



healthy campus

Promoting healthy campuses for over 30 years

Cornerstone.
Community.
Culture.

THE HEALTHY CAMPUS FRAMEWORK

The Healthy Campus Framework

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The Healthy Campus Framework: An Introduction

For the last 30 years, the American College Health Association's Healthy Campus project has provided a foundation for campuses working to become "healthier." The overarching goal was for institutions to improve the health of their students, faculty, and staff by setting and linking to national health objectives. However, over the years, many campuses struggled to use objectives that often did not represent or meet the needs of their diverse students and campus community. The original Healthy Campus framework also required resources and skills that many campuses lack.

During the process of looking forward and sunsetting Healthy Campus 2020, we had an opportunity to think about how we could provide a different approach. Over the last 10 years, the national conversation on health has shifted from a focus on physical and mental health to a broader conversation about well-being. As we began our work, we wondered if we could move away from clinically focused health objectives and from expecting one set of goals to serve a diverse nation to providing an aspirational framework that allows any campus a place to start, grow, and thrive. An excellent summary of this discussion is the recently published [*Framing Well-Being in a College Campus Setting*](#).

In looking back at Healthy Campus 2020, 2010, and 2000, we could not clearly identify systemic success from setting national objectives. The successes identified were primarily from well-resourced campuses who were able to mobilize both on- and off-campus assets to improve their community. It was easy to identify the campuses who had done amazing work and had powerful coalitions that impacted change. However, there were also many campuses who lost their champion and had fallen into disarray. The question facing us became: if we could not demonstrate long-term success for campuses and were providing objectives that only well-resourced institutions could implement, were we really promoting a healthy campus for the nation, or only for a privileged few? We had to acknowledge that the Healthy Campus 2020 objectives, much like the Healthy People 2020 objectives, were not demonstrating an impact on student, faculty, and staff health.

As the Healthy Campus Leadership Team wrestled with these questions, we began to think about the variety of people we serve and the diversity of our campus communities. We talked about how college health is a foundation for advanced health and well-being work. We believe every campus needs to provide comprehensive health services for students, with strong health promotion initiatives, along with physical and mental health services. We also believe strongly that for this work to be sustained, a campus needs to focus on building the infrastructure and support systems to sustain health and well-being efforts. We recognize that health and well-being efforts can and are being led by our colleagues in campus recreation, counseling, and other areas of student or academic affairs.

We acknowledge and embrace that health and well-being leadership is shared across an institution, regardless of professional role. We recognize how powerful a campus community coalition could be in mobilizing and addressing health issues from high-risk alcohol use to food insecurity. We also recognize that it takes resources and infrastructure to do the coalition building necessary to facilitate systemic change. We took time to consider and examine institutions which have successfully embedded well-being into the culture of their campus. These institutions

cultivate health and well-being as a core value, not only for students, but also faculty, staff, their families, and the community.

With all of this in mind, we recognize that for ACHA's Healthy Campus program to be relevant and useful, it requires a framework that allows for an institution of any size and any resource level to create their own path forward. We also recognize that a healthy campus engage with the numerous national programs, models, theories, and frameworks and recruit these resources to facilitate work based on their campus' unique needs. It is our goal to help higher education professionals to identify their specific campus' needs and apply the Healthy Campus Framework in a way that links them to the national resources necessary to facilitate the work of building a health-promoting campus for those who live, learn, and work there.

The new Healthy Campus Framework provides a tool for developing and sustaining the health and well-being of all college communities. This document and associated Institutional Inventory will allow a campus to evaluate where they currently stand and identify ways to move their Healthy Campus Initiative forward. Gone are national health objectives and decade-long goals; we are not "Healthy Campus 2030". Instead, we are focused on providing tools and resources to help campuses progress toward becoming health-promoting universities by investing in strong infrastructure, building a cornerstone, applying systemic strategies that create communities, and embracing long-term commitments to foster a culture of health and well-being on their campus.



