Highlights of Activities for the Program Year June 2015–May 2016

A Message from the President

ADVOCACY
6 Student Health Insurance Plans
6 Student Privacy
6 Campus Mental Health
6 Campus Sexual Assault
7 Position Statements
   - Statements on Religious Freedom and Anti-LGBTQ Legislation
   - Sexual Violence Position Statement
7 Liaisons and Collaborations

EDUCATION
9 Annual Meeting
10 Accreditation
10 Online Continuing Education
10 Peer Review Assistance Program
10 Healthy Campus 2020
11 Guidelines and Recommendations

RESEARCH
13 National College Health Assessment
13 Data Access and Dissemination
   - Pap Test and STI Survey for Calendar Year 2014
   - 2015–2016 College Health Salary and Staffing Survey
   - Patient Satisfaction Assessment Service/Survey

MEMBER ENGAGEMENT AND SUPPORT
15 The American College Health Foundation
16 National Elections
17 Membership
18 ACHA Financial Report
19 2015 Balance Sheet Highlights
19 2015 Operating Highlights

MISSION
To serve as the principal leadership organization for advancing the health of college students and campus communities through advocacy, education, and research.

VISION
To be the recognized voice of expertise in college health.

ADVOCATING ON BEHALF OF 20 MILLION COLLEGE STUDENTS

CREATING EDUCATIONAL OPPORTUNITIES FOR MORE THAN 3,300 COLLEGE HEALTH PROFESSIONALS

GATHERING DATA FROM NEARLY 160,000 STUDENTS ON THE MOST PREVALENT HEALTH TOPICS.

SHARING A STRONG VOICE WITH MORE THAN 2,700 MEMBERS FROM COAST TO COAST AND BEYOND
A MESSAGE FROM THE PRESIDENT

We are pleased to provide you with the American College Health Association 2015–2016 Annual Report, a synopsis of the achievements of our association and membership in advancing the field of college health and improving the health of the nation’s 20 million college students. ACHA is a member-driven organization, so through this report, we gratefully acknowledge our members for their ongoing commitment to the ACHA mission and for their continued support of the American College Health Foundation.

Specifically, this report provides an overview of the association’s activities during the program year, June 1, 2015, through May 31, 2016. The Financial Report reflects financial information for our fiscal year, January 1 through December 31, 2015.

ACHA continued its role of nationally advancing the health of college students with important activities in advocacy, education, and research, the principal goal areas of the association’s Strategic Plan:

In advocacy, ACHA continued monitoring implementation of the Affordable Care Act and its impact on college students and their health insurance coverage. The association collaborated with other stakeholders on the important issue of maintaining confidentiality of student health records given the interplay of the Family Educational Rights and Privacy Act (FERPA), Health Insurance Portability and Accountability Act (HIPAA), and state medical confidentiality requirements. Additionally, ACHA continued to stay in contact with other higher education organizations to monitor developments on campus sexual assault legislation, and, importantly, continued its focus on social justice issues in order to address diminished health outcomes.

In education, ACHA continued providing and expanding opportunities for delivery of relevant content and continuing education credits to professionals in college health—providing educational opportunities to more than 3,300 college health professionals. Whether through its national-level ACHA annual meeting, regional ACHA affiliate conferences, the ACHA webinar series, online continuing education programs, ACHA’s published guidelines and recommendations, or access to the Journal of American College Health, the association continued to be an important source for education that advances students’ health.

In research, ACHA continued its members’ pursuit of data and evidence-informed knowledge on issues impacting the health of college students and their campus communities. The association continued its longstanding ACHA-National College Health Assessment (ACHA-NCHA) with robust survey participation by institutions of higher education. Likewise, benchmarking surveys, such as annual surveillance of student sexual and reproductive health services via the Pap Test and STI Survey, comprehensive surveying of salary and staffing levels in the field of college health, and continuing support for institutional health service patient satisfaction assessments, all represented ACHA’s leadership in advancing college health research.

