment. Within this transaction, the amount of stress is determined by how an individual appraises the situation with the amount of available coping resources to handle the demands (Lazarus & Folkman, 1986). When an individual encounters a potentially stressful situation, he or she needs to determine what if any resources are available to combat the stress (Schlossberg et al., 1995). Depending on the self-appraisal, an individual determines how stressful a situation is. Lazarus (1993) suggested appraising situations according to the number of personal and situational factors involved. Students in recovery will inevitably experience times of stress although the degree may vary according the number of resources they possessed (Terrion, 2012). As individuals in recovery transition to higher education, they may struggle to process the stressors that result (Terrion, 2012).

Individuals in recovery may experience stressors that negatively impact their recovery success (Laudet & White, 2008). These stressors may be buffered by the accumulation of recovery capital (Laudet, Morgan, & White 2006). The multiplicity of transitions infused in the

recovery process present challenges that recovering addicts face. Education may be one of many of these transitions. Students in general encountered academic, financial, and social stress (Pierceall & Keim, 2007; Skowron et al., 2004). Stress may significantly impact student ability to successfully complete academic tasks when they lack strategies and supports necessary to negate stressful situations. This, in turn, contributed to less confidence in educational goals and increased stress levels again (Pierceall & Kelm, 2007). However, when student self-efficacy increased, transitions went more smoothly from one setting to another. Additionally, locus of control impacted stress levels. When students acted upon an external locus of control, believing that outside forces caused their struggles, their stress increased (Pierceall & Keim, 2007). Laudet et al., (2006) agreed with Cloud and Granfield (2008) that one of the goals of recovery is for students to be able to take responsibility for their actions and learn to confront their stress in positive ways.

As a result, students may use coping mechanisms to decrease the amount of stress they face while enrolled in higher education. Pierceall and Keim (2007) determined that students talked with family and friends and participated in purposeful activities to alleviate stress. Another study confirmed the importance of participating in enriching activities when facing stressful situations (Misra, McKean, West, & Russo, 2000). These enriching activities are important because 39% of students consumed alcohol and 15% consumed drugs as stress reducing strategies (Pierceall & Keim 2007) and less social support increased alcohol abuse on campus (Zaleski, Levey-Thors, & Schianffino, 1998). Students in general and specifically those recovering from substance abuse will inevitably experience stress during their college years (Willans & Seary, 2011). Higher education institutions have an opportunity to affect student success by implementing policy and programming to address student stress (Terrion, 2012).

Individuals in recovery may experience stressors that negatively impact their recovery success (Laudet & White, 2008). Laudet et al., (2006) argued that these stressors may be buffered by the accumulation of recovery capital that is defined as "the breadth and depth of internal and external resources that can be drawn upon to initiate and sustain recovery from alcohol and other drug problems" (White & Cloud, 2008, p. 22). Best and Laudet (2010) emphasized the role of recovery as providing empowerment for these individuals. Best et al. (2012) reported that acquiring recovery capital in the form of socially meaningful activities decreased anxiety. Individuals in recovery gained necessary support as they accumulated additional recovery capital within their transitions (Terrion, 2012). As they experience successful, comprehensive recovery, student perceptions regarding their quality of life may reflect success (Laudet & White, 2008).

Recovery Capital

White and Cloud (2008) and Cloud and Granfield (2008) conceptualized recovery capital as threads of essential resources necessary for recovery. Cloud and Granfield (2008) labeled recovery capital as either social, physical, human, or cultural. They defined physical capital in terms of how readily tangible it is. White and Cloud (2008) labeled cultural capital as a subunit of community capital and divided personal capital into two groups: human and physical. Physical capital refers to monetary assets as well as physical health and shelter that supports positive recovery while human capital includes educational status and other values such as self-esteem and self-efficacy (White & Cloud, 2008). In contrast, Keene (2011) referred to physical capital as any source of revenue that contributes to a better standard of living. According to Best and Laudet (2010) education may be viewed as both human and physical capital because educational attainment may lead to an increase in financial assets.

Cloud and Granfield (2008) introduced social capital as an accumulation of relationships with an emphasis on the responsibilities and supports that these relationships entail. In a study conducted by Best et al. (2012), a positive correlation was identified between self-esteem, classified as human capital, and social capital. Furthermore, engagement in meaningful activities with nonusers as well as others in recovery led to increased self-esteem as well as self-efficacy (Best et al., 2012). Sober outlets provide individuals in recovery with the means to participate in social activities and develop positive human capital (Kelly & Hoeppner, 2015). Meaningful activities provide purpose that Kelly and Hoeppner (2015) assert as a necessary factor in recovery. These types of activities may be found in employment and higher education involvement where individuals in recovery can engage in community activities. White and Cloud (2008) posited community capital as resources that contribute to the decline of substance abuse disorders. Higher education institutions may be considered recovery capital when they increase their attention to the needs of students in recovery who choose to transition to college. According to Keene (2011) higher education represents a place where these students gain physical capital in the form of increased education and a degree. Students in recovery have opportunities to improve their socialization capital as they interact with other students who do not abuse drugs and alcohol. Based on the consensus of multiple scholars (Best & Laudet, 2010; Granfield & Cloud, 1999; Kelley & Hoeppner, 2015; & Laudet & White, 2008), recovery capital conceptualizes a mixture of facets that flow in multiple directions simultaneously to enrich the overall quality of life for individuals. Notably, women may experience recovery differently than men and benefit from individualized recovery based on different recovery capital needs (Marsh, Cao, & Shin, 2009; Nelson-Zlupko, Kauffman, & Dore, 1995).

Women in Recovery

Women in recovery transitioning to higher education share characteristics with women who are not in recovery; however, they enroll in colleges and universities with unique situations that contribute to their experiences. Females in recovery differed from males in one way that warrants consideration. Sutker (1981) found that women chose drugs such as prescription medications more than men no matter the age, socioeconomic status, or geographical location. Stress and resulting anxiety may have contributed to female drug of choice. Drug use may produce undesired stress; however, the pattern is circular in that unwarranted stress may also increase the likelihood that women will continue using these substances. While attending college, women experienced more stress than men in multiple studies conducted (Abouserie, 1994; Pierceall & Keim, 2007). No matter if substance abuse preceded accumulated stress or stressful situations resulted from the abuse, women in recovery experienced stress that may impact their success in higher education.

Unfortunately, women faced stressors due to the lack of resources necessary for recovery and used drugs as a coping mechanism (Nelson-Zlupko et al., 1995). Consequently, substance abuse is only one source of stress women in recovery attempted to reconcile. Women entered recovery with less educational resources and work experience that may contribute to additional stress as they transition out of residential treatment (Marsh & Miller, 1985; Marsh & Simpson, 1986; Reed, 1985; Sutker, 1981). Root (1989) described women in recovery as having lower expectations for themselves. They experienced higher levels of shame, guilt, depression, and anxiety (Nelson-Zlupko et al., 1995). Williams (1987) concluded as did Nelson-Zlupko et al. (1995) that women in recovery encountered high anxiety and low self-esteem. Balancing multiple roles, female students experienced strain and perceived lack of supports (Home, 1997).

Marlow (1993) and Patchner (1982) agreed that female students feel constrained by their roles and are vulnerable to role strain. Being involved in relationships with other substance abusers, women are less likely to have supports while in recovery (Nelson-Zlupko et al., 1995). Hagen, Finnegan, and Nelson-Zlupko (1992) and Rhoads (1983) noted that women in recovery exhibited problems with interpersonal relationships resulting in weak social networks. This research suggested that women in recovery lacked social supports that other women may have in college. However, Home (1997) found that 57% of women reported having high amounts of support. Adult women left college more frequently than men when faced with nonacademic issues (Merdinger, 1991). Keene (2011) suggested that recovery capital may support this population when accessible. While enrolled in higher education, these women may increase interpersonal relationship with other students who can model positive self-efficacy (Keene, 2011). Women in recovery may experience increased success when receiving strengths-based treatment where they acknowledge their struggles, develop alternative coping strategies, and increase their support networks (Nelson-Zlupko et al., 1995). Higher education institutions have the opportunity to support women in recovery as they transition to college.

Comorbidity and Mental Illness

Comorbidity is defined in terms of the co-existence of more than one illness occurring at the same time for an individual (Valderas, Starfield, Sibbald, Salisbury, & Roland, 2009). Multiple researchers have studied the comorbidity of mental disorders with addictive disorders and have established the need to better understand this relationship. Thirty seven percent of individuals with an alcohol disorder faced the comorbidity of a mental disorder (Regier et al., 1990). Regier et al. (1990) found the highest comorbidity rate, 53%, for those individuals who experienced both substance abuse and mental disorders. In an earlier study Weissman, Myers,

and Harding (1980) found that the lifetime prevalence of alcohol disorders comorbid with mental disorders such as depression and anxiety to be 70%. Additionally, young adults experienced the highest comorbidity rates of any age group experiencing symptomatic anxiety, depression, and substance abuse (Substance Abuse and Mental Health Services Administration, 2011).

Community college students may have encountered potentially traumatic events that impact mental health and consequently college success. Additionally, scholars agreed that a large percentage of community college students identified as nontraditional. As a result, they may experience life events that impacted mental health (Anders, Frazier, & Shallcross, 2012).

Anders et al (2012) concluded that substance abuse, considered a mental health event, impacted 23% of students. Overall, community college students reported higher incidences of traumatic events than did 4-year university students (Anders et al., 2012). As student diversity increased, higher education institutional support evolved to meet the needs of all students (Choy, 2002; Levine & Cureton, 1998). College supports are intended to help students transition through academic as well as social and personal events including substance abuse and mental disorders (Council for the Advancement of Standards in Higher Education, 1999). Transitioning to college while experiencing comorbidity of psychological issues was the most challenging issue institutions encountered because the number of students with these barriers increased (Archer & Cooper, 1998; Kitzrow, 2003). Historically, scholars agreed that student psychological needs have changed from mere informational issues to more severe adjustment barriers such as substance abuse and mental disorders (Gallagher, Gill, & Sysko, 2000; Gallagher, Sysko, & Zhang, 2001; Pledge, Lapan, Heppner, & Roehlke, 1998). However, Sharkin (1997) cautioned against accepting these perceptions without the use of standardized instruments over time. A comorbidity of substance abuse and mental disorders affected students academically (Brackney

& Karabenick, 1995; Kitzrow, 2003). As a result, student persistence declined (Kessler, Foster, Saunders, & Stang, 1995; Kitzrow, 2003). Kessler et al. (1995) determined that anxiety, mood disorders, substance abuse, and conduct disorders positively predicted academic failure.

Emotional adjustment correlated with retention and academic adjustment (Gerdes & Mallinckrodt, 1994; Tinto, 1985). The comorbidity of multiple disorders directly impacted student affairs personnel as they implemented effective supports to address the diverse needs of these students (Stanley & Manthorpe, 2002; Stone & Archer, 1990; Wilson, Mason, & Ewing, 1997). Although research focusing on students in recovery is not included as part of studies targeting nontraditional students, information regarding collegiate recovery programs (CRPs) suggested that this population has not been forgotten.

