

Health & the University: An Ethnographic Approach

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Abstract

This essay is a short study of Illinois State University's (ISU) student health agenda. The study examines ISU's perspective and approach on student health efforts, infrastructure of health departments on campus, and ongoing Health Promotion and Wellness programs and their impact on campus and in the local community. Methods used include interviews with faculty in the Department of Health Wellness and Promotion, ethnographic observations of peer-to-peer health promotion programs, review of Department of Health Promotion and Wellness sponsored materials, and health behavior data. The principle finding is that the University's agenda and value of health reflects national cultural trends in that health is taken for granted and not a priority issue.

I. INTRODUCTION

Illinois State University (ISU)'s campus is in the twin-cities community of Bloomington-Normal near the geographic center of the state of Illinois. The University is one of twelve public universities in Illinois and serves 18,207 undergraduate students and 2,295 graduate students as of 2013 ("Quick Facts About Illinois State" n.d.). Nearly 61% of undergraduate students are from the Chicago area, and another 21% from the local county and surrounding area ("Quick Facts About Illinois State" n.d.). This demographic brings a unique set of diverse students from the larger city and suburban areas to the predominantly Caucasian twin-cities. ISU's academic departments offer more than 160 major and minor options and 41 masters, specialist, and doctoral programs. ISU understands the important role they play in developing their diverse student body and preparing students for their career paths. The University serves as a home to thousands of students throughout the year, and strives to meet student's needs both in and out of the classroom.

One of the main responsibilities for a large public university like ISU is to care for their students' health. The University cares about students' health because of its positive

correlation with academic success (Almeda 2011). According to the Centers for Disease Control and Prevention (CDC 2011), leading national education organizations recognize the close relationship between health and education, as well as the need to foster health and well-being within the educational environment for all students. The CDC (1998) claims that colleges and universities are important settings for delivering health promotion education and services to many young adults. But to what extent is ISU advocating to promote healthy behaviors in their students? Often universities struggle between balancing health promotion and education with treatment/medical services. In American culture, health is taken for granted as an individual is presumed healthy until they are sick. Accordingly, the United States spends much more on treatment than prevention (Scott 2009). Universities are embedded with the same culture and structure, but they can also serve as models for society and be on the front lines of creating a different culture of health care. On a health continuum, prevention efforts of health education/promotion lay on one end, and tertiary health (diagnosis, treatment, etc.) lay on the opposite. This research project examines ISU's perspective of health and where it lays on the continuum.

Before conducting my research, I made the

following assumptions as to why the University would invest in health promotion and wellness. The University exists to serve students. While the University must also tend to the health needs of faculty and staff, students are the University's priority population. Health and well-being are a strong foundation for students' academic success. As advocated by the CDC, the academic success of America's youth is strongly linked with their health. Scientific reviews have documented that school health programs can have positive affects on educational outcomes, as well as health-risk behaviors and health outcomes (Basch 2010). By integrating positive health behavior messages into the University's culture, inevitably a healthy student population can emerge. Lastly, health education and promotion fosters knowledge-seeking skills. Health Education Specialists (HES), and other in the health education sector, do not have all of the answers to health and medical questions as many people may assume. The role of a HES is to serve as a knowledgeable point of contact to guide a person to find the resources and solutions that best fit their needs; not give people definite yes or no answers and directions about their individual health situations. Health promotion campaigns on campus serve the same purpose. They work to provide insight on an issue and the resources of how to obtain further information. This creative design encourages the individual to exercise their own knowledge-seeking skills. These skills are transferable and can be used beyond finding resources for one's health needs. Knowledge-seeking skills are capable of enhancing self-efficiency and are beneficial to a student beyond college.

II. METHODS

Four interviews were conducted during the course of this research project. Three of the four interviews were with faculty of the ISU Department of Health Promotion and Wellness. These faculty members were the director of Health Promotion and Wellness and the two coordinators of the department. The fourth interview was with a current ISU senior who is a

member of the Student Wellness Ambassadorial Team (SWAT). Ethnographic observations at the peer health program G Spot, a portable gazebo that is set up around campus that distributes health promotion materials, were also conducted. In addition to the participant interviews, a review of materials produced by Health Promotion and Wellness were evaluated. Also an examination of the institutional report from the American College Health Association-National College Health Assessment was also conducted.