Healthy Campus: Infrastructure

Developing an Infrastructure

The American College Health Association (ACHA) released the [Framework for a Comprehensive College Health Program](#) in 2016 to describe the essential elements of not only physical and mental health care but also of health promotion. These elements rely on the support of infrastructure, administrative foundation, and ancillary services (see Appendix A). *The Framework for a Comprehensive College Health Program* includes essential infrastructure components, such as administration and management, which are key for all Healthy Campus Cornerstone, Community, and Culture strategies. These elements help build the capacity to influence health and well-being across campus. Without this crucial support in place, the ability to do this work is limited. A Cornerstone strategy may need to develop both the administration and management components while also providing the care and services to meet the basic health needs of students. These elements continue to be foundational to move through the Healthy Campus Framework.

Healthy Campus: Cornerstone

Introduction

Health and well-being is vital to the success of students on college campuses across the country. A campus using a Healthy Campus: Cornerstone strategy has established or is working to establish the [Framework for a Comprehensive College Health Program](#). The Cornerstone strategy provides a coordinated approach to identifying funding sources, support sources, data sources, and relevant partnerships. The target population of a Cornerstone strategy are the institution's students. Institutions in this phase are asking **if the student's basic health needs are being met**. The role of faculty and staff in this phase is to provide support and partnership. A Cornerstone strategy can be achieved by any sized institution through different pathways to scale up or scale down based on available internal and external resources. A Cornerstone strategy is creating a foundation that will enable larger scale health initiatives to take place on the campus.



A Cornerstone strategy includes conducting a gap analysis or needs assessment to identify opportunities to meet campus needs through current and potential collaborations. Documentation for this process may include reviews of contracts and memorandums of understanding (MOUs) or engaging with campus and community partners to ascertain what services are available. Whenever possible, data sources should be identified, tracked, and used in the decision-making process.

Components of a Cornerstone Strategy

A Cornerstone strategy acknowledges the incredibly diverse nature of institutions in meeting the basic health needs of their students. Application of the *Framework for a Comprehensive College Health Program* will depend on each institution's resources, population, health needs and trends,

and community resources. Institutions work towards a holistic approach to student well-being by connecting current resources and identifying avenues for potential new collaborations or community resources. A comprehensive program should provide or facilitate access to services with a commitment to reorienting resources toward prevention, health promotion action, and public health with equal importance to both physical and mental health services. Equity, access, and advocacy for the diverse needs of students are foundational elements of a Cornerstone strategy.

A Cornerstone strategy is rooted in the establishment and delivery of comprehensive physical health and mental health services for students. The provision of high quality services should also include educating students on navigating the college health care system and ensuring students have a voice in advocating for mission, goals, services, and programmatic evaluations. Assessment should include benchmarking and measuring the impact of specific services to ensure they are delivered efficiently and effectively. Assessment efforts may be enhanced by engagement with both state and national accrediting bodies.

Collaboration is one of the most important themes of a Cornerstone strategy implementing the Healthy Campus Framework. Collaboration should begin to occur among campus stakeholders and with community and campus partners. The development of these relationships and partnerships work to support a network of care and leverage resources. Collaboration and involvement in the broader campus community with partners outside of conventional health areas and engaging with leadership to build support for a healthy campus are critical foundational elements for a Cornerstone strategy. For campuses to engage in meaningful Healthy Campus work, infrastructure components are critical (see Appendix A).

Once a Cornerstone strategy has established the foundations of the *Framework for a Comprehensive College Health Program*, the institution will have the ability to expand their work beyond the basic health needs of students. As a Cornerstone Campus begins to assess their campus and community assets they may begin to work within the MAP-IT framework (appendix 4) to move toward the basics of the Collective Impact Model to become a **Community Campus**.



