



**SAAC HEALTH AND WELLNESS SUBCOMMITTEE
PRACTICE RECOMMENDATIONS, JULY 2009
(UPDATED APRIL 2010)**

This subcommittee of the Student Affairs Action Coalition (SAAC) was charged with reviewing health and wellness related data, define priorities, and make practice recommendations. The initial subcommittee met during 2008-2009. An additional subcommittee met during Spring Semester 2010.

This report includes names of committee members, data reviewed, indentified priorities (mental health, social health, and behavioral manifestations), key findings, programming recommendations, and connections.

Recommendations are applied to all priorities because of the interconnectedness of the defined health and wellness priorities.

COMMITTEE MEMBERS 2008-2009:

- Rachel Crane Student Health Services
- Megan DuBois Campus Wellness Connection, Sub-committee Chair
- Glade Ellingson Counseling Center
- Rob Jones Campus Recreation
- Lori McDonald Dean of Students Office
- Bridgett Peterson Student Health Advisory Committee
- Stephanie Piani Center for Disability Services
- Riddhi Sandi Counseling Center
- Angie Shewan Housing & Residential Education

COMMITTEE MEMBERS 2010:

- Megan DuBois Center for Student Wellness, Sub-committee Chair
- Delea 'Allcor' Meeker Housing & Residential Education
- Elizabeth Craig Center for Student Wellness
- Rob Davies Counseling Center
- Rob Jones Campus Recreation
- Brad Linn Center for Student Wellness
- Lori McDonald Dean of Students Office
- Stephanie Piani Center for Disability Services
- Mark Pontious Orientation/Leadership Development

Attachments:

- Highlight Summary- data reviewed
- Diagrams of emerging themes- based on data reviewed

DATA REVIEWED:

- Annual Reports:
 - Campus Recreation
 - Center for Disability Services
 - University Counseling Center
- Departmental Data
 - Student Health Center

- **Utah Higher Education Health Behavior Survey**

The Utah Higher Education Health Behavior Survey is a biennial statewide survey of college students conducted in 2003, 2005, and 2007. The surveys were conducted by the Utah Division of Substance Abuse and Mental Health (DSAMH). The 2003 administration gathered information from 4,658 participants at nine Utah Public colleges (College of Eastern Utah, Dixie State College, Salt Lake Community College, Snow College, Southern Utah University, University of Utah, Utah State University, Utah Valley State College, and Weber State University). The 2005 survey was completed by a total of 11,828 students attending the nine public college, as well as Westminster College. In 2007, the survey was completed by 10,186 students from nine public colleges. The sample included 1,512 University of Utah students.

- **National College Health Assessment**

The National College Health Assessment is a research effort organized by the nonprofit American College Health Association (ACHA) to assist health service providers, faculty, researchers, and student affairs professionals in collecting data about the health of college students.

Students answer questions about their habits, behaviors, and perceptions on the most prevalent health topics of the day: alcohol, tobacco, and other drug use; mental and physical health; weight, nutrition, and exercise; personal safety and violence; sexual health; and impediments to academic performance.

The University of Utah participated in the NCHA in 2002, 2004, 2006, and 2009.

- **Profile of the American College Student Survey**

The Profile of Today's College Student (PTCS), developed by NASPA and StudentVoice, was administered at the University of Utah in Spring 2008 to a random sample of undergraduate students. A total of 1197 students responded, which represents a 15% response rate. The survey is comprised of ten different sections. All participants completed the demographics section and were randomly assigned to three of the nine subject sections. Thus, number of responses on items can vary throughout the survey.

Demographics: Of the respondents, 51% were female, 49% were male. Seventy-eight percent of the students identified as White/Caucasian, 7% as Asian/Pacific Islander, 5% Latino, and 3% multiracial/ethnic. Less than 1% identified as Black/African-American, American Indian/Native American and 5% of the sample preferred not to identify. Of the sample, 78% were full-time and 39% were transfer students. The sample was fairly evenly distributed across class standing. The top five majors in the sample were Social Sciences (16%), Business (15%), Health Sciences (15%), Engineering (10%) and Humanities/Liberal Arts (10%). Seventeen percent of the sample indicated that they live on campus. Fifty-six percent are single, 41% married/partnered and 15% of the sample have children.

