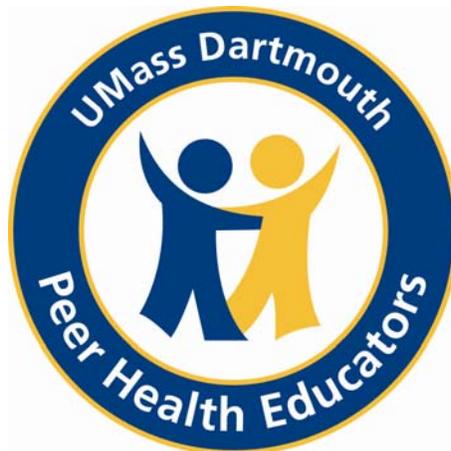




**LiveWell:
The Office of Health
Education & Promotion
Annual Report
2008-2009**



I. Highlights

Accomplishments

LiveWell Office

In Summer 2008, the majority of the office suite on the 2nd floor of Oak Glen was dedicated for health promotion activities. Separate work spaces were designated for the Coordinator of Health Education & Promotion, nutritionist, administrative assistant, and student staff. The Coordinator and nutritionist now have enclosed offices, vital to maintaining confidentiality. The expansion also allowed staff to work concurrently, boosting productivity and teamwork.

Peer Health Education Program

Six students enrolled in the Peer Health Educator internship in Fall 2008, five of whom successfully completed the internship. These students developed two new workshops to add to our repertoire of programs.

The Peer Health Educators (PHEs) now offer a total of 11 educational workshops:

- **Sex Jeopardy** (Sexual Health)
- **Ultimate Sex Jeopardy** (Sexual Health)
- **Girl Talk: All About Us!** (Women's Health. Program for female audiences *only*.)
- **The Absolute Truth** (Alcohol)
- **Rxology 101** (Prescription Drug Misuse/Abuse)
- **Truly Tired: A College Guide to Sleep** (Sleep)
- **Stress: Making it Work for You** (Stress Management)
- **Consent is Sexy!** (Consent/Sexual Assault)
- **STARR-Students Teaching About & Advocating for Respect in Relationships** (Healthy/Unhealthy Relationships)
- **The College Life** (Addresses many issues related to the transition to college life. Program designed for first-year students.)
- **Healthy Feud** (Nutrition)

There was an 8% increase in workshop attendance. The PHEs succeeded in diversifying their audience by aggressively marketing their programs to student groups outside of Residential Life (Res Life=approx. 60%; Greek Life=approx. 33%; other student groups=8%). Evaluations of the PHEs' workshops remain consistently positive.

The PHEs greatly expanded their educational “street” outreach to the residence halls, focusing on high-risk alcohol use and the Good Samaritan Policy. Additionally, the PHEs visited local bars and restaurants frequented by UMD students to encourage these establishments to participate in *Good to Drive?*, a program administered by the Massachusetts State Executive Office of Public Safety and Security, that encourages safe driving and the use of designated drivers. Participating vendors agree to provide free non-alcoholic beverages to designated drivers.

The UMass Dartmouth Peer Health Educators were awarded Outstanding Peer Education Group-New England by the Bacchus Network. Additionally, George Henry Aulson IV (Nursing, '08), was named Outstanding Peer Educator Alumnus-New England.

I administered the first UMass Dartmouth Peer Health Educator Alumni Survey.

Committee/Policy Work

The Good Samaritan Policy, which I drafted in December 2007, was adopted in February 2009.

I was appointed co-chair of the Student Health Advisory Board and the University Alcohol Committee. I also served on the following committees: DOSA Programming Committee, Integrated Student Learning Outcomes (ISLO) Task Force, and the Sexual Violence Prevention Committee.

I was invited by the Massachusetts Department of Public Health (MA DPH) and the Suicide Prevention Resource Center (SPRC) to participate in a College Suicide Prevention Working Group to develop goals and recommendations for training, consultation, and other support for campuses to plan, implement, evaluate, and sustain suicide prevention and mental health promotion programs.

