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IT TAKES TIME



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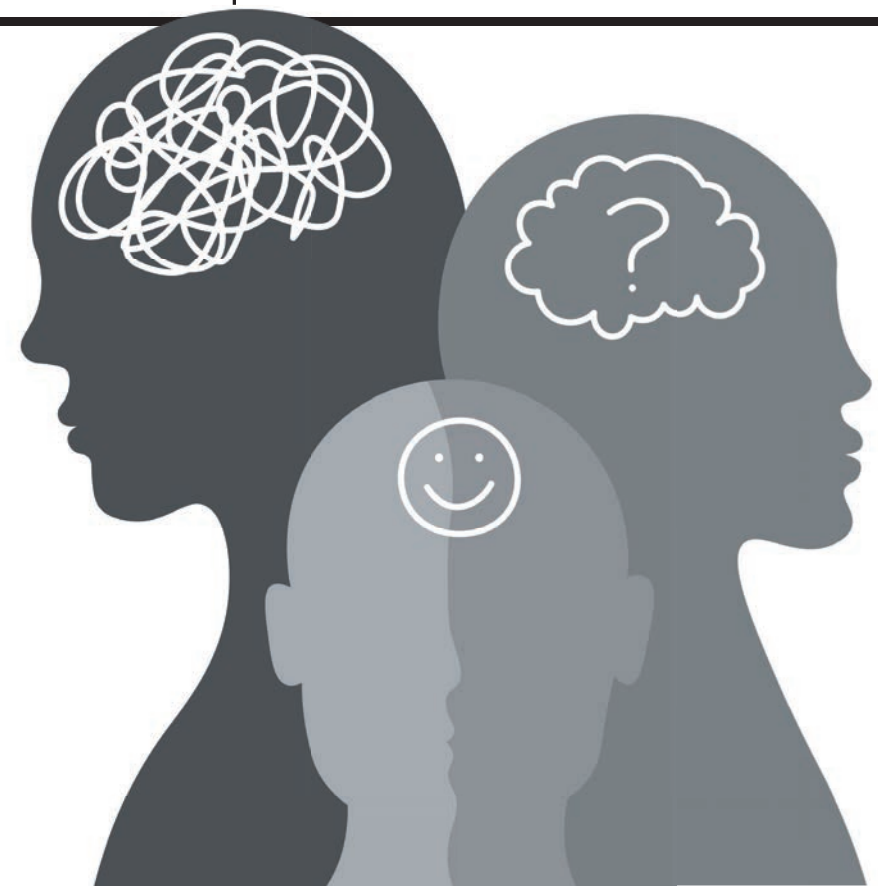
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According to Scott Miller, director of University Counseling Center and chair of the Behavior Intervention Team, the number of college students meeting the criteria for at least one psychological concern is up 50% since 2013. This edition shares stories of mental health struggles, substance use disorders and grief.

EMILY PARRY/OU DAILY

FROM THE MARKETING MANAGER

What wellness means

Dear reader,

For all the statistics and research I could spew when introducing our first-ever Wellness Guide — like that Oklahoma ranks second in the nation for the highest rate of substance use disorders, that Oklahoma's suicide rate of 21.5 per 100,000 people is over 50% higher than the U.S. national average of 14.2 or that young adults ages 18 to 25 report the highest past-year opioid use of all age groups — that's not what this edition is about.

Instead, it's about OU Students in Recovery and the stories of three students who overcame addiction. It's about a student sharing her struggles with depression, anxiety and suicidal ideation. It's about a father who lost his daughter to drug addiction and the substance use disorders that grip our state.

But most importantly, it's about bravery.

It's about choosing to reach out and get help, and waking up with the mindset that each day is going to be better than the last.

A first for OU Daily, this edition is entirely composed of sponsored content. How fortunate is it that our sponsors — OU's Higher Education Prevention Services, Southwest Prevention Center, Division of Student Affairs and others — care enough about our community to pay for awareness? How fortunate is it that every voice in this publication was eager to share their stories if it meant helping someone else? How fortunate are we to have the privilege to tell them?

Thank you to everyone who shared their personal stories. Thank you to those who guided our staff on what "wellness" meant to them. Thank you to the OU Daily staff, who worked tirelessly to get this edition to be what it is, and thank you to the sponsors for believing this cause is one that's worth fighting for.

This edition is called the Wellness Guide, but "wellness" does not mean everything has to feel all right or be okay. My hope as you read this is that you'll realize, no matter the struggle, you are not alone. The 988 Suicide and Crisis Lifeline is available at all times, and there are resources on and off campus you can turn to.

If you recognize yourself in these stories, reach out and get help. It is waiting for you.

Get connected,
Krista Fleming



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RECOVERING TOGETHER

OU organization brings together students healing from addiction



PHOTO PROVIDED BY GRANT EDWARDS
Students in Recovery is an in-person group offering a peer-led community for students struggling with addiction in any form.

SPONSORED BY OU SOUTHWEST PREVENTION • BY KRISTA FLEMING • KRISTA.B.FLEMING-1@OU.EDU

CONTENT WARNING: The following story contains mention of substance abuse, suicide and self-harm.

Students in Recovery is an on-campus community for students with any form of addiction, whether it be substances or behavioral addictions. Meetings are peer-led and in-person at 7 p.m. Wednesdays in Anne and Henry Zarrow Hall. There are no dues or fees for membership.

"We want it to be open for anybody who feels like they need a community of people that, whenever they call, they'll be there," said Grant Edwards, Students in Recovery president. "That's the idea of the organization. If you're hurt, we will be here for you. The one message that I want the Students in Recovery to be is that we are here if you need us."

Here are some of the stories of Students in Recovery members:

Grant Edwards

"A big part of recovery is giving back to the community."

Edwards, a social work senior, got sober on an operating table.

He was 23 years old, but he had lived more of his life with an addiction than without. At 8 years old, he asked his stepfather for Tylenol after getting a sunburn, and was given Ambien, a prescription sedative-hypnotic medication.

"I liked the feeling of playing with fire," Edwards said. "I thought that it was something to be admired, like 'oh, look how far I can go, look how much I can drink, look how many pills I can take.' It was almost like a badge of honor."

Over the next fifteen years, Edwards kept hitting wall after wall, ignoring the signs that something might be really wrong. He lost jobs and relationships. He dropped out of college in his first semester, flipped a car and got buried under snow after passing out.

The breaking point came when one of his friends took their own life. Edwards punched a mirror, cutting tendons in his hand, and let the blood flow for about six hours before he went to the hospital. As he got stitched up, he realized he wanted to change. He decided to get sober.

"I enjoyed the chaos, so I let it burn longer than I should have," Edwards said. "I had decided that I was probably going to die young, and then all of a sudden it dawned on me that I might want to stick around and see what life has to offer me."

Edwards quit cold turkey. He moved from Texas to Oklahoma, wanting a fresh start to find himself and build connections. He went back to school and graduated in 2023 with an associate's degree in addictions counseling from

Oklahoma State University.

"It was beautiful and it was hard," Edwards said. "There's a lot of lessons and hard conversations that I had to have with myself. Like, who I wanted to be, how I wanted to change and where I wanted to be in life. It is the best decision I've ever made."

Edwards joined Students in Recovery a couple years ago. His goal is to continue to grow the program by hosting more events and fostering a dependable community.

