Ohio University

The Office of Health Promotion

Division of Student Affairs

Program Review Self-Study

March 2020

1. **Section I: Introduction and Overview**
2. History and overview
   1. Brief history of the department

The Office of Health Promotion, previously (Health Education and Wellness) dates to the early 1980’s with one Director and a Graduate Assistant. The Director reported to the Dean of Students while funding was appropriated by the Director of Student Medical Services. In 1991 a new Director was hired and a separate budget from Student Medical Service was created. The Director continued to report to the Dean of Students but maintained a close working relationship with the student medical staff. During that time Health Education and Wellness supervised the Gynecological Clinic and Sexual Health Seminar. Within the next three years two Assistant Directors we hired, one as a part of the Drug Free Schools Act to provide alcohol and other drug education and the other as a result of the Clery Act to prevent sexual assault. These two additional staff were made possible with teaching appointments in the College of Health Sciences and Professions, which covered 20% of those staff members salary. This agreement continued with one staff person until 2015. In 2001 an additional Graduate Assistant was added to assist with alcohol harm-reduction education. In 2006 two additional graduate assistants were added to support sexual assault prevention and data collection. In 2008 the physical office was moved from Hudson Health Center to Baker University Center. During this time the name changed to Health Promotion as a recommendation from Keeling and Associates review of the area. Staffing levels remained stable until a University budget crisis/re-organization occurred in 2009 when the Office of Health Promotion was combined with Student Activities, Leadership, Greek Life and Preforming Arts. The staff of health promotion was reduced to one FTE with four graduate assistants.

* 1. Description of how the department is organized for function and reporting purposes

The office is supervised by the Associate Director, who supervises the two Assistant Directors, two of the Graduate Assistants and five work-study students. Each Assistant Director supervises one Graduate Assistant. The Associate Director reports to the Associate Dean of Students for Well-being.

* 1. A candid assessment of strengths and weaknesses

Strengths:

Strong Health Promotion Team, productive and supportive work environment

Long history of an effective peer health education program

Robust training for peer health educators that includes a 15 week course for credit in the College of Education

Continued growth of the Collegiate Recovery Community

Adequately trained staff that functions at a high productivity level

Educational programming that engages student learning through fun

Creative with allocated resources

Good relationships with many academic colleges, other administrative units and members of the division of student affairs

Close working relationship with City Council and other community resources

Provides experiential training opportunities for Graduate Assistants

Vast touch point with student body through a variety of health education programs

Ongoing data collection to assess and evaluate student health behaviors and program outcomes

Visible office location within the university center

Weaknesses:

Health Promotion and Well-being brand not defined or developed

Current organization of DOSA makes it difficult to establish and maintain on-going collaborative relationships with some division partners

Elimination of funding for Graduate Assistants after 2021

Budget for required online education courses are not part of the baseline budget

Health Promotion educational programming funds are not part of the baseline budget

1. Mission and strategic plan  
   1. Statement of department mission, vision, values (if exist)

Health Promotion is committed to the advancement of the total health and well-being of Ohio University's diverse population. Health Promotion will assess and respond to the health and wellness needs of all students through the development and implementation of proactive health and wellness programs and services. Health Promotion recognizes its responsibility to promote the wellness concept throughout the university community.

* 1. Statement of existing goals

Provide educational programs and services with learning outcomes within the scope of the area

Engage student in meaningful educational programs and services to increase retention and graduation rates Ensure that equity and social justice topics are embedded into educational programs and services of Health Promotion

* 1. Department strategic and/or operational plan   
     *See appendix 1, 2, 3, 4& 5*

1. A look back and a look ahead  
   1. A discussion of what staff, students, and graduate students consider the most important developments in the department over the last five years
   2. A discussion of the major opportunities and challenges facing the department over the next five years
   3. What did you learn and change in response to the last program review (if applicable)
2. Questions for the review committee

How can continued environmental change be bolstered through social norms marketing campus wide to address the health campus majority as it relates to, AOD use, active bystander behavior, recovery services and sexual health?

Consider ways to increase the scope of high-risk groups that are targeted thought specific prevention efforts.

Is the adequate prevention staffing and budget to address student health and well-being, meet institutional needs and to achieve identified goals?