Challenges & Concerns

Staffing

As the sole health promotion professional on campus, the scope of my duties is too broad. (I gathered significant support for this argument while conducting our infrastructure assessments.) I am acutely aware of the university's current financial difficulties. However, as we look toward the future, I believe the university must hire additional health promotion staff to effectively address the myriad of health promotion needs on campus. My recommendation is to hire designated health promotion staff to address each of the following areas: alcohol and other drugs, mental health promotion, and sexual violence prevention and response.

The addition of a part-time (10 hour/week) administrative assistant in Fall 2008 helped lessen the burden of administrative duties. However, this employee was often required to cover for other Health Services staff when they took scheduled and unscheduled leave. I shared these concerns with Barbara Agee who, beginning in FY '10, agreed not to use this staff person for coverage on days when she is scheduled in the LiveWell Office.

II. Accomplishments

Planned Goal	Status	How?
LiveWell Office		
Establish LiveWell Office Suite 2 nd fl., Oak Glen	Accomplished	Separate offices/work spaces for: Coordinator of Health Education & Promotion, nutritionist, administrative assistant, and student staff. Reception area conference room shared.
Peer Health Education Program		
Increase visibility of Peer Health Education program and services	Accomplished/Ongoing	<p>The following approaches were used to increase visibility of the PHEs' programs and services:</p> <ul style="list-style-type: none"> • Direct mailing to SROs and Greek Life; "meet and greet" at SRO/Greek Life meetings • In class presentations about PHE program • PHE representation on campus committees • "Meet and greet" with RD staff (fall 2008); PHE presentation to RAs at RA training (January 2009) • Numerous articles written by, and about, PHEs in <i>The Torch</i>. • "Street" outreach to Residence Halls (BAC Blitz to first-year quad; Good Samaritan Policy) • PHE presence at/participation in various events sponsored by others (Trojan Comedy Tour, Family/Friends Weekend, Sigma Phi Rho AIDS Benefit, Sex Signals, Vagina Monologues, etc.) • PHE sponsored/co-sponsored events • Launch of Facebook Fan Page and "Ask a PHE" on AIM
Increase number of students reached through Peer Health Educators' workshops	<p>Accomplished/Ongoing</p> <p>8% increase in attendance at the PHEs' workshops.</p> <p>Diversified audience; 60% Res Life; 40% other student groups</p>	<p>PHEs aggressively marketed programs to student groups outside of Res Life, most notably Greek Life.</p> <p>Res Life restructured their programming model such that RAs needed to have at least 10 residents at a program for it to "count".</p> <p><i>The PHEs will continue to lessen their reliance on Res Life for program requests and more actively engage/seek programming from other student groups (Greeks, Athletics, SROs, etc.) Additionally, the PHEs will continue to document</i></p>

		<i>how they influence their peers apart from educational workshops.</i>
Refine existing workshops Develop two new workshops	Accomplished	Existing workshops refined and two new workshops added: <ul style="list-style-type: none"> • Girl Talk (women's health) • The College Life (for first-year students; focuses on transition to college) <p><i>The PHEs now offer 11 different educational programs.</i></p>
Increase involvement in campus committees and policy/environmental change initiatives	Accomplished/ongoing	PHE representatives served on/named for the following committees: Student Health Advisory Board, University Alcohol Committee; Health & Wellness Committee (Sustainability Office)
Initiate office hours requirement for all Peer Health Educators	Accomplished	PHEs are required to complete (2) office hours per week.
Expand "street" outreach program	Accomplished	Expanded outreach to residence halls, especially first-year quad. Outreach largely focused on the prevention of high-risk drinking. Safer sex and sexual assault were also addressed.
Recruit and train new Peer Health Educators	Accomplished	Six new PHEs were recruited into the program; five completed the internship/training.
Provide continuing education and development opportunities for all Peer Health Education	Accomplished	All Peer Health Educators were required to complete continuing education on the following topics: <ul style="list-style-type: none"> • Sexual violence • Marijuana • Mental Health <p>The PHEs were also all certified in CPR.</p> <p>Additionally, we focused this year on strengths-based leadership. Each PHE received a copy of <i>StrengthsBuilder 2.0</i>, completed the self-assessment, and shared their Top 5 strengths with the team. The group identified our shared strengths and strengths unique to certain individuals. PHEs were challenged to apply their strengths to benefit the organization.</p> <p>Finally, the PHEs were encouraged to participate in other continuing education opportunities offered by DOSA and academic affairs.</p>