1. Mental Health

Key Findings: Depression

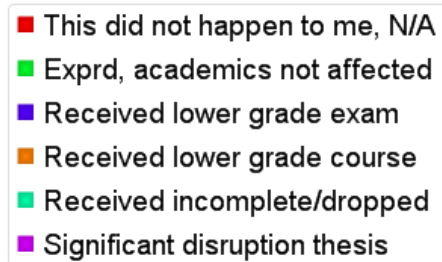
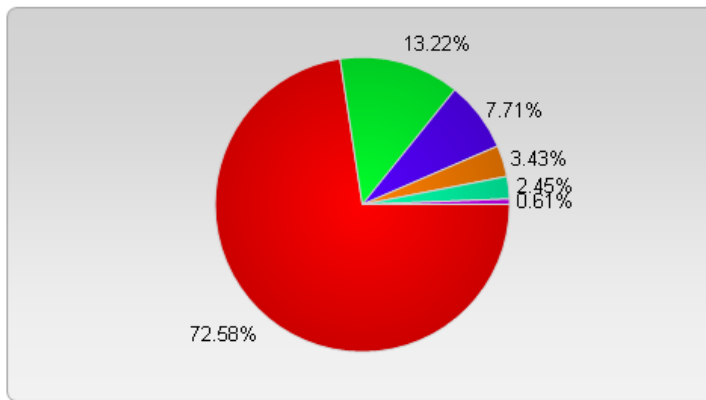
Utah Higher Education Health Behavior Survey (2007):

- University of Utah: 34.1% of females 25.5% of males need mental health treatment
 - (State=32.7% of females & 25.1% of males)

NCHA Survey (2009):

- Top 10 Academic Impacts – Depression is #6 (2009).

Q264. Within the last 12 months, have any of the following affected your academic performance: - Depression

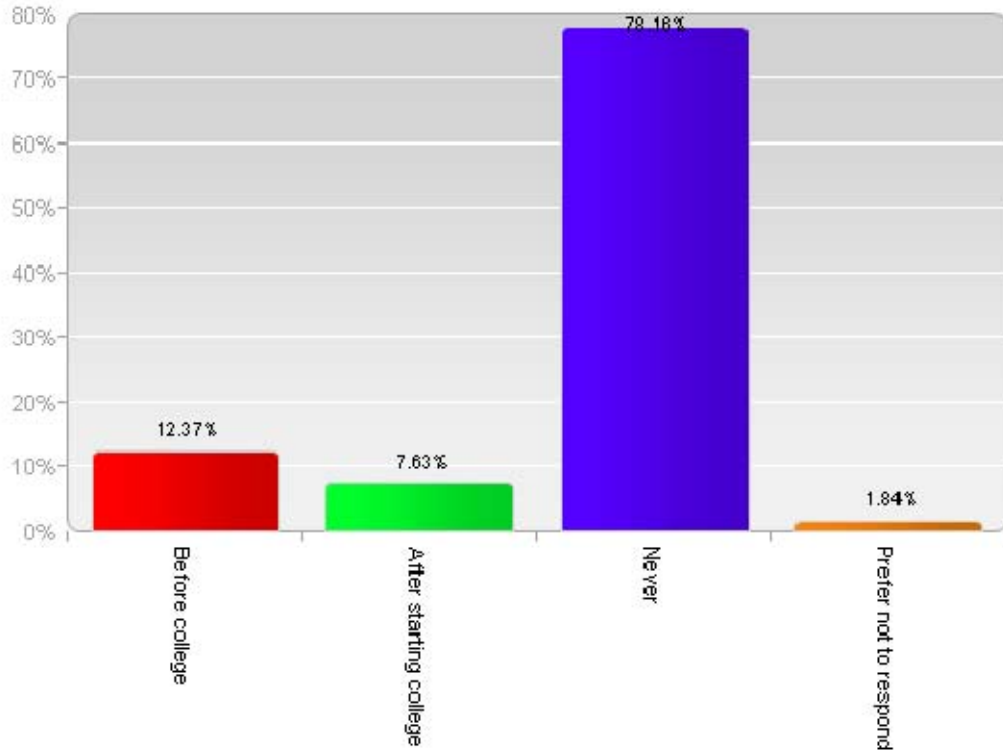


- 21.8% of students have been diagnosed with depression. Of those:
 - 9% have been diagnosed within the last year but have not received any treatment
 - 19.1% are currently in therapy for depression
 - 32% are currently taking medication for depression

Profile of the American College Student (2008):

