R'HEALTHY CAMPUS

NEEDS ASSESSMENT REPORT

JANUARY 2025

Kritika Gupta, PhD

Siddhesh Jadhav

Health, Wellbeing & Safety

UCR RIVERSIDE

CONTENTS

UC RIVERSIDE

LIST OF TABLES

UC RIVERSIDE

LIST OF FIGURES

EXECUTIVE SUMMARY

The **R'Healthy Campus Needs Assessment Report** evaluates the University of California, Riverside's (UCR) efforts to enhance equity, health and well-being, and sustainability. The report identifies systemic challenges, gaps in services, and areas for improvement while offering actionable recommendations to create a healthier, more inclusive, and sustainable campus environment.
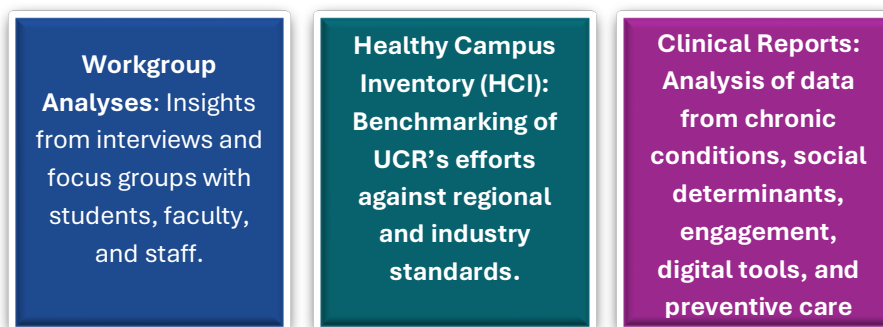
Key Objectives

The assessment aimed to:

1. Evaluate existing resources, policies, and practices across equity, health, and sustainability domains.

2. Identify barriers to participation and access for students, staff, and faculty.

3. Develop data-driven recommendations for addressing gaps.

Methodology

The assessment employed a multi-faceted approach (**Figure 1**), incorporating workgroup analyses, Healthy Campus Inventory (HCI), and UCR clinical reports.

Workgroup Analyses: Insights from interviews and focus groups with students, faculty, and staff.	**Healthy Campus Inventory (HCI):** Benchmarking of UCR's efforts against regional and industry standards.	**Clinical Reports:** Analysis of data from chronic conditions, social determinants, engagement, digital tools, and preventive care

Figure 1. Components of R'Healthy Campus Needs Assessment 2024

Findings

The R'Healthy Campus Needs Assessment revealed significant gaps across equity, health and well-being, and sustainability domains. Equity findings highlighted persistent disparities in access to resources, mentorship, and financial aid for marginalized groups, compounded by pay inequities and insufficient data systems to evaluate progress. In health and well-being, limited operational hours, staffing shortages in mental health services, and high rates of food insecurity emerged as critical challenges. Additionally, staff and faculty engagement with wellness programs was hindered by logistical barriers such as rigid work schedules and high parking fees. Sustainability efforts were constrained by

inadequate infrastructure for recycling and composting, reliance on part-time or student workers, and low awareness of existing programs among campus stakeholders.

The assessment also emphasized the interconnectedness of these domains. For example, addressing food insecurity supports both health and sustainability goals, while culturally inclusive equity initiatives can improve participation in health and wellness programs. Benchmarking through the Healthy Campus Inventory and clinical reports showed that UCR often outperformed regional and industry standards in preventive care and engagement but lagged in addressing systemic barriers such as infrastructure and accessibility gaps.

Recommendations

To address these challenges, the report recommends expanding service hours and increasing staffing for mental health and wellness programs to improve accessibility and reduce strain on existing resources. Tailored initiatives, such as financial aid and mentorship programs for underrepresented groups, are essential to address equity gaps. For sustainability, investments in infrastructure, including additional recycling and composting facilities, and hiring dedicated staff are critical for program stability and success. Expanding outreach and engagement strategies, particularly for wellness and sustainability programs, can also enhance participation across campus.

