The Art of Coalition Building
March 28, 2013

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Healthy Campus 2020
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PENN STATE ALTOONA
Health & Wellness Center

- Four year liberal arts
- 4,000 students
- Rural setting
- On and off campus housing
- HWC: Integrated Care model; Primary Care, Health Promotion, Counseling and Disability Services
Staffing Pattern

- Two full-time NP’s
- Contracted physician
- Medical Assistant (s)

- One contracted psychiatrist
- Five LPC’s
  - Two MH counseling
  - One MH and ATOD
  - One Triage/Outreach and case management
  - One alcohol and other drug intervention program

Health Services

Counseling & Psychological Services
History – “In The Beginning”


- Wellness outreach initiatives – Health & Wellness Center, Residence Life, Student Life
  - Core Survey
  - NCHA
Challenges

• Inconsistent and poorly coordinated efforts
  ▶ Difficulty with faculty engagement, participation
  ▶ Primary focus on high risk alcohol use
  ▶ Inconsistency with measurable objectives and outcomes
  ▶ Reporting structure to the Director of Student Affairs
The Nursing Process – 1958

- A – Assess (what data is collected?)
- D – Diagnosis (what is the problem?)
- O – Outcome Identification
- P – Plan (how to manage the problem)
- I – Implement (putting plan into action)
- E – Evaluate (did the plan work?)
Mobilize (MAP-IT)

How To Start: (top down)

- Vision/Mission:
  - Address environmental factors that reduce risk
  - Coordinate campus/community efforts related to student health, wellness, and safety
  - Promote positive choices and behaviors
  - Provide a coordinated continuum of care

- Develop a coalition model; Identify key stakeholders
Health Advisory Board—Structure

- Reporting structure to the Chancellor
- Steering Committee: Director Student Affairs, Director Health & Wellness Center, Associate Dean of Academic Affairs
  - Role: Guidance, Liaison, Oversight, Budget approval
- Three sub-committee structure composed of stakeholders from campus/community
- Co-chair model—(1) faculty (1) staff
Sub-committee chairs were appointed based on leadership—representing academics and student affairs—Fall 2011

Committee members: representation from faculty, staff, students, community

Initial meetings:
  ◦ Steering Committee meeting—Spring 2012
  ◦ Co-chair meeting with Steering Committee—Spring 2012
HAB Composition

- Faculty representatives: Variety of departments
- Staff representatives: Student life, Res. Life, Student Conduct
- Student representatives: Student groups, Greek, Athletes
- Landlords
- Local agencies: Counseling, Sexual Assault, D&A
- PLCB: Pennsylvania Liquor Control Board
- Police departments: campus and community
- Hospital
- High Schools
ASSESSMENT

- NCHA campus specific and national data (Spring 2013, 2011, 2009)
- Healthy Minds Study (2010)
- Healthy People 2020, Healthy Campus 2020
- NCDP data
- PSU Safe data (first year alcohol module)
- PSU Aware data (first year sexual assault)
- Counseling Center and Health Center data
Development of an annual strategic plan with Goals, baseline data/source, Objectives, Action Steps, Responsible party(s), Evaluation

- Annual budget based on targeted need—$4,000/sub-committee, plus funds for the NCHA every other year
- Data driven and evidenced-based plans linked to the budget

- Monthly sub-committee meetings
- Steering Committee involvement throughout the year
- Annual outcome based reports
## Alcohol and Other Drug Prevention Committee