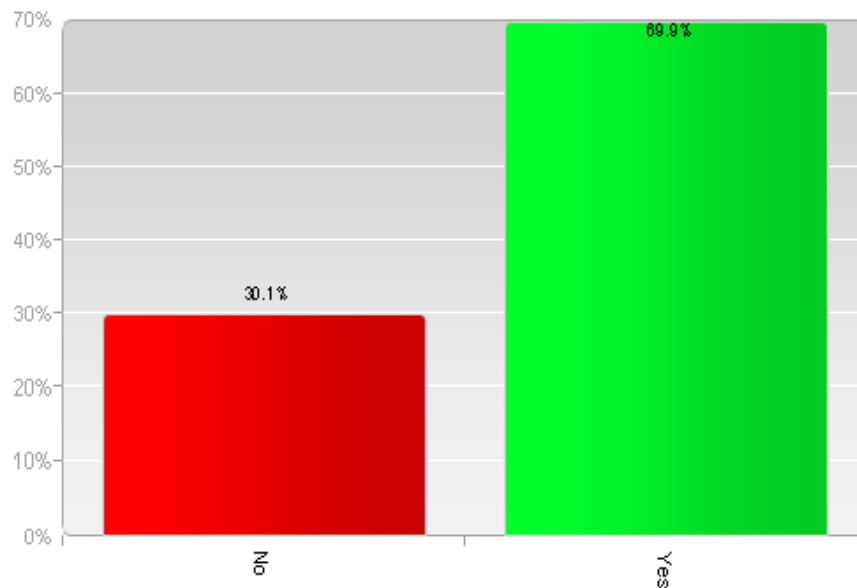
- 20% of students have been diagnosed or treated for depression

Q99. Have you ever been diagnosed or treated by a health care professional with any of the following? - Depression



- 27.03% of students report having experienced depression within the past 12 months
 - 70% of these students report that depression has affected their academic performance

Q134 Have any of the below negatively affected your academic performance in college (e.g., received lower grade on an exam/paper/project, received a lower grade in the course, received an incomplete or dropped the course)? - Depression



Student Health Center (2008):

- 163 depression-related diagnoses
- Ranks #7 among top 15 diagnoses

University Counseling Center (2008):

- Ranks #1 among self-reported presenting concerns: 61.8% of UCC clients (multiple responses allowed)

NCHA (2009):

- 44.8% of student report that they are interested in receiving information on Depression

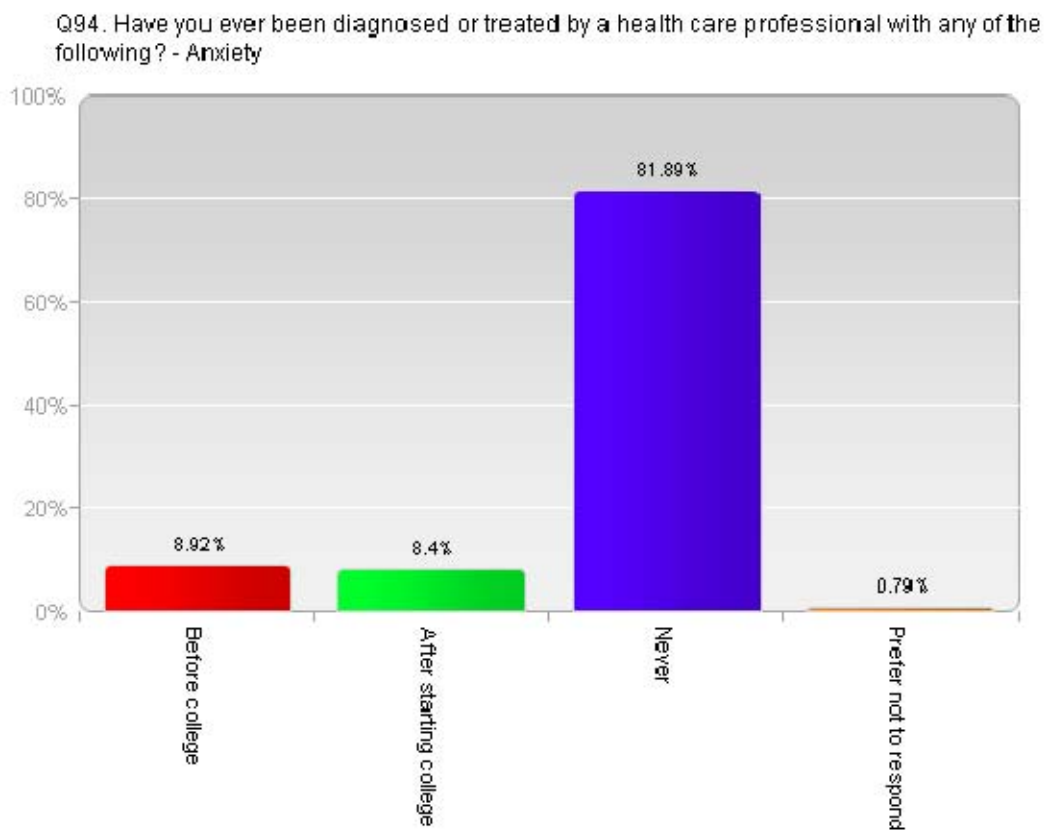
Key Findings: Anxiety

University Counseling Center (2008):

- Ranks #2 among self-reported presenting concerns: 56.9% of UCC clients (multiple responses allowed)