Data-driven approaches are vital to monitor progress, measure program effectiveness, and identify high-risk populations. Leveraging digital tools, such as telehealth services and preventive care reminders, can improve health outcomes and engagement. Finally, fostering a culture of inclusivity, leadership buy-in, and collaboration across departments will ensure the successful integration of equity, health, and sustainability initiatives into UCR's strategic framework, driving long-term transformation.

UC RIVERSIDE

INTRODUCTION

R'Healthy Campus Mission statement: We are committed to fostering a health-promoting campus culture where the discovery, communication, translation, application, and preservation of knowledge are seamlessly integrated with health and wellbeing, equity, and sustainability. We strive to create an inclusive and supportive environment where every individual can thrive while promoting sustainable practices and equitable access to health resources to benefit the entire UCR community and the broader world.

R'Healthy Campus is inspired by the Okanagan Charter. The charter is an international charter that guides the vision, purpose, and responsibility for the work in R'Healthy Campus. It calls on post-secondary schools to embed health into all aspects of the campus culture and to lead health promotion action and collaboration locally and globally. The Charter was created in 2015, and UCR officially adopted the Charter on April 30th, 2024. UCR was the 28th US institution to adopt the charter.

UCR uses the collective impact model to create change. Collective impact is a network of community members, organizations, and institutions who advance equity by learning together, aligning, and integrating their actions to achieve population and system-level change.

R'Healthy community understands that impactful change cannot be created by a single entity but by a community of people. R'Healthy serves as the backbone support to find a common agenda, shared measurement systems, and mutually reinforcing activities and provides continuous communication to all who are working towards making UCR a health-promoting campus. UCR is advancing campus health, well-being, sustainability, and equity through the following five pillars inspired by the Okanagan Charter.

Table 1. R'Healthy Campus Pillars

Pillars	Description
Personal Development	Personal development for faculty, staff, and students involves cultivating skills, knowledge, and attitudes that enhance their professional and personal lives. Through continuous learning, reflection, and growth, individuals can unlock their full potential and contribute meaningfully to their communities.
Campus Policies and Practice	Integrate a health-focused approach into campus policies by proactively reviewing, developing, and coordinating strategies that prioritize individual well-being while simultaneously promoting sustainability and equity.
Local and Global Action	Cultivate meaningful connections and partnerships within and beyond the campus community to champion health, well-being, sustainability, and equity at local and global levels.

UC RIVERSIDE

Research and Knowledge	Advance health, well-being, sustainability, and equity through active data collection, knowledge generation, and evaluation, fostering diverse research initiatives that enhance the well-being of communities, societies, and the planet.
Supportive Environments	Enrich the campus environment by actively promoting health, well-being, sustainability, and resilience across diverse facets, fostering connections and a sense of belonging to enhance success, engagement, and well-being within the campus community.

GOALS AND OBJECTIVES

Goal: To identify and address gaps in equity, health and well-being, and sustainability efforts across the UCR campus, providing actionable recommendations to enhance campus-wide programs and initiatives.

Objectives:

- Conduct a comprehensive evaluation of existing resources, policies, and practices in equity, health, and sustainability.
- Identify key challenges and barriers to participation and access for students, staff, and faculty.
- Develop data-driven recommendations and action plans that address identified gaps.

METHODS

To comprehensively assess the University of California, Riverside's (UCR) progress in fostering a healthy, equitable, and sustainable campus environment, a multi-faceted methodological approach was employed. This assessment integrates qualitative and quantitative data from diverse sources, including workgroup analyses, document reviews, Healthy Campus Inventory (HCI) data, and clinical reports.

DATA COLLECTION

WORKGROUP ANALYSES

- Three key workgroups—Equity, Health and Well-being, and Sustainability— conducted interviews and focus groups with students, faculty, and staff to identify systemic challenges, gaps in services, and areas of improvement.

UC RIVERSIDE

- Document analysis was performed on policies, program descriptions, and strategic plans to contextualize workgroup findings.

HEALTHY CAMPUS INVENTORY (HCI)

- The HCI provided quantitative benchmarks on campus efforts related to equity, health, and sustainability.
- Metrics were compared against regional and industry standards to identify strengths and areas for growth.