III. BACKGROUND: HEALTH ISSUES FOR COLLEGE STUDENTS NATIONWIDE, WHAT ARE THE CONCERNS? HOW DOES ISU MEASURE UP?

The American College Health Association-National College Health Assessment (ACHA-NCHA) is a nationally recognized research survey that assists in collecting precise data about students' health habits, behaviors, and perceptions. A comprehensive picture of student's health is necessary as college students are a diverse yet distinct population with specific health risks and needs. Having current and relevant data about students helps universities enhance campus-wide health promotion and prevention services. Each year the ACHA-NCHA compiles an institutional report for participating universities, which usually number around fifty institutions. The report is a result of a survey that focuses on alcohol, tobacco, other drug use, sexual health, weight, nutrition, exercise, mental health, and personal safety and violence.

A summary of findings is included in each institutional report. This report is made available to the public through the ISU Health Promotion and Wellness website. Over the years, ISU has consistently fallen in the average range of national results. Considering sexual health at ISU, several important issues were highlighted. First, 22% of students report not having sex whereas 46% report that they have had sex with only one partner in the last 12 months (Almeda 2011:13). This is contrary to the

perception that most students are having sex with more than one partner at the same time. Health Promotion and Wellness faculty are using the information gathered from this survey to create messages that address the acceptance that ISU students are having sex and advocate the fact that students are not having sex with a lot of partners (Almeda 2011:13). Second, consistent condom use during vaginal intercourse appears to have increased significantly from 2005 (50%) to 2011 (68%) while condom use for anal sex also increased significantly since 2002 (Almeda 2011:13). Looking at the most commonly used drugs, alcohol, tobacco, and marijuana, the percentage of ISU students who reported using these drugs in the last 30 days decreased significantly since 2002 for tobacco use, stayed about the same for alcohol, and decreased for marijuana through 2009 before slightly increasing in 2011 (Almeda 2011:13). Health issues that have the most negative impact on academic performance at ISU are: 1) stress, 2) sleep difficulties, 3) anxiety, and 4) cold/flu/sore throat (Almeda 2011:12). Significant impacts of these health issues may lead to a student receiving an incomplete in class, dropping a course, receiving a lower grade on an exam, project or course.

IV. HEALTH SERVICES AT ISU: STUDENT HEALTH SERVICES & HEALTH PROMOTION AND WELLNESS

ISU offers a number of student services including nonremedial tutoring, women's center, health insurance, and health series. As with other universities, ISU has always had a Department of Student Health Services for vaccinations, examinations, and treatment. The mission of Student Health Services at ISU is to enhance the health and wellness of their students, individually and as a campus community, in order to enrich their education experiences and future lifestyles ("Student Health Services" n.d.). The Department of Health Promotion & Wellness was established in 2009 to focus on promoting positive health messages for behavior change occurring on the individual and community level through

educational and environmental strategies. The mission of Health Promotion and Wellness is to foster a thriving, engaged campus community that advances wellness at all levels ("Mission Statement" n.d.). While Student Health Services is more aligned with focusing on individual students' health through tertiary care, Health Promotion and Wellness is geared to the masses and looks to reach out to the entire campus community through educating and raising awareness for preventative measures.

