



Introduction

To address the increasing risk of COVID19 disease to students, faculty, and staff at California State University, Northridge (CSUN), all face-to-face classes and activities were changed to virtual modalities beginning March 23, 2020. The changes affected all departments, including essential services. Understanding CSUN's response to COVID-19 regarding student health and well-being, with attention to basic needs, is critical for academic success.

- Health: Multidimensional construct that includes mental, physical, and social domains. Health is a state of complete physical, mental, and social well-being and not just the absence of disease or infirmity (World Health Organization [WHO], 2020a).
- Well-being: General agreement is that well-being includes the presence of positive moods and emotions, the absence of negative emotions, life satisfaction, fulfillment, and positive functioning (Centers for Disease Control and Prevention, 2018).
- **Pre-requisites for Health:** The fundamental conditions and resources that are necessary for health (i.e., peace, shelter, education, food, income, a stable ecosystem, sustainable resources, social justice, and equity). To improve health, a secure foundation in these basic-needs is required and are necessary for individuals to reach a state of complete mental, physical, and social well-being (World Health Organization: Europe, 1986).

Pre-requisites of Health Peace Shelter Education Food Income Stable Ecosystem Sustainable Resources Social Justice Equity

A state of complete mental, physical, and social well-being

Purpose

This case study aims to investigate California State University, Northridge response to COVID-19 as it relates to promoting student health, wellbeing, and basicneeds to highlight effective strategies and areas of improvement from students' perspective.

Methods

A qualitative research design using a case study approach and guided by the National Institute on Minority Health and Health Disparities (NIMHD) Research Framework. Publicly available data was collected from department pages on the CSUN website and organized with the NIMHD framework. The criteria for collecting data was based on the type of resource available and implementing a change in services due to the coronavirus pandemic. Data was collected from CSUN Food Pantry, Student Recreation Center, Oasis Wellness Center, Klotz Student Health Center, and University Counseling Services. Student researcher's spoke directly with the CSUN Food Pantry due to lack of available online data. Two 60-minute focus groups were conducted over Zoom using a convenient sample of CSUN students. Data analysis consisted of examining the changes made to keep offering services to students despite the pandemic. Data analysis from the focus groups consisted of examining the recurring themes. The focus groups data was transcribed, analyzed, and coded using NVivo Software.

Literature Cited

- Centers for Disease Control and Prevention. (2018). *Health-related quality of life (HRQOL): Well-being concepts.* U.S. Department of Health and Human Services. https://www.cdc.gov/hrqol/wellbeing.htm#three
- Office of Disease Prevention and Health Promotion. (n.d.). Healthy people 2030: Browse objectives. U.S. Department of Health and Human Services. <u>https://health.gov/healthypeople/objectives-and-data/browse-objectives</u>
- World Health Organization: Europe. (1986). Ottawa charter for health promotion. World Health Organization. https://www.euro.who.int/__data/assets/pdf_file/0004/129532/Ottawa_Charter.pdf?ua=1

California State University, Northridge Response to COVID-19 Regarding Student Health, Well-being, and Basic Needs: A Case Study Dr. Nelida Duran, Caroline Plaza, Lorena Melendez, Marie Page

Results

California State University, Northridge Response to COVID-19

Of the departments investigated two were in the domain of Health Care System: Mitchell Family Counseling Clinic (MFCC), and Klotz Student Health Center (KSHC). Two departments were in the domain of Behavioral: CSUN Food Pantry (FP), and the Student Recreation Center (SRC). Lastly, one department satisfied two domains, Behavioral and Health Care System: University Counseling Services (UCS).

Domain: Health Care System

- Most affected by changes were community level services.
- Availability of services increased due to the addition of free health and wellness resources. The MFCC offered free telehealth sessions to all CSUN students and Spring 2020 graduates until August 2020. New counseling clinics and support programs were created to address COVID-19. UCS created drop-in wellness workshops that incorporated meditation and mindfulness exercises.
- The KSHC reduced the availability of specific medical services offered.
- Face-to-face services, like counseling and peer education workshops, to telehealth or online modalities.

