



ACHA-NCHA Spring 2021

**CSULB Division of Student Affairs
Student Health Services
Office of Wellness & Health Promotion**

The American College Health Association – National College Health Assessment is a standardized tool used to assess student health and wellness, including impediments to academic success, mental health, substance use, sexual behaviors, health problems, basic needs, and more. It is utilized by universities nationwide as well as globally.

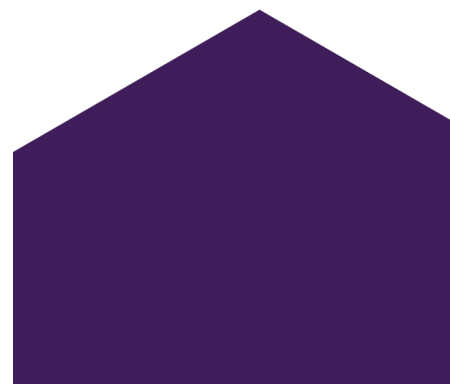
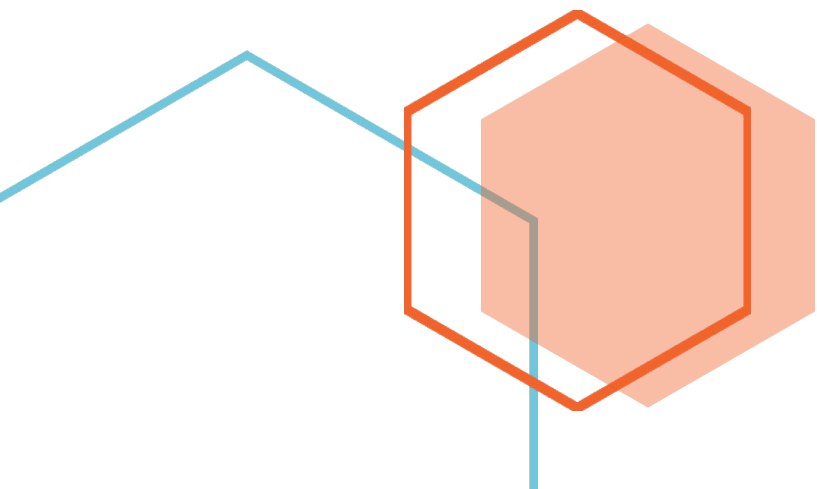




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Executive Summary

The ACHA-NCHA survey provides CSULB with information about students' health, health behaviors, mental health, and personal safety. These data are valuable for observation of trends, evaluation, and implementation of programs and services offered to students.

A 9.3% response rate was achieved for this survey (n=929 respondents) that was launched in Spring 2021. Some groups (housing, athletes, fraternity and sorority life, veterans, etc.) had a very low response rate, which makes data disaggregation and evaluation difficult, if not impossible. This summary includes results that are important to note, while the subsequent report pages provide further detail on these data results and meaning.

Data Highlights

Top 5 Impactors on Academic Performance

1. Procrastination
2. Stress
3. Anxiety
4. Depression
5. Sleep

COVID-19 Impacts

More than 1 in 4 student respondents (27%) reported a death of a family member, loved one, or friend due to COVID-19. Most respondents (92%) reported that the pandemic somewhat or significantly impacted their levels of stress and 72% reported their financial situation has been somewhat or a lot more stressful.

Discrimination and/or Hostile Behavior

Some respondents (13%) reported experiences of discriminatory or hostile behavior due to their race/ethnicity. More than half (57%) reported witnessing online or in-person discriminatory or hostile exchanges due to someone's race/ethnicity.

Basic Needs

Food insecurity was reported by 39% of our respondents. Temporary living situations or no place to live was reported by 1% of our respondents.

Mental Health

The majority (86%) of our students reported moderate or high stress in the last 12 months. Anxiety and depression were the leading mental health diagnoses. Intentional self-injury was reported by 9% of our respondents. Suicide attempt in the last 12 months were reported by 28 of our respondents. Transgender/gender non-conforming students reported disproportionately higher rates of self-injury, psychological distress, loneliness, and suicidality.

Substance Use

The majority (74%) of our respondents do not use tobacco or a nicotine delivery product. Most (66%) of our respondents also report not engaging in binge drinking in the two weeks prior to the survey. Cannabis use was reported by 23% of our respondents in the past three months. All other drugs were reported at lower levels than expected.