We are proud of our association’s role in supporting our members and the vital work that they do, day in and day out, to advance college students’ health. By the diligent pursuit of advocacy on their behalf, the delivery of high-quality educational content and expanded educational opportunity, and the continued promotion of relevant college health research, we hope that over this past program year we have, in some measure, enhanced our members’ ability to positively impact the health of our nation’s college students.
Student Health Insurance Plans

ACHA Advocacy leadership worked with the Student Health Insurance/Benefits Plans (SHIBP) Coalition to prepare for the outcome of King v. Burwell, which upheld the lawfulness of the subsidies outlined in the Affordable Care Act (ACA).

Specifically, the Supreme Court decided the Patient Protection and Affordable Care Act Section 36B’s tax credits are available to individuals who purchase health insurance on an exchange created by the federal government.

ACHA Advocacy leadership continued engagement in the implementation of the ACA by engaging with stakeholders at various federal agencies like the Centers for Medicare & Medicaid Services (CMS)/Center for Consumer Information and Insurance Oversight (CCIIO) and the Departments of Treasury, Labor and Health, and Human Services. As these agencies propose and finalize ACA-related standards, ACHA continues to conduct regulatory analysis and prepare public comments on a host of matters related to the creation, administration, and impact of student health insurance policies. Issues we monitored in the 2015–2016 program year included: student health plan actuarial values, upholding the ability for institutions of higher learning to subsidize graduate student health insurance plans without penalty, and various forms of state department of insurance policies.

Student Privacy

Protecting the privacy of college students is of critical importance to our membership. To increase public support for privacy-sensitive policies, ACHA partnered with the office of U.S. Senator Ron Wyden (D-OR) to host a webinar focused on student privacy in the delivery of counseling and medical services and the interplay among FERPA, HIPAA, and state medical confidentiality laws. ACHA also lent its support to Sen. Wyden’s introduction of the Campus Litigation Privacy Act of 2015.

Campus Mental Health

On March 15, 2016, Senators Durbin (D-IL), Bennett (D-CO), and Collins (R-ME) introduced the Mental Health on Campus Improvement Act with the support of ACHA and several other leading counseling/psychiatric professional associations. First introduced in 2009, ACHA has supported each version of this effort and has served as a data source in Sen. Durbin’s press statements and bill text.

Campus Sexual Assault

Preventing and reducing instances of campus sexual assault continued to be a priority as ACHA monitored legislation and guidance around the application of federal statutes like Title IX and the Clery Act. Keeping track of this evolving policy arena is critical in support of the efforts of ACHA’s Creating Guidance for Addressing Sexual Assault Task Force to create a tool kit for campus communities.

Sexual Violence Position Statement

ACHA understands that “campus sexual and relationship violence are serious public health issues that adversely affect college and university students because students cannot learn in an atmosphere in which they do not feel safe. Sexual and relationship violence comprise a continuum of behaviors that include, but are not limited to, sexual/gender harassment, sexual coercion, sexual abuse, stalking, sexual assault, and rape.” As such, ACHA issued an updated Position Statement on Sexual Violence on College and University Campuses.

View these and other ACHA position statements at www.acha.org/PositionStatements.

Liaisons and Collaborations

ACHA’s partnerships with other national health and higher education organizations helped to enhance resources for the college health field and continued to integrate college health into the national health agenda. For the 2015–2016 program year, ACHA maintained liaison relationships with the following organizations:

- Accreditation Association for Ambulatory Health Care (AAAHC)
- Centers for Disease Control and Prevention Advisory Committee on Immunization Practices (ACIP)
- Coalition of Higher Education Associations for Substance Abuse Prevention (CoHEASAP)
- Coalition of National-Health Education Organizations (CNHEO)
- Council for the Advancement of Standards in Higher Education (CAS)
- Gay and Lesbian Medical Association (GLMA)
- Higher Education Mental Health Alliance (HEMHA)
- The Joint Commission Ambulatory Care Professional and Technical Advisory Committee (PTAC)
- The Journal of American College Health (JACH)
- National Athletic Trainers’ Association (NATA)
- National Collegiate Athletic Association Female Athlete Triad Coalition
- National Operating Committee for Standards in Athletic Equipment (NOCSAE)
HOSTING THE COLLEGE HEALTH EVENT OF THE YEAR

ACHA 2016 Annual Meeting

More than 2,000 college health professionals from across the nation—and beyond—attended the ACHA 2016 Annual Meeting May 31–June 4, 2016, at the San Francisco Marriott Marquis in San Francisco, California. The meeting, Framing the Future for Comprehensive Care, was held in collaboration with the Pacific Coast College Health Association and focused on collaborative, comprehensive, and connected approaches to care and prevention amongst college health programs and the campus community.