Domain: Behavioral

- Changes affected individual and community levels of influence.
- UCS provided online mental health resources and workshops that increase student health literacy and coping strategies.
- The SRC addressed health behavior by changing fitness programs and group exercise classes to virtual modalities.
- The changes at the FP affected community functioning. The first change is an increase in hours of operation. Second, is a California State University (CSU) system wide change that will allow students enrolled at any CSU to access the Food Pantry at any sibling campus.

Student Focus Group Themes

Awareness or Motivation for Health: Students participating in the focus groups disclosed feelings of awareness or motivation for health that arose due to the novel coronavirus pandemic.

- Time spent at home allowed students to reflect on their health and the health of their community.
- Negative effects of food choices on overall well-being, but due to increased awareness of health were motivated to make changes.
- Increase in personal hygiene to protect personal health and the health of others.
- Spending increased time at home has led to learning new recipes and having healthier options available.

Academic Success in COVID-19: Students explained the negative and positive impacts of COVID-19 on their academic success.

- Online modalities discourage students from asking questions, connecting with peers, and focusing on lecture.
- Online modalities modernized education with increased use of computer-based resources.
- Factors for academic success are the ability to focus on schoolwork, personal responsibility, and completing assignments on time. Additional factors are having a sense of satisfaction over academic work and personal well-being.

Resources in COVID-19

- The free wellness workshops offered to students increased motivation to be healthy due to personal reflection on health choices.
- Reduction of available fresh vegetables. Online academic resources, like tutoring for students, was not the same experience.

• World Health Organization . (2020b). Archived: WHO Timeline - COVID-19 [Statement]. World Health Organization. https://www.who.int/news/item/27-04-2020-who-timeline---covid-19

• World Health Organization. (2020a). *Basic documents* [49th Edition]. https://apps.who.int/gb/bd/

Universities Fighting World Hunger 2021 Summit

Discussion & Recommendations

COVID-19 stymied student services, however, services deemed essential to student health and well-being remained operational: CSUN Food Pantry, Student Recreation Center, Oasis Wellness Center, Klotz Student Health Center, and University Counseling Services. It is recommended that outreach efforts expand to meet students' basic needs, faculty check-in with students, include classroom breathing exercises, and promote health and basic needs resources on campus.

- Food is a requirement to health; however, the quality of the food needs to be considered. Fresh vegetables and fruits must be available to students.
- Focus group participants reported the FP provides staple food items, financial security, and helps maintain healthy lifestyle.
- Participants reported the positive impact faculty had in expressing their concern for students.
- Increase health literacy during non-pandemic times. The classroom is the optimal place to introduce students to wellness exercises, explain disease prevention, and provide methods for increasing healthy habits.
- Teachers should incorporate breathing exercises and wellness activities into lecture or assignments.
- Universities should create an environment that values health promotion.
- Health must not be subjective. Institutions of education must ensure their students are meeting the pre-requisites of health as stated in the Ottawa Charter for Health Promotion of 1986.
- To help students and institutions reach the pre-requisites for health, promote well-being on campus, and basic-need resources it is recommended to follow the objectives of Healthy People 2030. Universities and colleges must set goals to address the objectives for Nutrition and Healthy Eating, Mental Health and Mental Disorders, Physical Activity, and Health Communication (Office of Disease Prevention and Health Promotion n.d.). A university campus provides the ideal environment to address the objectives because of the availability of resources.

Implications

The health and well-being of university students should be the priority of institutions. Increasing access to basic-need resources, like nutritious food, is critical for students. Students must have access to high quality vegetables and fruits, mental health counseling, health promotion workshops, and recreational spaces. The objectives of Healthy People 2030 and the pre-requisites for health stated in the Ottawa Charter for Health Promotion must become primary goals of institutions.



