

Health & Wellness Advisory Group Work Session #2 Full Notes - Monday, December 7, 2015 - 1:00pm - GRC

Additions from members after PowerPoint agenda

- Confidentiality/Student Counseling spaces
- How is design team getting this information? (Explanation of the LRDP process)
- Integration of physical and behavioral help in one space
- Oral health integration; hybrid models for filling gaps
- Significant health care gaps for college students
- Make sure campus has storage spaces for multi-use facilities
- Behavioral health map/contact list of the same 5-mile region as depicted on our primary-care health care providers slide from the presentation for this session would be really helpful to create
- Transportation collaboration considerations including: how are students getting to services, considerations for differing ability students, staff, faculty, and community members, busing/taxi /student shuttle services to health care facilities (this came up due to not necessarily having on-site medical facilities)

Promising collaborations or community partner relationships

- Health & Wellness Collaborations
- Cascade's Public Transit System
 - Transportation for all services
- Nearby gyms/fitness facilities (e.g. LIFT)
- Bend Parks and Rec – IM's, club sports, etc.
- St. Charles Emergency Services – working with students in crisis
- St. Charles Primary Care
- Juniper Center (Bend Parks and Rec District)
- Community Resources (All these are linked; resources for students)
 - These groups are great for looking at systems and policies
 - Family Resource Center
 - Parent Education Hub (20 orgs that work with families)
 - Early Learning Hub
 - Central Oregon Health Council (CCO extension; Health Insurance)
 - Better Together – Advising/Service Delivery/Research/Internships
- Physical/Behavioral Services (e.g. BMC, High Lakes, St. Charles Health Systems, Mosaic Medical)
- Commuting Options
- High Desert Food and Farm Alliance
- Nutrition Services through OSU Extension
- Bend Endurance Academy + foundation
- Central Oregon Oral Health Coalition

- Shared Future Coalition (drinking issues for 18-25)
- Deschutes County Health Services – Evidence based research on a variety of issues; tobacco, drugs, etc.
- Suicide Prevention Alliance
 - Policy and institutionalized system of resources
- Deschutes County Mobile Crisis Unit
- Bend Police Department
- Faith community
 - St. Charles has been reaching out to pastors lately, but tough to get them there in one group due to commitments, timing, etc.
 - Faith communities would love to be on campus, but not sure what this looks like; interreligious services
 - Great database of information around faith communities in town; lots of choices in Bend
- US Forest Service
- Deschutes Land Trust
- Children’s Forest of Central Oregon; outdoor internships/education
- Kinesiology Club food pantry and services beyond
- Neighbor Impact – gardening, fresh produce
- COCC – similar students/needs/concerns around healthcare
- Mt. Bachelor – shuttle services, etc.
- Small community fitness shop owners (bike, ski, etc.)
- Body healing, massages, etc.- holistic for bodies; practice hours
- Therapy animals
- Mental health providers – not a lot of numbers of providers; get information to students
- Public school district – fields, gymnasiums, etc.
- Cultural/ethnic organizations for social networks/support
- Central Oregon Research Coalition
 - Linked with other health and wellness orgs in town
- Volunteer Connect
- Business connections/retail (e.g. REI, small shops in Old Mill)
- OSU Main campus – help with liability, policy, etc.
- Interfaith council creation?
 - Opportunity to be a hub
- Youth Council
- Spiritual Health and Social Justice intertwined; service/support
 - Student get involved in various pantries, shelters, etc.
 - One barrier is equal representation of faiths in service so all feel welcome
- First Presbyterian Church
- St. Helen’s Center

- Safeway Pharmacies – Travel immunizations, clinics for regular immunizations, prescription filling right by campus

How do these partnership influence design of campus?

- Pop-up space for community resources (ie: multicultural services)
 - Multi-service spaces; utility of design in being able to transform/shift needs
- Transportation issues:
 - Bike baths/racks; cages for bike racks
 - Shower facilities
 - Bike repair spaces/classes
 - Bike share/ZipCars
- Some facilities more dedicated spaces and flex spaces
- Child care facilities on edge of campus
- Health and connectedness centralized location
- Large community room for classes, etc. + room for multi-types of health practitioners, ie: hygienist can come in and do treatments

What barriers confront OSU-Cascades for health and wellness? How can they be overcome?

- Tough to coordinate religious leaders
 - Great idea to have OSU-Cascades serve as a hub
 - Finding meaning in students' lives is very important; student development
- Boundaries of being a public institution and incorporating religions
 - Need to define relationships with all orgs
- Stigma of mental health services
 - We don't do enough in messaging about wellness
 - Need a wellness communication strategy
- Insurance/cost are barriers
 - Private providers/Oregon system issues
 - Expanding advisory services
- Navigating help-seeking behaviors
- Communication is vital; need to ensure effective communication process; can be a barrier in sustaining partnerships
- Effective student awareness of resources
- Student vs. parent needs for service; confidentiality issues
- Veteran's care
- Land limits for physical structures and outdoor spaces
- Neighbor concerns/issues (ie: smoking policy issues, etc.)
- Proximity of campus to providers
- Need for prevention/awareness
- Opportunities for students to experiment with drug/alcohol resources
- Money for students and money for institution
- Wanting to do too much too quickly

