Making the Case for Alcohol Abuse Prevention & Health Promotion to Senior Leadership

Illinois Higher Education Center

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Introduction



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Agenda

Learning Outcomes

- 1. Understand how to leverage standards of practice in the fields of alcohol abuse prevention and health promotion to advance communication with senior leadership.
- 2. Identify tools available to advance communication with senior leadership.
- 3. Explore strategies for strategic communication with senior leadership that reorient the work of health promotion to prevention.

Evolution of Wellness and Health Promotion

1958: WHO Constitution defines "health"



1975: Wellness Resource Center, Mill Valley, CA

1976: First campus Wellness Program at University of Wisconsin – Stevens Point

1990: First CHES Certification

1986: Ottawa Charter for Health Promotion



2000: DHHS Healthy People 2010/ ACHA's Healthy Campus 2010

2001: Standards of Practice for Health Promotion in Higher Ed

American College Health Association **2000:** CAS Standards for Health Promotion, AOD Prevention

2012: ACHA Healthy Campus 2020

healthy 2020
Connect. Collaborate. Create.

1950's

1970's

1980's

LATE 20TH/EARLY 21ST CENTURY

1961:

Halbert Dunn writes High Level Wellness **1975:** First National Wellness Conference

1977: National Wellness Institute formed



1987: FIPSE Grants to IHE's/The Network founded

1993: Higher Education Center established

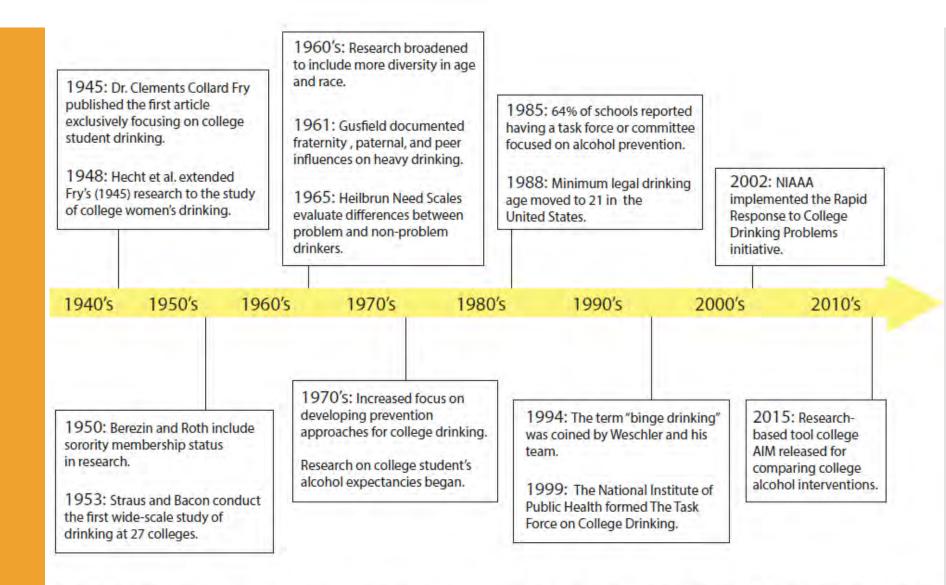


2015:

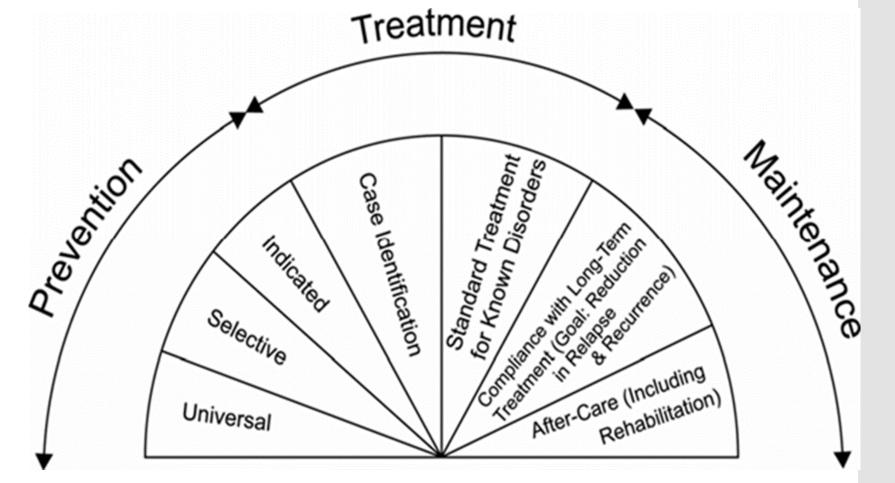
Okanagan Charter:
An International Charter for
Health Promoting Universities
and Colleges, an outcome of the
2015 International Conference
on Health Promoting
Universities and Colleges

Sources: Foundation Concepts of Global Community Health Promotion and Education (Hernandez, 2011); Wellness: The History and Development of a Concept (Miller 2005); Everfi Annual Research Summit (2015)

Evolution of Alcohol and Other Drug Abuse Prevention

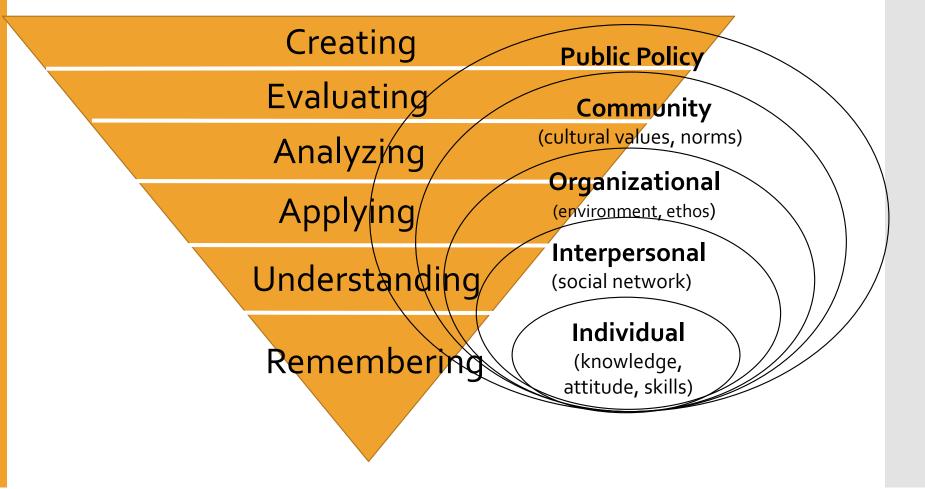


Theoretical Foundations; Institute of Medicine

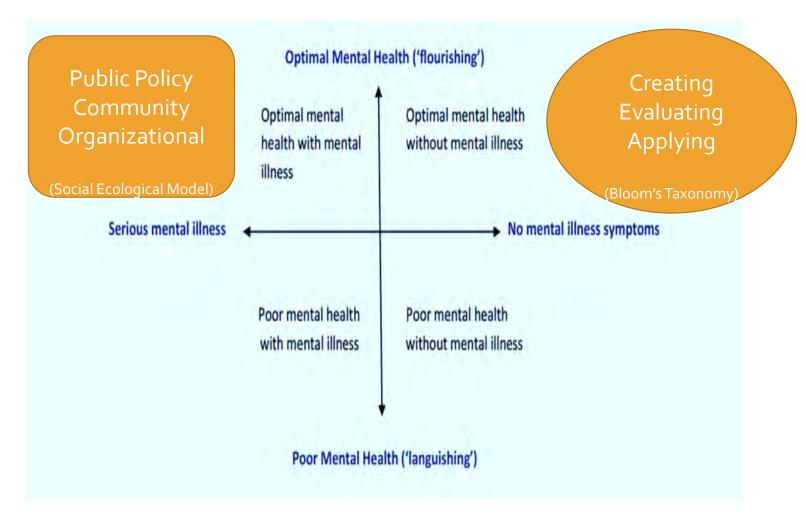


~ Institute of Medicine Continuum of Care Protractor, 1994

Theoretical
Foundations;
Blooms
Taxonomy &
Socioecological
Model



Theoretical
Foundations;
Dr. Corey
Keyes & Dr.
Laurie
Schreiner



Mental Health Continuum

Let's Chat!