Healthy Campus: Community

Introduction

A Community strategy specifically works to establish the mechanisms for community-wide well-being. A Community strategy begins to establish a more organizational and systems-based approach. The primary objective of a Community strategy is to begin shifting the focus beyond the individual health of students, to a campus environment where health and well-being are embedded across policies, cultures, and organizations.



A Community strategy can begin with mobilization around a specific identified concern. For example, your campus may engage with the JED Campus model to address mental health concerns or form a campus-community coalition to address high-risk drinking. Drawing upon previously validated models can help stakeholders learn about the power of a collaborative, systemic effort and nudge the campus toward a deeper culture of health.

A Community strategy is asking the question, “**who is leading us?**” A Community Campus focuses on establishing a centralized leadership structure. The Healthy Campus Initiative identifies a committee, coalition, or, ideally, a formal organization or department known as the Core Structure (known in some models as a backbone organization). A Community strategy also identifies and engages champions, preferably someone in senior leadership with significant influence across campus. A Community strategy builds stronger collaborations, maps assets, collects and examines data or environmental scans, and begins to act for specific well-being goals. Collaboration at this stage, could look more like shared efforts toward common goals. The visionary Okanagan Charter is shared and discussed with all campus partners. A Community strategy’s target population broadens to the entire campus community, including students, faculty, staff, their families, and community.

Components of a Community Strategy

Core Structure

A major emphasis for a Community strategy is to build a Core Structure that conceives of and leads collaborative efforts around campus-wide health and well-being. The core structure enables integrative, multi-sector efforts to advance systems-level change and must have dedicated capacity, in terms of financial and human resources, to succeed. Senior institutional leadership must support the need for personnel time, whether it is hiring full-time staff, a rearranging of current staff duties, or allocating a faculty member’s time, to develop and support this framework. While some roles may be shared across multiple people, the core structure requires capacity that is solely dedicated to the campus’s health promoting effort. Historically, this is most like what many institutions have referred to as their Healthy Campus Coalition. This is where health promotion units shift from health education to environmental and systems-level interventions. However, for success, a foundational infrastructure and resources must be available for this work to succeed.

Identifying Influential Leaders

Identifying the presence of an influential champion who commands the respect necessary to bring together cross-sector leadership is critical to the success of a Community strategy. An institutional champion can advocate for campus health and well-being as a priority issue and challenge other leaders across the institution to demonstrate their commitment. This champion often chairs or appoints a small senior group of administrators to guide efforts and deploy resources to priority projects. Beyond that, a general body and working groups dedicated to priority issues may be a common structure.

A Community strategy may begin by focusing on one topic that is considered most urgent and commit to bringing campus-wide partners to the table to address this issue. These efforts can lay the foundation for campus partners to assess the campus environment and strategically deploy resources to address an issue. Mobilization around a topic-specific effort may seem limiting, but it can provide proof-of-concept to your broader Healthy Campus efforts and act as an energizing model of collaboration and targeted effort. Ultimately, a Community strategy broadens this work to include all elements of health and well-being as the Campus builds capacity to implement a Culture strategy.



Healthy Campus: Culture

Introduction

A Healthy Campus Culture strategy includes an embedded culture of health and well-being and a clear commitment to that culture across the entire community. A Culture strategy has a well-established structure for articulating campus needs and taking steps to collectively address those issues. A broad array of campus and community stakeholders have committed to a shared agenda and shared measures to assess the impact of mutually agreed upon interventions. As part of a Culture strategy, people feel connected to the ideals of a healthy campus community and are committed to helping make that vision a reality. The campus includes a well-established core structure and agreement on which issues to address based on chosen data sources.



The Culture strategy may include creating a built environment that is accessible and health-promoting for all, including syllabus statements that promote mental health and accommodations resources, inclusion of health and well-being in an institution's mission or vision statement, and sustained programs such as alcohol and other drug misuse prevention, interpersonal violence prevention and advocacy, student success initiatives, and faculty/staff support.