Collegiate Recovery Programs (CRPs)

Woodford (2001), one of the first scholars to study the specific needs of college students in recovery, identified students in recovery as a hidden population. Although multiple scholars realized that research on this population was lacking, research excluded students in recovery as a sample (Bell et al., 2009; Botzet, Winters, & Fahnhorst, 2008; Cleveland, Harris, Baker, Herbert, & Dean, 2007; Dickard, Downs, & Cavanaugh, 2011; Doyle, 1999). As such, there is a lack of pertinent research regarding students in recovery and their transition to higher education. However, qualitative studies have focused on students in recovery, barriers to success, and campus initiatives targeted at supporting both their recovery and college achievements (Bell et al., 2009; Terrion, 2012).

Due to the growing number of students in substance abuse recovery as well as the National Drug Strategy and the U.S. Department of Education (Dickard et al., 2011) supporting the inclusion of recovery supports in higher education, 161 higher education institutions operated or

recently launched collegiate recovery programs (CRPs) in the United States (Transforming Youth Recovery, 2016). Out of over 1,200 community colleges in the U.S., only 15 offered or considered offering CRPs, and of those only six institutions developed verified collegiate programs. Historically, Rutgers University started the first collegiate recovery program, Alcohol and Other Drug Assistance Program (ADAPS), in 1983, and Texas Tech University's (TTU's) Center for the Study of Addiction and Recovery (CSAR), created a program delivery model in 1986 (Botzet et al., 2008; Finch, 2004; Harris, Kimball, Casiraghi, & Maison, 2014). Consequently, the U.S. Department of Education along with SAMHSA funded TTU's program in 2005. This funding allowed TTU to support other universities implementing CRPs (Bell et al., 2009). CRPs aimed to create a campus-based recovery space and supportive social communities to enhance educational opportunities while supporting student recovery and emotional growth (Harris, Bakers, Kimball, & Sumway, 2008; White, 2001). Both Rutgers University and Texas Tech University's recovery programs offered support groups; however, Texas Tech differed from Rutgers in two distinct ways. The Texas Tech program did not offer on-campus recovery housing; however, the program was part of the academic college instead of a health services unit like Rutgers. As a result, Texas Tech University offered academic incentives such as a substance abuse minor, scholarship programs to support students interested in chemical dependency counseling, tutoring, mentoring, and economic assistance for students in recovery (Finch, 2004).

Augsburg College's Step UP Program paralleled Texas Tech University in its academic support as well as mentoring development (Finch, 2004). While all of these programs differed somewhat, they all have a common theme of supporting students in recovery as necessary if these students were to see success. Bell et al. (2009) concluded that students in recovery need infrastructure in place to support their recovery success. Scholars emphasized the role that

campus support played in the recovery process (Harris, Baker, & Cleveland, 2010; Harris et al., 2014; Laudet, Harris, Kimball, Winters, & Moberg, 2015. Misch (2009) concurred with this research, emphasizing the priority conflicts that students in recovery face as they begin their academic pathway. Without appropriate supports in place, Bell et al. (2009) concluded that individuals in recovery may have to choose between academics and the recovery process if they are not provided with appropriate supports. While most students would enroll in higher education if programs were available, there are not many available even though institutions reported that retention and substance abuse were two of their main concerns (Finch, 2004). Additionally, Finch (2004) concluded that institutions lacked recovery programming due to limited funding, campus stigma risks, limited research, and campus awareness even though experts agreed that CRPs were needed but often institutions unheeded the importance (Botzet et al., 2008; Cleveland et al., 2007; Dickard et al., 2011; Doyle, 1999).

CRPs increased the recovery capital for students while attending college. Bell et al. (2009) found that students enrolled in higher education balanced academic priorities while maintaining recovery work. This supported prior research indicating that these students balanced multiple roles as they transitioned to higher education. Recovery work is essential if students are to sustain successful recovery. In this process, students benefitted from additional support that CRPs provided. CRPs included components that fostered both academic success and recovery support simultaneously (Transforming Youth Recovery, 2016). Institutions provided students in recovery with an array of supports that increased their recovery capital (Dennis & Scott, 2007; Godley et al., 2010; McKay et al., 2009). A combination of multiple supports included some of the following: 12 step groups, sober events and housing, counseling, and campus awareness (DePue & Hagedorn, 2015; Harris et al., 2010; Laudet et al., 2014; Perron et al., 2011). Sober

housing as well as access to on-campus meetings and purposeful activities that enabled students to socialize without easily accessible temptations focused on the main aspect of CPRs peer driven initiatives (Perron et al., 2011).

Peer support as well as counseling support focusing on academic and life skills was provided as part of the continuum of care. Students in recovery may have limited social recovery due to the changes they have chosen to make. Consequently, other classmates may not understand the specific situations that individuals in recovery must navigate (Misch, 2009). While social supports are important in the recovery process, these students may feel alienated because they cannot participate in activities other college students attend, particularly activities involving alcohol (Bell et al., 2009). CPRs promoted social capital which was essential to students in recovery successfully navigating the community college environment (Cleveland et al., 2010; Cimini et al., 2009; White, 2008). Mc Kay et al. (2009) found a growing body of evidence suggesting that students were engaged and invested in the recovery process. The greater the opportunity to socialize with abstinent peers resulted in less chance of relapse (Cleveland et al., 2010). CRPs contributed to less stigma when administrators supported the programs using a top-down approach and the campus community shared ownership of the problem (Middlebrooks, 2009; Perron et al., 2010). Students in recovery may seek help when they are provided with mechanisms in place where a supportive culture exists (Harris et al., 2014). The stigma attached to alcohol and substance abuse contributed to individuals' decision to self-disclose, and selfdisclosure is key to success (Laudet, Magura, Vogel, & Knight, 2000). However, Laudet et al.,(2013) found that stigma reduction occurred as individuals in recovery experienced peer support and normalization of substance abuse within the campus culture. CRPs focused on the

three main levels of student recovery and advocacy: (1) community (2) college and (3) student initiatives in an effort to facilitate student recovery (DePue & Hagedorn, 2015).

Laudet et al. (2016) researched the effectiveness of collegiate recovery programs to add to the limited body of knowledge. Thirty-six percent of students returned to college after dropping out previously. Without CRPs, one third of students indicated that they would not have attended the institution (Laudet et al., 2016). Interestingly, Laudet and White (2010) found that individuals considered pursuing an education as a priority in recovery process. However, 30% of respondents said that CRPs were not an important factor in their decision to attend college because they were determined to attend either way (Laudet et al., 2016). Laudet and White (2010) and Laudet et al. (2016) stressed that obtaining an education impacted successful recovery. Twenty-nine percent of participants inquired about CRPs before applying and 28% stated that Collegiate Recovery Programs were "extra helpful" for their success in college (Laudet et al., 2016, p. 246). Students who enrolled in collegiate recovery programs varied in level of substance abuse resulting in differentiated recovery support needs (Harris et al. 2014). Although community college CRP research is limited, Transforming Youth Recovery, a nonprofit charity created in 2013 to support students, institutions, and community members as they support individuals in recovery, conducted two studies that described CRPs found in both 4year universities and community college programs mentioned earlier and discussed assets vital for collegiate recovery program success (Transforming Youth Recovery, 2016). Four-year universities and community colleges shared common assets; however, the priorities placed on those assets differed and community based assets were stressed based on the infrastructure in place. The 2015 Collegiate Recovery Asset Survey identified 38 assets, nine of which were critical to starting any collegiate recovery effort. Ninety-seven percent of respondents ranked

student interest as critical while dedicated staff, support groups, and physical space were ranked next highest as critical. Two assets found on the 2014 list as vital to serve and support students moved to the critical list this year: organizations that can refer students and individuals available for mentoring support. Twenty additional assets recognized as essential to serve and support students included supportive housing options, counseling to support both mental and substance abuse disorders, academic guidance, and campus awareness. Sixteen percent of respondents mentioned a social emphasis as a major purpose for their collegiate recovery program, while 76% stated that peer-based support is the main emphasis for their programs. Transforming Youth Recovery's community college asset assessment determined that 23 of 38 4-year institutional assets were mentioned by 100 community colleges represented in the study. Student interest and physical space were the assets mentioned the most by community college administrators, followed by mentoring, support groups near or on campus, counselors trained to support both mental health and substance abuse disorders, peer support, academic support, and collegiate recovery campus awareness (Transforming Youth Recovery, 2016). Although more research is needed to fully understand the longitudinal impact that CRPs may have on students in recovery, current research revealed that institutional supports are necessary as part of the student recovery process (Finch, 2009; Misch, 2009).

Conclusion

This review presented an analysis of relevant literature regarding students in recovery and the transition to higher education, particularly the community college campus. The goal of this review was to provide readers with a better understanding of how prior literature contributes to the body of knowledge concerning this population as they transition to community college.

Despite the scholarly attention that has been given to individuals in recovery and their transition

back into society, little research has been conducted emphasizing their transition into higher education. In addition, the U.S. Department of Education has recommended further evaluation of CRPs to determine their usefulness in supporting students as part of a continuum of care approach to recovery (Laudet et al., 2016). More specifically, female students in recovery who transition to community college provide a novel research population as nontraditional females have been shown to experience multiple stressors related to college transition and experienced the recovery process differently than males (Marsh et al., 2009; Nelson-Zlupko et al., 1995). Currently, there is a paucity of research regarding community college students in recovery (Laudet et al., 2016). Because limited research is available, this study will expand upon previous studies and add to the body of knowledge regarding individuals in recovery as they transition to higher education.

CHAPTER 3

RESEARCH METHODOLOGY

Introduction

The purpose of this qualitative case study was to understand the transition experiences of women in recovery at community colleges. Specifically, this research explored how students in recovery conceptualized their recovery capital and its impact on the transition to and success in the community college setting. This chapter provides a description of the research design, research questions, setting, participants, data collection procedures, data analysis procedures, data trustworthiness, ethical considerations, and a brief summary.

Research Design

In order to understand students in recovery and their individual perceptions regarding transition to higher education, a qualitative approach was selected for this study. Qualitative research, at its roots, focuses on a specific phenomenon and builds understanding without a preconceived hypothesis (Patton, 2002). Using the qualitative approach, the researcher interviews, observes, and analyzes a small number of participants to better understand their reality in relation to the phenomena. According to Patton (2002) the "researcher is the instrument" and it is the researcher's skill and sensitivity level which build a strong case (pp. 5, 14).

Research Questions

The following questions were developed to examine the transition experiences of female community college students in recovery:

1. What factors contribute to female students in recovery choosing to attend college?

- 2. What challenges and resulting stressors do females students in recovery cite as influential in their community college transition?
- 3. What support structures do female students in recovery cite as critical in order to achieve success in community college?
- 4. How do female students in recovery define success?

Case Study

Multiple factors were considered and consequently affected the decision to use a case study methodological approach. Because the topic was perceptions of female students in recovery who transitioned to a community college, it was important to consider the phenomenon in relation to the context of the study. The two could not be easily separated from each other (Yin, 2003). Furthermore, Yin (2003) argued that a case study approach allows the researcher to gain understanding by taking into consideration the context in which the case is happening.

Using a constructivist paradigm, Stake (1995) and Yin (2003) argued that what individuals claim as truth is dependent on what they perceive to be reality. Case studies allow the researcher to study individual perceptions in the context in which the case occurs. Using this approach, the researcher worked collaboratively with the participants to understand their stories (Crabtree & Miller, 1999). The advantage of this interaction is the researcher's ability to analyze participant actions based on their distinct perceptions of reality (Lather, 1992). Hyland-Russell and Groen (2011) studied nontraditional learners using this approach as well. Using case studies in educational research allows the researcher to hear participant experiences in their own learning environment.