What types of administrators have you "gotten in front of" and how have you maximized those opportunities?

Stories from the field

- Facilitate listening sessions with new administrative leadership be prepared with talking points.
- Frame health promotion and data analysis around budget, retention data, and connect institution data directly to survey data (e.g., NCHA).
 - One campus has created a research methodology (stratified random sample) that will link NCHA data and institutional data on an individual level, with an 80% response rate. So, retention and GPA can be linked to specific responses/behaviors on NCHA.
 - Schedule meetings with academic deans and department heads to communicate how students in their program areas are doing with regard to health behaviors and academic success.
- One-page infographic with NCHA data for all health topics, and one specifically for academic impacts.
- Create space to talk about the good news by offering to talk about the crisis at another time.
- Remember:
 - You never know when opportunities will present themselves and where they may take you.
 - These topics can be very personal, and sometimes uncomfortable share the good news story.



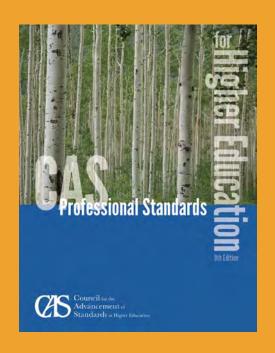
Sample Diffusion of Innovation Plan

VIA:
Diffusion of
innovation
template for
strategic
communication

Table 1. Strategies to Engage P4 Campaign Stakeholders by Adopter Category

Stakeholder Group	Performance Objectives	Adopter Category	Possibilities (P) and Barriers (B) to Adoption	Engagement Strategy
Board of School Directors	Provide visible leadership Provide financial support Attend campaign events Allow LYFT time to update at monthly attend Board meetings	Early adopter	P: Existing commitment to positive youth development, desire to be leaders in Bucks, existing relationship/trust with LYFT, shared vision for healthy teens B: Competing priorities, limited funds, lack of awareness re: these campaigns	Present campaign overview at Board meeting; create a sense of urgency; highlight common vision; appeal to their existing commitment to developmental assets and character education; convey how this effort will position Pennsbury as a leader in Bucks County; provide regular updates at monthly Board meetings
Superintendent and administrative leadership staff	Provide visible leadership Attend campaign events Provide administrative assistance on key activities (e.g., mass mailings)	Early adopter	P: Existing commitment to positive youth development, desire to be leaders in Bucks, existing relationship/trust with LYFT, shared vision for healthy teens B: Competing priorities, overburdened staff	Present campaign overview at administrative staff meeting; create a sense of urgency; highlight common vision; appeal to their existing commitment to developmental assets and character education; convey how this effort will position Pennsbury as a leader in Bucks County; provide regular updates via monthly reports
Parent-Teacher Organization	Assign a liaison to join the LYFT subcommittee and report back at monthly PTO meetings Provide visible leadership Attend campaign events Recruit volunteers Sponsor an expert lecture event	Early majority	P: Existing commitment to positive youth development, desire to be good parents, desire to be leaders in the community B: Lack of familiarity with these types of campaigns, denial (possibly) re: scope of problem, limited time	Present campaign overview at PTO meeting; create a sense of urgency; appeal to their desire to be good parents and leaders in the community; describe success of similar national efforts; ensure that liaison has a favorable experience on LYFT subcommittee
LYFT subcommittee of parents and teens	Attend meetings Provide feedback on campaign Attend campaign events Recruit volunteers Provide visible leadership	Early adopter	P: Existing commitment to LYFT, desire to be good parents, desire to meaningfully contribute, desire to build resume experience (teens) B: Limited time, preference for other tasks	Present campaign overview at LYFT meeting; appeal to their desire to do new and creative work; lead subcommittee with inspiration and trust; foster sense of ownership and commitment