CLINICAL REPORTS

- Comprehensive clinical reports, including the Chronic Conditions Report, Social Drivers of Health Report, Value Summary Report, Engagement Report, KP.org Member Activity Report, and Prevention and Lifestyle Risks Report, were analyzed to evaluate health outcomes, program utilization, and member engagement.
- These reports provided insights into healthcare cost drivers, preventive care utilization, and lifestyle risk factors.

DATA ANALYSIS

QUALITATIVE ANALYSIS

- Thematic coding was applied to interview transcripts, focus group discussions, and document content. Common themes, such as accessibility, engagement, and systemic barriers, were identified and categorized.
- Cross-domain themes, such as the interplay between sustainability and health equity, were emphasized.

QUANTITATIVE ANALYSIS

- Metrics from the HCI and clinical reports were analyzed to benchmark UCR's performance against regional and industry standards.
- Data visualizations were used to highlight trends in program utilization, engagement rates, and health outcomes.

INTEGRATION AND SYNTHESIS

- Findings from workgroup analyses, the HCI, and clinical reports were synthesized into a cohesive narrative.
- Overlapping themes across equity, health, and sustainability domains were identified to ensure an integrated approach to addressing challenges.
- Recommendations were developed based on campus-specific data.

ETHICAL CONSIDERATIONS

UC RIVERSIDE

- Institutional approval was obtained for all data collection activities.
- Interviews and focus groups followed ethical guidelines, ensuring informed consent and participant anonymity.
- Data from clinical reports and the HCI were analyzed in aggregate to maintain confidentiality.

LIMITATIONS

- This assessment is limited by the scope of available data, potential biases in self-reported information, and variability in external benchmarks.
- Future assessments should incorporate longitudinal tracking to evaluate the long-term impact of implemented recommendations.

RESULTS

The R'Healthy Campus needs assessment brings together comprehensive insights from three key workgroups—Equity, Health and Well-being, and Sustainability—to address critical challenges and advance the campus's strategic priorities.

R'HEALTHY CAMPUS INVENTORY

FINDINGS

The Healthy Campus Inventory (HCI) report provides a critical evaluation of the University of California, Riverside's (UCR) efforts to enhance health, equity, and sustainability across the campus. While the university has made strides in certain areas, the report identifies significant gaps in infrastructure, staffing, and systemic integration of health-promoting and sustainability practices. The findings highlight both the strengths of existing programs and the need for targeted interventions to address persistent challenges. By combining quantitative scores and qualitative insights, the HCI report provides actionable recommendations to align with the goals of the R'Healthy Campus Initiative.

A major theme of the report is the need for enhanced support systems to address after-hours care and mental health challenges. Existing programs such as CAPS and SWIFT offer critical services, but they are constrained by limited operational hours and insufficient staffing. Food insecurity among students remains a pressing issue, with current initiatives unable to fully meet the demand. Additionally, systemic gaps in data collection hinder the university's ability to monitor health outcomes, track program effectiveness, and make informed policy decisions.

The report also points to the lack of dedicated staff and infrastructure in sustainability efforts. Reliance on part-time or student workers creates instability, while inadequate recycling and composting infrastructure limits the campus's ability to manage waste effectively. Engagement in sustainability programs remains low, with many students and staff unaware of or unable to access available resources. Recommendations focus on hiring permanent sustainability staff, expanding waste management systems, and fostering a campus culture that prioritizes sustainability through education and leadership-driven initiatives.

One of the report's most critical insights is the interconnectedness of health, equity, and sustainability. Addressing food insecurity, for example, can simultaneously advance health and sustainability goals, while culturally inclusive wellness programs can improve engagement across all domains. The HCI report concludes that systemic investment in infrastructure, staffing, and data systems is essential for transformative progress. By acting on these recommendations, UCR can build a more inclusive, health-promoting, and

sustainable campus environment, positioning itself as a leader in holistic well-being in higher education.