Prior to 2009, faculty and staff working on issues of health promotion and wellness were done through a sector of the Department of Human Resources. However, even though faculty and staff were working through Human Resources, they were considered part of Student Health Services. While little data regarding the emergence and founding of Health Promotion and Wellness can be found online, the interviewees described this split as a need for two different units. A contributing factor was that Student Health Services, to an extent, overshadowed health promotion efforts because of their ability to provide direct medical services to students. One of the ways this was most evident was by there being more support to provide funding to the medical services rather than the prevention efforts. Faculty found it difficult to constantly compete for funding when the tertiary care was favored

V. FINDINGS: FUNDING AND PRIORITIES FOR TERTIARY CARE

The internal University's debate to invest specific funds into the establishment of a department for health promotion and wellness is a reflection of America's perspective on health. Both coordinators expressed in their interviews how as a culture we tend to ignore our health behaviors until we become sick. And, in many cases, even when people begin to realize they are not in adequate health, they do not seek medical care until they are in a worsened condition. This is possibly explained by how individuals view and define health. Health is generally viewed narrowly as not

being sick rather than holistic wellbeing. The physical aspect dominates the other dimensions of health, such as intellectual, emotional, social, vocational, environmental, and spiritual health.

This skewed perception of health is not surprising, nor is the reasoning for the separation of Health Wellness & Promotion and Student Health Services. In the United States, only three cents of every dollar spent on healthcare goes towards prevention efforts (American Public Health Association 2013). This is fascinating, as well as discouraging considering that seven out of ten diseases can be prevented through lifestyle health behaviors (American Public Health Association 2013). One of the Health Promotion and Wellness coordinators described the situation as, "When push comes to shove, health prevention efforts are usually not a priority," (Health Promotion and Wellness Faculty Member, interview, November 14, 2012).

Many institutions have adopted a philosophy of freedom with responsibility, thus giving students the freedom to choose their own actions but holding them responsible for the choices they make. For incoming and returning students who are leaving home to attend college, students might over indulge in personal freedom and participate in risk behaviors they may not actively participate in back home. In a national survey conducted by Susquehanna University's Center for Adolescent Research & Education (CARE) and Students Against Destructive Decisions (SADD) (2013), approximately one-third of teens are experimenting with risky behaviors; many for the first time during their first semester at college. The survey states that roughly one-third of current college students surveyed reported drinking alcohol (37%), engaging in intimate sexual behavior (37%), or having sexual intercourse (32%) during their first semester at college. It is important that colleges and universities do more to promote healthy practices and wellbeing of students. As self-reliant as students may seem, they are still being molded into young adults and are susceptible to peer pressure and inclined to

engage in risky behavior (Skorton 2012). Colleges and universities need to think creatively about the challenges of overcoming risk behaviors. Students will always be faced with risky choices, college can and should fulfill their educational missions by promoting safety through education and the provision of support services that will assist students in exercising their freedom responsibly (Skorton 2012).

VI. THE VALUE OF HEALTH AT THE UNIVERSITY LEVEL: DIFFERENCES IN FACULTY OPINIONS

The difference in Health Promotion and Wellness faculty opinions regarding the value of health at the university level is the most interesting finding. Both coordinators expressed how they continue to make sincere efforts in health promotion, yet they are continuously faced with many challenges. They argued that there needs to be support for health promotion on all levels at the University, with people in higher administrative positions taking more initiative. When asked how they handled situations when others are not open to promoting health as a greater priority, they responded, "It's like water on a stone. You keep repeating the message." Both of the coordinators spoke on the topic with a passion about being advocates of health promotion, sincerely believing that through consistent positive health behavior messages, they could enhance the quality of health in students. Beyond providing direct health messages, Health Promotion and Wellness faculty provide students with the knowledge-seeking skills, tools and resources that are going to give students an advantage beyond college to make healthier lifestyle choices.

Health Promotion and Wellness works to disburse positive messages of health behaviors, promote awareness of various health issues, and encourage knowledge-seeking skills. Toilet Talks, informational flyers posted in individual toilet stalls, are one way which the department disperses their messages around campus. Every

month, they design an informational flyer highlighting one health topic, how it impacts the students on ISU's campus, steps individuals can take to manage that issue and local available resources. Toilet Talks highlight a variety of health topics including immunizations, condom use, stress and time management, weather safety, physical activity, nutrition and the importance of sleep. The Toilet Talks are strategic in that they approach health holistically. Rather than only creating awareness for physical health, they promote awareness of the seven dimensions of wellness. Toilet Talks is also strategic in that they provide action steps that are basic and applicable to the everyday student to implement while also providing them with resources to find more information online and in their immediate community. By providing students with the initial action steps for changing their individual health behaviors, Health Promotion and Wellness is encouraging students to begin to take their health into their own hands.