Goal	Status	How?
Participate in regional Bacchus Network Peer Education Conference	Accomplished	The Peer Health Educators presented two workshops, Ultimate Sex Jeopardy and The Absolute Truth, at the Bacchus Network-Area 10 Conference held at Eastern CT State University on February 28, 2009. The UMD Peer Health Educators were awarded Outstanding Peer Education Group-New England and George Henry Aulson IV (Nursing, '08) was named Outstanding Alumni-New England.
Website		
Continue to develop LiveWell website	Accomplished/Ongoing	
Committees/Policy Work		
<p>DOSA Programming Committee</p> <p>Integrated Student Learning Outcomes (ISLO) Task Force</p> <p>Sexual Violence Prevention Committee</p> <p>Good Samaritan Policy</p> <p>Student Health Advisory Board</p> <p>University Alcohol Committee</p>	Accomplished/Ongoing	<p>DOSA Programming Committee: Collaborated with Frederick Douglass Unity House and advisor to GLBT students on the development of a <i>Stop the Hate</i> campaign. Participated in 1/2 -day program for high school GSAs (gay-straight alliances).</p> <p>Faculty and Student Senate approved ISLO Task Force's statement.</p> <p>Good Samaritan Policy adopted (February 2009)</p> <p>Named co-chair of Student Health Advisory Board and University Alcohol Committee. Both groups met once.</p>

Other Accomplishments

Peer Health Education Program

- Presented a two-hour workshop on alcohol, marijuana, stress and sleep, healthy vs. unhealthy relationships, and nutrition to approximately 400 students at Bishop Stang's Senior Wellness Day
- Presented *How to Stay Healthy as a Student Leader* at RA Training (January 2009)
- Petitioned for the adoption of the Good Samaritan Policy; conducted outreach on the policy, once adopted

Social Norms Research Project

- Graduate assistant Michaela Bileau completed a research project on social norms theory and its application to reduce high-risk drinking among college/university students and summarized her findings and recommendations for UMD. Her findings will be shared with the University Alcohol Committee for further consideration.

III. Challenges & Learnings

Planned Goal Not Accomplished	Why?	What issues would you handle differently going forward, and how, based upon what you have learned?
Health Assessment (Partially completed. In progress.)		
<p>In partnership with Institutional Research, analyze the American College Health Association's National College Health Assessment (ACHA-NCHA) data from our Spring 2007 survey. Present findings to university leadership, including DOSA Leads. Use data for program planning.</p>	<p>The staff person in IR who initially agreed to assist with this work left the university and, due to a staffing shortage, there was a long delay in receiving the completed analysis from IR. (The analysis was not received until late March 2009.)</p>	<p>Nothing. An Executive Summary of the results will be prepared in August 2009 for distribution, presentation, etc.</p>
Mental Health Promotion (Prioritize; renew collaboration)		
<p>In partnership with the Counseling Center and Active Minds on Campus, continue to expand mental health promotion activities on campus. These activities will: promote mental health; decrease stigma surrounding mental health issues; educate students, staff, and faculty on the "warning signs" of suicide and how to intervene.</p>	<p>Active Minds on Campus was far more organized this year and held several successful events/programs. However, due to competing demands, the Counseling Center and my office did not collaborate on mental health promotion initiatives (QPR training; <i>Building Bridges</i> campaign), as planned.</p>	<ul style="list-style-type: none"> • Continue involvement with MA DPH/SPRC College Suicide Prevention Working Group to develop goals and recommendations for training, consultation, and other support for campuses to plan, implement, evaluate, and sustain suicide prevention and mental health promotion programs. • Meet with Director of Counseling Center in August to develop plan for AY '09-'10; set dates for QPR training sessions and reserve space • Hold a joint meeting of PHE and Active Minds in early fall 2009 • Develop PHE workshop focusing on common mental health concerns (depression, anxiety)