The current productivity level is unsustainable, what should be cut to maintain a level of effective prevention programming?

What new operations could or should be considered?

What individuals or departments inside of Student Affairs have a role to play in prevention that currently do not exist?

What individuals or departments outside of Student Affairs play a role in achieving the institution’s prevention goals?

1. **Section II: The Department**
2. Overview of key work
   1. Summary of prominent department work and innovations

The Office of Health Promotion has many campus and community partners who assist us in sustaining the Healthy Campus Majority at Ohio University. The work over the last three years has expanded our targeted educational reach with a variety of student populations through these collaborations. We have identified that ongoing proactive health education dosing of upper-class and at-risk students are critical to support of the healthy majority. We have used data and recommendations included in previous external reviews from EverFi’s alcohol and sexual assault diagnostic inventory, NASPA’s Culture of Respect Initiative and the Optional College Town Assessment, OCTA to direct our focus and continue to broaden our work. We have begun to implement many of the recommendations that include, connecting alcohol harm-reduction with active bystander behavior addressing a variety health behaviors including the link between levels of sexual maturity and reducing sexual harm. We have used data to social norm active bystander behavior, promote low-risk or no alcohol use and support students seeking recovery or those in recovery from an addictive behavior. The goals of the office/staff members and individual job duties support the healthy majority.

1. Staff
   1. Discussion of staff, key job duties, credentials

The three professional staff positions in Health Promotion are master’s degree Required with three to five-year experience. Backgrounds in public health, counseling, social work and student affairs are all acceptable.

Associate Director of Health Promotion, M.Ed. College Student Personnel. Start Date-August 15, 2002

Certifications:

* Mental Health Frist Aid
* Ohio Dept. of Health HIV Counselor Training
* ACA Freshstart® Tobacco Cessation Facilitator
* Certificate in Prevention Leadership – Everfi
* BASICS Training
* One Love Domestic Violence Facilitator
* CHOICES Facilitator Training
* TIPS Alcohol Server Training
* Prime for Life/ On Campus Talking About Alcohol Certification

Key Job Duties:

* Directs the two professional staff and four graduate students in the area of Health Promotion
* Coordinates day to day operation, supervision and budget management of Health Promotion
* Supervises Health Promotion interns and five work-study students
* Oversight and management of the office budget
* Organizes staff trainings, professional development and appreciation celebrations within the area of Health Promotion
* Oversight of staff responsible for other drug education, power based personal violence, bystander interventions and the collegiate recovery programs
* Supervises all Health Promotion health and wellness awareness months addressing (Sexual Assault, Alcohol Education, Tobacco Use, Safer Sex/STI HIV testing and Other Drugs) throughout the year
* Supervision of Peer Health Educator Graduate Assistant and Advises 25 peer health educators, POWER/GAMMA
* Oversight of curriculum and instruction for the peer health educator training course
* Coordinates the collaboration with University College for the CHOICES risk reduction Alcohol and Active Bystander education program for first-year students
* Co-Chair for the Healthy Campus Coalition
* Management of all required online student education courses, Alcohol and Sexual Assault Education Undergraduates, Alcohol and Sexual Assault Education Ongoing and Sexual Assault Prevention for Graduate Students
* Supervision of the Graduate Assistant for Data Collection and Alcohol Programming
* Oversight of large data collection operations, Healthy Campus Survey, ScreenU for Alcohol, Prescription Drugs and Marijuana.
* Coordinates the use of data in the Healthy Campus Majority social norming campaigns
* Represents health promotion of campus and community committees as needed, i.e. (Reproductive and Sexual Health, Health Recovery Service Board of Directors and Drug Free Schools Biannual Review)
* Provides direction in department grant writing with awards being secured from the Ohio Department of Health, Great Plays, Avon, NCAA Choices and Drug-Free Action Alliance totaling 75,000

Assistant Director of Health Promotion for Recovery and Drug Education, M.Ed. Counselor Education. Start Date-July 1, 2013

Certifications:

* SMART Recovery Facilitator
* ACA Freshstart® Tobacco Cessation Facilitator
* Alcohol Literacy Challenge Certified Instructor