Not only does using a case study approach allow the researcher to interact with the participants individually while in the context the phenomenon is occurring, but it helps to create

an environment where rich data are collected. Baxter and Jack (2008) emphasized the importance of qualitative case studies where multiple sources of data were collected. The phenomenon is better understood when it is studied using multiple "lenses" to understand its complexities (p. 544). Participants were interviewed using interview guides that correlated to the study research questions. The interview guide can be found in Appendix A.

Case studies provide rich information that may be beneficial to stakeholders as they implement programs and policies that affect students in recovery (Merriam 1998).

Implementing a descriptive case study approach provides information synthesized from multiple sources. As a result, counselors, community services, treatment centers, and higher education representatives may develop programming and policies reflecting the research findings from this study. Although these findings cannot be generalized to other populations, information gained from this study will provide stakeholders with valuable data that may be applied to similar cases (Rossman & Rallis, 2003).

<u>Setting</u>

This research study took place with students in recovery who were enrolled in one of three community colleges located in the United States: Central Piedmont Community College, located in North Carolina, Pellissippi State Community College in Tennessee, and Tulsa Community College in Tulsa, Oklahoma. Furthermore, the colleges were chosen based on their recovery support structures with Tulsa Community College being one of the first community colleges to model Texas A & M's collegiate program. Transforming Youth Recovery (2016) described Central Piedmont Community College as implementing formal recovery supports. And as a contrast case, Pellissippi State Community College had no recognized recovery support program at this time of the study.

Participants

Purposeful sampling, considered a strength of qualitative sampling, ensures the collection of "information rich cases" (Patton, 2002, p. 230). In this study the researcher initially contacted the program directors for Tulsa Community College, Pellissippi State Community College, and Central Piedmont Community College. The participation criteria were discussed and a list of potential participants was created. A short prescreening instrument was developed to gain information regarding student demographics and recovery history. Using the data collected on the prescreening instrument, 10 women were purposefully selected to participate using the following criteria: (1) students in various stages of recovery, (2) students who varied in regard to enrollment status, and (3) demographics. Patton (2002) emphasized that the number of participants in a qualitative study may fluctuate depending on the data retrieved in the collection process. McMillan and Schumacher (2010) described the sampling processes as "phasic" and subject to change (p. 128).

Data Collection

Interviewing and Document Review

Participant interviews were the main source of data used in this study. Participants completed an initial prescreening instrument that was used to purposefully select the interviewees. Before beginning the interviews, it was explained that the interviews would be recorded and participants would be assigned a pseudonym so that no identifying information would be available. Any direct quotes placed in the final study would be ascribed to the pseudonym. Interviews were conducted by phone or in person. The participant was informed that she could withdraw from the study any time and should she choose to do so, any data collected would be destroyed.

The interview questions were developed and placed in an interview guide that was critiqued by research peers and members of my dissertation committee. To ensure the questions matched the research goals, each one was aligned with the research questions. Using additional probes during the interviews, participants were encouraged to elaborate on their responses. Also, participants were given the opportunity to confirm or elaborate on some responses by repeating answers back to them. Chao and Good (2004) used similar interviewing strategies including building rapport with interviewees to ensure rich data were collected. Although few studies have been conducted with the sample of students in recovery specifically, Terrion (2012) interviewed 14 women in recovery who were enrolled in higher education and Bell et al. (2009) interviewed students participating in a collegiate recovery program at Texas A & M. Both studies informed the interviewing decisions in the present study with respect to number of participants and data collection techniques.

Data Analysis

This study used constant comparative analysis to find common themes within and across the data collected. Comparing participant interviews and researcher field notes, patterns and repeated themes were identified in the data. According to Patton (2002) the first step in this process is to create a "meaningful coding scheme" (p. 463). Codes were developed based on interview transcripts. By repeatedly reviewing the recorded interviews, coding and recoding the transcripts, broader categories were developed where the codes fit within the categories. From there, the interview information was triangulated with the researcher's field notes to draw reasonable conclusions regarding students in recovery and their perceptions regarding transitioning to higher education. Because different researchers may identify vastly different

themes during the coding procedure, analytical triangulation was used to ensure research validity and credibility (Patton, 2002).

Trustworthiness

According to Patton (2002) validity and credibility both rely on the researcher's "skill, competence, and rigor" in the field (p. 14). Research must retain its validity and reliability to be useful. Although a predetermined number of participants were chosen, the researcher was open to seeking new participants if data saturation was not accomplished thought the original set of selected participants. Before conducting formal interviews, the initial interview protocol was piloted with a female community college student in recovery who was uninvolved in the actual study. Conducting the interview pilot strengthened the researcher's interviewing skills and refined the interview questions. Merriam (1998) suggested the researcher explain his or her position in relation to the topic of study to maintain internal validity because the researcher is the instrument in a qualitative study. The researcher acknowledges that she volunteers routinely at a recovery center where participants enrolled at Pellissippi State Community College resided in the past or currently reside. Through this volunteer experience, the researcher has exposure to, and experience establishing rapport with females in recovery programs. Reflexivity measures such as self-questioning and careful examination of personal ideas within the research allowed the researcher to constantly consider other cultural, political, and social perspectives besides her own (Hertz, 1997; Patton, 2002). Piloting the data collection process allows the researcher to see where participants may experience confusion and enables the researcher to solve any timing issues (Schade, 2015).

For the participant interviews, an audio recorder was used to record all interviews with the researcher recording nonverbals, setting information, analytic memos and other notes in a field notebook. Each interview was transcribed verbatim with the participant pseudonym located at the top of the file. The transcription was shared with the participant as a form of member checking to ensure trustworthiness of the data and encourage the participant to share any further thoughts or clarify details. In sum, triangulation of data, member checking, and peer review of the protocols increased the overall rigor of the study (Andrasik, 2016).

Ethical Considerations

Ethical issues such as confidentiality and prior consent were considered in this study. All participants were provided details concerning the study and data collection in a consent letter (see Appendix B). All data obtained were securely locked and stored and will be kept for the required 6 years. The pseudonym code list was kept separately from the participant transcripts. All recorded interviews were password protected to ensure confidentiality.

Summary

Because there are limited studies regarding the perceptions of students in recovery for substance abuse disorders, this study will contribute to existing body of knowledge on this topic. Throughout the study, methodological decisions were made based on a thorough literature review of the methods used in prior studies that employed a qualitative case study approach on similar topics.

CHAPTER 4

RESULTS

The purpose of this qualitative case study was to understand the perceptions of female students in recovery who are transitioning or have previously transitioned to community college. More specifically, this study explored the common struggles, stressors, and perceived support needs of female students in recovery in order to better understand their community college experience and how recovery affected this transition. The four research questions that guided this study were:

- 1. What factors contribute to female students in recovery choosing to attend college?
- 2. What challenges and resulting stressors do female community college students in recovery cite as influential in their community college transition?
- 3. What support structures do female students in recovery cite as critical in order to achieve success in community college?
- 4. How do female community college students in recovery define success?

The findings of this qualitative study were identified through interviews with women in recovery who were enrolling in community college in the next semester, were in the midst of their transition to college, or had already graduated from a community college. A diversified group of participants was selected from prescreening survey information sent out to female students enrolled in one of three community colleges located in Oklahoma, Tennessee, and North Carolina. These colleges were selected based on research indicating the level of verified collegiate recovery supports they provided to students in recovery. Consequently, a mixture of purposeful sampling was used to locate study participants. All female students enrolled in the community college located in Tennessee received an email with the prescreening survey link;

however, the colleges located in North Carolina and Oklahoma provide support services though a verified collegiate recovery program. The faculty member sponsoring these programs referred women in recovery who had made contact with her in the past by sending out the referral email. Once potential participants completed the prescreening survey, maximum variation sampling ensured that the final participant list was diversified based on age, time in recovery, and enrollment status. The sampling strategy for the study, maximum variation sampling, allowed a diverse variation of the individual participants to provide different perspectives (Creswell, 2013).

Ethical issues, including confidentiality, were considered in the development and implementation of this research study. Institutional Review Board approval was granted from all three community colleges. All participants were provided informed consent forms and agreed to those conditions before completing the prescreening survey or participating in interviews. All participants chose the time and place of their interviews which lasted between 20 and 45 minutes each. Participants are referred to using pseudonyms for the remainder of this dissertation.

Participant Information

The following section provides detailed in-depth information about the participants chosen for this study. The descriptions of participants have been arranged based on their enrollment status at the time of the study. The demographic information included in Table 1 provides information pertinent to the research questions.

Table 1

Participant Demographic Information

Name	Age	Do you have children	What are your children's ages?	College status at time of interview?	Working while in college? Hours	A, No CRP B,Developing CRP C, Est CRP	Credit Status Full time Part time?	What substances did you mis-use consistently?	Months/Years in recovery when enrolled in community college?	History of mental illness?	Treatment Experiences?
Nuna	29	no	NA	2nd year	Yes 20-25	А	Full	alcohol	Still using	No	None
				2						Depression, Bipolar, Anxiety,	DBT, Cognitive Distortions,
April	27	no	NA	1st semester	No	Α	Full	drugs		BPD	Therapy Groups
Bonnie	39	yes	12, 10, 4	2nd year	Yes 24-32	А	Full	drugs	6 months	ADHD	Inpatient and outpatient
Charles	44		25 20 40 40	Graduating in	Yes		- II		2	Anxiety,	0.1
Starlynn	41	yes	25,20,19,18	one semester	30	Α	Full	drugs	2 months	depression	Outpatient detox, rehab,
					Yes						halfway houses, 12
Rain	37	yes	16, 12, 5	2nd semester	40	Α	Full	drugs	5 years	yes	step program
		,						Ţ.	,	Yes, not	Outpatient,
										until	inpatient, , and 12-
				Graduated	Yes					recovery	step, mental
Maria	46	yes	16	Spring 2017	25-50	В	Full	drugs	10 years	2004	health Counseling
Dantin	35		NA	Graduated in 2014	Yes	С	Full	4	4	No	outreach groups
Destiny	35	no	INA	2014	30	C	Full	drugs	4 years	INO	through College. Prison, drug
											treatment
				Graduated							inpatient
Valentine	43	yes	26	Spring 2017	No	С	NA	drugs	23 years	No	outpatient
		,		Graduated	Yes						counseling,
Aduline	28	no	NA	Spring 2017	40	С	Full	drugs	1 1/2 years	ves	religious groups
7144		0		op8 2017				u. u.go	2 1/2 /00.0	700	90 Treatment
											center, classes to
					Yes						heal the mind
Kim	49	yes	20	2nd year	48	С	Full	drugs	13 years	Yes	heart and spirit

Nuna

Nuna is a 29 year old single student enrolled in the nursing program at her community college, although she has earned a prior degree from a university. She has 2 semesters left before she graduates from community college. She is working full time while enrolled full time in college. Her substance of choice is alcohol, and she is currently using while enrolled in college although she does not consider herself to be abusing her substance of choice. Nuna attends community college A where there is no formal recovery program.

April

April is 27 years old and is enrolling in community college in August 2017. She is single and does not have any children. She will not be working while enrolled in school and be taking full time hours. Her substance of choice is drugs, and she was completing formal treatment for her substance abuse at the time of the study. April attends community college A where there is not a formal recovery program.

Bonnie

Bonnie is 39 years old and is in her third semester of community college. She is a single parent and attends college full time. Bonnie's major is social work. Her substance of choice was pain pills; however, she has been in recovery since January of 2015. Bonnie attends community college A where there is no formal recovery program.