Methodology and Outcomes

- ACHA-NCHA 2021 was required by the CSU Chancellor's Office for assessment standardization purposes.
- IRB was approved January 29, 2021.
- 10,000 randomly selected students were sent an initial survey invitation on Sunday, March 7. Three reminders were sent to non-respondents and the survey closed March 25, 2021.
- 929 students completed the survey, resulting in a 9.3% response rate.

Important Facts about NCHA 2021

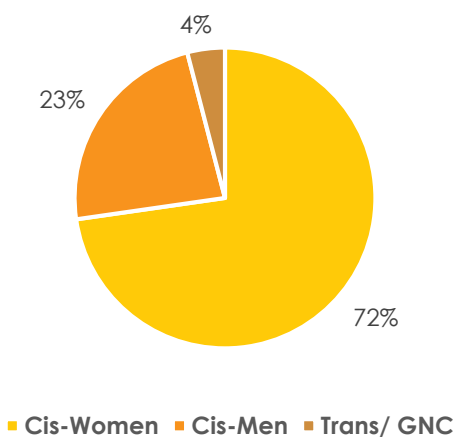
The survey tool – ACHA-NCHA III – was revised by the American College Health Association. As a result, some data cannot be compared with prior studies (2016 and 2018) due to the nature of the revisions. When applicable, the ACHA-NCHA III (Spring 2021) national data (n=96,489) will be used for comparisons to CSULB data.

Beginning in 2002, Student Health Services conducted campus health and risk behavior assessments utilizing an in-house developed instrument. In 2016 the Chancellor's Office required all CSUs to synchronously utilize the NCHA during spring semester every other year. NCHA was not administered in 2020 due to a variety of factors at the Chancellor's Office.

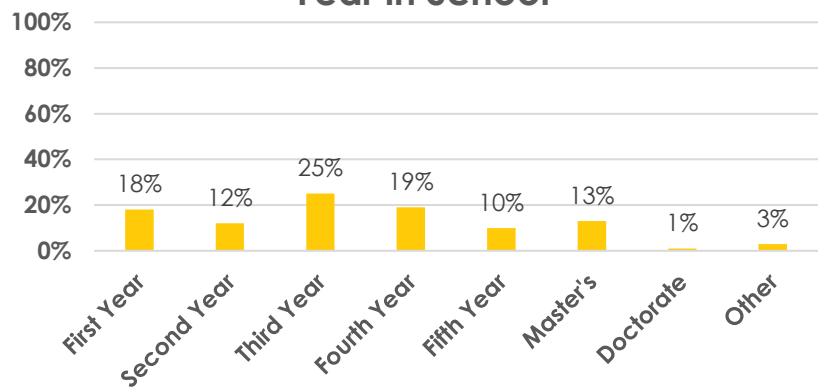
Demographics

- The mean age of respondents was 23.7 years with a range of 18 to 77 years, a median age of 21, and a standard deviation of 7.0 years.
- 72% of respondents reported being cis-women (n=671), 23% reported being cis-men (n=213), and 4% reported being transgender or gender non-conforming (Trans/GNC) (n=37).
- The majority of respondents were full-time students (87%) and the largest group of undergraduate respondents were in their third year (25%).