Key Job Duties:

* Oversight and promotion of the Collegiate Recovery Community, including weekly meetings, individual consults and social activities
* Supervise one graduate assistant
* Management of Other Drug prevention budget
* Deliver drug prevention education to learning communities and classrooms
* Coordinate campus/community recovery events
* Increase CRC awareness through marketing materials/social media about the support services throughout the campus community
* Assist CRC members in developing yearly relapse prevention plans to support retention
* Track meeting attendance and contact hours for students in recovery
* Train faculty, staff and students to be recovery allies
* Coordinate the CRC/Rural Woman’s Recovery Journaling program

Assistant Director of Health Promotion for Power Based Personal Violence, M. Ed. College Student Personnel. Start Date-July 6, 2016.

Certifications:

* Certificate in Prevention Leadership – Everfi
* Mental Health First Aid
* Safe Zone (trainee and trainer)
* Certified Bystander Intervention Facilitator – Green Dot

Key Job Duties:

* Supervise 1 graduate assistant, advise peer education group, and supervise practicum students and student interns as needed
* Develop, coordinate, and assess violence prevention programming using best practices/bystander intervention techniques
* Supervise better bystander peer educators, interns, and practicum students

Collaborate with campus stakeholders on programming, marketing, and assessment

* Develop social norming campaigns using best practices and data informed approaches
* Serve on key committees pertaining to violence prevention initiatives
* Co-Teach peer education training course
  1. Summary of institutional service for past three years—committees, appointments, etc.

Associate Director of Health Promotion

* Co-Chair, Healthy Campus Community Coalition
* Presidents Action Coalition on Sexual Misconduct
* Sexual and Reproductive Heath Initiative
* Culture of Respect
* Drug Free Schools and Communities Act Biennial Review

Assistant Director of Health Promotion for Recovery and Drug Education

* Chair, Stress Less Committee
* Chair, CRC Expansion/Addiction Awareness Committee
* Drug Free Schools and Communities Act Biennial Review member
* Athens HOPE (Halting Substance Misuse through Prevention and Education)
* Ohio University Hearing Board/Appeal Board
* Title IX Process Advisor
* Ohio University Tobacco Free Task Force

Assistant Director of Health Promotion for Power Based Personal Violence

* Co-Chair of PACSM Prevention Subcommittee
* Co-Chair of NASPA Culture of Respect Initiative
* Hearing Board Member and Student Organization Investigator
* Serve on OHIO Equity and Social Justice Committee and chair Professional Development Subcommittee
  1. Summary of professional service for past three years—editorial boards, professional associations, publications, etc.

Associate Director of Health Promotion

* Healthy town/gown relationships, Higher Education Center for Alcohol and Drug Misuse Prevention and Recovery webinar
* Prevention Excellence Award for Critical Process-EverFi
* Behavioral Health Advocate Award
* Outstanding Learning Community Advocate Award
* Content Review Expert, EverFi online alcohol education course
* NASPA Strategies Conference presentation on marijuana use data

Assistant Director of Health Promotion for Recovery and Drug Education

* Member of the Association for Recovery in Higher Education
* Guest blogger, Generation Rx University Voices Blog
* Co-Author, *Stress Less for Student Success presentation*

Author, *Are you Smarter Than Your Smart Phone? Why College Students Who Misuse Prescription Stimulants are Misled to Think They Are* presentation

Assistant Director of Health Promotion for Power Based Personal Violence

* NASPA Member
* Recipient of NASPA’s first Outstanding Contribution to Sexual Violence and Relationship Violence Prevention Award
* Red Cross Hometown Heroes Award: Sexual Assault Resource Collaborative
* Serve on NASPA Strategies program submission review committee
* Serve on Planning Committee for Ohio Department of Higher Education’s Title IX Student Summit
* Serve on Planning Committee for Ohio Consortium of Men and Masculinities in Higher Education

Conference Presentations:

The Role of Men in Prevention and the Needs of Male Survivors

Men and Masculinities Initiatives in Ohio

Unveiling a Masculinities Campaign

Not the Same Old, Same Old: Adapting Violence Prevention Programming for New Audiences