"A big part of recovery is giving back to the community," Edwards said. "It's just something that I felt called to do. The organization is trying to grow, and just needs people who can give it time to try to help nourish it and build it up. It was something that meant a lot to me, and I wanted to be a part of it."



PHOTO PROVIDED BY GRANT EDWARDS

Grant Edwards, social work senior at OU, is the president of Students in Recovery. The student organization meets weekly at 7 p.m. Wednesdays on campus.

Rachel Maier

"I've made it my goal to find good people ... I have a group I can talk to about it if I have temptations."

When Rachel Maier, meteorology sophomore, opened her eyes, she was in an ambulance again. And there was no one next to her.

This wasn't a rare occasion during Maier's first year at Carthage College in Wisconsin. What started as going out on weekends turned into attending class hungover every day and ended with multiple trips to the hospital.

In the ambulance, she knew she wanted something else. She transferred to OU the following year.

"I made it my goal to find good people," Maier said. "That's what I've done. Finding good people definitely helps because it's more of a secret, and you can't do it with them. They don't do it, so there's no urge to go out if you would be the only one."

Maier first began using substances to help fill the social skill development she missed out on during the COVID-19 pandemic. She said edibles made it feel easier to talk to people, and her addiction spiraled. Maier said that since transferring to OU, the main issue has been trying to figure out who she is.

"It's definitely a weird feeling," Maier said. "I don't feel who I am without that stuff. That was me. People in the past, that's how they knew me. That's how they viewed me."

Maier has been attending Students in Recovery meetings regularly and wanted to join a group like this since her arrival at OU. Students in Recovery gives out chips that pertain to time spent sober which Maier said helps keep her on track.

"It's really a good thing," Maier said. "I have a group I can talk to about it if I have temptations or if I'm really, really down in the depths and need someone to talk to."

Along with Students in Recovery, Maier has been involved in Oklahoma Cru, a Christian campus ministry. She shared her struggle with a friend in the ministry. It was the first time she told someone who didn't have similar experiences.

"I'm living my life for God," Maier said. "He already paid the ultimate sacrifice, so giving up one thing — giving up the drugs — that's nothing."

Jamie Van Horn

"I'm thankful for who I am today. Now I have a story to tell. I have people I can help with my story."

Psychology first-year Jamie Van Horn swore off substances before he entered middle school.

Van Horn's older brother died from an overdose in his 20s, when Van Horn was in elementary school. It felt obvious — of course he wouldn't do drugs. But as he grew older, those thoughts began to shift. Van Horn said what really hooked him was his reflection in the mirror while high.

"I looked in the mirror, and for the first time in my life that I could remember, I was able to look in the mirror and not have negative words to say to what I saw back," Van Horn said. "That's what I think really hooked me was the fact that I was okay with who I was at that moment, even though that's not who I am. It gave me an illusion of being someone else, and I fell in love with those illusions, I suppose."

As Van Horn's addiction worsened, his mental health suffered. He began chasing the feeling of being blacked out. If he was still conscious enough to take another pill, he didn't feel high enough. What he had once sworn off became something he seeked.

"As I grew deeper into my addiction, I would get mad at my older brother for not making it," Van Horn said. "I would just wish I had someone in this family who would understand what I'm going through on a deeper level. There'd be times where I was up at night and I was struggling."

When his parents found out, Van Horn bounced through recovery treatments. He attended Mission Academy High School, Oklahoma's only recovery high school, where he met Edwards. He is still in contact with his friends from the school, and he attributes some of his recovery to the support he received there. It was the first place Van Horn learned about Students in Recovery.

"I don't know what clicked," Van Horn said. "It wasn't like a 'if I don't recover, I'm gonna die.' It was just a 'I don't want to live this way anymore. I'm tired of being this way, so I'm going to change.'"

Van Horn said Students in Recovery provides him a place to get away from college stereotypes of partying. It's helped him feel comfortable sharing his experiences, and that's why, despite everything that's happened, he said he wouldn't change a thing.

"I'm thankful for who I am today," Van Horn said. "Now, I have a story to tell. I have people I can help with my story."

Resources

If you recognize yourself or someone you care about in these stories, support is available on campus.

The **OU University Counseling Center** provides mental health services, individual counseling and crisis support for students on the Norman campus (405-325-2911). The **Southwest Prevention Center** (SWPC) promotes substance use prevention, prescription medication safety and access to credible information and resources through initiatives such as Professor Pill (Instagram: @prof.pill, 405-325-4282).

Off campus, **Substance Abuse and Mental Health Services Administration's National Helpline** is a free, confidential, 24/7 365 day treatment referral and information service available in English and Spanish, for individuals and families facing mental health and/addiction (1-800-662-HELP).

The **988 Suicide & Crisis Lifeline** is a phone number you can call when you're facing mental health struggles, emotional distress, alcohol or drug use concerns or just need someone to talk to (Instagram: @988lifeline, 988).

Whether you are seeking recovery, concerned about a friend or simply have questions, reaching out is the first step. You don't have to navigate these challenges alone.


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TARYN COX/OU DIVISION OF STUDENT AFFAIRS
Junior Harper Herring utilized university resources and family support to persevere through mental health struggles during her first years at OU.

'YOU'RE GOING TO HEAL'

How OU student remained hopeful with mental health resources, support

SPONSORED BY OU DIVISION OF STUDENT AFFAIRS
BY KRISTA FLEMING • KRISTA.B.FLEMING-1@OU.EDU

CONTENT WARNING: The following story contains mention of suicidal ideations.

Impossible.

That's how everything felt to her: going to class, eating, even going on her phone. The drive she had just a semester ago wasn't there anymore.

At 19 years old, then-sophomore Harper Herring thought even breathing felt impossible.

"It was a guttural feeling of emptiness," Harper said. "My tank had nothing left to give, and I was running on fumes. It was a matter of trying to live, while feeling like you have nothing left to live on."

Scott Miller, director of University Counseling Center and chair of the Behavior Intervention Team, said the number of college students meeting the criteria for at least one psychological concern is up 50% since 2013.

"Sometimes, we have a problem and we keep a secret. Because we keep it a secret, it gets to be bigger and more overwhelming for us," Miller said. "But if we can share it with somebody we trust, sometimes just sharing it takes some of the pressure off us and can be a good first step to realizing what's going on."

> "I felt so relieved to finally be able to put a name to something. I felt like a weight was lifted off my chest, because I didn't feel so lost anymore."
>
> HARPER HERRING, JUNIOR

Anxiety

Harper first started showing signs of anxiety when she was in elementary school. She said her brain was on an endless loop of overthinking and being terrified of saying something wrong.

"I really didn't have any phrase to put it to," Harper said. "I had no clue what was going on. I thought that this was just what I dealt with, and it was my job to keep it under wraps."

According to the U.S. Centers for Disease Control and Prevention, nearly one in five children aged 3-17 are diagnosed with a mental, emotional or behavioral health condition. Anxiety and depression are most prevalent among adolescents and teenagers aged 12-17.

"There's something that we're doing as a society right now that's leading young people to be more anxious than they ever were before," Miller said.

The summer after eighth grade, Harper began to research her feelings. She said she searched "thoughts racing" and "heart beating too fast," and watched the screen fill with results about anxiety.

CONTINUED ON PAGE 8



"There's something that we're doing as a society right now that's leading young people to be more anxious than they ever were before."