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Baseline Data</th>
<th>Action Steps</th>
<th>Timeline</th>
<th>Responsible Party</th>
<th>Evaluation Tool</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>High Risk Substance use</strong></td>
<td><strong>Healthy People 2020:</strong> 27% of adults age 18 years and older reported binge drinking (5 or more drinks) during the past 30 days 28.1% of adults aged 18 and older reported they drank excessively in the past month 7.9% of adults age 18 and older reported use of illicit drugs during the past 30 days</td>
<td><strong>Spring 2011 National data:</strong> 30.2% of college students reported having 5 or more drinks the last time they “partied”/socialized. 11.4% of college students are frequent bingers (3+ times in two weeks) 16.5% of college students report unprotected sex as a consequence of drinking.</td>
<td><strong>Social norming ad campaign with designated messages. Screening questions through primary care.</strong> <strong>Orientation:</strong> The How Far Program  - AHR program in the classroom  - The Penn State PATH program: Focus on Greeks and Athletes Review outcome data from the first year student web-based program on high risk alcohol prevention. Consider a new proposal for the Sober Up Safely Program Late Night, alternative activities Develop newsletter related to curriculum infusion strategies to be distributed in fall 2013.</td>
<td>Through academic year</td>
<td>HWC</td>
<td>NCHA survey 2013</td>
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<td><strong>Healthy People 2020:</strong></td>
<td>14.4 new cases of AIDS/100,000 population aged 13 years and older were diagnosed in 2007</td>
<td>Free STI testing campaigns</td>
<td>October and March</td>
<td>HWC</td>
<td>HWC evaluations</td>
<td>Free STI Testing offered the fall and spring semesters by the Health Center.</td>
</tr>
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<td><strong>GOALS FOR STUDENTS:</strong></td>
<td>In 2008 7.4% of females aged 15-24 attending family planning clinics in the past 12 months tested positive for Chlamydia trachomatis infections</td>
<td>Provide a menu of topics to the Residence life staff and RA’s for programming. Topics to include sexual health and prevention of sexual assault.</td>
<td></td>
<td>HWC staff</td>
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<td></td>
<td>285 new cases of gonorrhea/100,000 females aged 15 to 44 were reported in 2008</td>
<td>Conduct the Sex on Campus Event</td>
<td>March 26, 2013</td>
<td>Committee members</td>
<td>Outreach evaluation surveys</td>
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<td><strong>Spring 2011 National data:</strong></td>
<td>Take Back the Night-Candlelight vigil- pond, speakers- music, clothes line (for abuse victims/survivors)</td>
<td></td>
<td>(Programming and Marketing workgroups)</td>
<td>Evaluation tailored for event</td>
<td></td>
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<td></td>
<td>26.6% of college students reporting using withdrawal for birth control the last time they had vaginal intercourse.</td>
<td>Bystander Training • John Q presentation</td>
<td>April 18, 2013</td>
<td>HAB subgroup leaders</td>
<td>TBA</td>
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<td></td>
<td>37.7% of students reported that they did not use a male condom the last time they had vaginal</td>
<td>• Collaboration among subcommittees to initiate bystander training</td>
<td>April 11, 2013</td>
<td>(Programming and Marketing)</td>
<td>Program evaluations</td>
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<td>Fall 2013</td>
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<td>TBA</td>
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**Sexual Assault/Violence Prevention Committee**

*Objective:*

- Increase knowledge on consequences of high risk sexual behavior: 10% reduction in students reporting withdrawal as a birth control method.
- Decrease percentage of students with unprotected intercourse by 10%.
- Reduce sexual violence through advocacy, awareness, education and support.
- Inform faculty and staff about resources.
## Suicide Prevention/Mental Health Committee

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<td><strong>High Stress Levels</strong></td>
<td>Spring 2011 national data: 62% of college students reported that they would like to receive information on stress. 25.7% of college students reported feeling stress that impacted academics. <strong>2011 ACHA PSUA:</strong> 58.3% of college students reported that they would like to receive information on stress management. 30.7% of college students reported feeling stress that impacted academics</td>
<td>Media Campaign: Behavioral health screenings. Promote the HeartMath program to students. Promote Faculty completion of: AT RISK and Utilization of Early Alert BBH 048- programs on sexual assault, AOD, and depression</td>
<td>August/Sept and November and Feb. Through Academic Year</td>
<td>Committee</td>
<td>NCHA 2014</td>
<td>NCHA 2009 stress impacts academics: 27.2%, 2011-30.7%</td>
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<td><strong>Emotional Health</strong></td>
<td>Spring 2011 national data: 65.9% of college students reported that they did not receive information on suicide prevention from their institution. 33.3% of college students reported being interested in receiving information.</td>
<td>Newsletters to Parents and Students; faculty/staff. Explore feasibility of a peer counseling program. Review of the DORA project. One credit training program option.</td>
<td>October and Feb.</td>
<td>HWC</td>
<td>EMR Data on outcomes</td>
<td>(2011-12) Screenings: 2011-2012- See outcome Report (2011-12) Heartmath: 97 visits</td>
</tr>
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</table>
Begin planning for 2013–2014, based on new NCHA data

Stress the importance of measurable objectives (percentage increase/decrease)

Do additional root cause analysis to determine other directions for planning and intervention
Challenges

- Active involvement of membership– 15 members per sub-committee (distribution of tasks)
- Faculty engagement
- Developing measurable objectives and actions based on identified needs
- Systemic approach/ evaluation
UND Health & Wellness Hub