Gender



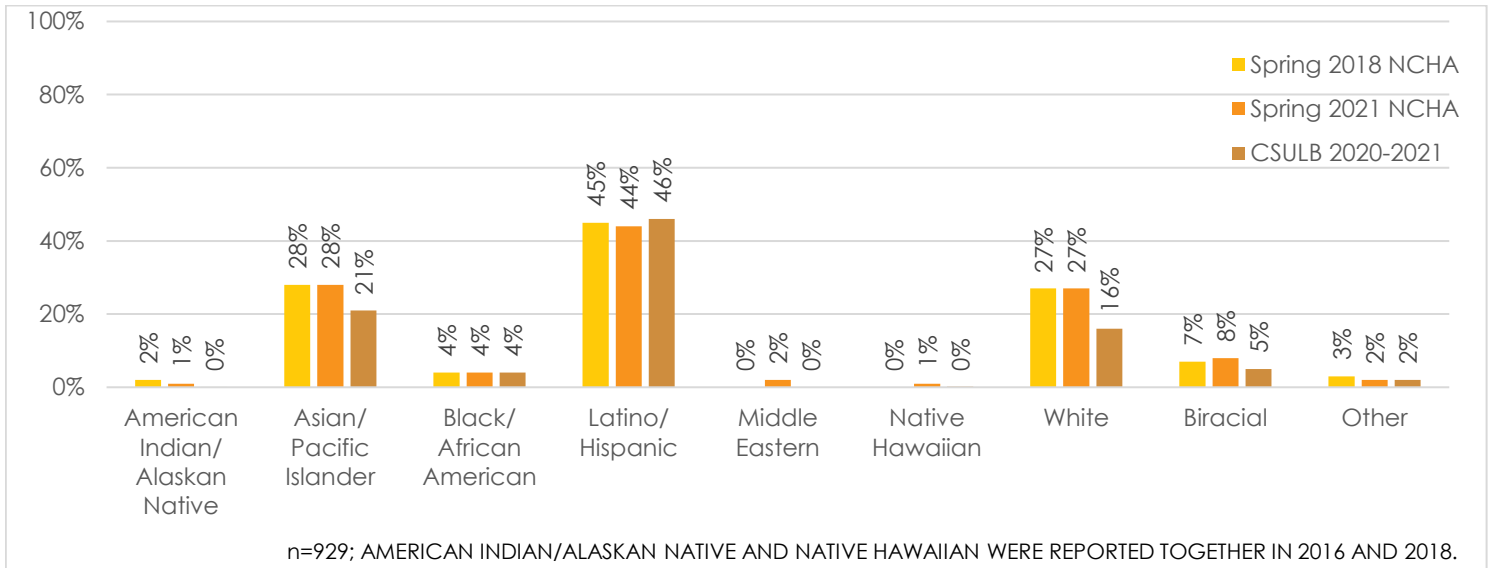
Year in School





Race/Ethnicity

The race/ethnicity statistics are similar to our campus-reported demographics in 2020-2021 from Enrollment Services, which demonstrates that our data represent our student body.



Residence/Living Situation

The majority (72%) of our students reported living with their parent/guardian/other family members. About 1% reported living either in a temporary “couch surfing” situation or do not have a place to live.

Additional Demographic Characteristics

- 60% reported being a first-generation college student. This is defined as achieving an undergraduate college degree.
- 6.5% (60) of students reported being a parent or having primary responsibility for someone else’s child/children under 18 years old.
- Less than 1% (9) of respondents reported being a veteran.
- 7.5% (69) reported having a visa to work or study in the U.S.

Food Security

39% of respondents reported low or very low food security, based on responses to the US Household Food Security Survey Module: six-item short form (2012) from the USDA Economic Research Services. Nationwide, 33% of students reported some level of food insecurity.

Disability Information

ADD/ADHD was reported by 7% of respondents; blind/low vision by 3%; and learning disability by 3%. The following were each reported by less than 1%: autism spectrum disorder; deaf/hearing loss; and speech or language disorder.



COVID-19 Impacts on our Students

A minority (14%) of our students reported testing positive for COVID-19 and only three respondents (<1%) were hospitalized due to complications of COVID-19. **Twenty-seven percent of respondents, more than 1 in 4, reported having a friend, family member or loved one die from COVID-19.**

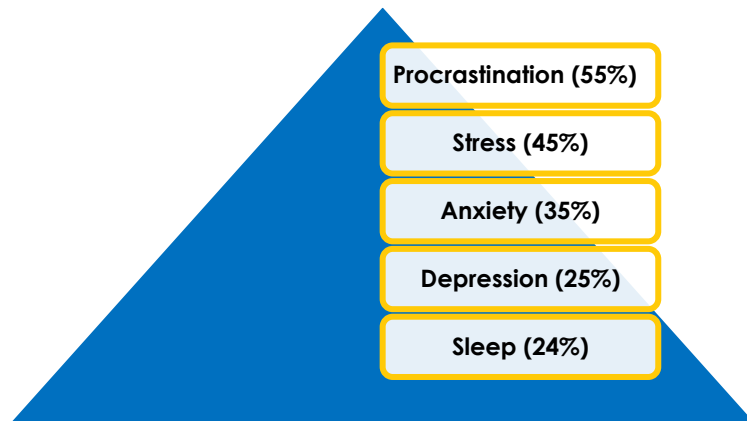
Many respondents (64%) reported that their faculty/instructors were supportive or very supportive during the pandemic. Some students (19%) reported they would prefer to take their classes online regardless of the pandemic.

Most respondents (92%) reported that the pandemic somewhat or significantly impacted their level of stress and 72% reported that their financial situation had been somewhat or a lot more stressful.

The majority of respondents (71%) felt that our campus had done enough to protect them from COVID-19; and 89% reported following campus policies related to COVID-19.