Building a Sustainable Toolkit for Peer Educators

Infusing Red Zone Education into the First Year Experience

* 1. Staff goals for the current year (if exists)

Associate Director of Health Promotion

* Track learning outcomes and the peer experience via peer health survey
* Update position descriptions to meet cultural competency requirement
* Incorporate equity and social justice topics to health education discussions each semester in the peer health educator training course
* Advise the general peer health educators, POWER/GAMMA to provide educational programs to the campus community
* Identify and provide educational programs and services that help students build community and feel connected
* Participate in learning outcome audit
* Update the CHOICES curriculum to increase bystander education as a result of last year’s data review
* Track retention support of peer health educators that stayed enrolled due to their peer experience
* Management of all online education portals addressing alcohol/sexual assault prevention for new students, juniors and graduate students

Assistant Director of Health Promotion for Recovery and Drug Education

* Provide one on one support to those seeking recovery or struggling to maintain recovery
* Deliver drug prevention education to learning communities, including Generation Rx (prescription drug misuse) and Stress-Less presentations to address stress and anxiety and reduce the misuse of alcohol and other drugs
* Assist CRC members in developing yearly relapse prevention plans to support retention
* Train UC academic advisors, CIC staff and Specific DOSA staff and students as recovery allies

to increase awareness of support services and referrals to the CRC

* Develop learning outcomes for the CRC experience
* Train Health Promotion graduate assistants and peer health educators to deliver the

updated Generation Rx program

* Through the stress less website track the resource sites that get hit addressing

stress and anxiety resources available to students

Assistant Director of Health Promotion for Power Based Personal Violence

* Advise the peer health educators (Better Bystanders) and consult on program development on verbal, physical/emotional abuse, 4 D’s of bystander intervention, and the expansion of bystander intervention skills into other wellbeing areas
* Complete the second year of the Culture of Respect Initiative the end of the fiscal year
* Develop higher level anti-hazing/bystander intervention programs for social Greek organizations by the end of Spring 2020
* Sit on the DOSA Equity and Social Justice Committee until the end of appointment in July 2020 (coordinate social justice in-service series)
* Assist in assessing the learning outcomes and experiences of peer educators during the Spring 2020 academic year for purposes of assessment and retention
* Spring 2020: Read *White Fragility*(D’Angelo, 2018). Fall 2020: use this work as a lens for examining how prevention work may or may not uphold problematic attitudes about race, to interrogate personally held beliefs as a student affairs practitioner, and to create more expansive means through which white fragility and race can be discussed in prevention work
  1. Staff and department highlights (optional)

Health Promotion Successes 2018-19

Health Promotion’s Peer Heath Educators, POWER/GAMMA and Better Bystanders and staff delivered 927 Health and Wellness educational programs to 13,816 students this past year. Power Based Personal Violence programs was a focus last year in the Greek Community with 357 members completing programs addressing hazing, active bystander intervention, and consent. Specifically, each program was designed to examine a certain element or various elements that contribute to power-based personal violence.

Data collection was at a high, completing the Healthy Campus survey, Optional College Town Assessment (OCTA), and the three online education programs for new students, juniors and graduate students addressing alcohol and sexual assault prevention.

Health Promotion completed the diagnostic inventories on alcohol and sexual assault prevention external review process from EverFi. Health Promotion and Ohio University was selected to receive the 2019 Impact Award for critical process work with alcohol prevention efforts.

The Collegiate recovery community continues to grow with 17 active members. The CRC survey administered each semester showed that students involved in CRC overwhelming state they feel a sense of belonging and community as members of the CRC. This year 77 students and faculty were trained as recovery allies.

The *Stress Less for Student Success* website went live highlighting the four elements of well-being while providing a hub for resources to help students reduce stress. A supplemental PowerPoint presentation has been created for Learning Communities and other classrooms presentations.

During the spring 2019 semester, a survey instrument was developed to seek interest from male identified faculty/staff and graduate/undergraduate students. Health Promotion will debut its new men’s mentoring initiative “OHIO MEN: Mentoring, Engagement & Networking” during the 2019-2020 academic year.  This program will update and replace a previous men’s engagement program with the aim of broadening faculty engagement and to provide opportunities to a greater number of male-identified students.