Table 2. *Major Findings from the HCI Report*

Health and Well-Being	Equity	Sustainability
Strengths: • Programs like CAPS, SWIFT, and Case Management provide foundational support for mental and physical health. • Initiatives such as The Well and Wellness Ambassadors promote community engagement and healthy lifestyles. **Gaps**: • After-hours care services are underdeveloped, scoring 2.6/5.0. • Insufficient systemic data collection to monitor health outcomes and evaluate program effectiveness. • Rising demand for mental health services outpaces	**Strengths**: • Commitment to equitable access to resources for marginalized groups is evident in principles like inclusivity and empowerment. **Gaps**: • Disparities persist in access to mentorship, financial aid, and career development for underrepresented groups, including BIPOC, LGBTQ+, and first-generation students. • Staff pay inequities and limited work-life balance hinder morale and retention.	**Strengths**: • Initiatives like R'Garden and food recovery programs contribute to waste reduction and sustainability awareness. • Transportation programs, such as carpooling and free winter break shuttles, promote eco-friendly commuting options. **Gaps**: • Insufficient recycling and composting infrastructure to meet campus waste management needs. • Lack of permanent staff to manage sustainability programs, leading to reliance on student workers and part-time staff. • Low engagement and awareness of

UC RIVERSIDE

current resource availability.		sustainability initiatives among students and faculty.

KEY THEMES

- Food insecurity is a cross-cutting issue, with sustainability programs (e.g., food recovery) serving as a potential solution for health and equity challenges.

- Data gaps in all domains limit the ability to track progress and measure impact.

- Cultural inclusion and leadership buy-in are critical for fostering engagement in health, equity, and sustainability initiatives.

RECOMMENDATIONS

Health and Well-Being

- Expand After-Hours Care: Increase operational hours and staffing for mental health programs to improve accessibility and continuity of care.
- Strengthen Mental Health Services: Address rising demand through specialized outreach programs and expanded access to services.
- Establish Data Systems: Develop systemic data collection processes to monitor health outcomes, track program effectiveness, and inform strategic decisions.

Equity

- Address Pay Disparities: Promote work-life balance and equitable compensation practices for staff to enhance morale and retention.
- Support Underrepresented Groups: Create targeted mentorship and financial aid initiatives for marginalized communities, including BIPOC, LGBTQ+, and first-generation students.
- Foster Cultural Inclusion: Integrate principles of equity, diversity, and inclusion into all campus activities and initiatives.

Sustainability

- Enhance Waste Management: Invest in recycling and composting infrastructure and scale waste management systems to reduce environmental impact.
- Hire Dedicated Staff: Employ permanent sustainability personnel to ensure program stability and efficacy.
- Increase Engagement: Develop awareness campaigns and innovative strategies to boost participation in sustainability efforts.

UC RIVERSIDE

- Promote Academic Integration: Embed sustainability concepts into academic curricula and research to align educational goals with sustainability objectives.

Integrated Actions

- Upgrade Campus Facilities: Create inclusive spaces that support health, equity, and sustainability goals, such as wellness centers and green zones.
- Embed Sustainability and Wellness in Academics: Integrate these themes into coursework and co-curricular activities to engage the campus community holistically.
- Leverage Data-Driven Insights: Use advanced analytics to track progress, identify high-need areas, and evaluate the impact of implemented strategies.

WORKGROUP REPORTS

EQUITY WORKGROUP

The Equity Workgroup revealed systemic inequities that disproportionately affect underrepresented groups at UCR, including BIPOC, LGBTQ+, first-generation, and foster youth students. These groups face challenges such as limited access to resources, pay disparities, and a lack of institutional support systems. Faculty and staff inequities, particularly in pay equity and work-life balance, further exacerbate these issues. Additionally, the lack of robust data collection systems undermines efforts to evaluate and address these inequities effectively.