SCOTT MILLER, UNIVERSITY COUNSELING CENTER DIRECTOR

CONTINUED FROM PAGE 7

She brought it up to her parents, Pat and Stacy Herring, and they enrolled her in therapy before high school began.

"I felt so relieved to finally be able to put a name to something," Harper said. "There were therapists and medications out there that could help with this. I found my problem, and my problem had solutions. I felt like a weight was lifted off my chest because I didn't feel so lost anymore."

The spiral

Harper's mental health journey before starting college was primarily concerned with anxiety. By the time she graduated high school, she knew her triggers and was better at managing them.

Harper always knew she was going to go to OU, and had everything planned to the smallest detail.

"I was very ready to go to college," Harper said. "I was very ready to start that new chapter of my life. It just felt like the natural continuation of everything when it was time to go."

The excitement lasted through her first semester, fall 2023. But the following semester, Harper said she hit a wall. Her motivation began to crumble and she started to struggle academically.

"I had absolutely no clue what was going on," Harper said. "I just thought it was a 'blah' moment and that I'd get over it. But it got really hard, and it kept getting harder."

Motivation would come and go, then eventually stayed gone. She began to skip class more often in favor of lying in bed, letting her thoughts spiral.

"It started off as 'why are you not going to class?'" Harper said. "And then it would be 'you're so stupid, you don't deserve to be here.' As my depression worsened, it would be 'you'd be better off dead.'"

Harper couldn't find it in herself to care.

"I was like, 'I'll deal with that later,'" Harper said. "I was also just so tired. I couldn't really bring myself to have any cognitive abilities to think, 'that doesn't sound right.' I was just like, 'oh, whatever,' and moved on with being tired."

Harper had participated in regular therapy at University Counseling Center throughout her fall semester, but said she went less regularly when the depression began to worsen. With just enough motivation to realize something was wrong, she utilized the center's crisis counseling services.

"I set up a regular therapy," Harper said. "And then, I had kinda fallen off going to therapy. When I realized I needed help, I went to their crisis center."

Harper had lied to her parents about how college was. Stacy said she felt defeated and thought things were different than they were.

"We walk a fine line," Stacy said. "I don't want to project my own stuff on her, but I also don't want to just leave her to figure it out herself. I don't want to push her over the edge with too much."

The crisis counseling services allowed Harper to immediately talk to somebody and get the next steps for handling her mental health crisis through that service.

"Sometimes in that first conversation, it's helpful to share with students that this is a fixable problem," Miller said. "There is help. You can feel better. You don't have to feel this way. This is the place on campus that really can help you do that."

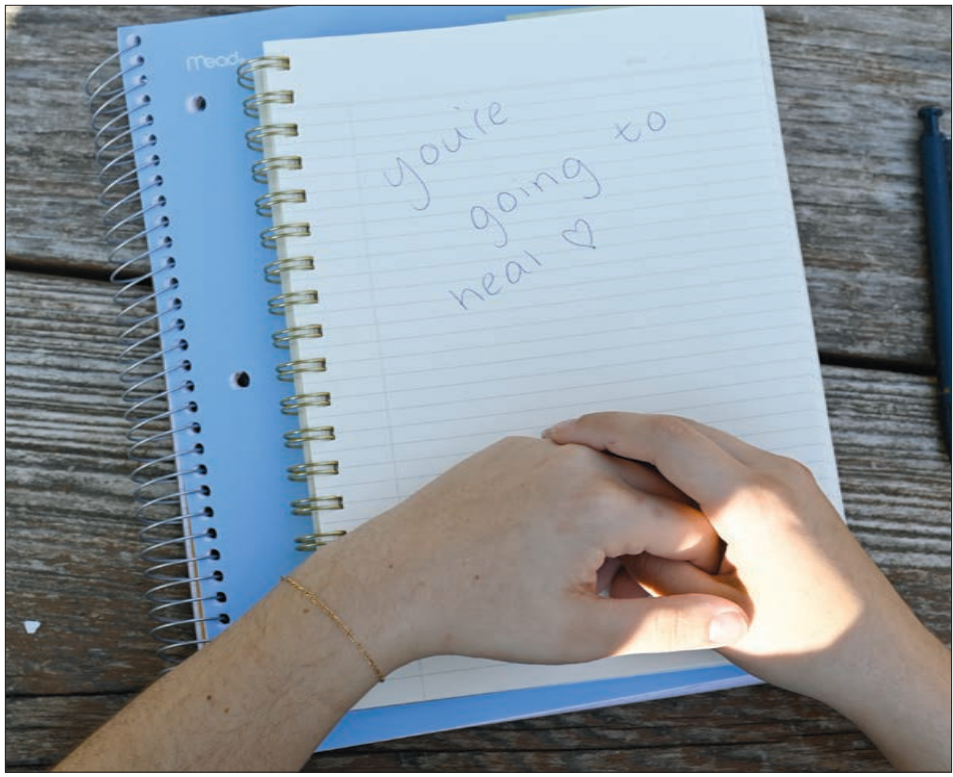
The crisis counselors helped give Harper the strength to tell her parents what was going on. Harper called her father while he was at a conference for work. He sat on the floor of the convention center with the phone pressed to his ear, reassuring her everything would be OK.

"What went through my mind was, I just knew it was a time that she needed to talk," Pat said. "I just needed to reassure her that it was OK, and that we weren't mad or disappointed."

Harper was diagnosed with depression with suicidal ideation in 2024. She made multiple visits to the University Counseling Center.

Harper medically withdrew from OU in spring 2024.

"I told her, 'we don't care about any of that stuff,'" Pat said. "We just want you to be healthy, and don't worry about the money piece of it, we'll figure it out. You're our daughter, and we love you, and we'll just work through it."



TARYN COX/OU DIVISION OF STUDENT AFFAIRS

The University Counseling Center offers comprehensive mental health services for students.

Tired

Harper and her parents hoped that the mental rest of winter break in 2024 would help her turn over a new leaf. While she felt better going into the second semester of her sophomore year than she had leaving the first, it didn't fix everything.

"I fell right back into the same patterns of the spiraling and negativity," Harper said. "The depression latched its claws in me and dragged me down even further."

Her grades began to decline again, and getting out of bed, eating and seeing friends became a harder battle than before. Everything she did felt wrong.

"It wasn't necessarily about dying," Harper said. "I was just so tired that I thought if I slept and never woke up, I'd be better off. I didn't really think about dying as an aspect of it. I just thought about a never-ending sleep, because I felt so exhausted."

Both of her parents have anxiety and depression, so they recognized the signs. They'd check her Life360 location to see she hadn't left her room in hours, and do their best to check in on her from Tulsa.

"I understand, and that's why it scares me a lot," Stacy said. "I know the dark spaces. I think about if I'm gonna get that call one day that she's decided it's too much."

After talking with her parents and the crisis counselors again, Harper medically withdrew from OU a second time.

She said it felt like failure.

Maggie Pool, Goddard's clinical administrative director, said there's no set timeline for college.

"People are like, 'I have to get this done in four years and so if I change my major, it's going to throw everything off,'" Pool said. "It's only your internal timeline."

Support

In summer 2025, Harper began the intensive outpatient program at Laureate Psychiatric Clinic and Hospital. There, she attended four weeks of group therapy every day from 9 a.m. to noon. Through it all, her family was with her.

"It was very nice to have that support system in place," Harper said. "I was very anxious, but the anxieties were all internal. I didn't have to worry about what my support system would do, because I had a good one in my family."