The director of the department was no less sincere in expressing the need for health promotion efforts at the University. However, what did significantly differ was her perspective on how the University values health. She made the argument that students are the University's priority and so is their health, and that they do not have to sell anybody on it, including administrators. She went on to describe how there are no problems with funding, that this is why the department was created. She mentions that Health Promotion and Wellness being its own department and having that type of visibility is an extension of how the University values health.

These clashing faculty opinions on how the University values health was difficult to analyze. It is assumed that the two coordinators work closely with the director, and are as informed about issues regarding the department. Yet why such different answers? One conclusion regards the dynamics of power and representation. The director is the principle spokesperson of the department. This being the case, perhaps she censors her responses about

the University more intensively. In the participant interviews I found that the director paused to collect her thoughts before answering. Was she using that time to reflect on the question? Or a construct a perfect answer?

VII. PEER-TO-PEER EDUCATION KEY TO HEALTH PROMOTION ON CAMPUS

SWAT and the G Spot are the most visible entities of Health Promotion and Wellness programs. SWAT, is a registered student organization that strives to promote healthy behaviors and lifestyles to ISU and the local community through a variety of programs and services. SWAT members are a group of ISU student volunteers from all majors with diverse backgrounds. As members, they are required to attend a weekend training retreat and weekly training sessions during the fall and/or spring semesters to learn the latest information and research on health issues. These members are trained by Health Promotion and Wellness faculty and staff to promote and talk to fellow students about a variety of health issues. They help staff the G Spot, a portable gazebo that travels to different points around campus. The gazebo is mainly utilized by students as a source of free condoms and a comfortable go-to place to ask their peers questions about sexual health and sexual health resources. Recognizing that the gazebo was the central hub of sexual health information for students, Health Promotion and Wellness faculty and staff named the gazebo "The G Spot" as a play on words from the popularized sexologist term "g-spot," also called Grafenberg spot; which is characterized as an erogenous area of the vagina that, when stimulated, may lead to strong sexual arousal and a powerful orgasm (Rosenthal 2012: 76). The gazebo travels to various locations on campus each week to provide wellness and health information, materials on a large variety of health topics, condoms, and fun giveaways for ISU students, faculty and staff.

As a student I have witnessed the popularity of the G Spot on campus. I had conducted

multiple ethnographic observations of the G Spot on campus. For each day of observation, I noted there was consistent traffic throughout the day at the gazebos. The G Spot appears at various locations on campus on different days of the week, enhancing their chances of being utilized by all students. In an interview with a SWAT member, she described the purpose of the G Spot as a place for students to feel comfortable to ask questions and talk about health-related topics, especially sex. She described how there is not much dialogue exchanged between students who stop by and SWAT members - it's about the atmosphere. The member explained how at the G Spot different ages interact with the gazebo differently.

"Younger aged students tend to come in pairs or groups. Most people who ask questions tend to be younger students, and ask questions timidly. Sometimes younger guys come and ask questions just to be funny, as if it were a dare. In cases like that we just are sure to give information objectively. Older students usually just come take condoms and leave."

In the interview with the student, I asked what made SWAT and the G Spot successful and/or not successful. Regarding success she said,

"The program creates a comfortable vibe. Instead of a lecture where you're just sitting and listening, you can ask your own questions. And because it's students talking to students it makes things easier to talk about. For example, someone asked me why we provide lubricant. We explained why and how it helps to not break a condom. And that was it, and they walked away question answered. I think that's much better than having to raise your hand in a classroom and ask in front of others. I think a lot of people don't want to admit that they don't know."