The dynamic featured speakers provided plenty of food for thought throughout the meeting:

• Keynote presenter Michele Borba, PhD, an internationally renowned educational psychologist, discussed how empathy and caring about others isn’t just about being nice; it’s a skill that’s vital for students’ mental health, leadership skills, and continued well-being.

• Dorosin Memorial Lecture speaker Susan McDaniel, PhD, director of the Institute for the Family in the Department of Psychiatry at the University of Rochester Medical Center and the 2016 president of the American Psychological Association, described the elements of successful integrated care.

• Closing Presidential Session speaker Frances Jensen, MD, FACP, professor and chair of the Department of Neurology at Perelman School of Medicine, University of Pennsylvania, explained the basics of brain development and mechanisms of learning.

Meeting attendees had access to more than 150 pre-conference workshops and educational sessions and more than 40 poster displays that addressed the diverse health issues faced by college students and the professional challenges faced by those in college health field—running the spectrum from allergies to vaccines and from accreditation to wellness models. More than 85% of attendees responding to the meeting evaluation survey said they planned to change how they practiced as a result of the meeting.

The bustling Exhibit Hall featured more than 80 vendors, showcasing products and services designed to help college health professionals advance the health of their students. More than 50% of survey respondents said they expected to make use of a product or service offered by a vendor as a result of visiting the Exhibit Hall.

Meeting attendees had the chance to meet new colleagues and greet long-time friends during numerous networking and social events, including committee and coalition meetings, the Diversity Reception, the Awards and Fellows Celebration Dinner, and section and affiliate meetings.
ENRICHING THE FIELD OF COLLEGE HEALTH

Accreditation

ACHA is proud to be accredited and/or approved to offer continuing education credits by 10 different national or state organizations. Through these relationships, we have provided continuing education credits to more than 3,300 college health professionals during this program year.

In addition to offering credit to physicians and physician assistants, nurses and nurse practitioners, health education specialists, psychologists, counselors, social workers, and pharmacists, we added credits for health information management professionals and registered dietitians during this program year.

Online Continuing Education

ACHA expanded its educational reach during this program year—providing new knowledge in a number of diverse topic areas to more than 1,300 college health professionals via eight live webinars.

The following webinars were free to download and CE was offered to ACHA members at member institutions for free and to other members and nonmembers for a nominal fee. Following the live broadcast, all webinars were archived and promoted via blast emails to ACHA members and the SHS listerv.

• The Choosing Wisely Campaign: Promoting Physician-Patient Conversation about Appropriate Care
• Marijuana Update 2015
• Primary Care for Transgender and Gender Nonconforming Patients
• Do You Have the Right Tools in Your Toolbox? Grant Funding
• Taking Care of Yourself so You Can Take Care of Others: Cultivating Resilience among Counseling and Health Service Staff
• Integrating Vision Into Action (VIA) into Professional and Program Development Strategies
• Zika Virus Update for College Health
• The Gender Affirming Therapist: What You Need to Know to Meet the Needs of Trans College Students

In addition to the archived webinars, ACHA added nine sessions that were captured from the 2015 Annual Meeting. These synchronized audio/PowerPoint presentations are available for a nominal fee and CE is offered for free to members at member institutions and for a nominal fee to others.

Details on all ACHA educational opportunities can be found on the Continuing Education web page.

ACHA Peer Review Assistance Program

ACHA’s Peer Review Assistance Program continued to provide institutions with assistance in evaluating their health services, with expert reviewers providing recommendations in such areas as funding sources, generating revenue, creating business plans, integrating counseling and health services, and staffing levels, compensation, and/or productivity, student health insurance benefits plans. The Peer Review Assistance Program enabled participating institutions to articulate how health and student health services support the vision, mission, and goals, and assist others in the development of strategies to achieve these goals.

If your institution is interested in participating in a peer review, please visit www.acha.org/PRAP.