- Equity
- Transportation barrier to services
- Lack of mental health and mental health service providers in community
- Funding restriction
 - Restrictions on job type of organizations
- Do not have control over what businesses come near campus (e.g. marijuana dispensary)
- Significant coordinator of services and reminders to university around importance
 - Don't cancel classes on Friday because of Thursday is perceived as a traditional "social night"
- Privacy issues
- Holistic health and wellness is difficult to coordinate; care in service
- Lack of culturally sensitive services
 - Global campus with local feel
- Funding for services not covered by insurance
 - Quantity vs quality (child care example....more students, less lavish facility?)
- Cost and access
 - 18-22 year old transition to having to figure out health care/wellness resources
- Large scatter plot of health and wellness interest of students
- Marketing will be critical for developing resources
 - Include on the back of ID cards emergency numbers for providers
- Insurance gaps
 - Determine gaps to create services
- Curriculum offerings restrictions based on "non-traditional" activity spaces
 - What can OSU-Cascades offer when PAC classes are so important
 - Transportation to facilities are very important
 - Partnerships for skiing, etc.
- Disseminating information/destigmatizing
- When one finds wellness, helping others talk about what resources are out there
 - Having 50 options makes it difficult for students/overwhelming/make resource more than a name on a list
- Keeping all types of students in mind (tradition vs. nontraditional)
- No local professional education facilities to partner with (medical, dental schools)
- Create non-party culture of campus; helping be positive force in community

Specific theme discussion

- Transportation
 - Shuttles and care sharing (incentivize)
 - Exceptions to parking system that encourage
 - Services tied with public transit
 - Wi-Fi on a bus because of the wait
 - Apps to show bus locations, etc.

- Bike sharing programs/free services
- Insurance
 - Provide gap services for students; primary care
 - Helps underinsured or uninsured students
 - Booklet of what they have and what they don't regarding insurance
 - OHP signups with Mosaic
 - Who needs to get on health plan?
- Student Communications
 - Utilize various platforms for marketing; lots of students that use primarily on-line services; using bulletin boards, newsletters, social media, etc.
 - Integrating health and wellness in the curriculum
 - Maximizing communication forms for students
 - Demographic influences on marketing tools (Tumblr reemerging; trends in other areas)
 - Training students on systems
 - Digital recreations of previous paper materials; repositioned flat screens
 - Pop-up spaces and creating physical spaces for wellness
- Partner Collaborations
 - List of partners and prioritize
 - Spaces for non-denominational access for spiritual wellness
 - On-campus is supporting student needs through process; connect students with partners in community
 - Communications hub around wellness/health to help with collaborations
 - Referral access between groups

Campus vision creation – Group activity

General compilation of campus vision ideas thrown submitted for dry-erase board activity

- Memorial services location
- Coffee house/food eating area
- Art
- Bike share station
- Standing desks in the classroom
- Info referral area for community connections
- Centralize multipurpose health center
- Rec Room
- Family growth/wellness
- Outdoor programs/rental
- Outdoor/multi-use spaces
- Transcultural spaces/Inclusive spaces
- Naturalized paths/decomposed granite pathways
- Rock wall/challenge course
- Student recreation center

- Student village
- Location for holiday celebrations/meals
- Community gardens
- Fast, healthy food locations
- Restaurants
- Community service spaces
- Athletic fields
- Contemplative spaces
- Places for play/whimsy
- Farmer's market area
- "Wellness in every building"

General Comments from Activity

- Treating the area as a destination place; how do you get people to stay on campus?
- Places to congregate that aren't classrooms
- Food – Are there self-op justifications due to food types we want (Bend/La Pine school system has great program)

Closing Remarks – What if architect was in the room right now?

- There are times spiritually where people need to support each other and need a place to come together; Space to group communally
- Think broadly about health and wellness; Utility of design should reflect this utilitarian need, but also when specific needs must be met
- Eco-wellness process in design; Make nature connection explicit
 - Hang out on campus and feel good
- Look at student demographic and realize demographics are across the board; not a monolithic design; Need to create facilities that are inclusive and help all achieve success
- Place where folks can stay; looking at coffee shops, open spaces, etc. – wide variety that encourage folks to experience campus and stay during the day
- Do the work to understand the student population; work with students, staff and faculty to really "know" campus needs
- Integrate health and wellness in all spaces; Net-positive promotion of health and wellness; Wellness lives everywhere; Also, factors into faculty and staff wellness
- What do we do to start and what to we build; quality over quantity in design
- There is something as "too many choices"; common spaces and quiet spaces needed; Group spaces are important too
- Natural lighting in spaces, standup desks, etc. (Are the spaces faculty/staff/students spend most of their time in as healthy as they can be?)
- No toxic materials in building supplies
- Think outside the box; We don't always have to do it the same way as it's been done

- Design has to enable people to do what they have to do, but, assuming functionality, when there is a chance to design to inspire...take that chance; Create little things that matter...within cost effectiveness
- Places for students to congregate are so important to build culture we are looking for