Starlynn

Starlynn is a 41 year old business administration student and will graduate in December of 2017. She has children who are over 18 and no longer live in the home. Her substance of choice was drugs, and she is currently in outpatient treatment as part of her recovery process.

Although she has transitioned between relapse and recovery multiple times since enrolling in

2014, she has not abused her substance of choice since June of this year. Starlynn attends community college A where there is no formal recovery program.

Rain

Rain is a 37 year old business management student starting her second semester in community college this fall; however, she transferred from another university. She attends college full time while working full time. Rain's substance of choice was drugs, and she has been in recovery since 2012. Rain attends community college A where there is no formal recovery program.

Maria

Maria is a 46 year old student who graduated in May of 2017 although she withdrew multiple times before graduating. While her degree is in Human Services with a concentration in substance abuse, she also earned three other certificates while enrolled in community college. She worked full time while attending college full time and was a single mother when she first enrolled in community college. Her substance of choice was drugs, and she has been in recovery since 2004. She suffers from posttraumatic stress disorder. While attending community college, she served as the president of the collegiate recovery program. Maria attends a community college with a developing collegiate recovery program.

Destiny

Destiny is a 35 year old student who graduated from community college in 2014. She majored in prelaw initially but later transitioned to social work. Presently, she is enrolled in a 4-year university majoring in education. While enrolled in community college, she worked full time while maintaining full time status in school. Her substance of choice was drugs, and she had

been in recovery 4 years prior to enrolling in community college. Destiny attends a community college with a verified college recovery program.

Valentine

Valentine is a 43 year old single parent who graduated from community college in May of 2017 with a degree in social work. Before graduating she enrolled and withdrew from the same community college numerous times. She has been in recovery since 1991. Her substance of choice was drugs. Valentine attends a community college with a verified college recovery program.

Aduline

Aduline is a 28 year old student who recently graduated from community college in May of 2017 with a degree in social work. While enrolled she worked full time while maintaining full time enrollment status. Her substance of choice was drugs, and she considered herself to be in recovery one and a half years when she enrolled in college. Aduline attends a community college with a verified college recovery program.

Kim

Kim is 49 year old student who will graduate in May of 2018 majoring in applied science. She works full time while attending school full time, and she is a single mother. Her substance of choice was drugs, but she had been in recovery 13 years at the time she enrolled in community college. Kim attends a community college with a verified college recovery program.

Findings

In depth interviews were conducted using a 14 question protocol, reviewed by another educational researcher and field tested in a pilot session. I modified the interview protocol based on peer and participant feedback so that questions would be more easily understood and data

collected would answer the research questions with greater detail. Additionally, member checking allowed participants to review the transcripts for accuracy, and modifications were made based on their feedback. These efforts helped to ensure trustworthiness of the data and subsequent research coding and analysis.

Using the study's literature review as a guide regarding the multiple definitions of recovery, I asked the interviewees an introductory question concerning their understanding of the term recovery. According to Kelly and Hoeppner (2015) recovery constitutes more than abstaining from substance of choice but involves changing multiple aspects of one's life and reaching a multitude of goals. Participant reponses revealed that recovery means more than not using their substance of choice.

<u>Introductory Question: How would you define someone who is in recovery?</u>

Most common answers involved changing something for the better. Bonnie said, "active change of ideals and attitudes" and "actively trying to change the behavior". Aduline defined recovery in this way:

I think recovery starts out as with this process of figuring out who you really are without that substance. To take a lot of insight and self-understanding and I think that that is the most important part of recovery as you're trying, you're almost reinventing yourself.

Valentine stated that recovery is "staying clean" and "changing the people, places, and things in your life to help you not be involved in that lifestyle". Rain indicated that recovery was "dealing with life situations...without using or drinking." April summed up her recovery by saying:

My definition of recovery is anyone who is seeking something better for their life. I think for me the biggest thing in recovery is learning that we don't have to cope with life but that we can have an abundant life and have something different for our lives and God wants us to have wholeness not just coping with anything that we can get by with whether it be drugs, alcohol, sex or anything. So I would say that a person who is seeking recovery is a broken person somebody who really wants something better for themselves

and is willing to come to a place of humility and say wow I am not okay and I need help. This really takes a lot of humility and a lot of brokenness and it is not easy but I am thankful to be there.

Starlynn stated that it is "day to day, taking steps you are supposed to" and Destiny concurred by saying that "Every day I fight to not return back to that". These responses align with research suggesting that recovery is a process that occurs over time and involves more than one aspect of an individual's life (Best et al., 2012; Laudet & White, 2008). Kim summed up recovery this way, "They have recovered mind, body, and soul. They have recovered in every area of their life."

Research Question 1

What factors contribute to female students in recovery choosing to attend college?

When asked why they chose to attend college, participant answers centralized around setting, focusing on, and achieving goals. Nuna stated, "I have a 5-year plan. We graduate, we get married, I pop out a few kids, somewhere in there I finish up with my bachelors, and then we live happily ever after with a house." Rain said that she wanted to major in business management and specifically mentioned reasons for enrolling in community college. She said, "They offered a cohort program which helped students to work full time and take night classes." "Starlynn mentioned financial reasons when she said, "I got off drugs, my son went into the army about that time but I had just gotten clean probably 7 months before. I wanted to make more money."

A common theme that emerged was the desire to change for the better. Valentine said it this way, "I wanted to do something positive with my life and become a productive member of society. Basically I wanted to show myself and the world that I was capable." Destiny said:

There are a few things actually that contributed to my decision, number one being at the age I was at whenever I was recovery. My life, I pretty much looked around and decided that it wasn't where it was supposed to be. I kind of looked stagnant and I was aware I want to choose to be alive and I wanted to progress in life. So, that was a few of my big

reason for wanting to go to school and plus change it in that direction and become a better human being.

Maria discussed the internal motivator that contributed to her decision to attend college. She said, "I got the confidence that I needed on different levels. Recovery taught me that if I practice something over and over again, I will be okay in it, if I ask for help from the right people." April emphasized this internal motivation when she said:

For me being in recovery, I have learned that I am not incapable and I have lived a lot of my life feeling like I could not do anything or that I was not good enough. But through recovery at Serenity I just really learned that I have something to contribute to this world and so now it is really pushing me to want to better myself and to do something and not just work at McDonalds or fast food restaurant but really do something go to school and better myself.

Additionally, Bonnie reflected on her children as a motivator for enrolling in college. "My kids more than anything else, that I'm a single parent so, I've got three, the middle one lives with my mother but it's really hard to by yourself, take care of kids on, getting paid minimum wage."

Additionally, participants desired to help others and felt that the first step was to go to college. Nuna recalls an experience when her father was sick in the hospital:

There was one nurse one day she took, she sat down with me for, she actually put her chair next to me and sat with me for about 40 or 45 minutes and I know how difficult that is to do. She sat and she would listen to me and she talked to me. That has been a huge driving force for me because I was like, that's who I want to be. I can help one person and if I can make one person feel the way that she made me feel about the situation and how someone cared then it would all be worth it.

Aduline noted her desire to help others when she said, "The second time around was let's see, after I got clean and I decided that I wanted to help people like me and so, they wouldn't have to do it alone."

Valentine said:

I'm very open about my substance use and incarceration which is why I went in to social work because I want to help people. I want to be able to help people succeed in the way that I have and change their lives in the way that I have.

Table 2 provides a matrix of participant responses related to reasons for enrolling in college. Cross-case analysis of participant interview responses indicated similar reasons for enrolling in community college.

Table 2

Reasons for Enrolling

	Nuna	April	Bonnie	Starlynn	Rain	Maria	Destiny	Valentine	Aduline	Kim
Factors										
Personal	X					X	X			
Goals										
Money			X	X						
Change		X					X	X		
Confidence		X				X		X		
Help	X								X	
Others								X		

Research Question 2

What challenges do students cite as influential in transitions?

Data generated from questions four through six of the interview protocol were used to answer research question 2. Female students in recovery constitute a group of individuals who face multiple challenges when transitioning into community college resulting in subsequent stress. Participant interviews reveal that these women struggle with circumstances specific to individuals in recovery; however, they shared experiences common for other campus populations such as non-traditional students. Based on Cloud and Granfield's (2009) recovery capital research, I categorized emerging challenges into themes paralleling sources of recovery capital: Physical, Human, Social, and Cultural.

Physical and Human

Physical capital refers to monetary assets as well as physical health and shelter that supports positive recovery, and human capital includes educational status and other values such as self-esteem and self-efficacy (White & Cloud, 2009). Multiple participants stated that financial challenges impacted their educational transition. April noted, "Definitely a lot of financial factors was the big thing." The subthemes of being a single parent, working full time, and balancing multiple roles emerged. Nuna said:

That's the biggest thing is just dealing with going back to school and being a little bit older has been the biggest challenge. This time around you know when I first went to I didn't have to, I worked on my breaks but I didn't work because I was going to school full time. I have to work all the time now which is very difficult trying to find the time. My time management skills have to be a lot better, they are not, but I try. Commuting I used to live on campus, now I live over an hour away.

Maria said, "I had two kids, and I had to choose work over school." Aduline also talked about the adult stressors that impacted her transition stating that "being out on your own and dealing with recovery and then also dealing with full time school, that was another challenge, adult things." Valentine discussed the stress she faced as a single parent transitioning to college. "My son was a teenager when I actually decided to go back and enroll and finish, and he has been diagnosed with Bipolar Disorder. It just kind of made things extremely stressful for me, plus I was working a full time job, and going to school."

Participants also discussed the challenges they faced with returning to college as an older student. Starlynn noted that "it is learning how to concentrate on school work after being out of school for twenty years." Taylor said:

I think I am nervous that I am going to fall backwards that I am not going to be able to do it. That I am going to either not fit in because I am going to be much older than the other kids probably just because I had to go through recovery first and with that I think it will help because I am at a different place in my life. But at the same time it really makes you

see what your priority is I am not going to school just because mom and dad are paying for it I am going to school because I am working for it.

Valentine discussed her academic struggles. She said:

The biggest challenge for me was that because I had a long and withdrew so many times, it dropped my GPA, you know it kind of messed up my GPA. So, it was really hard when I decided to go back because I was always on academic probation trying to pull that GPA up and because I had withdrawn so many times. I was on academic probation, it kind of you know it messed me up a little bit, I pushed through.

Kim concurred by stating:

It is very stressful because you have to work full time, and doing internship and keep going back. I'm a single mom, and going to classes in the evening or the day and then working. It is very stressful just being in the brain fog for not using your brain. Have the drugs some 17 years or so, 17, 20 years, something like that. I didn't use my brain at all so I'm getting back into learning. That was the biggest challenge I think was learning and get back into basic writing paper or something.

When asked about stressors, Maria discussed the learning difficulties she experienced:

I hadn't been in school in 17 years. So, learning how to balance school and work and kids and learn how to be structured and disciplined to study. I had no idea, I didn't study in high school so, I shouldn't know how to study in college. Then the stress or doing something new, being the oldest person in the room,

Time management and its effect on learning difficulties was mentioned by participants.

Nuna stated that "My time management skills have to be a lot better, they are not, but I try." Reiterating her learning challenges, Destiny mentioned that, "It took a long time for me to understand how to study, how to manage my time, things like that and they weren't really cooperative when I went first attended, they weren't any reference to how to manage things like these." April said:

Just being concerned about can I handle it, can I handle going to school and trying to live in recovery and taking care of myself and making sure that I have time. That was another factor that was big. Do I have the time? Can I manage everything? Can I go to school and be active in church and be active in recovery and take care of myself?