1. Student employees  
   1. A discussion of student employee job functions

The five work-study students currently assigned to Heath Promotion sit at the front pod desk and answer the phone, deliver posters and other printed materials, assist with program prep and staff the office when staff are not in.

* 1. List of goals/work accomplished (See Above)
  2. List of current student employee majors Public Health, Education, Child and Family Studies, Computer Science and Undecided
  3. List of what student employee alumni now do (employment status, graduate school, location) (optional)

1. Graduate student employees, if applicable  
   1. A discussion of graduate student employee job functions

There are currently four Graduate Assistants in Health Promotion.

Graduate Assistant for Peer Health Education, oversees the function and programs of the general peer health education group

Graduate Assistant for Power Based Personal Violence, oversees programs related to sexual assault, stalking and relationship violence. This position also supervises the Better Bystander peer education group.

Graduate Assistant for Assessment and Research, oversees and assists with the data collection within all areas of Health Promotion.

Graduate Assistant for Other Drug Education and Recovery Programs assists with the delivery of other drug prevention education programs and serves as a co-advisor to the Collegiate Recovery Program (CRC).

* 1. Discussion of how graduate student employment in the department contributes to academic learning the graduate student experience directly supports and complements their academic and career goals.
  2. List of current student employee majors

Three of the Graduate Assistants are in the Master of Education program, two in Counselor Education and one in College Student Personnel

One is in the Master of Public Health program

* 1. List of goals/work accomplished
* Measure through the CHOICES pre/post-test and year to year data if there is an increase

in bystander behaviors as a result of curriculum change

* Assist with data collection on behaviors for identified risk
* Graduate Students become proficient in delivering the updated Generation Rx and Recovery Ally programs
* Mentor peer health educators and assist with the management of the programs
* Assist staff with health education projects
* Track retention rates of peer health educators and CRC members
* Coordinate join peer health educator meetings monthly for peer professional development
* List of what student employee alumni now do (employment status, graduate school, location) (optional)

1. **Section III: Outcomes**
   1. Listing of DOSA Learning goals and learning outcomes the department contributes to and how

Assessment cycle plan for the next five years (see DOSA Introduction to Assessment Workbook for template)

Provide educational programs and services with learning outcomes within the scope of the area. Engage student in meaningful educational programs and services to increase retention and graduation rates. Ensure that equity and social justice topics are embedded into educational programs and services of Health Promotion (Provided by DOSA Strategic Plan). Well-being Goals Social Justice Goals completed through DOSA offered trainings.

* 1. Listing of department collected data (see reporting template) and collaborative data collection efforts

Annual Data Collection:

Health Campus Survey

CHOICES pre/post assessment

Peer Health Educator Impact Survey

CRC Student Impact Survey

EverFi new student, junior and graduate student pre/post assessment

Data Collection as Needed:

ScreenU for Alcohol, Prescription Drugs and Marijuana

Peer health educator program evaluation surveys

Sexual Health/Maturity Survey

Vaping Survey

Generation Rx assessment survey

* 1. Listing of university data the department examines or consults (as applicable)
  2. Evidence of department operational quality (e.g. surveys/interviews of current students, graduates, employers, community members or agencies, benchmarking operations against practitioner peers)

1. **Governance and Facilities**A description of standing and ad hoc committees run by the department

The Healthy Campus Community Coalition is a Presidential Coalition Co-Chaired by the Associate Director of Health Promotion and The Athens City Council President. The coalition’s goals are to:

Utilize data that will direct action to address Power-Based Personal

Violence, Substance Misuse/Abuse, and General Wellness, Change perceptions and institutionalize the “Healthy Majority” concept throughout the community, and Implement environmental strategies both on and off campus to make continuous improvements.

The Prevention sub-committee of the President’s Action Coalition on Sexual Misconduct (PACSM) is led by the Assistant Director of Health Promotion for Power Based Personal Violence.

The Stress-Less Committee is Chaired by the Assist Director of Health Promotion for Recovery and Other Drug Education. The committee charge is to reduce harm from alcohol and drugs by providing access to campus resources and other evidence-based strategies to reduce stress and anxiety

1. A description of the department’s physical space and facilities, including a discussion of the extent to which they are adequate.