Findings

- **Limited Access to Equitable Resources:** Marginalized student populations, including BIPOC, LGBTQ+, and foster youth, face disproportionate barriers to accessing campus resources, affecting their academic and personal success. First-generation students often lack access to mentorship and financial resources, which are critical to navigating higher education systems (American Council on Education, 2024).
- **Pay Equity and Work-Life Balance:** Non-faculty staff reported significant disparities in pay, with limited flexibility in working conditions. These inequities hinder employee retention and morale, as evidenced by recent workplace surveys (McKinsey & Company, 2023).
- **Insufficient Data Systems:** The absence of comprehensive systems to collect and analyze equity-related data limits the university's ability to track progress and inform policy decisions effectively (Velazquez et al., 2021).

Proposed Actions

To address these inequities, the workgroup recommends:

1. Developing tailored programs to address resource disparities, including mentorship opportunities and financial aid for first-generation and foster youth students.

2. Establishing metrics and systems to evaluate equity initiatives, ensuring continuous improvement and accountability.

Discussion

The Equity Workgroup highlighted systemic inequities affecting marginalized groups, including BIPOC, LGBTQ+, first-generation, and foster youth students. Key challenges include limited access to equitable resources, pay disparities, and insufficient institutional support systems for staff and faculty. The findings align with broader trends in higher education, where disparities in access and outcomes for marginalized populations remain

UC RIVERSIDE

pervasive (American Council on Education, 2024). Addressing these challenges requires not only targeted interventions but also systemic changes in institutional culture and practices. For example, comprehensive data systems are critical for understanding the unique needs of various groups and evaluating the effectiveness of implemented strategies (Velazquez et al., 2021). Recent studies underscore the urgency of addressing equity gaps. The American Council on Education's 2024 Status Report highlights significant attainment gaps among racial and ethnic minorities, particularly in STEM fields and graduate education. Similarly, research from the Education Resources Information Center (ERIC) emphasizes the importance of targeted interventions and robust data collection mechanisms to close these gaps effectively. While pay equity challenges for non-faculty staff were highlighted, emerging evidence suggests progress at some institutions. McKinsey & Company (2023) reported strides in equitable pay practices in certain sectors of higher education. However, these improvements are inconsistent across institutions, reflecting variability in the adoption of equity-focused policies.

Intersections with Broader Campus Initiatives

The equity challenges identified by this workgroup intersect with findings from the Health and Well-being and Sustainability workgroups. For instance, addressing food insecurity—a significant barrier for low-SES and foster youth students—requires collaboration across health and sustainability initiatives. Similarly, culturally inclusive programming can improve engagement and participation in wellness and sustainability programs, creating synergies across campus efforts.

HEALTH AND WELL-BEING WORKGROUP

The Health and Well-being Workgroup identified critical challenges impacting the mental and physical well-being of students, staff, and faculty at UCR. These challenges range from limited accessibility to mental health services to systemic barriers such as food insecurity and low engagement with wellness programs. These findings emphasize the urgent need for targeted interventions and systemic improvements.

Findings

- **Limited Availability of Mental Health Services:** Mental health services, including programs like CAPS (Counseling and Psychological Services) and Case Management, face challenges due to staffing shortages and limited hours of operation. These constraints reduce accessibility, particularly for students with demanding schedules. Trauma-informed mobile counseling through SWIFT is an innovative solution, but it remains underutilized due to low awareness.
- **Food Insecurity:** Food insecurity emerged as a pervasive issue, disproportionately affecting low-income and first-generation students. This challenge not only impacts students' physical health but also their academic performance and overall well-being (Tulane University Public Health, 2023).
- **Barriers to Wellness Program Engagement:** Faculty and staff face significant barriers to engaging in wellness programs, including rigid work schedules, high parking fees, and lack of onsite counseling options. These systemic obstacles reduce participation in initiatives like The Well and the Wellness Ambassadors program.
- **Gaps in Data Collection and Policy Implementation:** The absence of comprehensive data collection systems hinders the ability to evaluate the effectiveness of existing health services. Moreover, there is a lack of formalized policies to address after-hours care and systemic health challenges (Gupta, 2024).
- **Population-Specific Challenges:** Marginalized student groups, including low-SES individuals and those with disabilities, face significant barriers to accessing timely mental health care, often compounded by scheduling conflicts and the stigma surrounding mental health. Additionally, limited access to affordable and nutritious food options exacerbates challenges, impacting both their health and academic performance. Among staff and faculty, engagement with wellness programs remains low, primarily due to scheduling constraints and a perceived lack of relevance to their roles. Furthermore, systemic barriers such as high parking fees and inflexible work schedules further restrict their ability to access available health and well-being services.