During the pandemic, 13% of respondents reported experiencing discriminatory or hostile behavior or exchanges due to their race/ethnicity. Many students **(57%) reported witnessing online exchanges or in-person discriminatory or hostile exchanges due to someone's race/ethnicity.**

Top 5 Impactors on Academic Performance



As we review the trends from previous surveys, we see the same common themes of stress, anxiety, depression, and sleep affecting academic performance among students on campus. Unlike previous surveys, procrastination was added as an option to the ACHA-NCHA III and it became the leading impactor of academic performance on our campus, as well as nationwide. Using these data to inform practices, we can preemptively equip students with tools and resources to assist them throughout the semester as these issues become more pressing.

Understanding the impact of procrastination on our students' performance may be helpful for departments throughout Student Affairs, as well as Academic Affairs, to address with innovative curricula, workshops, and faculty discussions in classrooms.

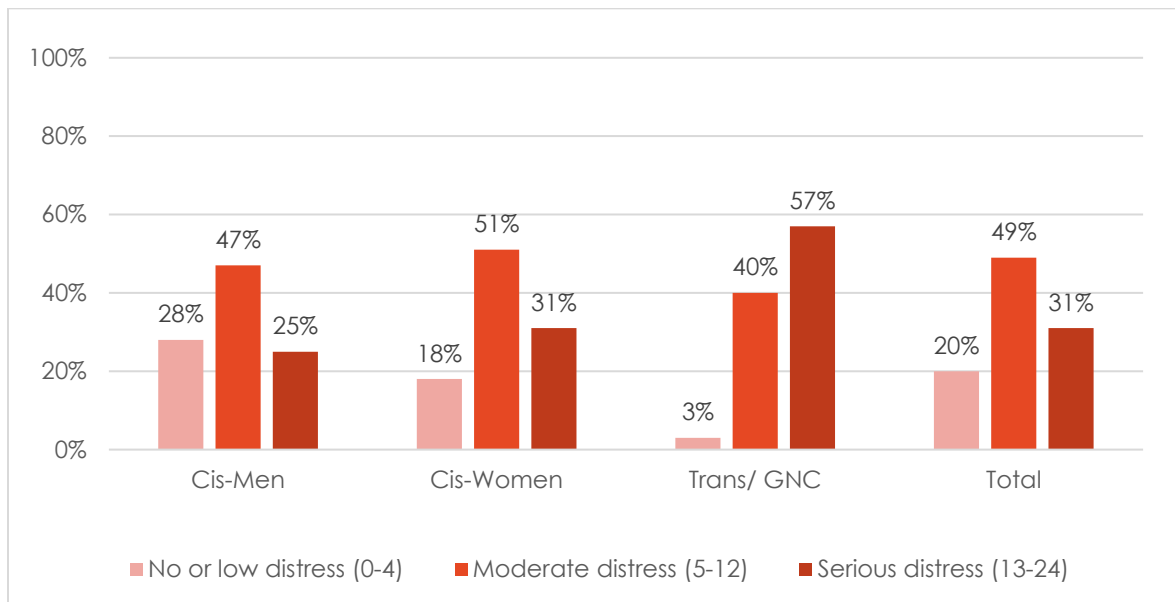


Mental Health

- **86%** of respondents reported **moderate or high stress** in the last 12 months.
- The leading mental health diagnoses reported were **anxiety (22%) and depression (18%)**, which were similar to 2018 results.
- Although 79% of respondents reported they would consider getting help from a mental health professional, only 21% of respondents received psychological or mental health services within the last 12 months.
- 26% students reported receiving mental health counseling at CAPS in the last 12 months.
- Intentional self-injury was reported by 9% of the respondents and was disproportionately higher in transgender/ gender non-conforming students at 19% compared to cis-women at 9% and cis-men at 6%.
- **28 students reported a suicide attempt within the last 12 months;** 43% were cis-men, 50% were cis-women, and 7% were transgender/ gender non-conforming.

The following scales are a new feature of the ACHA-NCHA III and assist with evaluating the mental health of our students.

Kessler 6 (K6) Non-Specific Psychological Distress Score (Range 0-24) Amended 12/9/21



The K6 was developed as a quick tool to assess the general public for serious mental illness.

