

Overview

The National Collegiate Health Assessment (NCHA) is administered to college students across the country biannually. The provide information back to campuses comparing students to national responses. UC Merced has participated in the survey four times since 2009, gaining information about our student body compared to college students across the country. Results are used by Student Affairs staff to shape educational programming and health-related interventions. Administered just prior to spring break, the survey is considerable in length and quite thorough in the nature of the questions about students' behaviors. Presented here are survey results, not only to track trends in UCM students' behaviors, but to compare to the American College Health Association's (ACHA) Healthy Campus 2020 Initiative which has set national goals for college student wellness.

Objectives

The NCHA asks myriad questions about students' health-related behaviors, included in 12 categories:

- Health Impediments to Academic Performance
- Health Communication
- Injury and Violence Prevention
- Mental Health
- Nutrition
- Physical Activity/Fitness
- Sexually Transmitted Diseases/HIV
- Family Planning
- Substance Use
- Tobacco Use
- Immunization and Infectious Disease

Methods

In Spring, 2015, 759 UC Merced students completed the health survey, a 13% response rate. The survey invitation tis emailed to all enrolled UCM graduate and undergraduate students. The survey sample was over-represented in women students, first year students, graduate students and bi-racial students, and under-represented in fourth year students. The sample was confirmed to be representative of our campus Greek population, something that we explored due to the high profile of national examples of fraternity and sorority members' unhealthy behaviors, such as binge drinking and sexual assaults.

In Spring, 2013, 910 UC Merced students completed the survey, a response rate of 16.9%. In Spring, 2011, 20.2% of the students responded to the survey. The initial survey, conducted in Fall, 2008, yielded a 27.5% response rate. The survey was moved to spring for subsequent iterations.

Results from Spring, 2015

Survey respondents were asked to report what factors, within the last 12 months, had a negative impact on their individual academic performance (which was defined as receiving a lower grade on an exam, or an important project; receiving a lower grade in the course; receiving an incomplete or dropped the course; or experiencing a significant disruption in thesis, dissertation, research, or practicum work). The following is a list of the percentages of the 2015 survey respondents who identified health-related impediments to academic performance with those responses over 10%:

Stress: 36.8%

Sleep difficulties: 24.5%

Anxiety: 22.3%

Internet use/computer games: 17.1%

Cold/Flu/Sore throat: 14.8%

Depression: 14.6%

Work: 13.1%

Concern for a troubled friend/family member: 12.6%

Roommate difficulties: 11.9%

Participation in extracurricular activities: 10.7%

Relationship difficulties: 10.3%

The remainder of the responses (receiving less than 10% of the sample) are listed at the end, but it is important to note that **one in three students** reports that academics were negatively impacted by **stress**. Almost **one in four** reports **sleep difficulties** that led to academic problems. As you work with students, please know that the NCHA benchmark data show that our students are more stressed than their peers at similar institutions across the country.

Longitudinal Data: Stress Undermines Academic Performance

Recognizing the datasets are not directly comparable, we should explore at the longitudinal responses as trends with considerable caution. The table below shows the percentage of respondents who identified “stress” as an academic impediment within 12 months of the survey date. The spring 2017 data point may help us understand if this will continue to decrease from a high of nearly 40% in 2013.

Academic Impediments	Fall 2008	Spring 2011	Spring 2013	Spring 2015
STRESS	31.7%	32.0%	38.2%	36.8%

More data are available on the UC Merced Student Health Services webpage at <http://health.ucmerced.edu/ncha>.

Comparing UCM Results to Healthy Campus 2020 Initiative

Health Promotion at UC Merced and the peer educators, the H.E.R.O.E.S., have selected eight indicators from the NCHA on which to focus their educational efforts this academic year. They are presented in the table below with the student responses from both the 2013 and 2015 surveys, compared to the targets set by the AHCA for the Healthy Campus 2020 campaign. Thus, we have 5 years to “move the needle” to reach those national targets.

ACHA Healthy Campus Objectives	UCM 2013 Results	UCM 2015 Results	2020 Target for Healthy Campus	Difference from Target
Proportion of students who report engaging in high-risk drinking	34%	32%	32%	0%
Proportion of students who report using marijuana	13%	18%	15%	3%
Proportion of students who report eating 5+ daily servings of fruits and vegetables	6%	4%	7%	3%
Proportion who report academic performance was adversely affected by sleep difficulties	24%	24%	18%	6%
Proportion of students who report having been tested for HIV	19%	22%	28%	6%
Proportion of sexually active students who report using condoms, most of the time or always, for anal intercourse	16%	18%	30%	12%
Proportion who report academic performance was adversely affected by stress	38%	37%	25%	12%
Proportion of students who report meeting guidelines for aerobic physical activity	44%	40%	54%	14%
Proportion of sexually active students who report using condoms, most of the time or always, for vaginal intercourse	24%	25%	56%	31%

Conclusions for Healthy Campus Initiative

Our 2015 results show that respondents have reached the national target for the proportion of students who engage in high-risk drinking behavior. The two responses that are closest to reaching the ACHA Healthy Campus targets are the proportion of UCM students who report using marijuana and who report eating five or more servings of fruits and vegetables daily. We have the most ground to gain in the students' use of condoms, meeting physical activity guidelines, and managing stress so it does not adversely impact academic performance. The H.E.R.O.E.S. have committed to increased educational programming in all of these areas in 2015-16. Please think about what your department can do to reinforce the positive behaviors and help change the negative ones among our student body.

Overarching Conclusions

It is important to reiterate that the results here have considerable limitations. The survey response rate has been dropping and now represents a little more than 10% of the student population. The samples we are able to collect are often overrepresented and underrepresented in significant ways, and the results are completely self-reported data about students' personal behaviors that are hard to confirm or triangulate. Still, many of the findings do seem to reflect observable behaviors in campus residence halls, and align with issues presented in the Student Health Center and Counseling and Psychological Services. At a minimum, this survey provides us information to help focus educational programming.

Recommendation: A Call to Action

Given the gaps that remain between our students and the ACHA targets, this assessment brief concludes with a Call to Action. Many campus colleagues could be tapped in efforts to help our students change their habits and behaviors. If you are interested in participating in a discussion of more of these data and possible strategies to close the gap between our students' behaviors and the

ACHA Healthy Campus 2020 targets, please contact Kristin Hlubik, Coordinator of Health Promotion at khlubik@ucmerced.edu to join a spring semester working group.

Additional responses to the question about what negatively impacts students' academic performance:

Finances: 9.2%

Homesickness: 8.3%

Death of a friend or family member: 6.4%

Chronic health problem or serious illness: 4.2%

Chronic pain: 3.9%

Sinus infection/Ear infection/Bronchitis/Strep throat: 3.0%

Alcohol use: 2.4%

Allergies: 2.4%

Attention Deficit/Hyperactivity Disorder: 2.4%

Injury: 2.4%

Learning disability: 2.1%

Drug use: 1.8%

Pregnancy (yours or partner's): 1.5%

Eating disorder/problem: 1.3%

Sexual assault: 1.2%

Discrimination: 1.1%

Sexually transmitted disease/infection: 0.7%

Gambling: 0.4%