UC RIVERSIDE

Proposed Actions

1. **Expand Service Hours and Staffing**: Increase availability of mental health and wellness services by extending operational hours and hiring additional staff for CAPS, SWIFT, and Case Management.
2. **Address Food Insecurity**: Implement targeted initiatives such as subsidized meal plans, food pantries, and partnerships with local organizations to provide nutritious options.
3. **Improve Awareness and Accessibility**: Develop comprehensive communication strategies to enhance awareness of available resources. Address systemic barriers such as parking fees and scheduling conflicts to improve engagement.

Discussion

The findings from the Health and Well-being Workgroup align with national trends in higher education. Over 60% of college students met the criteria for at least one mental health problem during the 2020–2021 academic year (American Psychological Association, 2022). Additionally, food insecurity disproportionately affects low-income students, emphasizing the importance of integrated support systems (Tulane University Public Health, 2023). The prevalence of mental health challenges is well-documented, with stigma and accessibility serving as major barriers to care (NASPA, 2021). Addressing these issues requires a combination of expanded services and targeted outreach. Research highlights the role of affordable, nutritious meal programs in reducing disparities in student health and academic performance (Tulane University Public Health, 2023). While the workgroup emphasizes low awareness as a barrier, some studies suggest that factors such as stigma and lack of time are more critical (NASPA, 2021). This highlights the need for strategies that address underlying perceptions alongside practical barriers. Efforts to address food insecurity intersect with sustainability initiatives, such as expanding campus gardens and composting programs. Similarly, mental health initiatives benefit from equity-focused programs that reduce stigma and provide culturally sensitive care.

This workgroup identified significant barriers to mental health services, food insecurity, and wellness program engagement. Limited operational hours and staffing constraints hinder service accessibility. Food insecurity remains a pressing issue for low-SES students, while faculty and staff report difficulties engaging in wellness initiatives due to rigid schedules and logistical barriers.

The HCI assessment supports these observations, scoring UCR's after-hours care services at 2.6/5.0, signaling substantial gaps. Recommendations include expanding service hours, addressing food insecurity through targeted programs, and improving communication to enhance awareness of available resources.

UC RIVERSIDE

SUSTAINABILITY WORKGROUP

The Sustainability Workgroup identified several critical challenges in promoting sustainable practices on the UCR campus. These challenges span staffing shortages, insufficient infrastructure, and low engagement levels among students, staff, and faculty. Addressing these gaps is essential for creating a cohesive and impactful sustainability strategy.

Findings

- **Staffing and Engagement:** Reliance on part-time or student workers creates instability in managing sustainability programs. The absence of permanent staff dedicated to sustainability limits long-term planning and program continuity. Research corroborates the importance of dedicated personnel, with universities that employ full-time sustainability coordinators achieving better outcomes and coordination (Velazquez et al., 2021). Moreover, effective engagement strategies, such as embedding sustainability into curricula and hosting community events, have been shown to enhance participation (Sustainability, 2022).

- **Infrastructure Challenges:** Inadequate recycling and composting infrastructure hinder waste management efforts across the campus. While programs like R'Garden and Dining Hall food recovery initiatives are valuable assets, they are insufficient to address the broader need for sustainable waste practices. Other resources underscore the necessity of comprehensive waste management systems to reduce campus carbon footprints (Mishra & Kumar, 2020).

- **Barriers to Participation:** Students and staff encounter significant barriers to engaging in sustainability programs. For students, limited awareness of initiatives and challenges in navigating sustainability offices, compounded by backlogs and high turnover, impede participation. For staff, heavy workloads, time constraints, and departmental resistance diminish involvement. These barriers align with findings that time limitations and lack of integration into daily operations are common obstacles in campus sustainability efforts (Resources, Conservation & Recycling, 2021).