Aduline noted that "Time management being one of them, before when I was using time management wasn't really a priority to me. So, I think trying to schedule everything else to where it would work best for me was stressful."

Participants discussed challenges classified as human due to the interpersonal relationships between those struggles and the individual. Lack of confidence, fear, anxiety, and depression were common themes that emerged. Bonnie summarized her challenges by stating:

It was just really the not knowing, the fear of the unknown scared to succeed, scared to fail, not knowing how to go about getting in and the process of it. Then it's hard to go in and explain to some foreign person that doesn't know you. Like this is where I'm at and like I don't know what I'm doing.

Kim discussed feeling stupid:

Going back to school 20 years later whatever, that was I didn't want to go when I was growing up, why would I want to go now? That was the challenge of being scared of not knowing anything, being stupid basically.

Maria noted, "I have a learning disability and I had a problem thinking that I wasn't smart enough. So, I thought that I was going to be made fun of, like I was in high school and stuff like that not being able to read." April went on to say:

Feeling like I could not do it. A lot of times when you go through recovery you have to learn about yourself and learn hey I can really do something better for my life. If you have ever struggled with substance abuse or alcohol a lot of time you don't think you can. You think this is the best it can ever be. I am laughing because I have had lots of stress; I have been like out of my mind nervous and just scared. I don't know if the right word is like testing myself like can I really do this and so I think for me the biggest stress has been to just make sure that I am okay before I go on to this adventure because I don't want to start school and stop school I want to do it to its entirety. I have met people in recovery who have tried to go to school and they could not do it. They were not able to actively participate in recovery and actually the one that I was the closet to actually is in relapse now and so with that she thinks that part of that was because she started school and she wasn't ready.

Nuna mentioned stress and how it affected her recovery as a student. "I didn't stop drinking, to do this or anything, the stress and anxiety brought on by school, by the program made

me want to drink more." Her best friend and father died and she goes on to further explain how this affected her recovery as a student, "My father and my best friend, my anxiety is still a lot worse and I deal with it the best I can. So, I don't have time to deal with my own black hole." Aduline elaborated on her mental health challenges:

I had to learn to deal with but going through recovery you have a lot of things going through your mind and not necessarily the best thing that should be going through your mind. Being I guess almost alone with your thoughts can affect your mental health a lot. I think I had an issue with that when I was starting community college.

Starlynn reiterated the effects of mental health on her success. She said, "You can't tell anyone about the mental illness and there is no one to confide in about stress or financial issues."

Social and Cultural

Cloud and Granfield (2009) introduced social capital as an accumulation of relationships with an emphasis on the responsibilities and supports that these relationships entail. White and Cloud (2008) posited community capital as resources that contribute to the decline of substance abuse disorders. When asked about social supports, Aduline said, "I did volunteer hours in the keeper's office, the addiction and recovery resources office but unfortunately I couldn't be a part of any clubs because I worked." Nuna discussed disclosing her challenges with others in community college:

I told my professor once just about the stress and anxiety and then told her a little bit about what was driving it plus my worries for school. Because I met with her about it and about testing anxiety and all that. I did not tell her about drinking or anything like that because she's very straight laced.

Aduline stated, "I think another stress was because I was so busy going into college and everything while working that I didn't really have a social life, or not as much as a social life that I was used to having." She went on to say:

When old friends are trying to contact me for anything, friends that I shouldn't necessarily be hang out or talking to. I didn't want to be rude but also I didn't want to talk

to them anymore for my own sake and I think it was stressful when they were all coming at me wondering what was going on and everything and just putting me down for the choices that I made that were good for me. But that was stressful in the beginning also old friends.

Nuna reiterated by saying, "I'm not getting the social interaction I probably should be, but I've done this all before. This isn't just fun and giggles and football games and making life time friendship, this is me trying to graduate with a degree." The stigma of having a substance abuse disorder and the lack of individuals who understand emerged as common themes with many participants. Nuna revealed this by stating:

So, it's not their business, because once you disclose something like that you have that stigma. I mean they look at you and they are like, 'oh!' That's on one class, that's on one student who, you know, she gets wasted all the time.

When asked if she disclosed her substance abuse to anyone at the college, Destiny said, "I did not and I mean the main thing I had was the shame that came along with it". She went on to say, "I remember feeling very isolated I remember not feeling like there were people there for me.

Not having people understand you are coming from a relapse." Starlynn elaborated on the theme of stigma and lack of understanding when she said:

It is not being able to share but then it is them not understanding either, it is what you are going through yourself that no one else can come and say oh! I know how you feel. Because I really don't, and if there is ever one thing I have learnt in the whole progress of anything is being the non-drug addicts do not understand recovering drug addicts. There is no way they are able going to understand but I think people are quick to judge that I'm doing that, even the job I just started I'm doing that. Because of what you have done doesn't mean that is what you are now. So, it is really hard for people to not just understand but even be compassionate about it I think.

Bonnie discussed difficulty in knowing how much to disclose about her substance abuse with others and summarized it this way, "I mean it's a stigma that I think will probably never go away." Aduline summarized her challenges as a student in recovery at community college by stating:

I had seen a counselor quite a while before I decided to enroll and so, learning all these new coping skills while enrolling into college. I was faced with all these challenges that I wasn't used to and I didn't know how to deal with. So, I think the hardest part was even though I was motivated to do this for other people the hardest part was sticking with my recovery and trying to develop this coping skill with all the chaos that comes around with the school.

Rain was the only participant that did not note any challenges in her transition to community college. She said that it was "a really smooth transition". Laudet et al.,(2006) discussed the relationship between recovery capital and successful recovery and found that challenging experiences may be buffered by the accumulation of supports necessary for success. Table 3 below presents data on participants' most common challenges experienced while in community college.

Table 3

Challenges and Stressors

	Nuna	April	Bonnie	Starlynn	Rain	Maria	Destiny	Valentine	Aduline	Kim
Challenges										
Physical										
Human										
Financial	X	X	X	X					X	X
Academic			X	X		X		X		X
Time	X		X			X				
Management							X		X	X
Lack of self-			X			X				
esteem		X								X
Mental				X					X	
Health										
Coping with				X						
Recovery										
Social										
Cultural										
Isolation	X						X		X	
Stigma	X		X	X			X			

Research Question 3

What supports do students cite as critical for success?

Based on extensive recovery capital research conducted by Cloud and Granfield's (2009), data taken from interview questions 8, 9, and 12 were categorized by types of supports. As with research question 2, supports were classified as either physical and human supports, or social and cultural supports.

Physical and Human

Participants mentioned an array of physical and human supports that helped the transition to college. Destiny spoke about the financial support that she received through a recovery program on her campus. She said, "I got a recovery scholarship that they had started... They actually give scholarships to students for being in recovery." Aduline concurred, "I believe they have like, I didn't take advantage of this, I probably should have, they have like a scholarship program, or financial assistance." Kim said, "I know they have a scholarship for recovery." Maria received this type of support. She said, "I got an award, I got a scholarship for one of those substance abuse scholarships."

Students also mentioned academic structures which supported their recovery and transition to college. Destiny noted:

I did, if you want to constitute like writing labs and things like that for that sort of support that works. I originally, when I first went to TCC and I was in a remedial course to be able to test me up to where everything was at. I mean it was really quickly and moved really smoothly, but I'm really grateful that I did the previous courses to be able to test me up in reference to that with my age.

April noted that when she toured the college, a tutoring center was included in the campus tour as a source of support. Rain noted that her community college has a "learning

resource center where people are available that can help you on a tutoring base or a quiet place to do homework." Rain also mentioned:

A gentleman... in the academic counseling department...he was amazing. I didn't know where I even stood with getting a degree thru them with my transcripts. He met after hours to meet with me because of my work schedule. He helped me to feel confident in the fact that I could get into this and actually succeed."

Kim said, "I have a friend that graduated from school with a teacher's degree. So, she help me in writing papers." Bonnie said, "The tutoring center, I've got a lot of help, I would have never survived statistics without the tutoring center." She went on to say, "I couldn't do fractions in the beginning, and so, I had to take the remedial, but if it hadn't been for the professor that I had for the remedial tutoring me I would have never got." Rain said, "They did a very in-depth orientation" to prepare her for the transition. She also mentioned that, "They did mention in student orientation that they have not necessarily counselors but mentors, not sure what word they used, that if you are having any problems, they have people you can speak to or resources." Maria summarized supports which enabled her to succeed in college:

I belonged to TRIO before collegiate recovery. It is the support services that they helped me a lot and they were like a family to me. I remember going there like they had tutoring for me and they could help you write papers. They gave me classes on finances stuff like that. That was a good support group and correlation with my collegiate recovery.

Aduline noted how internal motives supported her transition as a student. She said:

Just the motivation I have for the people that I wanted to help. Now I knew I could do it myself but there is like a whole group of people out there in the world for me to help just as much as I did and that's a lot of people. So, really I just used like every single person in the world to motivate me through it.

Maria noted how mental health structures supported her school success:

Then recently they changed my meds and my diagnosis so the psychiatrist has been huge changing my meds because I went from not being able to focus in class to being able to focus. I went from Bs and Cs to the dean's list the next semester.

Social and Cultural

Participants mentioned how important family and friends when considering the supports that contributed to their success. Nuna noted how her stepfather supported her:

I don't know how many times my stepfather said, 'You're going to be an awesome nurse.' It helps to have that honesty of somebody who thinks you're going to be amazing at what you're trying to do. It gives you a sense of purpose again and you're beaten down and you're tired and your brain hurts and you are just like, I don't know why I'm even doing this. Then somebody comes up, someone whose opinion you value and comes up and you're like, I know you're going to do amazing because of all these, all these points and, it just makes you feel better and give you some fire again.

April mentioned her grandfather's support and said, "He has been really supportive of me on this recovery journey and whatever that looks like he is behind me." She described her grandfather and the Serenity House as sources of support that prepared her for the transition.

Starlynn said, "I'm doing my normal, my group therapy, my sponsored church, I do have a lot of people that I confide in at church. Talking with family, church, my kids are really helpful, I mean they are older you know from 26 to 20. So, they really help me to keeping me grounded a little bit." She said that the group therapy was her most beneficial support. Destiny concurred, "She (the recovery center director) did have meetings that you could attend to as well that with your peers that have been, they're dealing with addition too. Those were the ones I would attend."

Valentine simply said, "just my friends and family" when asked about supports. Aduline described the impact that support groups had on her success:

There was another student in one of my classes who had just started their recovery and needed help or was just afraid to do certain things on their own. I volunteered to go to these groups with them so, they wouldn't feel so uncomfortable. I know that's me supporting them but you know, at the same time that is them supporting me as well as whether they knew it or not.

Bonnie said, "I have gotten most of my help from other people that go to 12 step meetings that I go to, that I've already went through the process before me, you know, asking

for their experience and their help as how to do it rather than people at the college." Kim said, "I have a friend that graduated from school with a teacher's degree. So, she help me in writing papers and things...I have my church friends they would help me study and stuff like that." When asked about coping supports, Kim went on to say, "prayer, praying daily and asking for renewing of the mind and for peace, and growing up that way that's how I use my coping skills is through prayer." When asked about supports, Bonnie said:

My sister, she has a doctorate and so she kind of helps me through the process or whatever. She's really supportive, other than that like my immediate family has not been. But I have lots of people that are my friends that are like family that encourage me.