At Laureate, the group would cover different topics and each member would share their own personal insight before listening to coping mechanisms and strategies. Harper said being with a group gave her a sense of community.

"I knew statistically that I was not the only person dealing with mental health struggles," Harper said. "When you are dealing with stuff like that though, it really feels like you are the only person in the world struggling. It's hard to wrap your head around how other people are dealing with the same issue you are."

Though it was gradual, Harper began to notice little changes in herself. She could start her day without feeling an overwhelming sense of dread, and her appetite returned. Then, the little things came back, like her favorite hobbies.

"Most of it is not something that can be controlled by the person that's going through this," Pat said. "It's a disease, a condition, just like someone having a broken leg. It has to heal and there's treatment for it."

The climb

In fall 2025, Harper began sophomore year again.

"It was scary, just because I had this daunting cloud over my head of all the experiences I had gone through," Harper said. "It really tinted my life in a negative view, because I had gone through so much and I had come out the other side, but I was still just so afraid of making the same mistakes."

Though her GPA and attendance didn't immediately bounce back, Harper redefined success in other ways. She passed every course. She made it to most of her classes. She ate every day. She slept well.

"It's been a struggle — because I was in such a low place — to climb out of that hole," Harper said. "There are moments when you slip back into it, because you just get so tired from the effort it takes to climb."

But what helped more than anything, Harper said, is embracing the little things and feeling connected.

"It can be the silliest little thing in the world, but if it gives your life joy, then keep doing it," Harper said.

The 2024-25 Healthy Minds Study found that 52% of students reported high levels of loneliness, but only 37% received therapy or counseling that year.

"You're going to heal," Harper said. "You're going to get better. In the moment, you don't see a way to get out, but you have to keep telling yourself that it's like any other issue: it will be over."

OU students and faculty can receive individual or group counseling, assessments and crisis services at the University Counseling Center, or get connected to licensed mental health counselors any time of the day on TimelyCare. The counseling center also has a Behavior Intervention Team (BIT), which provides intervention and support. If you're worried about a student and think they need support, reach out to the BIT program on their behalf.

"They just need one connection with one person to feel a sense of connection to campus," Miller said. "That's why so much of what we do is to help students connect socially, because that connection is also a piece of the unhappiness that drives some of the mental health stuff we see."

After medically withdrawing from OU twice and years of counseling, Harper finished her sophomore year, and is currently in her junior year. She is majoring in history of science, technology and medicine.

Though Harper's mental health journey may not be entirely over, she makes sure to take time for everything she has, whether it be research opportunities, an A on a test or crocheting with YouTube in the background, because those are the things that make life less hard.

"If I had to tell my younger self something, it would be that you are strong enough to deal with this," Harper said. "I know it feels like you aren't, but you have the strength inside of you to claw your way out of the hole. You have the strength to ask for help, and you have the strength to keep living. Life is worth living."

timelycare

'Support whenever they need'

App offers free counseling, resources for students

What is Timelycare?

TimelyCare Health & Well-being is a third-party app that offers free, 24/7/365 on-demand medical care, scheduled visits, emotional support and self-help resources. It is available for OU students across all three campuses and online. TimelyCare offers immediate crisis support and brief solution-based counseling, but is not a replacement for ongoing services at OU.

"We're trying to make it as easy as we can for students to know that they've got support whenever they need," OU University Counseling Center Director Dr. Scott Miller said. "TimelyCare is a great service for students."

How can students use Timelycare?

Students can download TimelyCare from the app store or access it on their Canvas dashboard. There is no need for insurance, and it is accessible across the nation. TimelyCare's "TalkNow" feature will connect students to a licensed counselor in around four minutes. Students get six sessions of scheduled counseling per year through the app.

'Drug addiction will take you further than you want to go, and keep you longer than you want to stay'

EVERY SECOND COUNTS

SPONSORED BY
OU HIGHER EDUCATION PREVENTION SERVICES

BY KRISTA FLEMING
KRISTA.B.FLEMING-1@OU.EDU

CONTENT WARNING: The following story contains mention of substance abuse and overdose.

"Are you drinking?" No.

"Are you doing drugs?" No.

As sick as it made him feel, this was something of a routine for Mongo Allen. For months, this was the conversation he'd have with his 16-year-old daughter, Yasa. But after Allen saw her report card — riddled with F's where there used to be A's — Yasa couldn't lie. She told him the truth: she had a substance use disorder.

"I died that day," said Allen, director of business development at Oakwood Springs, a behavioral health hospital and addiction treatment facility. "That day, I felt like my very being was dropped in a black hole, and my spirit was literally crushed. There are parts of me that are broken, but that will never be fixed."

According to the Mental Health and Well-Being Foundation, Oklahoma ranks second in the nation for the highest rate of substance use disorders (SUDs). According to the Oklahoma Department of Mental Health and Substance Abuse, the state ranks fourth in the number of adults with any recorded mental illnesses in the past year.

Since Allen works at Oakwood Springs, statistics like these weren't shocking, and both he and Yasa understood the danger of substance abuse.

"When they're 5, 6 and 7 years old, they're saying, 'I want to be a doctor, and I want to be an astronaut, and I want to be all these beautiful things,'" Allen said. "You're saying, 'Baby, you can be whatever you want to. I promise you, you're going to get there.' No parent ever dreams of their child being a drug addict."

For the decade following that day of confession, Yasa was taken to different treatment facilities, but avoided going in. Allen and his mother both kept a bag full of clothes at their homes, shoes and essentials ready to go if she decided to go into recovery.

Around midnight on a Friday in 2025, Allen got a call from his mother. The police found Yasa unresponsive.

For three days, a team of doctors in the hospital monitored Yasa to wait for changes. On Sunday, a doctor came out to say

HOW TO USE NARCAN

Narcan is a nasal spray used in the event of an opioid overdose, and it is crucial to know how to use it. Narcan will not harm someone if it is given when not needed. If you suspect an opioid overdose, check for the following symptoms: unconscious or unresponsive; slow or shallow breathing; discolored skin, nails or lips; small, pinpoint pupils that don't react to light; and limp body.

that it would be inhumane to keep her in this condition.

Allen got on his knees and prayed, saying "Thank you, Jesus, for my child."

Then he told the doctors to take her off the medications. Yasa passed away at 27 years old.

"Nothing in the world can prepare you," Allen said. "I watched that child be pulled from her mother's womb, and I had to watch my child leave this earth and die. That's what drug addiction does."

According to the Mental Health and Well-Being Foundation, there are an estimated 645 overdose deaths annually in Oklahoma.

"Drug addiction will take you further than you want to go, and keep you longer than you want to stay," Allen said.

College students

According to a National Survey on Drug Use and Health survey, young adults ages 18 to 25 report the highest past-year opioid use of all age groups. A 2009 study conducted by the National Library of Medicine found that nearly half of surveyed students met the criteria for at least one substance use disorder involving alcohol or marijuana during their first three years of college.



PHOTO PROVIDED BY MONGO ALLEN
Yasa Allen as a child. Her father, Mongo Allen, said the photo "gives a miniscule glimpse of how much she was loved and how happy she was in life." Yasa passed away at 27 years old.

The most common reasons for substance use and misuse among college students include coping mechanisms, academic performance, family history, a belief that it's part of the college experience, greek life, experimentation, availability and social reasons or pressures.