CAS: Principles Underlying all Standards



Students & Their Environments

The whole student is shaped by environments that provide learning opportunities reflective of society and diversity, with students having ultimate responsibility for learning

Organization, Leadership, & Human Resources

Quality of leaders possessing sound preparation is essential, with success directly correlated to clarity of mission

Ethical Considerations

Educators exhibit impeccable ethical behavior in professional and personal life

Diversity & Multiculturalism

Institutions embracing diversity and eliminating barriers with justice and respect for differences, binding individuals to community

Health Engendering Environments

Education prospers in benevolent environments that provide students with appropriate challenge and necessary support

CAS: Making the Case for Health Promotion Using the Standards

- Initiate and/or continue self-study
- Contribute to and prepare for accreditation
- Identify better use of funds
- Consider essential, non-negotiable functions
- Determine necessary training and/or degree preparation for recruitment and hiring staff
- Self-Assessments Guides (SAGs)
 - Provides an effective workbook/format for evaluation, self-assessment, and institutional reviews
 - Translates standards into multiple criterion statements which can be measured
 - Clusters of criterion measures focus on subsections of the standards, allowing raters to express detailed and targeted judgments
 - Informs on program strengths and areas for improvement
 - Leads to an action plan to enhance programs and services that benefit student learning and development

Let's Chat!

How are you currently "making the case" for alcohol abuse prevention and health promotion on your campus?

Stories from the field

- Share data from programs, NCHA, and other large surveys done on campus with division of student affairs leadership group.
- Connect NCHA data with:
 - division priorities/strategic plans
 - institutional research data on campus
- Reframe language around initiatives to connect with indicators of academic success.
- Define what prevention is for people help them understand what we do and what we do not do.
- Promote department's strategic plan by posting it online.
- Create a dashboard or Prezi to share with student affairs leadership and other stakeholders.
- Analyze and share data to plant the seed [tell the need] with people making policy decisions.
 - Engage with senate on academic policies connecting back to the academic mission of the university.

Simon Fraser
University
Healthy
Campus
Community
Initiative



Theoretical Foundations; Okanagan Charter



Health promoting universities 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.

Let's Chat!

How are you linking student success measures to your work?

Stories from the field

- Strike a balance between internal and external focus. Have good local data to demonstrate the need – do not rely on national data alone.
- Navigate and negotiate various relationships. Have examples to share about important issues in a positive way. Tell the good news story.
 - Support student leaders who are oftentimes more influential help them tell their stories
- Have the confidence to speak up and own our expertise when talking with partners, stakeholders, and campus administrations.
- Protect Health Promotion staff from starring in supporting roles to clinicians and counseling.
- Keep in mind what employers are saying is important.
 - Critical thinking, communication and problem-solving skills are much more important than a student's major
 - Active and engaged work experience is much more important than learning without application

Theoretical Foundations; Gallup-Purdue

Key Findings from the Gallup-Purdue Index

- Study examining workplace engagement, wellbeing and alumni engagement among 30,000+ U.S. graduates
- Experiences in college have far more impact on graduate wellbeing than what kind of school attended (public/private, small/large, selective/not)

Graduates who had a professor who:

- · cared about them as a person
- · made them excited about learning
- encouraged them to pursue their dreams

odds of thriving in wellbeing and workplace engagement



Graduates who feel their college prepared them well for life outside of it

odds of thriving in all areas of wellbeing



"When it comes to finding the secret to success, it's not 'where you go,' it's 'how you do it' that makes all the difference in higher education."