Destiny described the impact that a positive campus culture had on her success. When asked about supports, she said, "Finding peers that knew where I was standing was a big deal. Also even having faculty understand where I was standing at, that place, the feeling of being accepted and understood where you are at, that was the biggest support. There was a group of individuals that were there for me and were able to talk it out. So, that's how the stress was handled once that happened." She went on to say, "I was just talking to the professor, she pretty much let me know that it's okay to be a part of something and let people know. She made me feel like it's okay, you are not going to be punished for that and it's okay if you talk to your teachers and things like that." She went on to discuss her transition from feeling insecure to being able to use the support of faculty, "I was stressful at the point of being insecure. My college is going to get rid of me because of this. So, eventually I gained the ability to speak to my faculty members in reference to those things." Rain was another participant who mentioned social supports on her campus:

I am not sure as far as a recovery based, but from what I've seen everyone welcomes you with open arms and wants you to be a part of which is something huge for people in recovery at least for myself. I don't want to feel like I am an outcast. They do not care what your major is. They are just open arms.

Rain discussed informal supports in the form of emails from students where senior students or alumni...help transition into school..rethreads...several people who openly offered support if you have any difficulties if you need help along the way." Maria noted, "I had students that were in the class and we'd be supportive." April discussed the college campus by saying, "They had almost a kind of family feel to it, so when I went in that was great." Professors were a source of support for participants as Aduline noted, "Although I didn't seek out any support like that, I do know that all of the classmates especially the ones with similar problems and my professors were more supportive if they thought I needed it, they were amazing." Maria agreed that professors were supportive. She said, "I was the president of the recovery community at my community college. So, we had a business meeting every week and I was close to the advisor there, so I would also talk to him." She recalled another professor by saying, "It was one of my first teachers that I ever had... I took, "How to be a successful student. We connected instantly and later on it was revealed to me that she was in recovery too. So that how come we connected, it is cool there was numerous different teachers or instructors like me." Rain noted that "having instructors who were readily available" was a source of support in her transition. Maria also noted that asking for help supported her community college success. She said:

I have a learning disability and I had a problem thinking that I wasn't smart enough. So, I thought that I was going to be made fun of, like I was in high school and stuff like that not being able to read. But that wasn't the case because recovery taught me that if I practice something over and over again, I will be okay in it if I ask for help from the right people..all I had to do was ask for help. But it is hard for someone to ask for help.

A cross case analysis was completed by assembling participant responses into an organized matrix. Table 4 provides the most common supports given by respondents.

Table 4
Supports

	Nuna	April	Bonnie	Starlynn	Rain	Maria	Destiny	Valentine	Aduline	Kim
Supports										
Physical										
Human										
Financial						X	X		X	X
Academic		X	X		X	X	X			X
Church/Faith		X		X		X				X
Social										
Cultural										
Family							X			
Friends	X	X	X	X	X	X		X		X
Professors	X		X		X	X	X		X	
Group			X	X						
therapy		X				X	X		X	
Positive		X			X	X				
culture							X		X	

Research Question 4

How do female students in recovery define success?

Interview questions 10 and 11 provided data for research question 4. Participants defined success in multiple ways with the most traditional definition being to graduate. Maria said:

I graduated, knowing that I walked across the stage for the first time in my entire life was amazing. It was a different feeling because I worked for this and in high school, you just got to do it. You don't have to go to college. I graduated with honors, honors court and all, and I couldn't even get it in high school.

Kim elaborated on success by stating, "Successfully completing getting your diploma I guess graduating." Nuna went on to say, "This isn't just fun and giggles and football games and making life time friendship, this is me trying to graduate with a degree and I don't care about study parties and cupcakes and pizza." April said:

Definitely walking across that stage when I graduate. I am definitely looking forward to that. I got a GED, so I never graduated high school so I never got that feeling of walking

across the stage and my whole family going 'yeaha'. I never got that feeling. Knowing that I will have so many people there that may not be my real family but truly family hooping and hollering.

Rain said success was, "Continuing through school and achieving my degree." Destiny said, "Graduation was one of my specific successes." Starlynn explained that success is going beyond just graduating. "Getting through, to get a degree but just taking the degree and getting a good job and not just paying good, but a job that you don't have to deal with certain stressors that you would if it is like fast food."

Nuna considered success as, "Good grades, well, I shouldn't say that, passing grades, because at this point passing grades." She elaborated by stating, "If you are successful then you have passing or good grades. Successful, successful, actually learning, like my first semester I didn't feel successful at all because I didn't feel like I retained anything, like there was so much information being thrown at us." Aduline concurred by saying, "I don't exactly have to get an A in every single class, just completing the class to pass was great enough." Kim emphasized doing your best and said, "I would define success as completing each course and doing the best that you can." April went on to say that success is:

Really trying. Putting my neck out there and going for it. I may not get it the first time. I may be struggling in a couple of classes. I haven't been in school for a while and that is okay. I have supports. Trying to lean on myself instead of being so concerned about everyone else. Being thankful for what God has given me and utilizing those things.

Nuna also perceived verbal affirmation as success:

So, I feel more successful now than I did several months ago. I guess because I'm actually able to put two and two together with proper learning. Successful, positive feedback makes me feel like I'm being successful.

One theme that emerged from the data was personal goals. Beyond graduating and getting good grades, participants emphasized success as personal. Destiny described success like this:

Success is achieving your goals, whether these goals be just getting your associates degree and doing that, whether your goals be taking a few hours or your goals be understanding you as a person. To me success is defined by what your personal goals are as a human being. Success can be the fact that I'm still clean after all of these years, you know, that's success to me.

Starlynn shared a similar definition of success:

Knowing that somebody can get to the point to do it, that's first and foremost, we have to be, I know because when you are drug addicts you don't care about anything, except where you are going to get your next drug from. It doesn't matter what drug it is, you know so stay and clean through it all. I mean that is kind of like a success and accomplishment all in one time. But it is a day by day thing.

Maria shared her experiences with success this way:

Success to me is overcoming the barriers or the obstacles that you have on meeting your goals and obtaining your goal with another goal in mind. That is what success is to me, just because you finished the goal, people in recovery when we finish a goal, when I finish a goal there you go. When I finish the goal, I feel complete but then I feel empty because I don't have another goal to go by.

Rain responded by saying:

I used to rely a lot on my GPA or actual grade itself. At this point I am relying on what I am getting out of it. I can open a book and ace a test easily. What am I really getting out of it. What can I use in the future that will stay with me?

Participants emphasized success as seeing yourself as capable of success. Adeline said, "with each class that I completed I felt more accomplished and that made me feel successful starting now or transitioning into it." Valentine's response revealed an increase in self-esteem and self-efficacy. She said:

I think just kind of overcoming, someone shouldn't have been addicted to drugs and has been down in the trenches in life. It is really hard to get past that who that person was in that way of thinking about yourself where self-esteem is concerned. So, to grow into the new you and to view yourself in a different way, is sometimes difficult. I know I still kind of struggle with that. Sometimes when you meet people and they are extremely successful and they never had any kind of substance abuse or any kind of negative behavior or actions in life. You sometimes think you know these people are better than me, they have never done the things that I have done so they are better than me. So, to get past that and realize that you are just like everyone else, you have had ups and downs and

you succeeded in it. You have overcome the struggle, and you are who you are today, and who you are today is not the same person that you were then. I mean that's success to me.

Aduline summarized success by describing a combination achievements, She said:

Not only passing all my classes, graduating I was part of an honest society, I made deeds honorable, almost every semester. I was able to do full time school while fulltime working and you know, I think all those little things they were just all successes that I made like one huge success.

Bonnie also defined her success by saying, "Accomplishment in some stuff that I never knew or dreamed that I could, completing something for the first time in my life." Maria concurred by saying, "I got the confidence that I needed on different levels, different people help me like the first time I went back in 2006 that's when my sponsor helped me understand that I could do it. Because I have a learning disability and I had a problem thinking that I wasn't smart enough." Rain discussed success as learning something new and being successful with it. She said, "The sheer fact that I am passing two online class. I am more of a traditional student. I am pressing 40 years old. I need face to face time...asking questions face to face." April said success was also being able, "To say I am getting on the right track now. Just in being able to put the pride on the shelf and say 'Hey I need help'."

Table 5 shown below examines the most common ways that students in recovery defined success. Using a cross-case analysis, a matrix is provided to collaborate the data.

Table 5

Definition of Success

	Nuna	April	Bonnie	Starlynn	Rain	Maria	Destiny	Valentine	Aduline	Kim
Success										
Graduation		X			X	X	X		X	X
Good	X								X	X
Grades										
Completing										
Courses					X					
Actually	X				X					
Learning										
Completing					X		X			
for the First										
Time			X							
Continued				X			X			
Recovery								X		
Overcoming						X				
Barriers							X		X	
Increased			X						X	
confidence		X						X		

In Chapter 2, I reviewed literature that cited the importance of recovery capital and its impact on individuals striving to stay in recovery no matter how personal that definition may be (Cloud & Granfield, 2009). A handful of community colleges are offering supports in the form of on campus Collegiate Recovery Programs (CRP)'s. Although these programs differ in types of and frequency of services provided, each aims at supporting students as they transition into community college as part of the recovery process. Although research stresses the impact CRPs may have on student success, few CRPs exist (Botzet et al., 2008; Cleveland et al., 2007; Dickard et al., 2011; Doyle, 1999). Data obtained from interview questions 13 and 14 offered insight into these CRPs and their impact on participant transitions in community college. In reference to a program for students in recovery called TACKLE at her community college, Destiny said:

So, he sent me over there and I started talking to her and said, these are my issues, this is where I'm at, this is, you know my problems with everything. TACKLE was less resistant in reference to my substance abuse, my previous substance abuse. They actually give scholarships to students for being in recovery. So, it's kind of to take the structure off for related money. I think that's a wonderful program as well.

Aduline was enrolled at the same community college and discussed a similar program, although she chose not to use its supports:

I believe they have like, I didn't take advantage of this, I probably should have. They have like a scholarship program, something like that to help with the finance side. They also have the Addiction and recovery resources center on campus, they have that. They also have about two or three clubs that are for people in recovery or people who want to help people in recovery which most members of those are people in recovery.

When asked about her participation in these programs, she said, "I did volunteer hours in the keeper's office, the addiction and recovery resources office but unfortunately I couldn't be a part of any clubs because I worked and I did not take advantage of the scholarship program."

Although Valentine attended one of the community colleges with a verified collegiate recovery program, she did not participate. When asked why, she responded:

I mean I'm sure that they do but I don't know anything about it. Yes, when I first decided to get clean, I went to like meetings, and I just didn't have a very good outcome with that. When I went to NA, which is actually these programs here in Tulsa. Some people weren't really ready to get clean. I felt like those people kind of dragged the one that wanted to get clean. So, I didn't want to subject myself to other people who are addicts at the time because I didn't want to be tempted or swayed in anyway.