Jane Croeker, LSW
Health and Wellness Promotion Director
University of North Dakota
University of North Dakota

- 15,250 students
  - 11,953 undergrads
  - Grad, Law & Medical
  - Non-Res/Alien 6.6%
  - Hispanic 2.4%
  - AI/AN 2.15%
  - Black/Non His 2.1%
  - White/Non-His 79.1%

Located in Grand Forks – 50,000 people
Health & Wellness Unit

- Student Health Services
- Counseling Center
- Wellness Center
- Work Well (Employee Wellness)
- H&W Promotion Team
  - Healthy UND/Healthy UND 2020
Building a Solid Foundation

Creating a Blueprint for the Future

HEALTHY UND COALITION

HEALTHY UND 2020
Vision:
Healthier Students, Faculty, and Staff

October of 2000 Launch
How we started

- Who do we know?
- Who might benefit?
- Who has an interest?
- What perspectives are needed?
- Reach out and invite
- Ask for input
- Who are we missing?
What H& W programs/services are already in place?
What are our gaps/needs?
What advice/ideas do you have?
Are you willing to get involved (provided options)?
Who else should I talk to?
Presidential Kick Off
Mission:
To work in partnership to promote healthy lifestyle choices by enhancing awareness, building skills, changing social norms, and creating a healthier environment.
Overall Objective: To promote Wellness
Membership:

202 UND students, administrators, faculty, and staff
Healthy UND Coalition

- Quilt of Hope
- Spirituality Walk
- Prairie Garden
- Healthy UND Walking Trails
- Wellness Center
- Work Well
- Healthy Food Options
- Wellness Living Learning Community
- Tobacco-free Campus
Charge:

Create an action plan to address top health and wellness issues that negatively impact students’ academic performance and retention.
Students
- Student Government, Greek, Undergrad, Grad, Diversity,
- Peer Educators

Faculty
- Nutrition & Dietetics
- Physical Education
- Nursing
- Medicine
- Teaching & Learning

Campus Minister

First Lady

Staff
- Library Director
- Architect
- TRIO programs
- Student Success Center
- Residence Services/Dining
- H&W Unit
  - AVP for H&W
  - Fitness
  - Nutrition
  - Mental Health
  - Clinic Nurse
  - Health Promotion
Academic success
Not the usual suspects
Group norms
Socio-ecological framework
Vision
Review data
Develop priorities
Opinion Surveys
Student Focus Groups
ACHA–NCHA II
CORE AOD Survey
NIRSA Rec Bench
Institutional Research
  Freshman, Sophomore, Senior, NSSE
SHS, UCC, & WC
Healthy UND 2020 Priorities

- Alcohol and Other Substance Use/Abuse
- Mental Health
- Physical Activity
- Nutrition
- Healthy Relationships/Social Skills
Recruited members
Elected leadership
Completed socio-ecological frameworks
Shared best practices
Prepared inventories
Reviewed data
- Reached consensus
- Created general recommendations
- Developed goals
- Craft SMART objectives
Healthy UND/Healthy UND 2020 2011–2012

- Student Data Highlights
- Healthy UND/Healthy UND 2020 Annual Meeting
- Healthy UND 2020 Call to Action Report
- Monthly Priority Focus
- Alcohol & Other Drug Committee
- Nutrition Subcommittee
- Physical Activity Subcommittee
- Tobacco Free Campus Task Group
- Partnerships/Collaborations
- Resources/Support
Healthy UND/Healthy UND 2020 2012–2013

- H–UND/H–UND 2020 Annual Meeting
- Alcohol & Other Drug Committee
- Nutrition Subcommittee
- Physical Activity Subcommittee
- Tobacco Free Campus Task Group
- Work Well Advisory Committee – Faculty & Staff
- Wellness LLC Advisory Committee
- Internal and External Collaborations
- Resources/Support
- Baselines and Targets
Building Blocks

- Administrative support
- Financial support
- Broad membership
- Active engagement
- Effective communication
- Mutual respect
- Staff support
- Planning
- Accomplishments
The Art of Coalition Building

- Find the mutual benefit
- Margaret Mead was right
- Remember the Principle of Creative Tension
- Sustain the focus on academic impact
- Cultivate advocates and champions
- Never stop recruiting
- Look for low hanging fruit
- Emphasize policy, cultural, and environmental change
- Be in it for the long haul – Policy takes patience
Nikki Brauer, MS, CWPM, COEE
Director,
Health Promotion and Wellness
Illinois State University
Chair Elect, ACHA Faculty Staff Health and Wellness Coalition
Illinois State University, est. 1857
The First Public Institution in Illinois

- Faculty and Staff – 3,500
- Graduate and Doctoral Students – 2,500
- Undergraduate – 19,000

- Undergraduate Institution with an Emphasis on Teaching

Health Promotion and Wellness
Illinois State University
The mission of the University Wellness Council is to provide leadership for the Illinois State University community by addressing issues of health, safety, and environmental sustainability that affect faculty, staff, and students.