Massage Program (Suspended)		
Expand massage program for students, staff, and faculty.	<ul style="list-style-type: none"> • Competing responsibilities for Wellness Resource Center (massage therapy) and UMD staff. • Massage services were not centrally located on campus. • Regulations prohibited online credit card payment for massage services. I believe this posed a significant barrier, esp. for faculty/staff. • Online scheduling/reminder system was a low-priority for CITS Web Team 	<ul style="list-style-type: none"> • Survey UMD community regarding their interest in massage therapy services, etc. prior to developing program. • Get a clear commitment from Wellness Resource Center staff before the beginning of the semester re. dates/times they will be on campus. Contract? • Involve WRC staff in promoting the service (mailings, poster, free chair massages, etc.). WRC assumes/shares cost of promotion. Contract? • Work with CITS to develop online scheduling/appt. reminder system, but collect payment at point of service. • Identify a location near the point of service for storage of massage supplies.
HIV Testing (Revisit)		
Attempt to reinstate free, anonymous, on-campus HIV testing for students.	<ul style="list-style-type: none"> • Insufficient staffing at New Bedford Family Planning and Citizens for Citizens Family Planning in Fall River for off-site testing services. • Federal guidelines now recommend incorporating HIV testing into the primary care setting. 	<ul style="list-style-type: none"> • Nothing. A PHE was appointed student liaison to New Bedford Family Planning. I will revisit the issue in AY 2009-2010 and inquire if either organization has the ability to offer off-site testing.
Professional Development		
CHES Certification	<ul style="list-style-type: none"> • Insufficient time to study for the CHES exam outside of work. 	

IV. Goals and Objectives AY 2009-2010

Department specific goals

LiveWell Office

- Increase visibility and awareness of LiveWell Office and services

Peer Health Education Program

- Increase visibility and awareness of Peer Health Education program and services
- Increase number of students reached through workshops by:
 - increasing number of small group programs offered
 - increasing number of student attendees, primarily by aggressively marketing and providing programs to new audiences (SROs, student leaders, classrooms, etc.)
- Refine existing workshops; add 1-2 new workshops?
- Expand “street” outreach, including refinement/replication of *BAC Blitz* to first-year students during first weeks academic year
- Increase involvement in campus committees and policy/environmental change initiatives
- Add community service requirement
- Train new Peer Health Educators (Fall 2009)
- Provide continuing education and development opportunities to all Peer Health Educators
- Participate in regional Bacchus Network Peer Education Conference (Spring 2009)

HIV Testing

Attempt to reinstate free, anonymous, on-campus HIV testing for students.

Web Site

Continue to develop LiveWell web site.

Inter-department goals

Health Assessment

Complete analysis and write Executive Summary. Present findings to university leadership, including Student Affairs Heads. Use data for program planning. Conduct ACHA-NCHA in Spring 2010.

Mental Health Promotion

Continue involvement with MA DPH/SPRC College Suicide Prevention Working Group; apply Working Group’s recommendations, once finalized, to inform mental health promotion activities on campus. In partnership with the Counseling Center and Active Minds on Campus, continue to expand mental health promotion activities on campus. These activities will: promote mental health; decrease stigma surrounding mental health issues; educate students, staff, and faculty on the “warning signs” of suicide and how to intervene.