Let's Chat!

What particular tools have been helpful to you when you have had these opportunities?

Stories from the field

- When one area is doing well, utilize these opportunities to help in other areas:
 - Expansion of sexual violence efforts on campus has helped make connections to other programs
 - Recovery communities students in recovery need a healthy environment, as do all students
- Linking key initiatives which have brought the same people to the table, who then become champions for multiple efforts.
- Investing in an assessment and evaluation person for student affairs with the ability to connect to division priorities.
- Connecting with deans in schools of public health and/or related fields.
- Connecting with the Healthy Campus 2020 movement or larger campus initiatives.
- Employing an all levels-approach grass roots and buy-in from upper administration.

Wrap Up

Have questions?

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Want to continue the conversation?

Wellness & Health Promotion Knowledge Community - NASPA Health Promotion Section - American College Health Association

Additional Resources

- American Association of Colleges and Universities (2013). LEAP Employer Survey. It Takes More than a Major: Employer priorities for college learning and student success.
- Centers for Disease Control and Prevention. Health-related quality of life. http://www.cdc.gov/hrgol/wellbeing.htm.
- Council for the Advancement of Standards in Higher Education (CAS) standards available through American College Health Association membership:
 - Alcohol & Other Drug Programs
 - Health Promotion Services
 - Clinical Health Services
- Foster, E.M., Dodge, K.A., Jones, D. (2003). Issues in the economic evaluation of prevention programs. Applied Development Science, 7, 76-86.
- American College Health Association. *Healthy Campus 2020*. http://www.acha.org/HealthyCampus
- Keeling, R. (1994). Changing the Context: The Power of Prevention. *Journal of American College Health*, 42: 243-247.
- Kilmer, J., Cronce, J., & Larimer, M. (2014). College student drinking research from the 1940s to the future: Where we have been and where we are going. *Journal of Studies on Alcohol and Drugs*, 17, 26-35.
- Kreuter, M. Health is not the benefit. CDCynergy Social Marketing Program. http://www.healthedpartners.org/ceu/sm/Cdcynergy/Content/activeinformation/videos/video3o_kreuter.htm
- Lawrence, L.S. (2016). Declarations, charters, and statements Their role in health promotion. Health Promotion International, 22, 179-181.
- Springer, J.F. & Phillips, J. (2006). The Institute of Medicine Framework and Its Implication for the Advancement of Prevention Policy, Programs and Practice.
- World Health Organization. (1998). Health Promoting Universities: Concepts, Experience, and Framework for Action. Health Documentation Services: WHO Regional Office for Europe Copenhagen.

Vision Into Action (VIA): A brief overview (via.acha.org)



Standards of Practice for Health Promotion in Higher Education



- What used to be a workbook available for purchase through the American College Health Association (ACHA) is now a FREE interactive Web site
- End-users of VIA:
 - <u>Entry-level and seasoned health promotion professionals</u> can use VIA to assess and stimulate development of their own health promotion competencies.
 - <u>Supervisors</u> of health promotion departments can use VIA to assess and advance the rigor of health promotion initiatives and services and encourage professional development among their staff.
 - <u>Senior administrators</u> can use VIA to communicate the purpose and function of health promotion to students, faculty, staff and other campus and community constituencies.

VIA: Learn, Observe, Perform

2.2 Examine and address campus and community health issues at all levels of the socioecological model — intrapersonal, interpersonal, institutional, community, and public policy.