Healthy Campus 2020

The Healthy Campus Coalition continued to provide valuable resources to the college health community through the Healthy Campus 2020 initiative, a framework for improving the overall health status on campuses nationwide. Strategies suggested in the Healthy Campus 2020 extend beyond traditional interventions of education, diagnosis, treatment, and health care at clinic levels. Through the collaborative efforts of health, academic, student affairs, and administrative colleagues, institutions of higher education can foster health environments and behaviors. This initiative includes national health objectives for both students and faculty/staff.

UPDATEREVEISED AND NEWACHAGUIDELINES AND STATEMENTS

Trans-Inclusive College Health Programs

NEW: October 2015

In collaboration with the Consortium of Higher Education LGBT Resource Professionals, the LGBTQ+ Health Coalition developed the guidelines to help college health professionals create climates and environments in campus health centers that are inclusive and affirming of transgender, gender nonconforming, genderqueer, and similarly self-identified students.

Examples of best practices outlined within the document include:

• Using universal language that is inclusive of individuals outside the gender binary.
• Identifying clinicians and mental health providers who are knowledgeable and supportive of trans-specific health care and mental health issues.
• Offering insurance coverage for gender-affirming hormones and gender-affirming surgical procedures under university/college provided SHIPs.
• Enabling students to self-identify gender on intake forms and indicate their preferred name instead of their legal name.

Recommendations for Institutional Prematriculation Immunizations (RIPI)

UPDATE: April 2016

The RIPI now includes recommendations for meningococcal serogroup B vaccines, the new 9-valent HPV vaccine, and the pneumococcal conjugate vaccine PCV13 along with the correlating ACIP recommendations. For greater understanding, an appendix was added to more clearly communicate the complicated recommendations for use of the pneumococcal vaccines. The Sample Immunization Record included in the RIPI has been updated to include these new vaccines. Additionally, the list of countries that have a high incidence of active TB disease was also updated based on 2014 WHO data and now includes several territories as well as countries.

Tuberculosis Screening and Targeted Testing of College and University Students

UPDATE: April 2016

Changes to this document were made based on corresponding changes to the RIPI. The lists of countries with high and low incidence of active TB disease were updated based on 2014 WHO data and now include several territories as well as countries; these territories, while not considered independent countries, are geographically distinct and have published TB incidence data. The section “Whom to Screen” was updated to indicate that areas of high and low incidence include territories as well as countries.

Addressing Sexual and Relationship Violence on College and University Campuses

NEW: June 2016

ACHA states that campus sexual and relationship violence are serious public health issues adversely affecting college and university students because students cannot learn in an atmosphere in which they do not feel safe. The association believes that campuses have a responsibility and an opportunity to engage with emerging research; evaluate the efficacy of their own prevention, response, and treatment efforts; and actively share lessons learned. Trauma-informed practices should be adopted in every aspect of care in order to provide a more sensitive response and lower the risk of re-victimization. Services, resources, and training should be congruent with best practices as they evolve.

As such, ACHA has released the ACHA Guidelines: Addressing Sexual and Relationship Violence on College and University Campuses. Developed by ACHA’s Creating Guidance for Addressing Sexual Assault Task Force, these new recommendations provide institutions of higher education with a guide to building a comprehensive program that addresses this serious public health issue through a public health framework.
UNDERSTANDING OUR STUDENTS

The ACHA-National College Health Assessment

The ACHA-National College Health Assessment, ACHA’s premier surveying instrument on student health, continued with strong participation. The Fall 2015 ACHA-NCHA Reference Group included data from 19,861 students at 40 institutions.

The ACHA-NCHA continued to assist college health service providers, health educators, counselors, and administrators, and other college health professionals in collecting data about their students’ habits, behaviors, and perceptions on the most prevalent health topics. These topics include:

- Alcohol, tobacco, and other drug use
- Sexual health
- Weight, nutrition, and exercise
- Mental health
- Personal safety and violence
- Impediments to academic performance

Fall 2015 Survey Highlights

- 52.6% of college students surveyed described their health as very good or excellent.
- 64.2% reported receiving vaccination against meningococcal meningitis.
- 85.1% reported feeling overwhelmed by all they had to do.
- The top five factors affecting academic performance in college students surveyed were:
  1. Stress
  2. Anxiety
  3. Sleep difficulties
  4. Depression
  5. Cold/flu/sore throat

PROVIDING RELEVANT DATA

Throughout the program year, ACHA assisted various groups within the association in collecting relevant data to support their work. The surveys conducted from June 2015 through May 2016 included:

Pap Test and STI Survey for Calendar Year 2014

2015 marked the 25th year that ACHA conducted the annual ACHA Pap Test and STI Survey. Results from the survey provide colleges and universities with benchmarking data about sexual and reproductive health services including the provision of gynecological services, Pap test collection and evaluation, and STI testing and treatment. The Pap Test and STI Survey for Calendar Year 2014 generated 149 responses—a cumulative student enrollment of just over 2.9 million.