When asked about these programs, Kim noted that they do have programs, but she never participated. She said, "I know they have a scholarship for recovery. I think that's all, I think that they might have something for students in recovery that they might meet every month or something, I am not sure about that. I have been just too busy but I'm not quite ready for them." Maria noted that her involvement in a collegiate recovery program supported her success. She said:

I know collegiate recovery is the only one I know, but I also belong to other clubs. I think it was a student that told me about it. I was there the second year I joined the first year but I wasn't really a part of. The second year is when I became more part of, then I became the president the third year. It is brand new and it is on the website stuff like that, but it's all new and we just got a \$10,000. We have more funds to be able to do more things and we go to see more people to join. We have got our little room, and we had drinks and snacks and stuff like that for people to go and we can go in there anytime we wanted to. We could have a meeting or we can sit there and study we can have quite time. If we needed to talk, we could call someone in the group and meet with them and say, 'Hey, I'm having a hard time', it was still small, but I feel that it will grow.

She went on to discuss how being part of the student council supported her success but was concerned that they were unfamiliar with the collegiate recovery program that her community college offered. "So, I asked for them to pay for a recovery conference. They didn't know about what my club was." Of the 10 participants, six were unaware of any collegiate recovery programs to support students in success, and three of the six attended a community college where no formal recovery support program existed.

Summary

In this qualitative case study data were collected from participant interviews to answer research questions concerning the perceptions of female students in recovery pertaining to their transitions in community college. Participant responses revealed that these students share common experiences as other college students. However, they often shared how their substance abuse and now recovery affected their community college transitions in a very personal manner. Students emphasized the theme of belonging and being surrounded by people who understand their needs, and this theme is evident in the data related to all four research questions. The findings presented in this chapter may be useful for stakeholders including faculty, staff, administrators, policymakers, government officials, and others who work directly with individuals in recovery. Chapter 5 includes a summary, conclusions, and recommendations

for practice relevant to students in recovery and concludes with recommendations for future studies which may increase the body of knowledge relevant to this topic.

CHAPTER 5

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

This qualitative study included five chapters. Chapter 1 provided an introduction to the study with the statement of the problem, research questions, significance of the study, scope of the study, and limitations and delimitations of the study as well as definition of important terms. Chapter 2 presented a review of the literature that included research on substance abuse and recovery definitions, transition theories, recovery capital, comorbidity of substance abuse and mental illness, and a synopsis of collegiate recovery supports currently available. Chapter 3 outlined the research methodology with a discussion of the interview guide, cases, data collection, and data analysis. Chapter 4 presented the results of the study. Chapter 5 concludes with a discussion of the results with recommendations for further research, policy, and practice.

Summary

This qualitative case study explored the experiences of female students in recovery from substance abuse who were in transition to community college or had previously transitioned. The research questions were developed in response to a systematic literature review and provided a foundation for data collection. The questions presented in the prescreening survey enabled the researcher to employ maximum variation sampling to select a diverse set of participants and the interview questions aligned with the research questions.

Three community colleges consented for data collection to take place at their institutions. As a result, 10 participants were chosen to participate through in person or telephone interviews. Data analyses were performed by reviewing participant interview transcripts, coding, recoding, and using the constant comparative method to identify common themes. Constant comparison was used to examine within cases and across cases for analysis.

Two of the three community colleges offered collegiate recovery supports although their support services differed somewhat; however, the third college did not offer any verified supports. According to one participant at the college with no formal support, the new student orientation included information about students who are struggling with something to reach out. No other participants from this college mentioned any collegiate support system. Peer mentoring, dedicated recovery support space, campus meetings, scholarship opportunities, and a positive recovery culture are a few of the supports found in the two campuses with verified collegiate recovery programs. Although this study did not specifically examine collegiate recovery programs, data indicate that these supports did impact participants who chose to use them. However, not all participants enrolled at the colleges with recovery programs participated in these programs. All participants revealed common struggles as well as supports that affected their success in community college. Themes that hindered success included: low self-efficacy, isolation, financial, and academic deficiencies, while academic infrastructures, financial supports, a positive campus culture, and multiple types of social supports including family, friends, and campus faculty and staff, supported overall success.

Conclusions

Most research on students and substance abuse is limited to a sample of 4-year universities and tends to focus on campus preventative measures. As a result, there is limited research studying the perceptions of students in recovery from substance abuse who are choosing to attend community college during or after their recovery (Baum, Little, & Payea, 2011). Additional research concerning students in recovery as they transition to college, community college specifically, was needed considering this lack of prior research coupled with an increase in number of individuals dealing with prior substance abuse.

Because there is a lack of research on this topic, this study was intended to be general in nature as it addressed the perceptions of female students in recovery transitioning to community college. Although the research questions were answered after gathering participant data, the questions do not focus on specific parameters such as age, years in recovery, or enrollment status. General comparisons and subsequent conclusions were made based on the data collected which may be used for further research.

This study was delimited to 10 female students in recovery from substance abuse who were in transition, currently enrolled, or recently graduated from one of three community colleges. Data were collected using triangulation strategies which helped to confirm the findings and the themes that emerged from the analysis of data.

Research Question 1: What factors contribute to female students in recovery choosing to attend college?

Community colleges reach a diversified number of students for many reasons including their flexible scheduling and smaller teacher-to-student ratio. Additionally, community college enrollment is on the rise due to federal and state initiatives offering students free education (Bryant, 2001; Ceida & Kaylor, 2001). Just like community college students attend college for varying reasons, students in recovery decide to enroll based on various motivators.

Table 2 represents the most common reasons for enrolling in community college and reveals that most participants enroll in college for more than one reason. About one third desired to help other people and felt that earning a degree would provide the means to accomplish this goal. A number of participants were in a human services program where they would be able to help others who were experiencing substance abuse just as they had. One third experienced an increase in their confidence levels and felt that they could be successful in community college

since being in recovery. The same number of participants wanted to change something in their lives for the better. The theme of changing for the better corresponds to prior research emphasizing change as a key component of recovery (Kelly & Hoeppner, 2015). It was interesting to find that only two participants mentioned money as a barrier to recovery, and these two participants had been in recovery for the shortest amount of time. Multiple factors impacted the decision to enroll and reveals just how personal and complex the decision to enroll in community college can be.

What challenges and resulting stressors do female students in recovery cite as influential in their community college transition?

Participants cited multiple challenges when transitioning to community college. Cloud and Granfield (2009) researched recovery capital in an effort to better understand how individuals may achieve more success as they recover from substance abuse. Recovery capital has been categorized into two groups: physical and human or social and cultural based on data obtained. Recovery capital has the ability to buffer any challenges and stress experienced while in recovery. Therefore, participant perceptions regarding their challenges and the supports that have helped them to maneuver their transitions in community college may extend the body of knowledge currently available.

Table 3 summarizes the challenges that impacted participant transitions to community college. In relation to physical and human struggles, 6 of 10 reported experiencing financial struggles. Participants mentioned being a single parent as reason for financial stress. Others noted that their recovery impacted their financial situation due to past choices. Academic stressors were cited by 5 of 10 participants and time management stressors impacted 6 of the 10 participants. Some participants discussed how abusing substances affected their brains and

retaining information was difficult. Others expressed how remedial coursework was necessary due to lack of study skills or had not previously performed well in school. Those who struggled with time management said that working while going to school was difficult, and it was hard to balance both roles. A common theme emerged regarding time management and lack of ability to balance the multiple expectations of being in college. Research suggested that balancing multiple roles could be a source of stress for students in recovery (Skowron et al., 2004). Working, taking care of families, and balancing classes were challenges faced by the participants. Four of the ten participants indicated that lack of self-esteem impacted their transitions negatively. Lack of confidence was reported to increase stress. Three of the participants experienced academic, time management, and low self-efficacy supporting the assertion that students in recovery experience transitions as a process and multiple factors working together may impact success. Only two participants considered mental health as a struggle although six identified themselves as experiencing mental health issues. Only one of the two said that coping with recovery was a stressor. This participant had the least amount of time in recovery. It may be that mental health challenges are impacted by time in recovery and impact how one copes with recovery. Further research should explore time in recovery as a factor.

In relation to social and cultural challenges, participants mentioned isolation and stigma. Participants indicated that working while attending college impacted their ability to integrate into the programs offered. These individuals could not always attend social groups held on campus. Additionally, participants noted how feeling like no one understood their addiction, no one cared about their addiction, and there was no one to talk to made it more difficult to transition. Four experienced some form of stigma while on campus regarding their substance abuse. However, they did not mention specific examples of others stigmatizing them but rather they felt that no

one understood and implied that those who have never used substances do not understand and characterize those who have a certain way. Research indicated that social supports on campus directly impacted students' commitment level and subsequent successes (Rendon et al., 2000). It could be that in not providing supports to students in recovery, these students believed the campus culture was unreceptive to their recovery efforts. Supporting students in recovery is a multi-faceted collaboration between multiple stakeholders. Understanding challenges and the supports that impact success may shed light on the body of knowledge currently available.

What support structures do female students in recovery cite as critical in order to achieve success in community college?

Table 4 summarized participant responses regarding supports that contributed to the successful transitions in community college. Four participants reported that financial supports contributed to their success. Two participants participated in programs that offered scholarships for being a student in recovery. Six participants were supported by academic supports such as learning labs, academic counselors, and tutoring centers. Church, prayer, and faith impacted the success of four participants, and they noted how attending life skills classes and church events helped them to overcome struggles.

The greatest support participants discussed came from social supports such as family, friends, professors, and other individuals they could relate to in group therapy. Schlossberg's (1989) marginality and mattering theory emphasized how important it is for students to feel as though they matter to someone and that they are understood. Nine out of 10 participants attributed success to the support of family and friends who listened, noting how peers who understood what they were going through helped to develop coping skills. Some students attended meeting on campus provided by their collegiate recovery programs. Six of the 10

participants found that professors supported them. Professor support came in the form of a listening ear, academic help, or guidance in making decisions. Participants also discussed how professors did not always know that they were in recovery, but they still helped them when they asked for help. It is important to note that most participant answers to the research questions were not specifically related to recovery. It was the effects of their recovery in the form of other challenges and resulting supports that increased their ability to cope with those challenges. The data revealed that these students did not want to be known for their recovery but to be provided with the supports they needed in a campus culture conducive to success. Finally, of the 10 participants, five said that a positive campus culture was a support they used, and it is important to note that not all five attended campuses with formal CPRs.

How do female students in recovery define success?

Data presented in Table 5 reveals that participants define success in a variety of ways and notably success was rarely defined as continued recovery. This may be due to the length of the time the individuals had been in recovery. Four participants had experienced over 10 years of recovery before enrolling in community college. Graduation, which six of the 10 listed as a success, was important, but it appears that the process of graduating and the personal successes experienced along the way impacted participants the most. Just as recovery is a daily process so is transitioning through college. Four noted that completing each course was a success.

Completing something that was started was considered a success in three out of 10 individuals, and two mentioned actually learning something useful as success. These individuals wanted to be able to use what was learned in college beyond simply earning a diploma. Overcoming barriers to success and increasing confidence was mentioned by three participants. Again, this data reiterates that for students in recovery, the journey is a process made up of many steps, and

students do not experience recovery in the same way. It appeared that the participants wanted to succeed in multiple ways and were looking for college campuses that supported them as they navigate college.

Recommendations for Further Research

The recommendations for further research were generated from previous research as well as a reflection of the researcher's own study methodology, data collection, and analysis. Further research should include a greater number of participants of varying age ranges and enrollment status to compare the challenges and supports for students in recovery. Although maximum variation was used to select a wide range of participants in multiple areas such as age and college status, more participants and colleges would be needed to assess statistically significant differences between the parameters.