LEARN

- The Community Tool Box: Analyzing Problems and Goals
- Healthy People 2020: Assess
- Healthy Campus 2020: Implementing Healthy Campus

OBSERVE

Social-Ecological Model: A Framework for Violence Prevention [pdf]

PERFORM

- Social-Ecological Model: A Framework for Violence Prevention [pdf]
- Healthy Campus 2020 Tool: Brainstorm Community Assets [Word Document]
- Healthy Campus 2020 Tool: Prioritizing Issues [Word Document]

Guidelines for Hiring Health Promotion Professionals in Higher Education (ACHA, 2014)

ACHA Guidelines

Guidelines for Hiring Health Promotion Professionals in Higher Education

Second Edition, May 2014

Purpose

The American College Health Association (ACHA) supports and recognizes the need for hiring well-qualified health promotion professionals in higher education. Additionally, the Council for the Advancement of Standards in Higher Education (CAS, 2012) and Accreditation Association for Ambulatory Health Care (AAAHC, 2013) indicate that professionals working in the area of health promotion must be appropriately credentialed, trained, and qualified for the position. Recent reviews of position descriptions from across the United States did not reflect the use of these established standards.

In 2008 the ACHA Health Promotion Section developed the Guidelines for Hiring Health Promotion Professionals in Higher Education to encourage and support institutions of higher education (IHE) in hiring the most qualified staff. The second edition includes language that is most closely aligned with the third edition of the Standards of Practice for Health Promotion in Higher Education (ACHA, 2012); sample director-level and health promotion staff-level position descriptions, updated level of experience required for director-level and health promotion staff-level positions for greater alignment with current practice and Council for the Advancement of Standards in Higher Education (CAS)Professional Standards for Higher Education, and MCHES level of certification.

Introduction

The specific purpose of health promotion in higher education is to support student success. In the higher education setting, good health enables student success through the creation of health-supporting environments including both the physical and the social aspects of our surroundings (World Health Organization, 1991). Specific health promotion initiatives aim to expand protective factors and campus strengths, and reduce personal, campus and community health risk factors. This is done in alignment with the missions and values of the institutions of higher education (ACHA, 2012).

Qualified health promotion professionals in higher education possess specific competencies that make them best suited to support student success through the practice of prevention – that is, by preventing the development of personal and campus population-level health problems, while enhancing individual, group, and institutional health and safety. They are competent to:

- develop strategic plans for health promotion that support the unique missions and values of institutions of higher education
- examine and address campus and community health issues at all levels of the socio-ecological model – intrapersonal, interpersonal, institutional, community, and public policy
- engage and collaborate with interdisciplinary partners
- demonstrate cultural competence and inclusivity

Standards of Practice for Health Promotion in Higher Education (ACHA, 2012)

ACHA Guidelines

Standards of Practice for Health Promotion in Higher Education

Third Edition, May 2012

Introduction and Guiding Principles

In 1996, the American College Health Association (ACHA) appointed the Task Force on Health Promotion in Higher Education to study the scope of practice of health promotion in a higher education setting and develop professional standards of practice (Zimmer, Hill, & Sonnad, 2003). ACHA first published the culmination of that research as the Standards of Practice for Health Promotion in Higher Education (SPHPHE) in 2001; a revised edition was published in 2005. Like previous editions, the third edition serves as a guideline for the assessment and quality assurance of health promotion in higher education. The third edition also acknowledges additions to the body of knowledge and makes explicit the scope of practice and essential functions for the field. The new SPHPHE are guided by several principles:

- Health is the capacity of individuals and communities to reach their potential. Health is not simply the absence of disease measured through clinical indicators, but "a positive concept emphasizing social and personal resources as well as physical capacities" (World Health Organization [WHO], 1986).
- The specific purpose of health promotion in higher education is to support student success. In the higher education setting good health enables student success by creating health supporting environments – that is, both the physical and the social aspects of our surroundings (WHO, 1991). Specific health promotion initiatives aim to expand

protective factors and campus strengths, and reduce personal, campus, and community health risk factors. This is done in alignment with the missions and values of institutions of higher education (IHEs).