- Established in 1989 via a Presidential Appointment
- Budget – $7,600.00 annually
University Wellness Council

- First Decade: Collaboration was goal
- Objectives: Wellness/Fitness, Substance Abuse, STI’s and AIDS
- Second Decade: Campus Wide Approach
- Goals identified for the Campus, Employees, and Students
- Focused on Funded Projects: 1999 – 2010
Campus Wellness Evolving

- 2004 – UWC Defines Wellness at Illinois State –
  - 7 Dimensions: Emotional, Environmental, Intellectual, Physical, Social, Spiritual, and Vocational

- 2004, 2008 – Educating Illinois Strategic Plan –
  Goal 5: *Illinois State University will provide a healthy, safe, and an environmentally sustainable campus.*

- 2009 – Health Promotion and Wellness Created

- 2013 – Revised Educating Illinois document proposes health objectives in three main goals
Key Stakeholders

- Campus Dining
- Environmental Health and Safety
- Facilities Management
- Health Promotion and Wellness
- Department of Health Sciences
- Mennonite College of Nursing
- Provost Office
- School of Kinesiology and Recreation
- Student Counseling Service
- Student Health Services
- Office of Sustainability
- University Housing Services
- University Police
- Office of the Vice President for Student Affairs
Assess

- ACHA NCHA – Biennial
- Core Alcohol and Drug Survey – Biennial
- Faculty Staff Health Status Survey – Biennial
- Healthy Minds
- Environmental Scan – spring 2012
- NSSE
- University Housing Survey of Students
- Focus Groups – Faculty, staff, students
Strategic Planning – 2010–2011

- Define the Values that identify our ideal community
  - What’s getting us closer to our values?
  - What’s taking us away from our values?
  - What stakeholders are not represented?
  - What don’t we know?
  - Based on the above, begin building outcomes, goals, objectives and strategies
Coalition Goals

- **Assessment** – Identify measurable objectives related to Healthy Campus 2020
- **Advocacy**– Comprehensive approach to programmatic activities to reduce redundancies, maximize utilization of resources among campus units and broader community
- **Collaboration**– Enhance opportunities for faculty, staff, students to make more positive, healthy, and productive life choices
- **Communication** – Support avenues that distribute health information affecting health status of various segments of the campus community
Coalition Priorities

- Sleep
- Stress and Emotional Health
- Fitness and Physical Activity
- Nutrition
- Sustainability
Current Work

- Performing SWOT Analyses of the priority health areas to be completed by 3–29–13

- Rethinking the number of meetings. Considering creative ways to continue to gather stakeholder feedback with less face to face meetings. Recent observation.
Motivation

- Utilizing Healthy Campus framework to invigorate energy in this coalition

- Planning process has allowed stakeholder involvement to prioritize which health issues they are most invested in working toward
Lessons Learned

- We believe need new membership to move Healthy Campus 2020 forward

- Fragile situation: How do we do this without harming relationships already established?

- Identify key people willing to do the work. Who will actually work on projects? We’re in the process of finding this out.
Lessons Learned

- University Wellness Council is moving from an advisory group model toward the ecological model.
- The new focus of this coalition has changed the group dynamics.
- Patience is a virtue.....
Policies Update

- Faculty Staff Participation in Wellness Activities, events and Programs (release time policy)
- Employee Assistance Program
- Nursing Mothers in the Workplace – 2013 (Identifying lactation spaces is the next step)
- Smoking and Tobacco – Smoke free Quad January 2013
 Faculty and Staff

- Engage your governance bodies for representation
- Human Resources – reach out
- Wellness Ambassadors (champions) – Find them, engage them in the process
- Inventory Health Related Policies – review these with a broadened focus that includes faculty, staff and students.
- Assess the needs – does your campus have data on your faculty and staff?
Presenter Contact Information

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Questions?