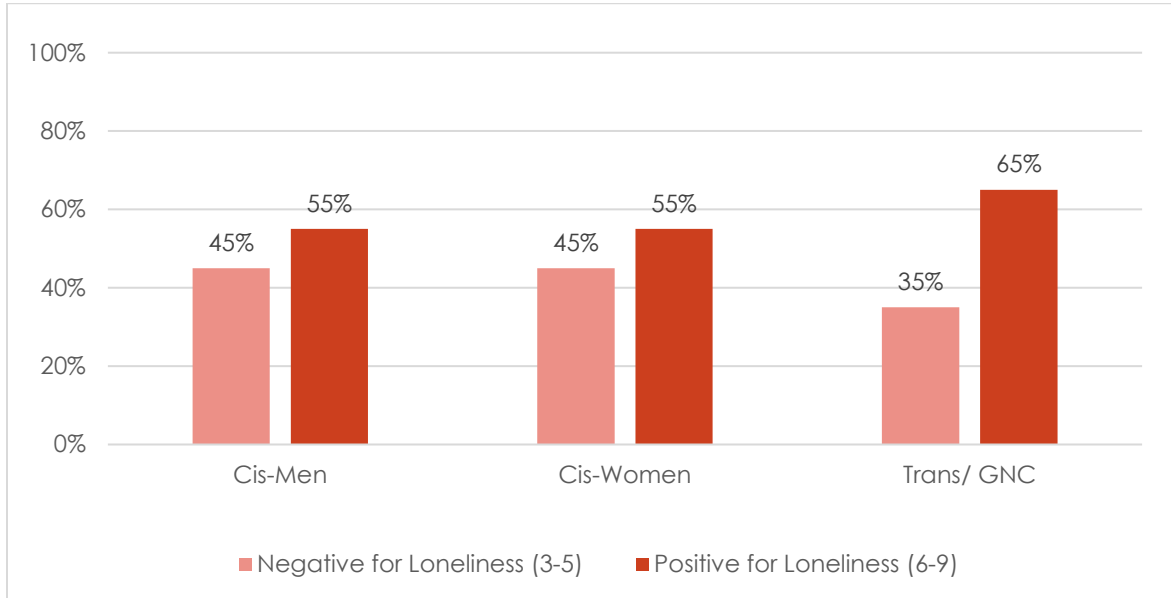
Interpretation of Scores:

| | |
|--------------------|-------|
| No or low Distress | 0-4 |
| Moderate Distress | 5-12 |
| Serious Distress | 13-24 |



The mean score for CSULB respondents was **9.69**, which demonstrates our respondents' being in moderate distress. The national mean score was **8.79**.

UCLA Loneliness Scale (ULS3) Score (Range is 3-9)



American culture defines loneliness with a negative perspective. Loneliness is considered a predictor for mental and physical health, as well as cognitive functioning. A positive score for loneliness means that one is negatively imbalanced with social relationships.

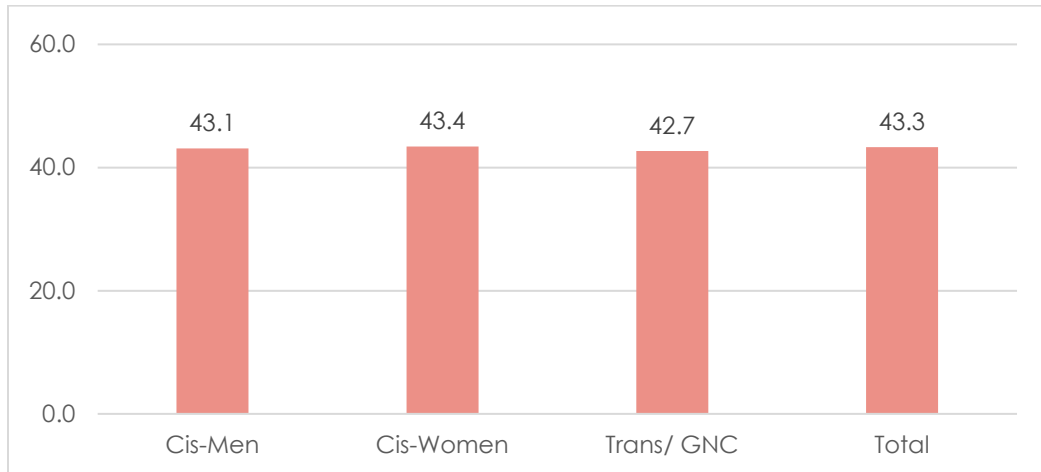
Interpretation of Scores:

| | |
|-------------------------|-----|
| Negative for Loneliness | 3-5 |
| Positive for Loneliness | 6-9 |

The mean score for CSULB respondents was **5.76** and the national mean score was **5.62**.