This study was delimited to female students in recovery; however, further research may generate data specifically focusing on the perceptions of male students in recovery who are transitioning to community college. Additional researchers may want to compare male and female students in recovery to determine if there are gender specific differences which may impact student success.

Although data collection included the participant's disclosing their substance abuse when first enrolling, these data were used for descriptive purposes. Further research on this topic may offer insight as to why students choose to disclose their recovery and how disclosure to peers, faculty, or other college representatives may or may not impact future community college success.

Additionally, participants noted when collegiate recovery programs offered particular supports or encouraged successes. However, data were limited because few participants in this

study attend formal recovery programs on their campus. Further research may want to examine models of collegiate recovery supports and how community college students are impacted by these campus programs.

Participants in this study were in different stages of recovery at the time of enrollment and data supported the claim that students at different levels of recovery may experience college transition differently. Further research should examine the effects of various levels of recovery on student experience.

Recommendations for Policy and Practice

This research was conducted in response to an influx in the number of individuals coping with substance abuse and a lack of research concerning those who consider themselves to be in recovery from substance abuse, particularly those enrolled in community college. Federal and state policy initiatives like President Obama's 2020 college completion program and Tennessee Governor Bill Haslam's Tennessee Promise, both initiated in response to low college graduation rates, encourage successful completion and provide supports that may lead the way for success (Lederman, 2009; Tennessee Higher Education Commission & Student Assistance Corporation, 2016). However, there is a lack of clear institutional policies regarding students in recovery at this time.

It is recommended that institutions develop policies that address how to best identify students in recovery while maintaining confidentiality. Further policy development should focus on measures that encourage student success by providing diversified supports based on individual needs, as evident in the institution's practices of recovery dorm housing implemented at 4-year universities (Bell et al., 2009).

- 1. Faculty and staff should be trained on the biological as well as psychological characteristics of individuals in recovery particularly as it relates to student success. Research suggests that individuals in recovery share common characteristics that impact their physical and mental health. The findings from this study indicated that participants sometimes felt like no one on campus understood where they were coming from as students in recovery. Participants did recognize when faculty and staff reached out to make sure students were achieving success. This family atmosphere encouraged success and was considered a support in itself. While participants felt that the stigma of substance abuse existed on campus and negatively impacted their recovery, those campuses with a positive culture regarding recovery enabled student success. Destiny described the impact that a positive campus culture had on her success. When asked about supports, she said, "Finding peers that knew where I was standing was a big deal. Also even having faculty understand where I was standing at, that place, the feeling of being accepted and understood where you are at, that was the biggest support. There was a group of individuals that were there for me and were able to talk it out. So, that's how the stress was handled once that happened."
- 2. Although students mentioned different campus program such as TRIO, learning labs, academic support, and campus clubs, there did not appear to be coordinated communication across the various programs. One participant noted that one club she was a member of did not know that the collegiate recovery program she served as president of existed. Research suggests that recovery is a collaborative process involving multiple facets of an individual's life. It is recommended that college campuses develop policy to reflect increased communication and coordination of student support services to include

students in recovery. The challenges and supports mentioned by participants reveal that recovery is a very personal process comprised of multiple factors. Campus program supports should meet regularly to collaborate on students' needs as it relates to different types of students, particularly students in recovery. Programming should reflect the particular needs of individuals who may work and attend school simultaneously. Providing flexible scheduling for campus programming and activities would allow students to become more active on campus. "The more students are academically and socially engaged with faculty, staff, and peers, the more likely they are to succeed in college" (Tinto, 2012, p. 7). It is recommended that campus programs come together, combine knowledge, and problem solve collectively to address overall college success.

- 3. Participants noted that financial challenges impacted their transitions to community college. One student in particular mentioned how financial constraints affected programming on campus as one professor told her that the college did not have funds for a recovery program. Resources are needed to address formal recovery support. It is recommended that community college administrators work with faculty and staff to acquire grants to address supporting students in recovery. Grants may be available to help college campuses organize verified collegiate recovery programs. It is further recommended that administrators research current recovery programs, visit campuses like Texas Tech who already have strong recovery programs, and develop policy initiatives to offer collegiate recovery programs at their institutions. Data from this study can be used as a springboard to tailor support services according to their campus needs.
- 4. It is recommended that institutions begin the process of developing a positive collegiate recovery culture on campus. Participants noted how the campus culture affected their

transition to community college. Advisors, professors, and other students were cited as individuals who influenced their success or lack thereof. Some ways a positive culture may be created is through student advising. Without asking, an advisor has no idea if the student is in recovery or not; however, he or she can establish a positive culture by using effective listening skills and taking note as students share their experiences. Being prepared to recommend campus supports and useful information, advisors can help set the tone for the remainder of the student's semester.

5. Collegiate recovery programs have been created on a handful of community college campuses and offer a multitude of supports for students. Campuses will benefit from investigating student needs, determining what supports are available, and forming a committee of students, community members, faculty, staff, and administrators to address how to best support students in recovery. Organized collegiate recovery programs may offer mentoring, dedicated meeting space, sober activities, and other recovery resources. Findings from this study emphasizes the common challenges and supports that impact student success, and collegiate recovery programs can be provided to eliminate many of the challenges by providing most of the supports participants noted. Research suggested that having a campus sponsor, someone considered faculty or staff, was common in most campus collegiate recovery programs. This creates a positive culture because participants found professors and staff support to be instrumental in their success, and having dedicated staff may provide the organization with more power to reach more students and to effectively communicate with administration about the program.

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APPENDICES

APPENDIX A

Email letter to female students

May 2017

FROM: Mandi Walker

SUBJECT: REQUEST FOR STUDY PARTICIPANTS

Dear community college student:

My name is Mandi Walker, and I am a doctoral student in the Department of Educational Leadership and Policy Analysis at East Tennessee State University. For the completion of my dissertation, I am gathering information on perceptions of students in recovery attending community college.

I will be conducting personal interviews of participants who are currently enrolled, plan to enroll in the Fall or graduated from community college in December 2016 or May 2017. Specifically, I would like to discuss perceptions of your transition to community college as a student in recovery.

I would appreciate your willingness to voluntarily join this research study. Your experiences and insight as a student in recovery will information beneficial to community colleges as they prepare for students in recovery. The criteria to be considered as a participant of this study include:

- Female
- Age: 18 years or older
- In recovery (past use of alcohol or any drug where you would consider yourself having a substance abuse disorder
- Recent graduate from community college in either December 2016 or Spring 2017, currently enrolled in community college, or enrolling in August 2017.

This research study will involve: Completion of a pre-screening survey. Note that not all women who submit the pre-screening survey will be chosen to participate in the interviews.

- An interview lasting between 60 and 90 minutes.
- These interviews will take place either using an online communication system such as Blackboard or Skype or in person at a location agree upon by both the researcher and you.

- The interview questions are framed to bring about discussion of your transition to community college.
- You have the option to decline to answer the interview questions at any time and may terminate the interview at any time.
- The interviews will be digitally recorded to collect information which will then be transcribed for analysis and sent back for you to review. Direct quotes will be included in the transcripts for your review. These will be sent via email. Please note that email communications are not secure; however, all files will be password protected before they are transmitted.
- Your participation remains confidential. Once you sign the consent, you are giving permission for your quotes to be included in the findings using a pseudonym name.
- Compensation for participating in this research study includes a \$10 Walmart gift card given to you if you are chosen for the interview. This payment will be made at the completion of this research study.
- Data collected by the researcher will be contained in a lock box and transcripts will be
 disposed of in six years from the end of the calendar year when the study is closed.
 Recorded audio will be destroyed as soon as they have been analyzed and the final report
 has been submitted.
- After the data has been analyzed, you will receive a report of the research results to check for accuracy.
- If you have any questions or need additional information to assist you in reaching a decision about participation, you may direct your call or email to my cell at 865-776-8083 or my email address of mwalker@k12.com
- In order for this research study to take place, please be aware that the Office of Institutional Review Board (IRB) at East Tennessee State University has approved this research case study.

This research study is totally voluntary. If you agree to participate in this research study and meet the required criteria listed above, complete the survey using the link provided in the email. Once I have received your survey answers, I will select participants and contact you if you are chosen to schedule the interview session most convenient for you. Thank you for your time in reading this email and the interest you may have in participating in this research study. Complete the survey within one week of receiving this email to be considered for the interview portion of the study.

Thank you for assisting with this research.

APPENDIX B

Pre-Screening Survey

Please provide your contact information below so that I can reach you in the event that you are selected for an interview.

Name:	
Phone:	
Email:	
. Age: Check one.	
18-24 years old 25-34 years old 35-44 years old 45-54 years old 55-64 years old 65-74 years old 75 years or older	
2. Marital status: Single, married, divorced?	
3. Do you have children?	
List their ages?	
4. At what age did you first enroll in college?	
Are you presently enrolled in college?	
When are you enrolling? When did you graduate?	
5. Do you have employment outside of attending college?	
How many hours per week do you work outside the home?	-
How many hours per week are you enrolled in college for the next semester	?
6. What substances did you misuse consistently? Check one.	
alcohol	
drugs (prescription/non-prescription)	

7.	How old were you when you first used your substance of choice?
8.	Do you have a history of mental disorders (depression, anxiety) for which you received
	treatment?
9.	What forms of treatment if any did you engage in when attempting to recover from your
	substance abuse disorder if any?

APPENDIX C

Interview Protocol

- 1. How would you define someone who is in recovery from a substance abuse disorder?
- 2. What factors contributed to your decision to enroll/reenroll in college?
- 3. If enrolled in college in the past, what factors contributed to your decision to withdraw?
- 4. Describe any challenges you have faced as you transitioned to community college?
- 5. Describe any stress you have experienced in your transition to community college?
- 6. What experiences have contributed to this stress?
- 7. Did you self-disclose your substance abuse to anyone when you enrolled in community college or after starting community college?
- 8. What supports did you seek out in your transition to community college?
- 9. Which supports have you found to be most helpful in your transition to community college?
- 10. How would you define "success" at it relates to your enrollment in community college?

- 11. Do you consider yourself to have been successful in community college?

 Please describe any successes you have experienced.
- 12. What has contributed to this success?
- 13. Does your community college have a collegiate recovery program or any other programs to support students in recovery?
- 14. Have you participated in any of these programs? Why or why not?

VITA

MANDI WALKER

Education: Ed.D. Educational Leadership,

concentration in Post Secondary & Private Sector

Leadership

East Tennessee State University, Johnson City, TN, 2017

MA in Reading Literacy, Walden University, 2005

BA in Elementary Education, minor in Special Ed

Lee University, Cleveland, TN, 2000

Professional Experience: General Education/Special Education, Elementary

School/Middle School,

Tennessee Virtual Academy, Union County, 2012

Adjunct Transitional Reading Instructor,

Transitional Education, Pellissippi State Technical

Community College, 2005

General Education Instructor, Elementary School/Middle

School,

Campbell County Schools, Campbell County, TN, 2005

Special Education Instructor, Elementary/Middle School, Campbell County Schools, Campbell County, TN, 2002

Community Involvement: Serve as director of a community ministry, "Serenity Sister,

Inc.", in Knoxville, TN.

Lead a team of 10 volunteers to support women in recovery Work in collaboration with the Knoxville Rescue Mission Implemented mentoring support program for women

Participated in an inmate support program

Director of Women's Ministry at Clear Springs Baptist

Educational Travels: Traveled to Ukraine

Introduced other teachers and students to America's culture

Collaborated with other teachers to support student success