The current location of the Office of Health Promotion is Baker Center 339 and the Collegiate Recovery Community lounge in Baker 313. The office moved to this location in August of 2019 as a result of the re-organization. The office space is prime real estate in a campus building that has much student traffic. There is a large info desk outside of the main lobby referred to as the POD where the work-study students are located. This POD is utilized as a program/education space for the peer health educators. The main office includes a workspace for the two peer health educator groups, POWER/GAMMA and Better Bystanders which have 32 members. There are 3 private offices for the professional staff and a workspace for the four Graduate Assistants. There are two storage closets, one for peers and the other for office supplies. There is a small refrigerator and microwave available to staff and students. The CRC is in a quiet space at the end of the student organization hallway. This serves as a lounge and meeting space for recovery programs. There is a private office for staff to use when needing private meeting with recovery students.

1. **Equity and Social Justice**
2. Highlight efforts and actions undertaken by department to recruit, retain, mentor, and provide professional development opportunities for students and employees in support of divisional and institutional goals for equity and social justice

We have incorporated equity and social justice topics into health education discussions each semester and in the peer health educator training course.

1. Discussion of retention of staff and recruitment of new staff for past three years, include challenges and efforts taken to advertise new positions

Health Promotion has not had a position opening since 2016.

1. List of department-level equity and social justice goals for past three years. Meet the requirements of Student Affairs to complete on diversity training each semester.
2. Identify challenges, opportunities, and future strategies that the department plans to pursue to advance equity and social justice
3. Appendices and Tables
4. Data analyses *See appendix 1, 2, 3, 4& 5*
5. Evidence of program impact

**Campus Climate Change**

Ohio University has seen a 58% decrease in high-risk drinking from 2003-2019. The Healthy Campus Survey is administered every year. In 2019 15% of Ohio University students when choosing to drink were doing so in a high-risk way. 82% of students at Ohio University fall into the Healthy Campus Majority of drinking, with 48% drinking in a low-risk way.

**Alcohol Edu. Undergraduates**

All first-year students must complete the online education program Alcohol Edu. From the 2019 course we know that our first-year student’s high-risk drinking rate is 23%, significantly surpassing the national average of 19%. The data also indicates that 25% of OU students arrive on campus as (*abstainers, 0 drinks in the past year*) and 26% arrive on campus as (*non-drinkers, 0 drinks in the past two weeks*). Midway through fall semester 31% of that population becomes high-risk drinkers as a result of the environment.

**CHOICES about Alcohol for first-year students (UC 1000) and (UC1900)**

During fall semester 2019, 3,578 first year students enrolled in University College first year courses 1000 and 1900 freshman seminar and/or learning communities completed the extended alcohol education programs through Health Promotion. These programs are designed to increase the likelihood that students will make low-risk drinking choices and reduce risk for alcohol related harm. The CHIOCES program is an exemplary educational tool for college students as defined by the National Institute on Alcohol Abuse and Alcoholism (NIAAA). The program engages students with in-depth dialogue about low-risk alcohol choices, active bystander intervention, sexual assault and health-positive behaviors. CHOICES programming is delivered by a student organization of 30 non-paid certified peer health educators called POWER/GAMMA, (Promoting Ohio University’s Wellness, Education, and Responsibility), and (Greeks Advocating the Mature Management of Alcohol). The POWER/GAMMA members lead group discussions on alcohol use that challenge the expectations of what using alcohol will bring. After completing the program, 93% of participants state they understand the signs of an alcohol overdose and 33% have called 911; 55% of participants would intervene if a friend was too drunk. As a result of CHOICES 78% can identify a standard drink and 73% measure their drinks when choosing to drink.

**Summary of AOD program Strengths and Weaknesses**

In the spring of 2019 Ohio University was reviewed by experts from EverFi as a part of the Alcohol Prevention Coalition. As a result of the review Ohio University was provided with an alcohol prevention action plan and the recommendations are highlighted in the recommendations and action steps. This Action Plan is designed to provide an overview of Ohio University’s strengths and weaknesses and serve as a roadmap for future work in alcohol prevention based upon a close examination of the following: current prevention programming, the degree of institutional support for alcohol prevention on campus, campus alcohol policies and their enforcement and adjudication, adherence to critical processes, and the extent of relationships with a variety of key constituencies. The Campus Alcohol Prevention Action Plan is included in the appendix of this document.