In terms of not being as successful, she described issues regarding age and generation gaps,

"...Well older adults sometimes come by, most of the time seem *judgey*. They have the mentality that sex is not okay until marriage and here we are saying that it is okay... Gets awkward sometimes. But we know what we stand for and as long as students are safe and healthy and we continue to promote these health topics and don't feel intimidated. It also throws things off when adults stop by. It stops students from approaching the booth."

Overall the student expressed how SWAT and the G Spot are a value to the ISU community. These programs are a way to get teachers involved with students, and in turn have those students pass on knowledge to their peers.

Peers play the most significant role in an undergraduate's growth and development during college (Astin 1993, Pascarella & Terenzini 2005). Peer health education on college campuses has been shown to impact positive health behavior (BACCHUS n.d., White et. al 2009). Positive health behaviors are behaviors that prevent and reduce risks of unwanted health issues. For example, limiting alcoholic beverages while going out and ensuring the individual has a designated driver or a safe means of getting home are positive health behaviors as they reduce the risks of binge drinking, impaired driving, and possible sexual intercourse and drug use associated with binge drinking. Many universities, including ISU, participate in BACCHUS (Boosting Alcohol Consciousness Concerning the Health of University Students) and other peer health education programs. Organization like BACCHUS work to actively promote student and young adult-based, campus and community-wide leadership on healthy and safe lifestyle decisions concerning alcohol abuse, tobacco use, illegal drug use, unhealthy sexual practices and other high risk behaviors (BACCHUS n.d.). Peer health programs empower students and administrators to voice their opinions and needs to create a healthier and safer campus

and community.

VIII. RECOMMENDATIONS FOR THE UNIVERSITY

My first recommendation is that the University, beyond the Health Promotion and Wellness program, express their support of health promotion by integrating their value of health into campus culture. While this may be a difficult challenge with administrators, being stronger advocates for health promotion and education would expedite the process of integrating health promotion efforts into the campus values. Initiatives on various university levels should demonstrate a supportive a commitment to health and health promotion. This could be achieved by Health Promotion and Wellness working with various other departments on campus for bi-monthly campaigns towards health issues. Another way university representatives could show their support would be to co-sponsor a health promotion event or seminar that includes both students and university representatives working together. The University could also initiate specific studies and surveys to better understand the student's perceptions of health services on campus and how it equates to success in the classroom.

As a second recommendation, the University should provide larger campaigns regarding health services on campus and the local community. Many students on campus are unaware of the health services provided by the University or don't feel that the staff is as qualified as their personal physician. One method in which this can be achieved is by integrating a campus services scavenger hunt during their first year orientation which will allow students to become familiar with the location of the services and connect with staff on a personal level. Another approach is to encourage students to meet at least once with a representative from Health Promotion and Wellness, or Counseling Services. This setup would mirror how students are encouraged to meet with their academic advisor and

financial aid advisor at least once a semester to discuss their academic and financial path. By fostering a relationship between students and representatives from Health Promotion and Wellness and Counseling Services, ISU can better monitor the individual health needs of its students.

My third recommendation is for the Health Promotion and Wellness to recognize that the incoming student body is no longer the traditional students from high school expecting to finish college in four years. Greater emphasis should be placed on recognizing that the phrase 'first year students' doesn't refer to only freshman. Health Promotion and Wellness messages should refine their promotion messages adequately tend to the health needs of veterans, students with disabilities and non-traditional students (individuals granted campus services who are not part of the university's primary constituent groups). This could be accomplished by conducting a survey to examine what the needs of these student groups are and how their perception of having their health needs met at Illinois State University.

IX. CONCLUSION

The perspective of the University's view on the value of student's health does not appear to attract to a particular side of the health continuum. While Health Promotion and Wellness continues to advocate and sponsor successful peer-to-peer programs for the campus community, little advocacy is initiated by others at the University to integrate health into campus infrastructure. As a University, the institution's overall stance does not appear to emphasize the important relationship that exists between health and academic success. Health Promotion and Wellness continues to lay down a strong foundation of student health outreach services that perhaps in the future the University as a whole will build upon.

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