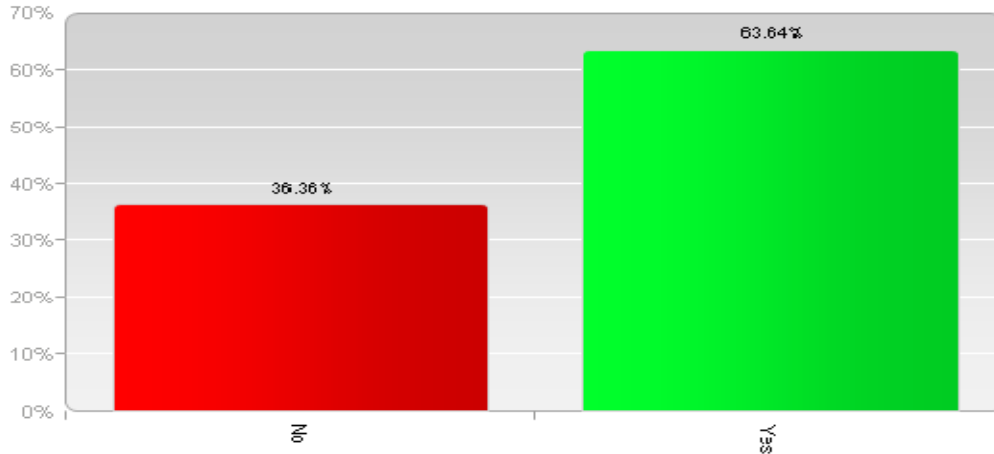
Profile of the American college student (2008):

- 17.32% of students have been diagnosed or treated for anxiety.



- 63.64% of these students report that anxiety has negatively affected their academic performance.

Q110. Have any of the below negatively affected your academic performance in college (e.g., received lower grade on an exam/paper/project, received a lower grade in the course, received an incomplete or dropped the course)? - Anxiety



NCHA (2009)

- 51.4% of students report having felt overwhelming anxiety in the past year.
 - 12.6% report having been diagnosed with anxiety.

NCHA (2009):

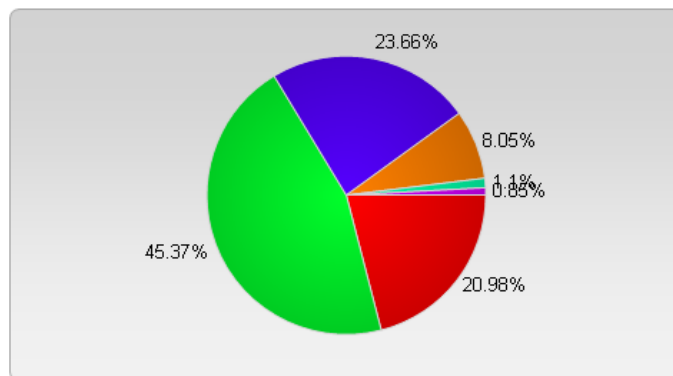
- 44.8% of student report that they are interested in receiving information on Anxiety

Key Findings: Stress

NCHA (2009):

- Top 10 Academic Impacts – Stress is #1

Q281. Within the last 12 months, have any of the following affected your academic performance: - Stress

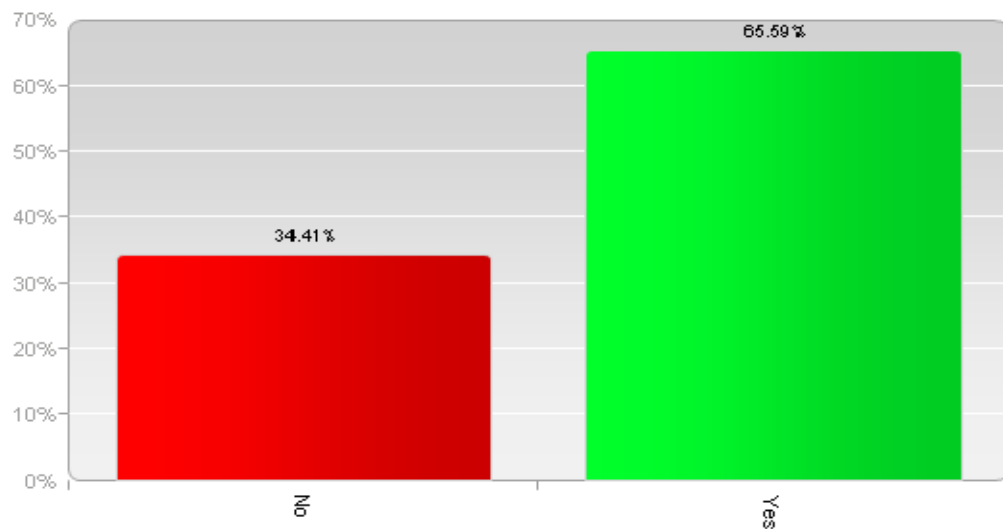


- This did not happen to me, N/A
- Received lower grade course
- Exprd, academics not affected
- Received incomplete/dropped
- Received lower grade exam
- Significant disruption thesis