At this level, institutions are asking **how health and well-being initiatives are making an impact** on student success and community well-being. The target population is the entire campus, including faculty, staff, students, and the surrounding community. Campus and community stakeholders are developing and committing to a shared agenda and shared measures. The Culture strategy includes embracing cutting edge resources such as the Okanagan Charter and Collective Impact.

Components of a Culture Strategy

A Culture strategy has a track record of established collaborative work to address campus issues across all levels of the socioecological model. These campuses have a strong, sustained core structure that have established areas of priority, brought together various stakeholders to effect change and can point to demonstrated positive outcomes. Regardless of staff turnover, a Culture strategy will continue to orient towards a shared agenda and work to involve broader groups of stakeholders beyond the campus community.

Building a Shared Agenda

There are five elements to building a shared agenda when using the Collective Impact (Appendix C): a set of guiding principles, a shared problem definition, a measurable population level goal, a framework for change (how work and resources will be allocated), and a plan for tracking progress and group learning to determine what is working. A Culture strategy is well on its way to building

a shared agenda across the institution, as there is a core structure that has brought together partners to make data-driven decisions on which issues are the most pressing and need to be addressed.

Developing Shared Measures

Once the priority issues are identified and defined, a shared measurement strategy must be developed across the Healthy Campus Initiative. A Culture strategy recognizes that each partner brings unique talents, skills, and tools to address the health and well-being of the entire community. Additionally, there is an understanding that the local community impacts the health and well-being of the campus and campus health and well-being affects the local community.



Summary

The Healthy Campus Framework provides a roadmap to achieving a campus culture that values health and well-being as central to the success of its students. By creating a campus that prioritizes health and well-being, there is clear recognition that student, staff, faculty, and the local community are integral parts of this equation. By implementing ACHA's comprehensive college health program framework, developing a core structure, identifying a champion, creating a shared agenda and shared measures, an institution has the capacity to go beyond the basic health needs of students. By creating a community and culture that prioritizes health and well-being, any campus can be a Healthy Campus.



Appendix A: Framework for a Comprehensive College Health Program



Appendix B: Resources for a Cornerstone Strategy

ACHA Guidelines

The following statements and guidelines can be accessed at www.acha.org/Guidelines.

Addressing Sexual and Relationship Violence on College and University Campuses (Health Promotion)

Recognizing the impact of sexual and relationship violence may have on the learning environment, ACHA developed guidelines for building a comprehensive program. Document provides overarching principles for prevention, risk reduction and response, as well as, additional recommendations and future directions. These guidelines should not be construed as compliance to state or federal statutes, or other applicable statutes.

Cultural Competency Statement (Cultural Competency and Qualified Workforce)

In order to enhance service delivery of students, ACHA recommends personal and leadership development in the areas of cultural competency. After defining cultural competency and its continuums; the statement provides characteristics of a culturally competent organization at the individual and institutional level. In conclusion, outlines the Associations commitment in this area.

Drug Education and Testing of Student Athletes (Health Promotion, Health Screening and Medical Services)

In response to the rising concerns about illicit drug use among athletes, ACHA provides suggest that a sound program should combine drug testing with drug education to address the health and welfare of student athletes. Guidelines regarding the elements of a drug education are discussed. Considerations are reviewed related to the establishment of a fair and accurate drug testing program.

Emergency Planning Guidelines for Campus Health Services: An All-Hazards Approach (Public Health and Safety)

Developed to assist higher education communities in planning for emergencies using an all-hazards approach. Explains National Preparedness Response Systems, Communications, and the role of Campus Health Center in emergencies. Prevention, preparedness, and evaluation strategies are also discussed.

General Statement of Ethical Principles and Guidelines (Team-based Collaborative Care)

General principles and standards of ethical conduct are given for all institutions. Ethical guidelines include the provision of services, professional responsibilities and competence, ethical responsibilities, responsibilities to institutions, ACHA and the profession of college health. All the guidelines are based on the value, worth, and dignity of each individual.