Committees/Policy Work

Continue work with the following committees to improve campus policies to support student health/wellness: University Alcohol Committee (co-chair), Student Health Advisory Board (co-chair), Programming Committee, Sexual Violence Prevention Committee

Health Promotion Expansion

Continue to advocate for the hire of additional health promotion staff for the following areas: alcohol and other drugs, sexual violence prevention and response, mental health promotion. Identify funding

opportunities to support health promotion activities/expansion. Collaborate on proposal development, as indicated.

Top priorities

LiveWell Office

Measures of Success: increased awareness of office and services (survey?)

Peer Health Education Program

Measures of Success: increased awareness of office and services (survey?), increased attendance at workshops (attendance sheets); workshops refined; new workshops added; more PHEs participate in campus committees; PHE engage in campus policy initiatives; PHE complete office hours (work logs); expand street outreach (work logs); new PHEs trained (successful completion of internship); PHEs attend Bacchus Conference and participate in other continuing education opportunities; PHEs complete community service project.

Health Assessment

Measures of Success: analysis and Executive Summary completed; results of analysis presented to/shared with DOSA Leads, others; analysis used for future program planning; ACHA-NCHA completed in Spring 2010.

Committees

Measures of Success: University Alcohol Committee and Student Health Advisory Committees established and operational; University Alcohol Committee develops recommendations and shares report with senior management.

Mental Health Promotion

Measures of Success: continue involvement with MA DPH/SPRC College Suicide Prevention Working Group; enhance collaboration with Active Minds and Counseling Center; increase number of QPR workshops offered on campus; launch *Building Bridges: Friends Helping Friends* campaign; distribute *Building Bridges* and associated materials; increase number of students, faculty, and staff who feel that they can recognize the “warning signs” of suicide and intervene effectively (QPR workshop evaluations, pre/post survey *Building Bridges* campaign launch?)

V. Supervisory Support

My supervisor, Barbara Agee, is supporting me in the above goals by:

- advocating for my advancement, including appropriate compensation
- underwriting an administrative assistant for LiveWell (10 hours/week)
- advocating for the hire of additional health promotion staff
- encouraging my participation in continuing education/professional development opportunities

In addition to the above, my supervisor can continue to support me in accomplishing my goals by:

- assisting me in identifying funding for the next ACHA-NCHA survey
- seeking Divisional funding to support LiveWell or advocating for an increase in the Health Fee to support health promotion activities, so that I am not dependent upon SFAC funding and can possibly expand staffing
- earmarking monies for the future development of a Wellness Center, which would incorporate Health Services, LiveWell, and Counseling (?)

VI. End Notes

I was on maternity leave from mid-December 2008 through mid-March 2009 and out on emergency family leave from mid-April through mid-May 2009.

Respectfully Submitted by,
Beth-Anne Vieira, MPH
Coordinator, Health Education & Promotion
June 10, 2009

VII. Addendum/Data

Peer Health Educator Workshop Program Evaluation Summary AY 2008-2009

(N=486)	Strongly Agree	Agree	No opinion	Disagree	Strongly Disagree
The presenter(s) was/were well prepared.	86%	13%	1%	0%	0%
The material was clearly presented.	86%	12%	1%	0%	0%
The presenter(s) responded to questions clearly and knowledgeably.	87%	12%	0%	0%	0%
The presenter(s) respected differing viewpoints.	88%	10%	1%	0%	0%
The topic was interesting.	85%	13%	1%	0%	0%
The program provided me with new information.	84%	13%	2%	1%	0%
I would recommend this program to a friend.	85%	15%	1%	0%	0%

**Note: Evaluations of the Peer Health Educators' presentations for RA training (January 2009) and Bishop Stang's Senior Wellness Day (March 2009) are not included in the above total. (Evaluations of RA training sessions are conducted by Res Life.) Approximately 130 RAs and 400 high school students attended these workshops.*