Profile of the American College Student (2008)

- 74.02% of students report having experienced stress within the past 12 months
- 65.59% of these students report that stress has negatively affected their academic performance

Q144. Have any of the below negatively affected your academic performance in college (e.g., received lower grade on an exam/paper/project, received a lower grade in the course, received an incomplete or dropped the course)? - Stress



University Counseling Center (2008):

- Ranks #3 among self-reported presenting concerns: 51.3% of UCC clients (multiple responses allowed)

Other Key Findings:

Center for Disability Services (2008)

- Students with psychological disabilities is the largest population (28.5%) that the CDS accommodates. The CDS accommodated 244 students in 2003-04; 347 students in 2007-08. It is an increase of 42.21% in 5 years. Last year, the change was 23.05%.

2. Social Health

Key Findings: Relationships/Loneliness

University Counseling Center (2008):

- 5 of the top 10 presenting concerns of UCC clients are related to relationship/loneliness issues (multiple responses allowed):
 - Relationship with partner: 37.9%
 - Loneliness: 33.5%
 - Social Anxiety: 22.2%
 - Family I Grew Up In: 19.7%
 - Relationships with Friends: 19.0%

3. Behavioral Manifestations

Key Findings: Suicidality/crisis

Utah Higher Education Health Behavior Survey (2007) – University of Utah:

- 11.8% have seriously considered attempting suicide in the past year (State=10.7%)
- 1.3% have actually attempted suicide in the past year (State= 1.5%)

NCHA (2006):

- 95.41% of students have never received any suicide prevention information from the U

NCHA (2009):

- 52.9% of student report that they are interested in receiving information on how to help others in distress

Counseling Center (2008)

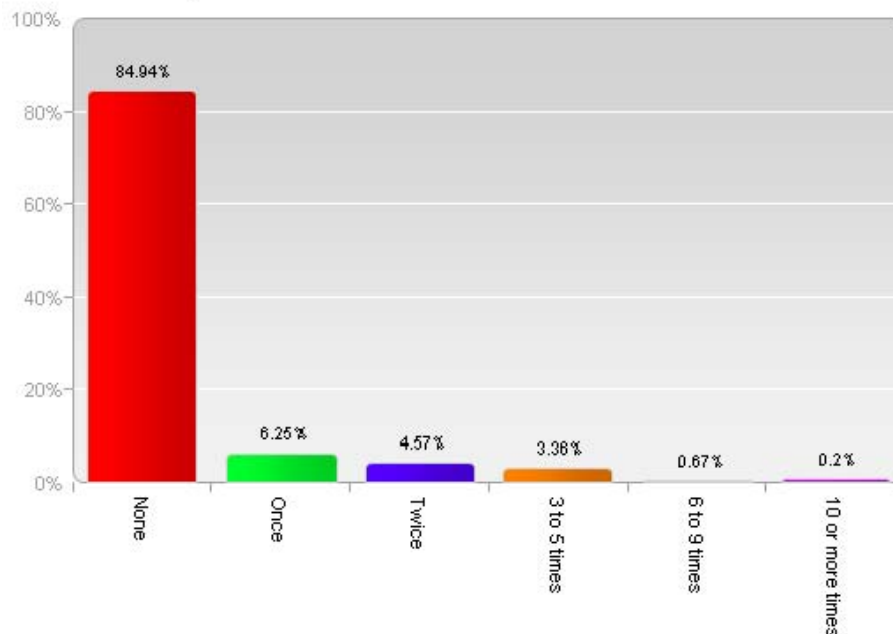
- Last year, UCC logged 183 crisis sessions, up 40% from the previous year. (These are typically urgent same day or walk-in sessions.)

