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 committee met during 2008-2009.

This report includes names of committee members, data reviewed, indentified priorities, 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:
- 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

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.


• **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 indentified 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.

  **Identified Priorities:**
  • Mental Health
  • Social Health
  • Behavioral Manifestations

  **Attachments:**
  • Highlight Summary- data reviewed
  • Diagrams of emerging themes- based on data reviewed

  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 (2006):
  • Top 10 Academic Impacts – Depression is #5
18.94% of students have been diagnosed with depression. Of those:
- 33.52% in the last year
- 23.08% currently in therapy for depression
- 35.36% currently taking medication for depression

Profile of the American College Student (2008):
- 20% of students have been diagnosed or treated for depression
• 27.03% of students report having experienced depression within the past 12 months
  o 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/topic/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)

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.
12.97% of students report having had anxiety in the past year.
- 8.85% report having been diagnosed with anxiety.

**Key Findings: Stress**

**NCHA (2006):**
- Top 10 Academic Impacts – Stress is #1
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

Q1 44. 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

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?

- 84.94%
- 6.25%
- 4.57%
- 3.38%
- 0.67%
- 0.2%
Q20. Answer the following questions:

- Does your campus have alcohol and drug policies?

32.71% Don't know

66.29% Yes

1.01% No

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

- Driven a car while under the influence
- Missed a class
- Performed poorly on a test or important project

(U of U Yes, U of U No, State Yes, State No)
Key Findings: Sleep

Student Health Center (2008)
- 5th most frequent diagnosis: Fatigue

NCHA (2006):
- Top 10 Academic Impacts – Sleep Difficulties are #2

Q243. Within the last school year, have any of the following affected your academic performance?
- Sleep difficulty
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

G143. 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

<table>
<thead>
<tr>
<th></th>
<th>%</th>
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</thead>
<tbody>
<tr>
<td>Yes</td>
<td>70.51%</td>
</tr>
<tr>
<td>No</td>
<td>29.49%</td>
</tr>
</tbody>
</table>

**General Recommendations:**

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.
   - 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.
   - 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.
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
     - Access to Resources
     - Financial stability/financial planning
     - Safety on campus
     - Volunteerism
   - 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.

**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**

<table>
<thead>
<tr>
<th>Office Health Promotion/SHAC</th>
<th>NCHA</th>
<th>Higher Ed Health Behavior Survey</th>
<th>Profile of the American College Student</th>
<th>Student Health Center</th>
<th>University Counseling Center</th>
<th>Center for Disability Services</th>
<th>Housing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health - major concern identified by OHP</td>
<td>Top 10 academic impacts:</td>
<td>ATOD rates are much lower in Utah than nationally</td>
<td>Anxiety – major issue</td>
<td>Top Dx:</td>
<td>Depression</td>
<td>Increase in ADHD</td>
<td>Alcohol</td>
</tr>
<tr>
<td>Depression - major concern identified by OHP</td>
<td>1-Stress 2-Sleep 3-Cold, flu, and sore throat 4-Concern family/friend 5-Depression 6-Relationships 7-Internet/computer game use 8-Sinus infection, ear infection, bronchitis, strep 9-Death of a family member or friend 10-ADD</td>
<td>For most substances, Utah rates are ½ to ⅓</td>
<td>Depression - major issue</td>
<td>URI</td>
<td>Anxiety</td>
<td>Increase in Psychological Concerns</td>
<td>Increase in Crisis</td>
</tr>
<tr>
<td>Suicide - major concern identified by OHP</td>
<td>Need for mental health tx</td>
<td>Sleep - major issue</td>
<td>Stress</td>
<td>Pharyngitis</td>
<td>Stress</td>
<td>Increase in Medical (Chronic)</td>
<td>Students in Crisis</td>
</tr>
<tr>
<td>Stress - major concern identified by OHP</td>
<td>Suicide ideation &amp; attempts</td>
<td>Parent/Family Relationships &amp; Communication (students are talking to their parents frequently)</td>
<td>Loneliness</td>
<td>Skin Lesion</td>
<td>Loneliness</td>
<td>Increase in total of number of students served</td>
<td>Urgency</td>
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<td>Need for more collaboration among SA offices</td>
<td>Alcohol or drug treatment</td>
<td>Family Concerns</td>
<td>Social concerns</td>
<td>Health</td>
<td>Self-Esteem</td>
<td>Veterans</td>
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<td></td>
<td>High-risk drinking</td>
<td>What resources students are aware of??</td>
<td>Family</td>
<td>Counseling (HIV &amp; INH)</td>
<td>Fatigue</td>
<td>Medications</td>
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<td>Academic impact</td>
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<td>UTI</td>
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<td>Perception vs reality (behaviors)</td>
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<td>Where they obtain their health info.</td>
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Attachment: Diagrams of Emerging Themes

Physical Health
- HIV
- URI

**Behavioral
- Sleep Disorders
- Addictions
- Suicide Ideology
- High-risk behaviors

Mental Health
- Depression
- Anxiety
- Stress

Social Health
- Family
- Loneliness
- Perception/reality
- Relationships

Behaviors
- Sleep Disorders
- Addictions
- Suicide Ideology
- High-Risk Behaviors

• Urgency
• Coping Strategies