- . IHEs are communities, IHEs possess all of the components of a community - that is, functional spatial units, units of patterned social interaction, and symbolic units of collective identity (Glanz, Rimer, & Lewis, 2002) - and therefore should build upon the inter-relationships and interdependencies among their members and contextual systems to influence health. This principle indicates use of a socioecological-based approach that examines and addresses health issues at multiple levels: intrapersonal, interpersonal, institutional, community, and public policy (McLeroy Bibeau, Steckler, & Glanz, 1988). Therefore, the specific populations targeted will vary with the community and may include students. faculty, staff, alumni, and community members, among others.
- Health promotion professionals in higher education practice prevention. At its core, health promotion works to prevent the development of personal and campus population-level health problems, while enhancing individual, group and institutional health and safety. Although prevention efforts may be universal, selective, or indicated (Gordon, 1983), health promotion in higher education emphasizes creating

• The professional and program development components of the Web site guide individuals and programs through a process of assessment and development of action plan(s) based on the Standards of Practice for Health Promotion in Higher Education (SPHPHE).

 Through completion of an individual or program assessment, scores are generated by standard and a blank action plan is provided to guide strategic individual and program development.

MIE ABOUT STANDARDS OF PRACTICE PROFESSIONAL DEVELOPMENT PROGRAM DEVELOPMENT GUIDELINES FOR HIRING STORIES FROM THE FIELD

Individual Assessment

Select one option for each question that comes closest to your answer. When you have completed the questions, click the "Submit" button below to view your results. To print your results, please select "Print" in your browser menu bar or hit "CRTL+P".

Please use the following scale for all questions:

- 4 = Very experienced
- 3 = Experienced
- 2 = Developing Experience
- 1 = Minimal Experience
- 0 = No experience

Standard 1. Alignment with the Missions of Higher Education

Effective practice of health promotion in higher education requires professionals to align health promotion initiatives with the missions of institutions of higher education. Please rate your level of experience with the objectives of Standard 1.

1.1. Develop a strategic plan for health promotion that supports the unique missions and values of the	- 0		112		24
institution of higher education.			- 2	- 3	-4
1.2. Design health promotion initiatives that support student success as defined by the institution of higher	0.0	- 7	1) 2	2	0.4
education.	- 0			- 3	-
1.3. Disseminate research that demonstrates the effect of individual health behaviors and environmental health	0	- 2	1) 2		- 4
behaviors on student success.	- 4		- 2	3	-4
1.4. Advocate for health as a core value of the institution of higher education.	0	100	0 2	113	0.4

Standard 2. Socioecological-Based Practice

Effective practice of health promotion in higher education requires professionals to understand and apply a socioecological approach. Please rate your level of experience with the objectives of Standard 2.

2.1. Review professional literature on socioecological planning models.	0	-1	U 2	113	4	
2.2. Examine and address campus and community health issues at all levels of the socioecological model —		-	02			
intrapersonal, interpersonal, institutional, community, and public policy.	0.0	-	2	0.3	9.4	
2.3. Focus primarily on transforming the campus and community environments through population-level			02			
initiatives.	u.u.	-	2	- 3	- 4	
2.4, Build upon the inter-relationships and interdependencies among the members and systems of the campus		- 4	02		0.4	
and community.		-	~ 2	-3		
2.5. Advocate for campus, local, state, and national policies that address campus and community health.	0	101	1/2	113	4	



Your Results

Thank you for completing the Individual Assessment. The range of possible scores is from 0 to 4, with 4 being the highest level reflection of the standards.

After your score is calculated for each standard, your next step is to complete your <u>Individual Action Plan</u> to increase your capability to effectively practice health promotion in higher education.

Where you identify room for growth based on your scores, we encourage you to visit the related <u>standards page(s)</u> and go to the Learn, Observe, and Perform links where you will find key articles, documents, strategies, and models used at other institutions, templates that you can use in your daily work, and more. We encourage you to explore these resources that have been handpicked by leaders in the field to assist you in crafting your <u>Individual Action Plan</u> and guide your professional development.