"Nobody dreams of having mental health issues when you're a kid," Allen said. "Nobody dreams of being an alcoholic or being hooked on meth. But what happens is, when you're going through that process from grade school to junior high, somebody's offered it to you."

Painkillers and opioids are some of the substances used most often by college students, along with psychedelic or hallucinogenic drugs, marijuana, stimulant medications, alcohol and cocaine. Oklahoma youth ranked third in the nation for past-month marijuana use in 2021-22, up from No. 43 in the nation in 2017-18. Medical marijuana became legal in Oklahoma in June 2018.

Stimulant drugs — often called "study drugs" — are widely shared among college students. A 2018 article estimated that 20% of college students abuse prescription stimulants for recreational or academic purposes, most often by obtaining the medications from peers.

"As a society, I think we need to go back a step and look at why these drugs are so accessible so easily to our community," said Amir Khan, CEO of Oakwood Springs. "Where are they coming from? Until that happens, we are here, and we try our best to do what we can."

Opioid epidemic

According to the Oklahoma Department of Mental Health and Substance Abuse Services, Oklahoma ranks as follows nationally: No. 5 in mental health workforce availability, No. 28 in overall access to care and overall ranking, No. 44 in both adult illicit drug dependence or abuse in the past year and adult major depressive episode in the past year, No. 14 in adults needing but not receiving treatment for illicit drug use in the past year and No. 45 in serious mental illness in the past year.

"People are starting to open their eyes a little bit more to this recognition, because whether we want to admit it or not, every single person in the state of Oklahoma is touched by substance use disorder in some way, shape or form," said Ricki Hoover, a therapist at the Virtue Center and licensed clinical social worker. "They've either struggled with it, or a family member, loved one or coworker has. It is everywhere."

The opioid epidemic has claimed more than half a million

CONTINUED ON PAGE 12

What role does mental health play in substance abuse disorders?

According to the Substance Abuse and Mental Health Services Administration, approximately

21.2 million

adults in the U.S. had a co-occurring mental illness and substance use disorder in 2024. People with mental illness are at a higher risk of developing an SUD compared to those without. In 2025,

63.8 million

adults perceived that they ever had a problem with their mental health.

If these symptoms are present, immediately administer Narcan by following these steps:

1. Lay the person on their back and tilt their head upward.
2. Insert the nozzle of the spray into either nostril and press down firmly on the plunger.
3. Call 911 immediately after giving the first dose. If the person does not respond or breathing problems return, administer another dose using a new nasal spray every two to three minutes.
4. Place the person on their side, stay with them and monitor their breathing until emergency responders arrive.



According to the Oklahoma Department of Mental Health and Substance Abuse Services, **Oklahoma ranks nationally:**

5th
in mental health workforce availability.

28th
in overall access to care and overall ranking.

14th
in adults needing but not receiving treatment for illicit drug use in the past year.

44th
in both adult illicit drug dependence or abuse in the past year and adult major depressive episode in the past year.

CONTINUED FROM PAGE 11

lives since being declared a public health emergency in 2017. Though opioid overdose deaths started declining in 2023, they still remain above pre-pandemic levels. The epidemic was initially driven by prescription opioids, but is currently dominated by illicit synthetic fentanyl.

For almost a decade, policy actions from both the first Trump administration and the Biden administration have focused on expanding access to opioid treatment and overdose prevention. Current laws, however, have shifted toward a heavier approach, specifically citing illicit fentanyl as a weapon of mass destruction.

"I think that we've made a lot of progress on the opioid epidemic, especially in the last three or four years," Hoover said. "It's still a problem, and I think that sometimes people forget that it is still a prominent problem."

Defining substance use disorder

A substance use disorder, or SUD, is characterized by the Substance Abuse and Mental Health Services Administration as an "impairment caused by the recurrent use of alcohol or other drugs (or both), such as health problems; disability; or failure to meet major responsibilities at work, school or home."

In 2025, 44.6 million people in the U.S. aged 12 or older had an SUD, including 25.7 million people who had an alcohol use disorder and 26 million who had a drug use disorder. About 7.1 million people had both.

"If substance use is not working for you, then perhaps it's time to find a different solution," said Brian Sabolich, operations manager for Into Action Sober Living. "If your solutions aren't working, then maybe it's time to listen to someone else's solutions."

A key way to recognize if you have an SUD is if recurrent substance use results in failure to fulfill major role obligations at work, school or home. However, these are not the only signs.

"It can be hard not only to admit when there's an issue, but to identify that there's an issue," Hoover said. "'I can't be an addict because I have a job. I have a family. I'm not homeless.' When in reality, it's causing a lot of problems."

'The worst flu in the world'

Withdrawal happens when one's body becomes physically dependent on a substance, and the body does the opposite to counteract whatever the substance does. When those substances are taken away, individuals can get sick.

For opioid dependencies, withdrawals are described as "the worst flu in the world." Early symptoms include: anxiety and restlessness, muscle aches, increased tearing, runny nose, excessive yawning, sweating and difficulty falling asleep. Escalated symptoms develop between hours 12–48, and can include: nausea and vomiting, diarrhea and abdominal cramping, dilated pupils, goosebumps, elevated heart rate and blood pressure, intense muscle and bone pain, severe insomnia, strong drug cravings and irritability.

Some individuals have a prolonged withdrawal phase, or post-acute withdrawal syndrome, that can last for weeks, months and, in some cases, over a year. These symptoms can include anxiety and panic attacks, depression, sleep disturbances including insomnia and vivid dreams, cognitive difficulties, mood swings and sensitivity to stress.

"It's very, very, very unpleasant," Hoover said. "People are so worried about getting this sickness because it's so miserable that they keep using just because they don't want to get sick."

Over-the-counter medications

The Drug Enforcement Administration found that six out of 10 fentanyl-laced counterfeit prescriptions contain a deadly dose. Hoover said most people with substance use disorders are aware of the potential of laced substances.

"If you're already struggling with this, you already feel hooked on this substance, that's scary to think about," Hoover said. "I think for most people, it's easier to ignore it to a degree, even though they know it's a risk."



PHOTO PROVIDED BY MONGO ALLEN

Mongo Allen posing for a photo. Allen is the founder of a 501(c)(3) nonprofit organization called the Five Smooth Stones Foundation and hosts a podcast dedicated to sharing recovery stories called "The Movement with Mongo."

Over-the-counter medications and prescriptions can be just as dangerous and addictive. Evidence suggests many Americans are overmedicated, with 15% of adults taking five or more medications. Approximately 48% of men and 60% of women in the U.S. will spend their lives taking prescription medications. A specific danger with prescriptions comes from sharing; 92% of misused stimulants are obtained from peers.

"It's not just about the dangers of overdose and the dangers using these things," said Noah Sweet, coordinator for education and outreach at the Office of Advocacy and Education at OU. "It's also 'hey, this medicine is prescribed to me, and it can also be used for recreational purposes, and therefore I want to keep it safe.'"

Getting help

Hoover says walking into a recovery facility can feel vulnerable and scary.

"People develop this disorder more often than not because they're trying to cope with life or trauma or mental health," Hoover said. "Over time, this thing that they use to cope has now become really problematic. To come in and say 'I want to take this thing away, and I know by saying this is a problem,' there's a chance people will look at me differently,' is very vulnerable."

Sabolich said recovery is about finding a spiritual condition that replaces the desire to use substances.