Guidelines for Hiring Health Promotion Professionals in Higher Education (Health Promotion and Qualified Workforce)

Looking to hire health promotion professionals? Information delivered about the competencies of health promotion professionals, the benefits of hiring, and categories of positions. Guidance about terminology, salary, and attraction of qualified applicants.

HIV Pre-Exposure Prophylaxis (Medical Services)

Considering implementation of HIV pre-exposure prophylaxis (PrEP)? This document includes free consultation resources and a roadmap on offering PrEP at your institution. In addition, common concerns and considerations, and how to connect with local resources are discussed.

Immunization Recommendations for College Students (Medical Services and Public Health and Safety)

Provides guidelines for the implementation of a comprehensive institutional immunization policy, which includes recommendations for tuberculosis screening. Recommendations for immunization schedules, with indications and contraindications. Templates for immunization records forms available.

Opioid Prescribing in College Health (Medical Services)

The ACHA Task Force for Opioid Prescribing in College Health created guidelines to further an understanding of the issues surrounding opioid prescribing; review major concepts designed to maximize safety and reduce potential for abuse; and identify possible avenues to assist addicted students with rehabilitation, recovery, and return to the college environment.

Position Statement on Tobacco on College and University Campuses (Public Health and Safety)

Encourages colleges and universities to focus their efforts to achievement of a 100% indoor and outdoor campus-wide tobacco-free environment. The position statement serves a guide to assist colleges and universities with becoming or maintaining tobacco-free living and learning environments. Tobacco issues discussed includes policy, prevention, and cessation.

Scope of Practice for the Registered Nurse in College Health and Scope of Practice for the Licensed Practical Nurse in College Health (Medical Services and Qualified Workforce)

Outlines guiding principles and professional standards of college nursing practice.

Standards of Practice for Health Promotion in Higher Education (Health Promotion)

The scope of practice and essential functions of health promotion in a higher education setting. The third edition of this publication serves also as a guideline for the assessment and quality assurance of health promotion in higher education.

Standards for Student Health Insurance Coverage (Medical Services)

Ten standards are given to guide institutions of higher education in the establishment of an appropriate, credible student health insurance program. The standards apply to both fully insured and self-funded student health plans.

Trans-Inclusive College Health Programs (Medical Services and Cultural Competency)

Recommendations are given to extenuate barriers that college students identifying as transgender or gender nonconforming may face when accessing mental health, physical health and preventative services on campus.

Tuberculosis Screening and Targeted Testing of College and University Students (Medical Services and Public Health and Safety)

In order to control and prevent infection on college and university campuses, guidance is provided on strategies for screening the incoming student population, targeting those at increased risk for TB testing, and a review appropriate follow-up care for students diagnosed with latent TB infection (LTBI) or TB disease.

Accreditation and Standards

This is a quality assurance process under which the services and operations of a health center are evaluated by an external body to determine if applicable standards are met. This process is voluntary and provides the organization with the ability to measure and compare quality of services and performances against nationally recognized standards.



Appendix C: Collective Impact Model

Collective Impact is the commitment of a group of important actors from different sectors to a common agenda for solving a specific social problem at scale (Juster, 2019). The Collective Impact Model, used by communities across the globe, is anchored by a mutually developed common agenda. Distinct from the Healthy Campus Framework, it is focused on population-level outcomes, rather than common topics, and pays special attention to system-level change. Additional important elements of the Collective Impact Model include a commitment to equity, continuous communication, shared measurement, and a formal structure which includes a backbone organization (also known as a core structure).

More information can be found through the Collective Impact Forum:

<https://collectiveimpactforum.org/>

Campuses who are exploring this model in depth can begin by exploring the Collective Impact Readiness Assessment available at:

<https://collectiveimpactforum.org/resource/readiness-assessment/>

Appendix D: MAP-IT Framework

Adapted from [Healthy People](#), the MAP-IT framework can be used to plan and evaluate public health interventions. Whether you are a seasoned professional or new to the field, the MAP-IT framework can help you create your own path through the Healthy Campus Framework. The champion and the core structure can begin to work together with these tools to guide the process.