Standard 1. Alignment with the Missions of Higher Education

Your Average Score: 1.5

Standard 2. Socioecological-Based Practice

Your Average Score: 1.00

Standard 3. Collaborative Practice

Your Average Score: NaN

Standard 4. Cultural Competency

Your Average Score: 1.25

Standard 5. Theory-Based Practice

Your Average Score: 1.00

Standard 6. Evidence-Informed Practice

Your Average Score: 0.86

Standard 7. Continuing Professional Development and Service

Your Average Score: 1.50

Professional Development

Individual Action Plan

Your Individual Action Plan(s) provides you with a systematic approach for developing and strengthening your current level of knowledge, skill, and experience specific to the standards. The following guidelines are meant to assist you in getting the maximum benefit out of your Individual Action Plan(s).

Guidelines for use:

- Review your Individual Assessment.
- Identify your current and desired level of experience in each standard. If you are brand new to the field, it may be unrealistic to reach "Very Experienced" - Level 4, during one review period.
- Select the standard(s) that you would like to work on. Where you identify room for growth
 based on your scores, we encourage you to visit the related <u>standards page(s)</u> and go to the
 Learn, Observe, and Perform links where you will find key articles and documents, strategies
 and models used at other institutions, templates that you can use in your daily work, and
 more. We encourage you to explore these resources that have been handpicked by leaders
 in the field to assist you in crafting your Individual Action Plan and guide your professional
 development.
- Keep an electronic or paper copy of your Individual Action Plan(s) as well as any supporting evidence or artifacts that demonstrate completion of your goal.

Individual Action Plan

Name	e:	
Begir	nning Date:	Ending Date:
A.	Experience Level	
	your score from your Individual Assessment of experience in that standard.	ent for the standard. Then, identify and record your desire
Curre	ent Level:	Desired Level:
В.	Professional Development Strategies	
ldent the st	ify professional development strategies that trategies are specific to your context, envir	at will assist you in achieving your goal. It is important the onment, etc.
Exam	pples of Professional Development Strategie	s
Audit	or enroll in academic courses	Teach a course
Partic	ipate in case conferences	Find a mentor
Attend	training workshops	Seek feedback from colleagues
Jnde	rtake experiential learning	Be a mentor
Join jo	ournal clubs	Serve as a volunteer
Attend	d lectures/seminars	Undertake an annotated literature review
Join p	rofessional associations	Engage in self-study
Becor	ne a leader in professional associations	Enroll in online courses
Read	professional literature	Join nonprofit organizations
Cond	uct research	Find colleagues at other institutions
Join s	tudy groups	Join a campus or community committee
Attend	d professional meetings	
1		
1		

C.	Resources and Support
dentify	the resources and support you need to accomplish your professional development.
D.	Evidence of Completion
	y tangible artifacts that document your completion of this professional development process. Kee nic or paper copies of this evidence with this Individual Action Plan.
E.	Evaluation
	ras your current practice enhanced by this professional development process? What did you learn vill you integrate into your work?

VIA: Using the Professional Development Action Plan

- Both supervisor and staff member complete the assessment, discuss and identify discrepancies.
- Integrate the staff member self-assessment into the performance appraisal process and include progress points into subsequent appraisal processes.
- Develop a professional development plan for the staff member that also includes trainings, conferences, leadership opportunities and departmental responsibilities that will allow the staff member to develop skills in the identified area(s).
- Create staff dyads to provide ongoing check-ins and relationship-building among staff members.

VIA: Using the Program Development Action Plan

- Complete the assessment from your own perspective as the department manager.
- Facilitate a discussion with your staff and develop a consensus score for each objective.
- Instruct each staff member to individually assess how the program reflects each objective and average the scores, share and discuss.
- Establish a departmental action plan that engages all staff members in the process.
 - Utilize routine staff meeting time to include discussion about progress points toward the action plan.
 - Integrate progress points into departmental annual report process.
 - Utilize end-of-year planning time to training, outcome presentation(s), and closing the loop on the past year's progress points.