"People who have had substance use disorders have a lot of fear, guilt, shame and remorse that typically we want to escape from, and so we're in our heads a lot," Sabolich said. "Those are the things that are in our heads, and we're either resenting other people, or resenting ourselves, or acting out of selfishness and self-centeredness. The life based on that is not a very fulfilling life."

Sometimes, deciding to detox also means deciding to set boundaries and cut people out. Benjamin Lalli, chief nursing officer of Oakwood Springs, said it's a decision he sees people struggle with.

"The toughest thing for anybody coming into detox is having the mindset that you're doing this for yourself, no one else, and that you don't want to live this life anymore," Lalli said.

There are 164 substance use treatment facilities across Oklahoma, with many positioned near metropolitan areas like Oklahoma City, Tulsa, Norman, Broken Arrow, Edmond and Lawton. Among them, there are 138 outpatient, 32 residential/inpatient, 34 detox, 45 intensive outpatient and 29 long-term residential options.

Along with facilities, OK I'M READY is a resource provided by the Oklahoma Department of Mental Health and Substance Abuse Services for help with substance abuse and drug addiction. It provides free Narcan, a nasal spray that can help reverse and prevent opioid overdoses.

"The Oklahoma Department of Mental Health has done a good job of trying to push more services," Allen said. "If you want to see the community actually do well, you've

CONTINUED ON PAGE 15

What is Higher Education Prevention Services?

Exploring an on-campus initiative dedicated to recovery

A part of OU's Office of Advocacy and Education (OAE), Higher Education Prevention Services (HEPS) is an on-campus initiative implemented in 13 universities across the state funded by Oklahoma Mental Health and Substance Abuse Services and the Substance Abuse and Mental Health Services Administration (SAMHSA). It provides prevention education and resources across the following topics:

- Opioid and stimulant misuse prevention
- Overdose prevention
- Substance use disorder prevention
- Suicide prevention

OU HEPS is a coalition-based campus initiative where students, staff, faculty and community stakeholders come together to propose and plan new strategies to help prevent opioid and stimulant misuse. The group also collaborates with other members of HEPS from various colleges in Oklahoma.

"We can learn from each other to then help bolster our own communities, which will impact the state of Oklahoma as a whole," said Noah Sweet, OAE's coordinator for education and outreach. "Every student, every faculty and every staff member whom we talk to can also take that information into their own personal lives off campus."

To join, email the Office of Advocacy and Education at oae@ou.edu.

Programming and resources

HEPS programming includes prescription medication take-backs and handing out lockboxes and medication disposal pouches.

Through OAE, students may attend trainings to learn more about prevention across four areas: gender-based violence prevention, substance misuse prevention, hazing prevention, and general wellness & sexual health. Request a training from OAE on its website; sessions range from 30 minutes to three hours and can be either peer-led or professional.

Follow @oae4ou on Instagram for videos and posts relating to recovery, prevention and education.

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*** U.S. Centers for Disease Control and Prevention**

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OU Higher Education Prevention Services is a grant funded by the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) Prevention Division and the Substance Abuse and Mental Health Services Administration (SAMHSA).

CONTINUED FROM PAGE 13

got to have a system like that constantly pushing for that to happen."

On campus, students can find help through the Office of Advocacy and Education, and join community groups like Students in Recovery.

"A big part of recovery is rebuilding a relationship with yourself and becoming somebody that you enjoy being," Students in Recovery president Grant Edwards said. "A big part of being able to do that is helping people who are on their earlier stages of that kind of journey."

Treatment

When seeking help, patients often go through three steps: initial assessment; medical detoxification, which typically lasts three to 10 days; and therapeutic treatment. In addition, there are 38 sober living houses in Oklahoma City.

"We try to be very intentional about making people feel welcome at our treatment center," Hoover said. "We do not want anyone to come in here and feel judged. We really just want to know how we can help you."

SUDs are not a one-size-fits-all approach. Treatment plans are structured by levels of care and pertain to the patient's condition. Outpatient care is the most independent, allowing patients to go to appointments and leave the same day. Inpatient programs, by contrast, have patients stay at the hospital or treatment program overnight for a few days or weeks. Residential care consists of patients living at the program for additional support or extended treatment.

In addition, there are also different peer recovery support groups through recovery facilities, on campus and various Oklahoma communities.

"Having a space where people dealing with similar struggles can come together and normalize is a wonderful thing," Hoover said. "I see a lot of empathy in those spaces, and I see a lot of encouragement in those spaces."

> "We try to be very intentional about making people feel welcome at our treatment center. We do not want anyone to come in here and feel judged. We just want to know how we can help you."
>
> **RICKI HOOVER, THERAPIST AT THE VIRTUE CENTER**

When Yasa first admitted she had an SUD, Allen said he made a deal with God to treat the people who walked through the door to recovery like his own child, because he was hoping she would walk through next. He said, despite the loss of his child, he still believes Jesus Christ is his savior.

"Healing is possible. It's real. I've seen hundreds and thousands of people get healed," Allen said. "You just have to believe it and want it. If you're ready to believe it and want it, then make the call. Today, you can get help."

If you think you may have a substance use disorder, help is available. Contact recovery facilities near you to discuss treatment options. You can call 988, the nationwide phone number that connects to the Suicide & Crisis Lifeline for individual crises related to mental health struggles, emotional distress and substance use.

REEL THERAPY

Five movies that discuss mental health



Everyone has their go-to type of media for when they need a good cry, whether it be shouting a song at the top of their lungs or rereading the same book series for the fifth time. For some, it's movies that hit that sweet spot of cinematic masterpiece and a deeply personal message. Here are five movies that discuss different aspects of mental health:

"Beautiful Boy" (2018)

With a star-studded cast including Timothée Chalamet as Nic Sheff and Steve Carell as his father, David Sheff, it's no wonder "Beautiful Boy" took home multiple award nominations. It shows the cyclical nature of substance use disorder as Nic struggles with an addiction to meth, and the destructive path it weaves through the whole family. This film is a masterclass on the relationship between substance abuse and familial love, shown through subtle acting and beautiful writing that's enough to make anyone cry.

"Good Will Hunting" (1997)

The breakout movie for Matt Damon and Ben Affleck as both writers and actors, "Good Will Hunting" was an instant classic backed by strong box office results and Academy Award wins. The film follows Will Hunting, a genius who works as a janitor until his talents are discovered by Professor Gerald Labeau, played by Stellan Skarsgård, who sends him to therapist Sean Maguire, played by Robin Williams. Will has to learn to move on from his past and allow himself to be vulnerable if he's going to pursue a fulfilling life.

"Thunderbolts*" (2025)

"Thunderbolts*" follows the new Avengers as they discover what being a team really means, through a lot of bickering and near-death experiences. It explores what happens when powers fall into the hands of those battling mental health issues, and what it means to be "okay" in a world always demanding more. "Thunderbolts*" is perfect for anyone dealing with feelings of isolation and self-loathing, showing that sometimes it isn't the cape that makes someone a hero.

"The Perks of Being a Wallflower" (2012)

Based on the No. 1 New York Times bestseller, "The Perks of Being a Wallflower" is a coming-of-age film designed to hurt and heal. The film follows Charlie, a shy freshman dealing with his best friend's suicide as he's taken under the wing of two senior students who teach him about the complex relationship between love, depression and friendship. He's forced to confront his troubled past in a cinematic end that teaches the audience there's always light at the end of the tunnel, no matter how dark it gets.