Key Findings: Alcohol and Drug Use

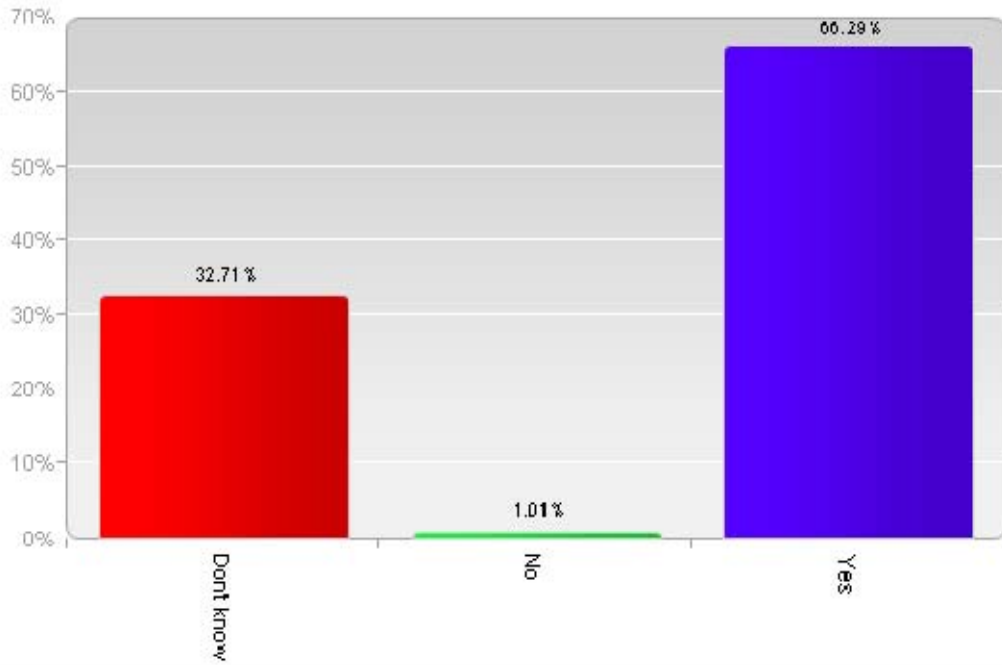
Utah Higher Education Health Behavior Survey (2007) – University of Utah:

- Overall, the rates of alcohol, tobacco, and other drug (ATOD) use for Utah students are much lower than for students nationally.
- For most substances, Utah students use at rates that are ½ to ¼ the national rates.
- 9.9% need alcohol or drug treatment (State=7.3%)
- 15.1% had 5+ drinks in one sitting in the past 2 weeks (State=10.9%)

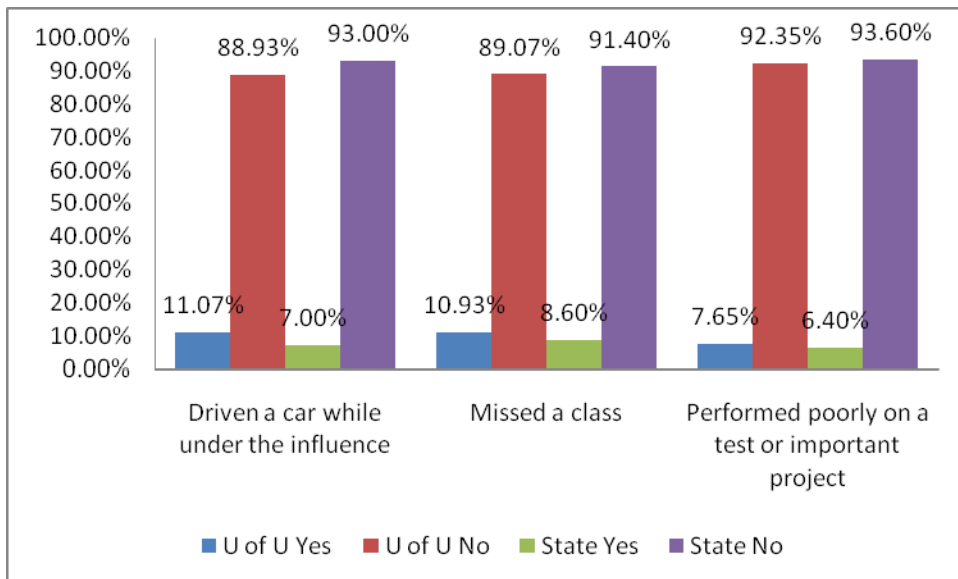
Q30. Think back over the last two weeks. How many times have you had five or more alcoholic drinks at a sitting?



Q20. Answer the following questions. - Does your campus have alcohol and drug policies?



Have you experienced the following due to your drinking or drug use during the last year?



Key Findings: Sleep

Student Health Center (2008)