2015–2016 Salary and Staffing Survey

The 2015–2016 College Health Salary and Staffing Survey is the fourth such survey conducted by ACHA and gathers the most recent information on salary and staffing levels for 51 different college health positions. Data from the survey provides a framework for customary, comparative practices across the field of college health and assists ACHA in quantifying the overall contribution that college health makes to higher education.

Patient Satisfaction Assessment Service/Survey

The ACHA Patient Satisfaction Assessment Service (ACHA-PSAS) gauges patient satisfaction and provides insight into the quality and performance of a college or university health service. Fall 2015 had a total of 13,051 patients from 26 institutions participating responding. This patient satisfaction measurement tool helps college health administrators support their center’s accreditation, track performance over time, compare results to other institutions, and address satisfaction issues immediately.
BUILDING A LASTING LEGACY FOR COLLEGE HEALTH

The American College Health Foundation

The American College Health Foundation (ACHF) worked further to build a strong foundation for the future of college health. ACHF continued to receive generous contributions from members, groups, and corporations devoted to college health. This financial support helped the foundation to fund programs that advanced the college health field.

The following ACHF named funds provide support for various areas of college health:

- Foundation Endowment Fund
- Ayers/Battle/Thomas Diversity Fund
- Aetna Student Health Fund
- Clifford B. Reifler Fund
- Gallagher Koster Innovative Practices in College Health Fund
- Health Promotion in Higher Education Fund
- Josh Kaplan Fund for Clinical Medicine
- Murray DeArmond Student Activity Fund
- Professional Nursing Fund
- Stephan D. Weiss, PhD Mental Health Fund for Higher Education
- UnitedHealthcare StudentResources Fund

In addition to funding several 2016 Annual Meeting programs, ACHF granted five funding awards to ACHA member institutions during the meeting; these awards were made possible through earnings from the Foundation Endowment Fund, Gallagher Koster Innovative Practices in College Health Fund, and a direct sponsorship from FirstRisk Advisors. The annual ACHF Student Travel Award was made possible through earnings from the Murray DeArmond Student Activity Fund, which provided funding support for one student to attend the annual meeting.

ACHF held its eighth annual Matching Gift Challenge event during the 2016 ACHA Annual Meeting. Total donations to the challenge exceeded $13,000, and plans are to hold a challenge event each year during the annual meeting.
ELECTING LEADERS OF COLLEGE HEALTH

ACHA National Election

ACHA conducted the national election of association officers and regional representatives to the Board of Directors and section officers in March and April 2016.

The following individuals were elected as Association Officers:
President-elect: Mike Huey, MD, Emory University
Treasurer: Ted Coleman, PhD, CHES, California State University-San Bernardino

The following individuals were elected as Board Regional Representatives:
Region I Representative: Debbie Rosenberger, BSN, RN-BC, University of Mary Hardin-Baylor
Region III Representative: Julie Yingling, RN, BA, The University of Findlay
Region V Representative: Margaret Higham, MD, Tufts University

The following individuals were elected or appointed as Section Officers:
Administration Section Chair-elect: Angela Allen, MA, University of North Carolina-Charlotte
Program Planner-elect: M. Scott Tims, PhD, Tulane University

Clinical Medicine Section Officers Program Planner-elect: David McBride, MD, University of Maryland-College Park

Health Promotion Section Officers Chair-elect: Sarah Menenee, MPH, CHES, College of William & Mary
Secretary: Victoria Beltran, MPH, CHES, University of South Florida-St. Petersburg
Program Planner-elect: Jamie Leonard, MPH, University of Virginia