Diener Flourishing Scale – Psychological Well Being (PWB) Score (range is 8-56)

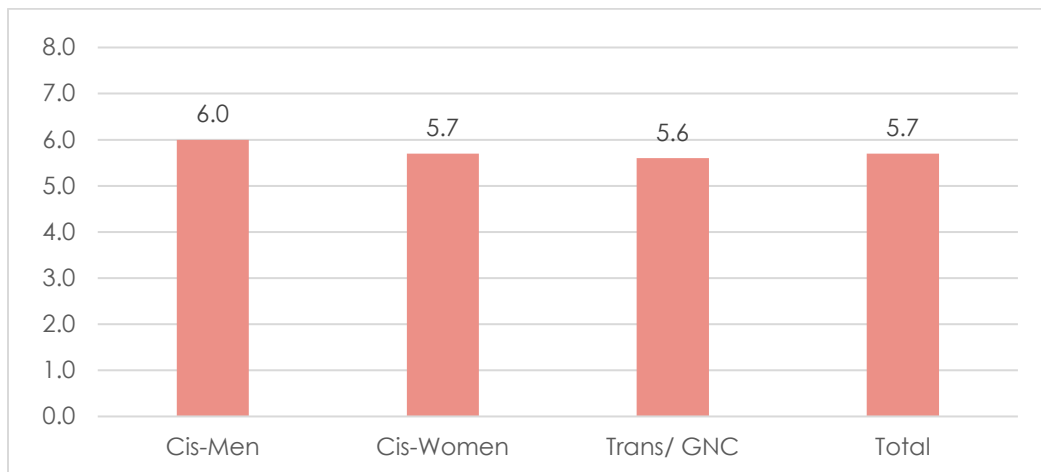


Interpretation of Scores:

The possible range of scores is from 8 (lowest possible) to 56 (highest PWB possible). A high score represents a person with many psychological resources and strengths.

The mean score for CSULB respondents was **43.3** and the national mean score was **44.4**.

The Connor-Davidson Resilience Scale (CD-RISC2) Score (Range is 0-8)



Interpretation of Scores:

The CD-RISC 2 was developed as a measure of "bounce-back" and adaptability by the original authors and has a score range of 0-8.

The mean score for CSULB respondents was **5.73** and nationally the mean score was **6.02**.



Suicide Behavior Questionnaire-Revised (SBQR) Screening Score (Range 3-18)



SBQR is a 4-item questionnaire measuring past and frequency of suicidal ideation; current threat, and likelihood of future suicide attempt.

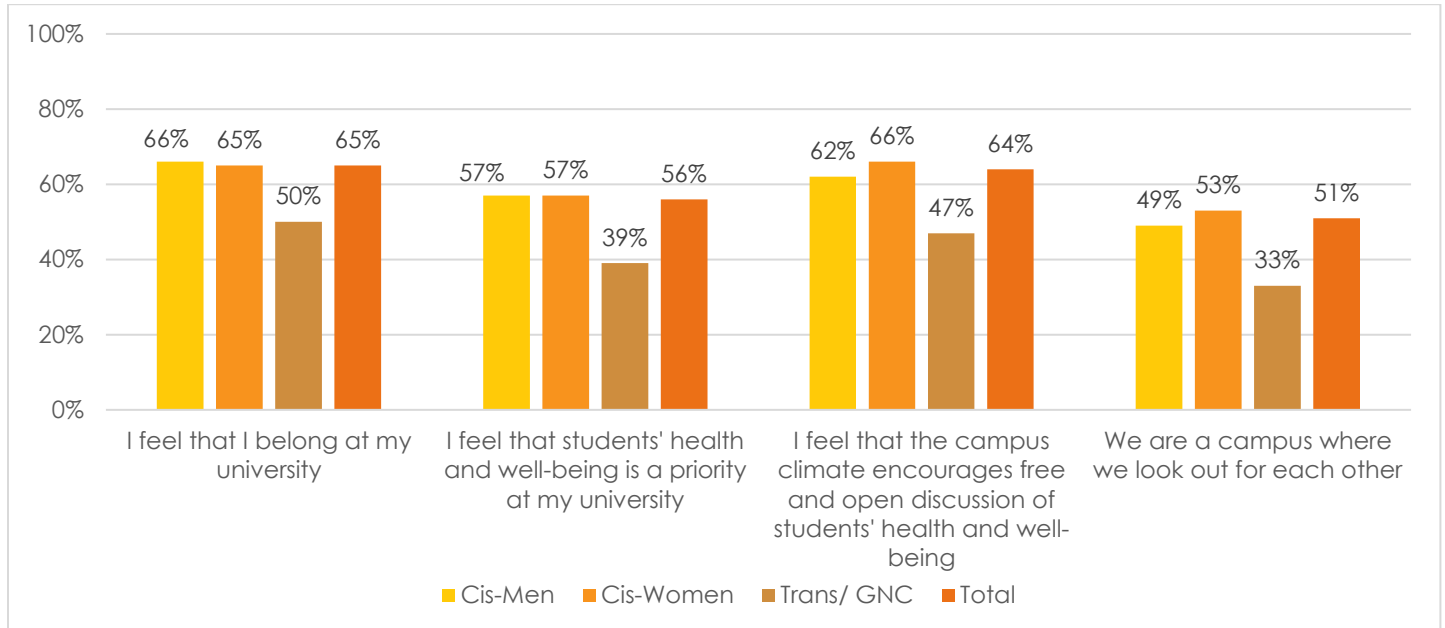
Interpretation of Scores:

| | |
|-----------------------------|------|
| Negative Suicidal Screening | 3-6 |
| Positive Suicidal Screening | 7-18 |

The mean score for CSULB respondents and the national mean were both **5.28**.



Belonging and Campus Climate



Safety and Violence

- **6% of respondents reported being sexually assaulted within the last year.** This includes touching, attempted penetration, and penetration against their will.
- 4% reported being a victim of stalking; 1% reported physical assault; and 8% reported being verbally threatened.
- **13% reported being in an emotionally abusive relationship,** 3% reported being in a physically abusive relationship, and 4% in a sexually abusive relationship within the last 12 months. The above-listed forms of abuse were reported by more students in 2021 than in 2018.
- Reporting of sexual assault in 2018 (13%) was twice as high as 2021 reporting in this survey. Stalking and physical assault reporting has also decreased since 2018. Most likely this is due to students being home during the pandemic.

General Health

- 45% of respondents described their health as *very good or excellent*.
- Only 38% of respondents met the *guidelines for Active Adults* (150 minutes of aerobic activity and 2 days of strength training/week).
- The majority of students reported eating less than 3 servings per day of fruit (77%) and vegetables (68%) in the last 7 days.

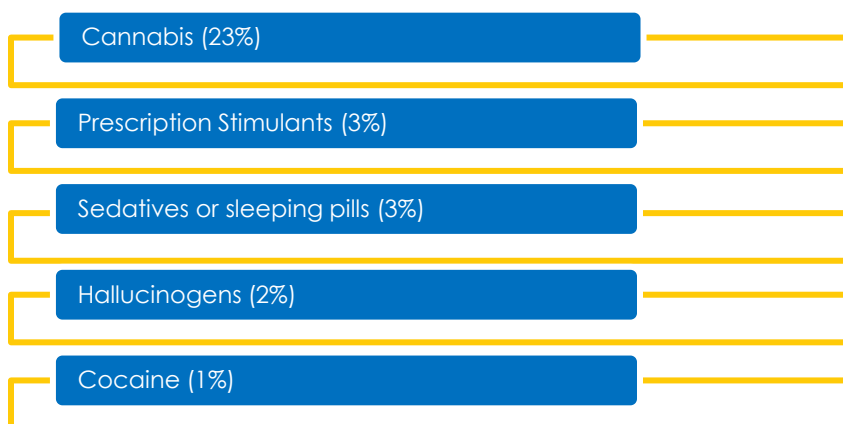


- Half of respondents reported that they slept an average of 7-9 hours on weeknights.
- The primary source of health insurance for respondents was a parent's healthcare plan (51%) and 24% of students reported having a government/public plan, such as Medi-Cal.

Substance Use

- 74% of respondents reported they have never used a tobacco or nicotine delivery product. The most commonly used products were e-cigarettes/vapes (8%) followed by cigarettes (4%).
- 35% of respondents reported consuming alcohol within the last 2 weeks, while 26% reported never having consumed alcohol.
- 66% of respondents who consume alcohol, reported they had not engaged in binge drinking in the last 2 weeks and the **average number of drinks** consumed at the last drinking event was **2.6**.
- 15% of alcohol users reported having a negative experience in the last 12 months due to their alcohol use (i.e. black out, police trouble, unprotected sex, etc.). 13% of respondents reported driving after having alcohol in the last 30 days and 28% reported driving within 6 hours of using cannabis/marijuana in the last 30 days.
- 8% of respondents were considered at moderate risk and less than 1% at high risk for alcohol use (based on the Substance Specific Involvement Scores from the ASSIST survey). Nationally, 11% of students were at moderate risk and less than 1% were at high risk for alcohol use.
- 3% of respondents reported being in recovery (the types of recovery are not specified).