Mobilize

As a campus begins to assess their campus and community assets, the following worksheets may be helpful and can be found at <https://www.acha.org/resources-programs/programs-services/healthy-campus/map-it-framework/>

- Create a list of potential campus and community partners to invite to join your coalition. Aim for broad representation
Tool: Brainstorm Potential Partners
- Before contacting partners, identify the roles and responsibilities you would like potential partners to undertake.
Tool: Organizing a Coalition
- Meet with partners to discuss collaboration.

Assess

The core structure, champion, and coalition should work through.

- Assess campus needs and assets (resources) to get a sense of what is realistic to accomplish.
Tool: Brainstorm Community Assets
- Collect baseline data to determine your campus's unique needs.
Work together as a coalition to set priorities. Consider feasibility, effectiveness, measurability, and relevance to your institution's mission as you discuss what issues are important to campus leadership and community organizations. The data you collected during the assessment phase will serve as baseline data. The data you collected during the assessment phase will serve as baseline data, which will allow you to track your progress.
Tool: Prioritizing Issues

While your overarching goal is the holistic well-being of your students or entire campus community, the coalition of stakeholders will need to identify the major priority topics that will be addressed. A common roadblock to effectively addressing a complex health issue is not coming to consensus on how the problem is defined and therefore what specific interventions are needed. Using the data available, what are the most urgent issues that need to be addressed? The Healthy The Prioritizing Issues worksheet prompts users to examine the prevalence of the issue, population affected, level of impact on student success or work performance, and likelihood of success impacting the issue. Collaboratively examining how you will define health or well-being can be a powerful iterative process to bring stakeholders together.

Plan

When planning, data is critical in the decision-making process. The worksheets help institutions identify areas of measurement and developing targets for health outcomes and performance.

- Develop a plan with clear objectives and specific action steps to achieve them. The objectives and goals you set will be specific to your campus community.
- Consider opportunities for intervention, particularly intervention points that have potential for broad reach and high impact.
- Determine how you are going to measure your progress. What is expected to change, by how much, and by when? Choose objectives that are challenging yet realistic.
Tool: Defining Terms: Vision, Goal, Objective, Strategy (Download Worksheet - Word Document)
- Each objective needs a baseline and a target measure. When possible, establish the baseline using your campus-specific data. Targets can be based on national baseline data; if your baseline data is different from nationally available data, consider setting an improvement rate and target based on your campus' baseline data.
Tool: Potential Health Measures (Download Worksheet - Word Document)
Tool: Setting Targets for Objectives (Download Worksheet - Word Document)
- Once you have selected your campus goals and objectives, established your baseline, and set targets, you will need to select strategies to achieve the objectives. Start by searching for best practices and other tested interventions. Engage backbone organization or coalition members in a strategy brainstorm.

Implement

- Create a detailed work plan that includes concrete action steps assigned to specific people with clear deadlines and/or timelines.
- Share responsibilities across coalition members but consider having a single point of contact within your core structure to manage the process to ensure that momentum is not lost. Check in with coalition members by using the Coalition Self-Assessment to see if your process is running smoothly.
Tool: Coalition Self-Assessment (Download Worksheet - Word Document)
- Develop a communication plan. Consider use of high-impact opportunities such as kick-off events, activities, or campus meetings to showcase your coalition's accomplishments.
Tool: Communication Plan Template (Download Worksheet - Word Document)

Track

- Plan regular evaluations to measure and track your progress over time. Evaluations can help your core structure determine if your plan has been effective in achieving your goals. Be mindful of limitations of self-reported data, data quality, data validity, and reliability. Partnering with a statistician or researcher at your institution can help you conduct a quality evaluation. You can use these basic formulas to calculate baseline, target, and achieved rates for your selected health outcomes.