Mental Health Section Chair-elect: Bryant Ford, PhD, Dartmouth College
Secretary: Joy Himmel, BSN, MA, PsyD, Ross University School of Medicine
Program Planner-elect: Keith Anderson, PhD, Rensselaer Polytechnic Institute

Nurse-Directed Health Services Section Secretary: Deb Taylor, ADN, CWE, COMS, Anderson University

Nursing Section Chair-elect: Jacqueline Hop, BSN, MSN, MBA, University of Central Florida
Secretary: Pamela Stokes, MHCA, MSN, RN, Oklahoma State University-Stillwater
Program Planner-elect: Wendy Bledsoe, RN, SANE, University of North Carolina-Wilmington

Pharmacy Section Chair-elect: Jason Goodman, PharmD, Ohio State University

Student Section Chair: Jazmin Felix, Florida International University
Chair-elect: Spencer Treu, Winona State University

PROVIDING STRENGTH IN NUMBERS

Membership

By working together to impact the lives of students and campus communities, members have the ability to strengthen citizenship, the learning environment, and the future health of our society.

As of May 31, 2016, the end of the program year, ACHA had 2,716 individual members, 775 institutional members, and 16 sustaining members (i.e., organizations with intersecting interests in college health).

ACHA individual membership was comprised of nine sections that reflect the wonderful diversity of college health: Administration, Advanced Practice Clinicians, Clinical Medicine, Health Promotion, Mental Health, Nurse-Directed Health Services, Nursing, Pharmacy, and Students/Consumers. Their proportionate sizes were as depicted below.

As of May 31, 2016

ACHA Membership

Individual Members - Section Enrollment Strength

<table>
<thead>
<tr>
<th>Section</th>
<th>Enrollment</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration</td>
<td>553</td>
<td>20%</td>
</tr>
<tr>
<td>Clinical Medicine</td>
<td>370</td>
<td>14%</td>
</tr>
<tr>
<td>Health Promotion</td>
<td>482</td>
<td>18%</td>
</tr>
<tr>
<td>Nurse-Directed Health Services</td>
<td>335</td>
<td>12%</td>
</tr>
<tr>
<td>Mental Health</td>
<td>245</td>
<td>9%</td>
</tr>
<tr>
<td>Nursing</td>
<td>298</td>
<td>11%</td>
</tr>
<tr>
<td>Advanced Practice Clinicians</td>
<td>277</td>
<td>10%</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>25</td>
<td>1%</td>
</tr>
<tr>
<td>Students/Consumers</td>
<td>131</td>
<td>5%</td>
</tr>
</tbody>
</table>

This information is presented to further describe certain attributes of ACHA members and the institutions of higher education represented in ACHA’s membership. It may not be used for commercial business purposes. Copyright ACHA 2008.
Highlights of Activities for the Program Year June 2015–May 2016

Membership

Members of ACHA also held automatic membership in regional affiliate organizations: Central, Mid-America, Mid-Atlantic, New England, New York State, North Central, Ohio, Pacific Coast, Rocky Mountain, Southern, and Southwest College Health Associations. Their relative membership levels are illustrated below.

As of May 31, 2016

ACHA Membership
Individual Members - By Affiliates’ Geographic Area

- New England CHA, 249, 9%
- New York State CHA, 240, 9%
- Mid-Atlantic CHA, 402, 15%
- Mid-America CHA, 292, 11%
- Ohio CHA, 99, 4%
- Pacific Coast CHA, 514, 19%
- Southern CHA, 349, 13%
- Southwest CHA, 233, 8%
- Central CHA, 97, 3%

ACHA Financial Report

ACHA’s is on a calendar year basis—January 1 through December 31, 2015. This report mirrors the Treasurer’s Report as presented to the Assembly of Representatives in San Francisco on June 3, 2016. Copies of the complete audit report are available for members.

Financial reporting standards require ACHA to include the American College Health Foundation’s (ACHF) activities in a consolidated financial statement format, since ACHF is considered an affiliate for purposes of financial reporting of nonprofit organizations.

2015 Balance Sheet and Operating Highlights

The consolidated assets totaled $5,051,430 on December 31, 2015.
Consolidated revenues for 2015 totaled $3,031,158.
Consolidated expenses for 2012 were $2,928,942.

ENSURING FINANCIAL STEWARDSHIP