Most commonly used drugs in the past 3 months:



- **Cannabis use (23%) has increased steadily since our first NCHA survey launch in 2016 (17%) and then 2018 (19%).**



- Less than 1% of respondents were identified as having high-risk use of cannabis, and 17% were identified as having moderate risk use (based on the Substance Specific Involvement Scores from the ASSIST scale). Nationally, students reported similar use of cannabis.
- Reported misuse of prescription stimulants was low (3%), as well as use of sedatives (3%), and opioids (0.3%).

Sexual Health

- Respondents reporting **never having engaged in vaginal, oral, or anal sex has increased from 35% in 2018 to 46% in 2021.**
- The average number of sex partners also decreased among sexually active respondents **from 2.16 partners in 2018 to 1.5 partners in 2021.**
- The percent of respondents who reported using condoms mostly or always in the last 30 days reduced from 44% in 2018 to 31% in 2021. However, there was a significant increase in the percent of students who reported using a method of birth control the last time they had sex, from 49% in 2018 to 82% in 2021.
- Condoms were reported as being the most frequently used form of birth control (42%), followed by birth control pills (40%), and the withdrawal method (23%).
- The use of emergency contraception for those engaging in vaginal sex in the last 12 months was reported by cis-men at 13%, cis-women at 17%, and trans/gender non-conforming students at 33.3%.
- Unintended pregnancies were reported by students engaging in vaginal sex in the last 12 months by cis-men at 5%, cis-women at 1.2%, and trans/gender non-conforming students at 0%.

Limitations

- Due to the pandemic, outreach efforts to notify students of the survey launch were limited to social media campaigns; in the past, the response rate was much higher due to the diversity of advertising sources available.
- Despite the low response rate, demographic characteristics are reflective of our campus enrollment. This allows our campus to understand our students' health behaviors at this point in time.
- The majority of ACHA-NCHA III questions are not comparable to past editions due to the tool being revised; therefore, we cannot observe trends in several health behaviors, diagnoses, etc.
- The CSU reference group report will not be available for comparison purposes until the middle of the fall semester with an estimated date of October 2021, according to the Chancellor's Office.

Discussion

The CSULB students who responded to the ACHA-NCHA III in spring 2021 presented with lower substance use risk levels than expected. However, they met the expectation of higher stress levels and mental health problems such as anxiety and depression. COVID-19 personally impacted students with both personal infections and death of family members and friends. In addition, financial stress due to the pandemic was high.

Transgender/gender non-conforming students were included for the first time in the NCHA. These data showed disproportionate mental health concerns, such as suicidality, loneliness, and psychological distress.

Individual departments within the Division of Student Affairs may be most interested in specific information that will assist with program implementation. Dissemination of these data during the 2021-2022 Academic Year will be a focus for our team. Publishing the report on the Student Health Services website and/or other campus websites will be a priority so that the campus community becomes more aware of the importance of collecting these data.

It is important to note that the COVID-19 pandemic led to a number of challenges for student wellbeing and success that could not have been predicted. Understanding the impact of these challenges on our student population will be crucial in order to implement and improve services on our campus. Individual departments may be able to use these data for grant proposals, funding research, as well as publications. It would be recommended to fill in the data gaps with other sources, such as qualitative studies and/or focus groups.

Recommendations for Practice

- Creation of innovative programming surrounding the themes from the academic impactors (procrastination, stress, anxiety, depression, and sleep). For example, the students who might benefit greatly would be Summer Bridge, SOAR, Housing and Residential Life, and peer mentor groups.
- Further exploration of topics, such as discrimination and harassment in greater detail using other studies that have been completed on our campus.
- Dissemination of these data through presentations at department meetings and for other interested parties on campus.
- Use of COVID-19 data to develop a more complete picture of our students' lived experience during the pandemic.
- Mental health and LGBTQ+ collaborations may find these data useful for the development of increased outreach and/or programming to assist our transgender/gender non-conforming students.
- For the 2023 NCHA survey launch, the entire student body should be sampled to increase response rate for better understanding of our students' wellbeing.