Tool: Measuring Progress (Download Worksheet - Word Document)

- Make sure to share your progress and success with your community by issuing a press release and utilizing strategic communication avenues. Be sure to celebrate your progress with your coalition.



Appendix E: Identifying Data Sources

A comprehensive assessment of campus culture would include a review of students, faculty, and staff, an assessment of physical and cultural attributes of campus health and well-being, and an assessment of the readiness of the campus community to address health and well-being. Whatever assessment tool you decide upon, you will analyze whether your system has the prerequisite characteristics and conditions necessary to launch your effort. An externally developed or self-directed scan of current assets can include:

- alcohol abuse (Higher Education Center)
- sleep (Center for College Sleep)
- mental health (JED Campus)
- interpersonal violence (NAPSA Culture of Respect, Pennsylvania Coalition Against Rape)
- accreditation (AAAHC, Joint Commission)

Collect and Examine Data and Environmental Scans

Assessing the status of campus health and well-being can be an energizing and collaborative process. A first step is to identify available data sources. A variety of campus constituents may hold data to illuminate the current state of your campus health and well-being.

Types of Data often Available on a College Campus

- Nationally normed collegiate health surveys, such as the [National College Health Assessment](#) or the Core Alcohol and Drug Survey. These broad surveys examine students' behaviors and perceptions.
- Benchmark surveys and data from other functional areas. Campuses may buy surveys to compare their services or student experiences to other campuses; these surveys may include health questions. An example is the AFA/EBI Assessment of fraternity and sorority life which includes questions about alcohol use. Another example may be customer behavior surveys by your food service vendor.
- Surveys of student health behaviors without available national reference sets, such as Healthy Minds Survey.
- Campus-developed surveys by departments, faculty, or students' theses or dissertations. Quality and sampling process may sometimes impede the generalizability of findings, but there may be meaningful data collected for the purpose of research.
- Campus climate surveys.
- Campus law enforcement and/or campus conduct records.
- Behavioral Intervention Team reports.
- Community law enforcement and code enforcement data from areas where students live.
- Environmental scans on issues like alcohol availability, pedestrian safety, or lethal means restriction.
- Surveys embedded in pre-enrollment alcohol or sexual assault educational programs.

- Data on claims and health behaviors from your health insurance provider for faculty/staff and your student health insurance plan if you have one.
- Aggregate data on conditions treated by health center, counseling services, and/or local community partners who heavily serve your student population.

Impact Evaluation

CAS Cross-Functional Framework for Advancing Health and Well-Being

The Council for the Advancement of Standards in Higher Education publishes a Cross-Functional Framework for Advancing Health and Well-Being. Cross-functional frameworks are designed to assist campuses in addressing issues that span multiple functional areas and to serve as a resource to address these emerging issues. These are components of this cross-functional framework:

- Framework is aimed at creating an environment that fosters health and well-being, so that students can flourish.
- Framework is not prescriptive; rather, it outlines processes to build capacity within the institution for sustainable action.
- Emphasizes the need to identify the facilitating and inhibiting factors specific to the institution that influence health and well-being at all levels of the Social Ecological Model.
- Emphasizes the need to shift from a deficit-based approach to an asset-based approach.
- Differentiates from a cross-functional “response” team as a cross-functional team guided by processes to advance health and well-being.
- Acknowledges that changing the campus culture requires the collaboration of multiple stakeholders.
- Recommends strategically assembling functional areas and facilitating institutional efforts based on universal, selective, and indicated levels of prevention.
- Recognizes the importance of being intentional about community readiness to engage in this work.

More information can be found here: <https://www.cas.edu/standards>

What if there is little to no usable campus data?

- If you serve a heavily regional population, is there local or state health data available?
- Can you order a set of [NCHA data reports](#) on similar institutions to your own?
- Do you need to commission campus experts like faculty or advocate for funds for data collection?