- 5th most frequent diagnosis: Fatigue

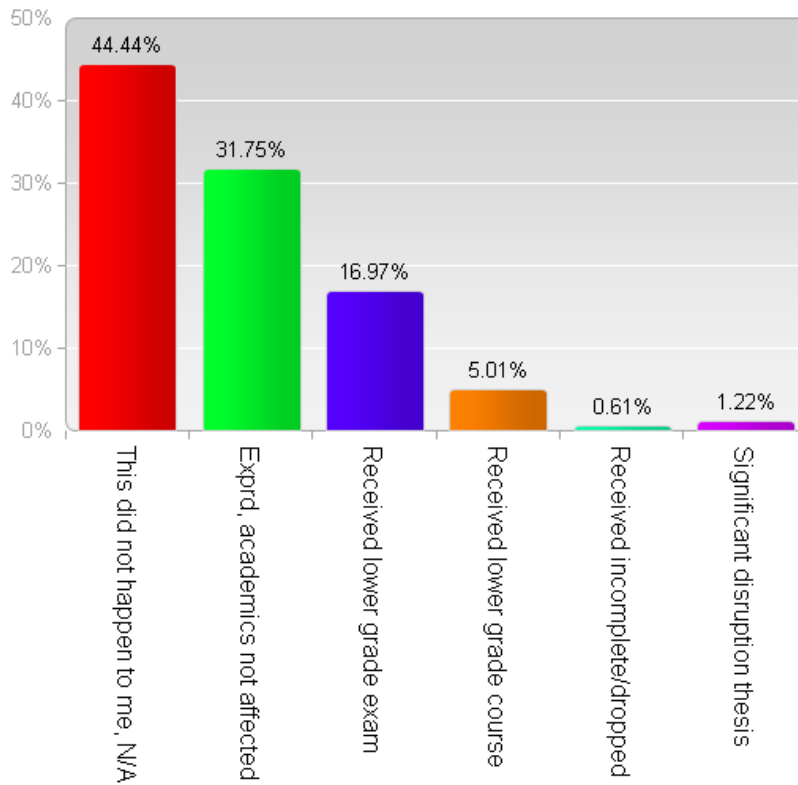
NCHA (2009):

- 52.6% of student report that they are interested in receiving information on Sleep Difficulties

NCHA (2009):

- Top 10 Academic Impacts – Sleep Difficulties are #2 (below diagram changed to 2009 data)

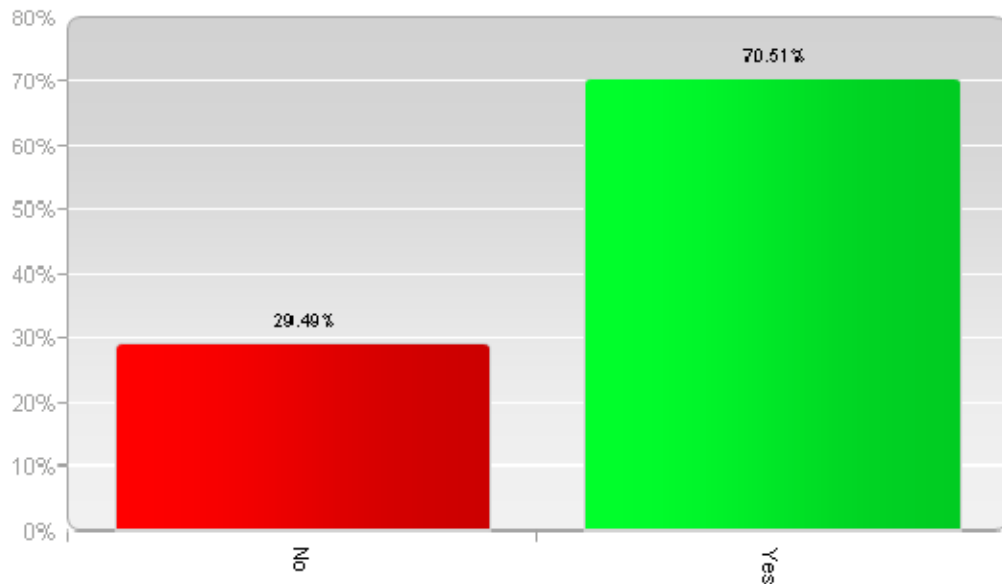
Q280. Within the last 12 months, have any of the following affected your academic performance: - Sleep difficulties



Profile of the American College Student (2008):

- 41.99% of students report having experienced sleep difficulties within the past 12 months
 - 70.51% of these students report that sleep difficulties have negatively affected their academic performance

Q143. Have any of the below negatively affected your academic performance in college (e.g., received lower grade on an exam/paper/project, received a lower grade in the course, received an incomplete or dropped the course)? - Sleep difficulties



Key Findings: Other

NCHA (2009):

- 56.6% of students report that they are interested in receiving information on Physical Activity
- 58.7% of students report that they are interested in receiving information on Nutrition
- The 2009 version of the NCHA added additional questions on the academic impact of anxiety, work, and finances. All three made the list of Top 10 Academic Impacts.

General Recommendations:

Initial recommendations (from 2009) are in purple.

Additional recommendations and strategies (from 2010) are in blue.

1. **Communication:**
 - Share key areas and findings with Student Affairs directors.
 - Increase staff awareness of the top 10 academic impacts for students (NCHA data). Clearly make the connection between academic success/retention to health and wellness related impacts. **Strategies:** create and distribute posters on top 10 academic impacts; include information in FYI Publication.
 - Provide additional staff/student training on available resources within the division. Increase probability of students being aware and accessing resources. Help staff understand their role as gatekeeper. **Strategies:** create & distribute a grid offering solutions for concerns related to students; create and distribute posters, stickers, or magnets for staff displaying information on where to access resources.