"The Sheep Detectives" (2026)

"The Sheep Detectives" is a surprise hit perfect for the whole family, following a flock of sheep trying to solve their shepherd's mysterious death. This old-fashioned mystery has a talented cast that brings the flock to life, examining the roles that love, memory and growing up play in grief. Though it has an undeniable absurdity, "The Sheep Detectives" has an infectious charm designed to make it a classic for children and adults alike.



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YOUR GUIDE TO LOCAL RESOURCES SERVING NORMAN AND SURROUNDING COMMUNITIES

UNIVERSITY COUNSELING CENTER

620 ELM AVE., ROOM 201
OU.EDU/UCC | 405-325-2911

Located in Goddard Health Center, UCC provides mental health counseling, substance abuse support, crisis intervention and psychiatric services. It also partners with TimelyCare, connecting students to help 24/7. It serves eligible OU Norman students, faculty and staff.

NORMAN BEHAVIORAL HEALTH

712 WALL ST.
NORMANBEHAVIORALHEALTHGROUP.COM | 405-579-7560

Norman Behavioral Health provides counseling and behavioral health services addressing stress, anxiety, grief, relationship concerns and other mental health needs. It serves children, adolescents, adults, couples and families.

PEAK BEHAVIORAL HEALTH

2405 PALMER CIRCLE, SUITE 100
PEAKBH.ORG/NORMAN | 405-561-7928

Peak Behavioral Health offers behavioral and developmental services, including applied behavior analysis, speech therapy, counseling and specialized support. It serves children, adolescents and adults, depending on the service.

THE VIRTUE CENTER

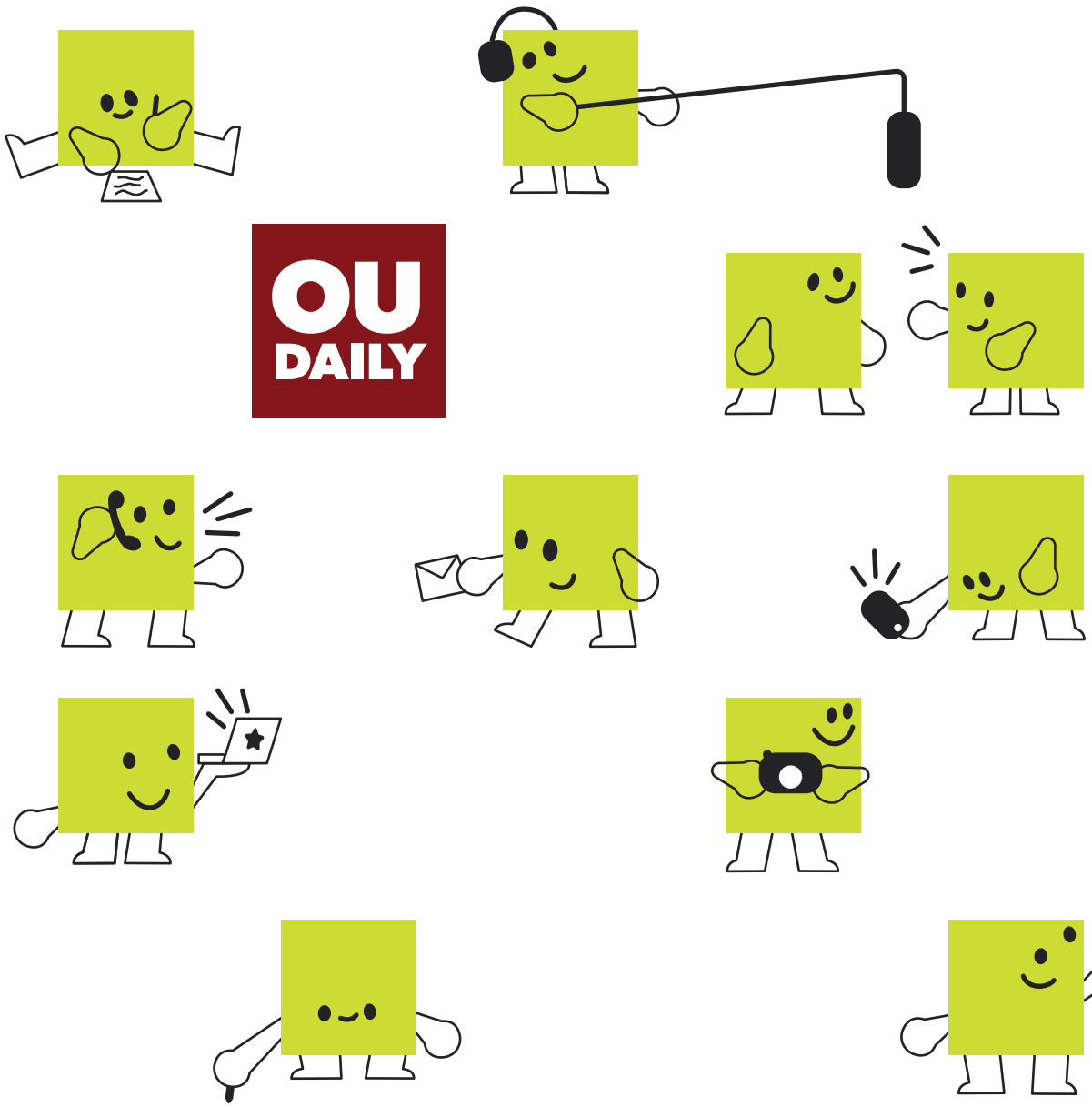
2457 WILCOX DRIVE
THEVIRTUECENTER.ORG | 405-321-0022

The Virtue Center provides substance use treatment, recovery support, prevention education and overdose prevention resources, including naloxone training. It serves adolescents, adults and families seeking mental health or substance use services.

Scan for additional mental health and substance abuse prevention help.

OU Higher Education Prevention Services is a grant funded by the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) Prevention Division and the Substance Abuse and Mental Health Services Administration (SAMHSA).

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PHOTO PROVIDED BY MANDY MALLORY
OU alum Mandy Mallory is a Licensed Counselor and Social Worker spearheading Teaming with Life Counseling. Find more information at teamingwithlife.org.

'Find a place where you're safe'

SPONSORED BY TEAMING WITH LIFE COUNSELING
BY ABIGAIL KALLNER • ABIGAIL.N.KALLNER-1@OU.EDU

Meet the OU alum spearheading Teaming With Life Counseling in Norman. Licensed Counselor and Social Worker Mandy Mallory finds joy in meeting with local students and residents to help them traverse the tricky paths of life.

"My favorite part is definitely seeing growth," Mallory said. "I get to see those lightbulbs, like when someone comes back and says, 'I tried this different thing, and now I understand.'"

Mallory has worked with people in the prison system, survivors of domestic violence and victims of emotionally abusive relationships. She also worked with former colleague Ryan Fowler at Oklahoma Department of Mental Health and Substance Abuse Services around 2015.

"She does understand it's not one size fits all with mental health," Fowler said. "I think that's important. So what works for you may not work for me, and vice versa."

Dr. Patrick Ellis, an integrative psychiatrist working in telehealth, has referred patients to Mallory. He said her ability to form relationships with her clients is what stands out.

"The most critical thing about quality therapy or counseling is the client-therapist relationship," Ellis said. "There has to be a sense that 'my therapist is compassionate, caring and really is someone that I can trust and open up to.' With Mandy, it's very clear very quickly upon meeting her how kind she is."