Appendix F: Okanagan Charter

The Okanagan Charter calls on post-secondary schools to embed health into all aspects of culture and to lead health promotion action and collaboration locally and globally. Created in June 2015, the Charter provides institutions with a common language, principles, and framework to become health and well-being promoting campuses.

“Health promoting universities and colleges transform the health and sustainability of our current and future societies, strengthen communities and contribute to the well-being of people, places and the planet.”

Health promoting universities and colleges infuse health into everyday operations, business practices and academic mandates. By doing so, health promoting universities and colleges enhance the success of our institutions; create campus cultures of compassion, well-being, equity and social justice; improve the health of the people who live, learn, work, play and love on our campuses; and strengthen the ecological, social and economic sustainability of our communities and wider society.

Adhering to, and intentionally building structures, systems and policies along a socio-ecological model are imperative for institutions to be able to affect the wellbeing of students, staff, faculty and the larger community. Colleges and universities at this point have a long history of building systems, programs and policies through needs assessment, have created a central organization to facilitate collaborative work across sectors, and continually evaluate and improve processes. Well-being is a priority in the institution’s mission, vision, and values, as well as onboarding and succession planning processes.

Furthermore, such campuses have:

- Stakeholders engaged at all levels
- Strong community partnerships that align with the academic mission and vision
- Commitment to shared values: engagement, academic success, resilience, thriving, equity and inclusion
- Policies congruent with shared goals (safety, respect, etc.)
- Flexibility to deal with crises

Institutions operating as a healthy campus with an embedded culture of well-being have a central organization and an understanding of a common agenda to solve complex campus issues, shared measures, strategies for reaching common goals and a sustainability plan that includes continuous evaluation and improvement. Staff, faculty and students throughout the institution understand and believe in their role to help sustain their campus as a healthy place in which to live, learn, work, play and grow.

The Okanagan Charter outlines two calls for action for higher education institutions:

1. Embed health into all aspects of campus culture, across the administration, operations and academic mandates

1.1. Embed health in all campus policies. Review, create and coordinate campus policies and practices with attention to health, well-being and sustainability, so that all planning and decision-making takes account of and supports the flourishing of people, campuses, communities and our planet.

1.2. Create supportive campus environments. Enhance the campus environment as a living laboratory, identifying opportunities to study and support health and well-being, as well as sustainability and resilience in the built, natural, social, economic, cultural, academic, organizational and learning environments.

1.3. Generate thriving communities and a culture of well-being. Be proactive and intentional in creating empowered, connected and resilient campus communities that foster an ethic of care, compassion, collaboration and community action.

1.4. Support personal development. Develop and create opportunities to build student, staff and faculty resilience, competence, personal capacity and life enhancing skills –and so support them to thrive and achieve their full potential and become engaged local and global citizens while respecting the environment.

1.5. Create or re-orient campus services. Coordinate and design campus services to support equitable access, enhance health and well-being, optimize human and ecosystem potential and promote a supportive organizational culture.

2. Lead health promotion action and collaboration locally and globally.

2.1. Integrate health, well-being and sustainability in multiple disciplines to develop change agents. Use cross-cutting approaches to embed an understanding and commitment to health, well-being and sustainability across all disciplines and curricula, thus ensuring the development of future citizens with the capacity to act as agents for health promoting change beyond campuses.

2.2. Advance research, teaching and training for health promotion knowledge and action. Contribute to health promoting knowledge production, application, standard setting and evaluation that advance multi-disciplinary and trans-disciplinary research agendas relevant to real world outcomes, and also, ensure training, learning, teaching and knowledge exchange that will benefit the future wellbeing of our communities, societies and planet.

2.3. Lead and partner towards local and global action for health promotion. Build and support inspiring and effective relationships and collaborations on and off campus to develop, harness and mobilize knowledge and action for health promotion locally and globally.

Source:

Okanagan Charter: An International Charter for Health Promoting Universities and Colleges (2015).



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