- Increase awareness of student lead initiatives and awareness of how to support them and be more of a resource to students.
- Create ways for SA staff to meet face to face; recognize how spread out SA offices are and how that impacts how we communicate.
- Create a standardized informational paragraph, related to health services on campus, available to all faculty members and encourage them to include it on their syllabi. This would increase awareness of available health resources on campus. **Strategies: Propose to SALT and the Student Commission; take a top down approach vs. approaching academic chairs and professors individually.**
- Create a short professional video articulating how health & wellness impacts students, the role Student Affairs plays, and available resources. Again, connecting health and wellness and success at the University of Utah. **Target audience: students. Show in classes, orientations, student events, etc.**

2. Programming:

- Continue to support, nurture, and value programming that fosters **protective factors**. The following factors impact all priorities identified by reviewed data:
 - Social engagement
 - Social support (family, friends, ethnicity, spirituality/religion, community)
 - Physical Activity/Proper Eating Patterns
 - Access to Resources
 - Financial stability/financial planning
 - Safety on campus
 - Volunteerism
- **Funnel resources into topic areas that students are most interested in: depression, anxiety, how to help someone in distress, physical activity, nutrition, & sleep.**
- Promote the use of effective coping strategies among students and Student Affairs staff.
- Create social-norming campaigns within student affairs to normalize help-seeking behaviors (continued research on the effectiveness of social-norming campaigns).

3. Further Research:

- Information flow within SA: track students ' usage rates of resources and rates of certain behaviors
 - U-Card information related to Campus Recreation's utilization rates and relationship between physical activity among our students and the priorities identified by reviewed data.
 - Conduct system
 - Behavioral Intervention Team
 - Sanctions (HRE, Deans Office, CWC)
- Explore the impacts of technology on social engagement and social support.
- **Examine where students currently receive health information and how they want to receive this information.**

Connections:

- Behavioral Intervention Team
- Campus Recreation
- Campus Wellness Connection
- Counseling Center
- Dean of Students Office
- Disability Services
- Housing& Residential Education
- Public Safety
- SA Assessment, Evaluation, & Research
- Student Groups
- Student Health Advisory Committee
- Student Health Services
- Student Systems

Attachment: Highlights from Data Reviewed

Meeting: March 31, 2009

Office Health Promotion/ SHAC	NCHA (2006)	Higher Ed Health Behavior Survey	Profile of the American College Student	Student Health Center	University Counseling Center	Center for Disability Services	Housing
Mental Health-major concern identified by OHP	Top 10 academic impacts:	ATOD rates are much lower in Utah than nationally	Anxiety –major issue	Top Dx:	Depression	Increase in ADHD	Alcohol
Depression-major concern identified by OHP	1-Stress	For most substances, Utah rates are ½ to ¼	Depression-major issue	URI	Anxiety	Increase in Psychological Concerns	Increase in:
Suicide- major concern identified by OHP	2-Sleep	Need for mental health tx	Sleep- major issue	Pharyngitis	Stress	Increase in Medical (Chronic)	Students in Crisis
Stress- major concern identified by OHP	3-Cold, flu, and sore throat	Suicide ideation & attempts	Parent/Family Relationships & Communication (students are talking to their parents frequently)	Skin Lesion	Self-Esteem	Increase in total of number of students served	Urgency
Need for more collaboration among SA offices	4-Concern family/friend	Alcohol or drug treatment	Family Concerns	Health	Loneliness	Veterans	
	5-Depression	High-risk drinking	What resources students are aware of??	Counseling (HIV & INH)	Social concerns		
	6-Relationships	Academic impact		Fatigue	Family Concerns		
	7-Internet/ computer game use	Perception vs reality (behaviors)		UTI	Urgency Medications		
	8-Sinus infection, ear infection, bronchitis, strep	Perception vs reality (behaviors)					
	9-Death of a family member or friend						
	10-ADD						

Meeting: March 11, 2010

NCHA (2009)			
Top 10 academic impacts: *new questions included since 2006		Topics of high interest to students:	Perception vs. actual use
1. Stress	6. Depression	Depression, Anxiety, How to help someone in distress,	
2. Sleep Difficulties	7. Internet use/comp. games	Physical Activity, Nutrition, Sleep	
3. Anxiety*	8. Concern for a friend/family		Marijuana-perception of harm
4. Work*	9. Relationship difficulties		
5. Cold/flu/Sore throat	10. Finances*		

Attachment: Diagrams of Emerging Themes