Mallory has counseled parents, spouses and teens each going through their own healing and growth journeys.

"The thing about someone like Mandy is that she's good in so many areas with her extra training and extra expertise," Ellis said. "I've always gotten such good feedback from people about their experiences."

Mallory said her father was a big role model in her life and career journey. He passed away when she was 16.

"He was just a very patient, very kind person," Mallory said. "He was always understanding of others and very much encouraged me to find my path and to be able to take care of myself and depend on myself. That really shaped me when I started facing hard things."

Teaming With Life Counseling strives to meet patients exactly where they are and create a safe space for sharing, healing and reflection.

"Let me help you find a place where you're safe and understand this isn't your fault," Mallory said. "You can move on and you can heal."

For more information about Teaming With Life Counseling, visit teamingwithlife.org or email mandy.m@teamingwithlife.org.



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FILE/OU DAILY

Glow Kitchen is located in Cross Village and has healthy options like smoothies and wraps.



FILE/OU DAILY

Baja Fresh Express, located in the Oklahoma Memorial Union, uses fresh ingredients and provides a balanced meal.

HEALTHY EATING

5 options for balanced meals on campus

BY ABIGAIL KALLNER • ABIGAIL.N.KALLNER-1@OU.EDU

Balance and variety is key to eating healthy, according to Leah McKee, OU Housing and Food Services' marketing and communications coordinator. Due to everyone's unique needs, "healthy" can look different for everyone.

"Rather than labeling foods as 'good' or 'bad,' students can focus on balance, variety and making choices that meet their individual needs," McKee wrote in an email to the OU Daily. "All foods can fit into a balanced diet, but students should be mindful that some foods should not routinely displace others that provide important nutrients."

She added that when choosing meals on campus, the goal should be finding options that help you feel fueled and supported throughout the day. Below are a few healthy options that take meal points:

Baja Fresh Express
Oklahoma Memorial Union

Baja Fresh Express offers Mexican food, including burritos, tacos and salads. It serves everything fresh – no canned or microwaved foods. Its menu is full of vitamins, protein and hand-chopped produce and greens.



FILE/OU DAILY

The Couch Cafeteria offers a variety of cuisines.

Glow Kitchen
Cross Village

Glow Kitchen offers sandwiches, wraps, smoothies and acai bowls. Grilled chicken, black beans, rice and leafy greens are nutritious choices for your sandwiches and wraps. The smoothies promote healthy digestion and can provide a quick energy boost from natural sugars.

Chick-fil-A
Oklahoma Memorial Union

Looking for a healthier option at Chick-fil-A? Substitute the fried chicken for the grilled chicken. Instead of fries, try the waffle potato chips, which contain less calories. The kale crunch salad and fruit cups are also great side alternatives.

Couch Restaurants
Adjacent to Couch Center

Keep an eye out for healthy proteins such as the lemon pepper trout and cajun baked salmon, which contain omega-3 fatty acids, beneficial for heart health. Fill your plate with fruits and vegetables paired with some fiber or grain like rice or pasta. Don't forget to take advantage of the Athens Cafe. The Mediterranean diet is ranked among the best diets in the world for longevity and heart health.

Dining halls
Dunham, Headington and Wagner

Headington, Dunham and Wagner dining halls serve a wide range of diet-friendly foods, including vegan options like barbecue tofu. Vegan or have a dairy allergy? There is vegan mac-n-cheese, lasagna, shepherd's pie and flautas.

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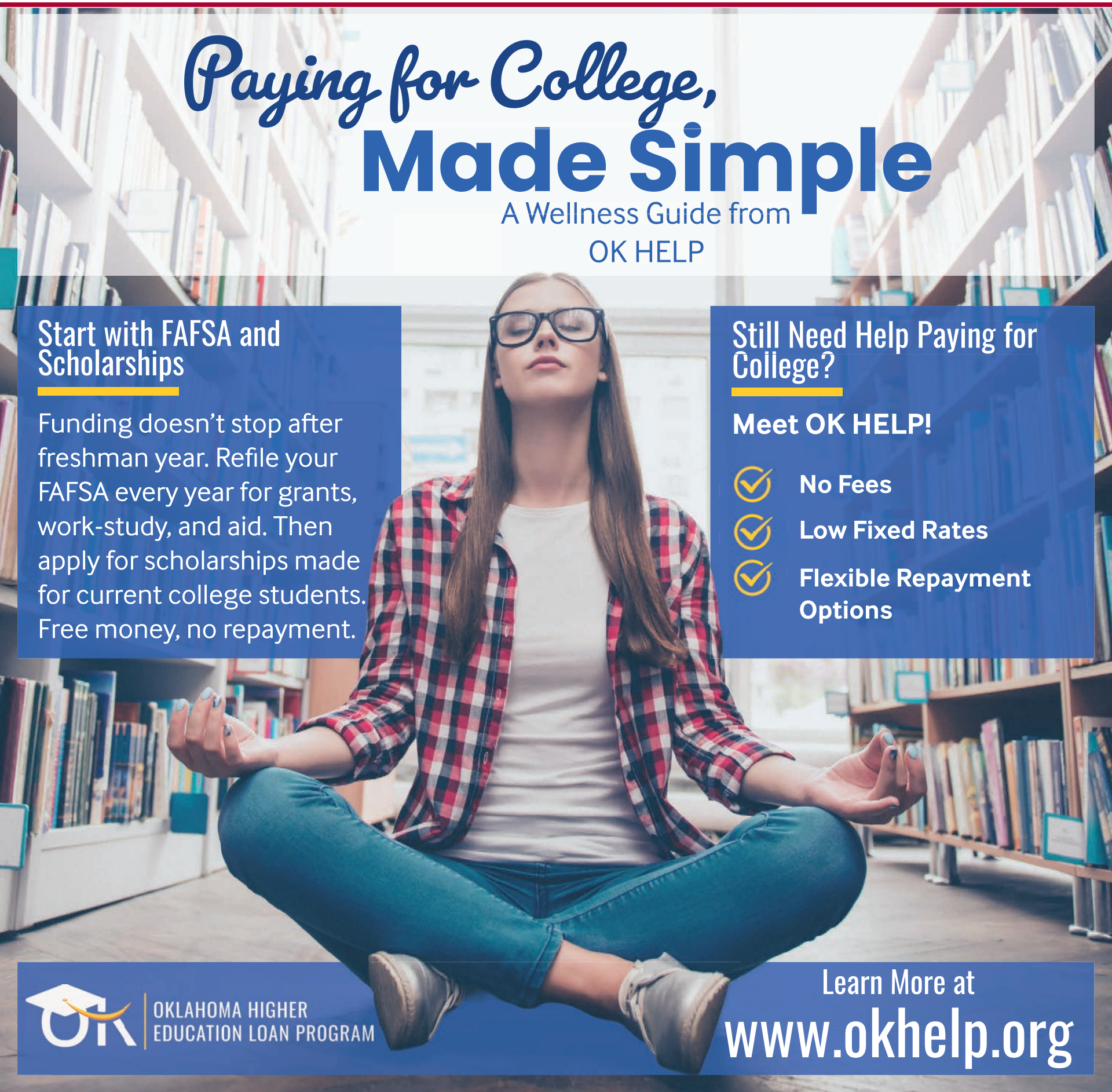


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