**Ohio University’s Recommendations and Action Steps**There are three key areas where administrators at Ohio University can stand to make improvements intheir alcohol prevention approach over the next 24 months based on this assessment of OhioUniversity’s alcohol environment and prevention efforts.

**Recommendations and Action Steps: *Institutionalization***

Secure campus resources for alcohol prevention:

• **Funding:** At the time of submission, Ohio University reported spending $2.02 per student on alcohol prevention, compared to the national Diagnostic average of approximately $4.38 per student. Administrators can evaluate the total cost of alcohol on the institution and estimate the cost savings opportunity from improvement in alcohol prevention by filling out the *EverFi Alcohol Cost Calculator and Alcohol-Related Attrition* *Calculator*. These data can be used as a powerful lever for gaining support for alcohol prevention from key stakeholders across campus.

• **Staff:** The environmental prevention effort that is necessary at OU requires the consistent and unwavering attention of administrators strictly devoted to this endeavor. Currently, Ohio University has 1 FTE per 16,614 students, compared to the national Diagnostic average of 1 FTE per 4,529 students. It is also below the average of 1 FTE per 8,174 students for

institutions with over than 10,000 students. Assess resources needed to bring Ohio University’s specific, measurable goals for prevention to fruition.

**Recommendations and Action Steps: *Critical Process***

Due to Ohio University’s exemplary performance in the area of Critical Processes, there are no recommendations at this time. We strongly encourage Ohio University to maintain its current level of thoughtful planning and reliance on data. This work is critical in performing ongoing evaluation to help advance and strengthen efforts in need of improvement as noted in the Programming, Policy, and Institutionalization sections of this Action Plan.

**Recommendations and Action Steps: *Policy***

1. Strengthen policy enforcement efforts in off-campus settings. The need for effective enforcement is not exclusive to on-campus settings. Administrators should pilot and evaluate additional enforcement activities to monitor and curtail alcohol use among students.

2. Ohio University uses minimal channels to disseminate written AOD policy. Administrators should utilize additional media, such as the student handbook, orientation documents, and social media.

3. Engage student activists in the policy review and development process, and encourage student participants to speak to their peers about the process and rationale for policy changes in order to gain student buy-in. Identify how and when Ohio University administrators will involve students in the policy review and development process. Decide how students will be recruited or invited to participate in the process, and outreach accordingly. Once policies are developed, engage

student participants to speak to the process and rationale for policy changes in order to gain buy-in on the part of other students.

**Recommendations and Action Steps: *Programming***

With limited resources, Ohio University should consider limiting the practice of tabling. Tabling has no demonstrated efficacy in the research literature and no theoretical basis for behavior change. Eliminating such efforts may free up resources that can be used to implement more effective approaches.

2. While there are occasional alcohol-free social and recreational options, administrators should look to expand these offerings. Failure to expand and build upon such activities conveys a lack of support for the choice to not drink. Ohio University must maintain a focus on providing readily available spaces and venues that meet the specific needs identified by students.

3. Implement more evidence-based indicated programming to address students with demonstrated signs of alcohol problems. Discontinue ineffective activities and determine the best way to redirect resources to ensure greater impact and consistency with prevention goals and objectives. Continue to build upon current efforts to create visible and institutionalized alcohol-free environments and activities.

● For these to be effective, they must be provided on a regular basis, in a designated location, and occur between the hours of 10pm and 2am. Creating an effective and innovative strategy for communicating these opportunities is key to

institutionalization of such efforts.

● Assess their appeal and interest for the larger OU community. For example, does the way in which events are promoted appeal to a broad audience, or does language or framing hinder or limit participation? Do students know what alcohol-free

opportunities are available to them whether they are specifically seeking them out, or perceiving them as a standard part of OU social life?

● Identify spaces that can be repurposed and used to provide permanent, ongoing events and activities (e.g., coffee houses, open mic nights, movies, etc.)