Proposed Actions

1. **Increase Visibility and Communication**: Develop targeted awareness campaigns to improve knowledge of existing programs. Promote sustainability initiatives through social media, campus events, and collaborations with academic departments.

2. **Enhance Waste Management Infrastructure**: Install additional recycling and composting bins across campus. Expand food recovery initiatives and implement composting programs for residential halls and dining facilities.

UC RIVERSIDE

3. **Invest in Dedicated Staffing**: Hire permanent staff to manage sustainability programs and initiatives, ensuring consistency and long-term impact.

4. **Develop Engaging and Educational Events**: Organize interactive workshops and fairs that combine sustainability education with enjoyable activities to attract more participants.

Discussion

The challenges identified by the Sustainability Workgroup mirror broader trends in higher education, where insufficient staffing, infrastructure deficits, and engagement barriers are common. Universities with dedicated sustainability personnel report higher program success rates, as full-time staff can focus on coordination and long-term planning (Velazquez et al., 2021). Additionally, improving infrastructure for waste management is a critical step toward reducing environmental footprints, as highlighted in a review of campus recycling programs (Mishra & Kumar, 2020). Sustainability intersects with other campus priorities, including equity and health. For instance, food recovery programs can simultaneously address food insecurity while advancing sustainability goals. Similarly, promoting sustainable transportation options aligns with efforts to improve accessibility and reduce environmental impacts. Comprehensive systems for recycling and composting are essential for effective sustainability initiatives. Universities with robust infrastructure report significant reductions in waste and emissions (Journal of Cleaner Production, 2020). Education and leadership buy-in are critical for fostering a culture of sustainability. Incentives such as discounts for reusable products and access to micromobility options are effective in increasing participation (Journal of Environmental Education, 2022; Renewable and Sustainable Energy Reviews, 2023). While awareness campaigns are necessary, some studies suggest that accessibility plays a more significant role in driving engagement. For example, simplifying program participation and ensuring resources are readily available can overcome barriers more effectively than promotional efforts alone (Environmental Research Letters, 2021). Economic incentives, such as subsidized transportation options, further enhance engagement by reducing financial and logistical constraints (Renewable and Sustainable Energy Reviews, 2023).

The Sustainability Workgroup identified staffing shortages, insufficient infrastructure, and low engagement as primary barriers. Reliance on part-time or student workers creates instability, while inadequate recycling and composting systems hinder waste management. Limited awareness and engagement further impede sustainability initiatives.

The HCI scored UCR's sustainability efforts at 2.6/5.0, reflecting significant room for growth. Recommendations include increasing staff, enhancing waste management infrastructure, and promoting interdisciplinary collaboration on sustainability projects.

Literature supports these priorities, emphasizing the role of permanent staff and comprehensive waste management systems in reducing carbon footprints (Mishra & Kumar, 2020). Additionally, fostering a campus culture of sustainability requires leadership buy-in and inclusive participation (Leal Filho et al., 2021).

UCR CLINICAL REPORTS

CHRONIC CONDITIONS REPORT

The UC Riverside Chronic Conditions Report provides a comprehensive analysis of the prevalence and impact of chronic health conditions among UCR's employee population. The report evaluates health metrics, healthcare costs, and program utilization between July 1, 2022, and June 30, 2023, benchmarking UCR's outcomes against Kaiser Permanente's regional and industry standards.

Findings

1. Chronic Conditions and Healthcare Costs

- **Prevalence**: 21% of UCR members are affected by at least one chronic condition, driving 59% of healthcare costs.

- **High-Cost Drivers**: Members with two or more chronic conditions represent 2.1% of the population but account for 17.1% of total costs.

- **Common Conditions**: Diabetes, hypertension, asthma, and depression emerged as the most impactful chronic conditions.

2. Utilization and Engagement

- **Clinical Engagement**: 87.3% of UCR members visited a clinician during the reporting period, surpassing regional and industry averages.

- **Program Enrollment**: Existing disease management programs target conditions like diabetes, hypertension, and depression but have limited participation.

3. Health Risk Factors

- **Obesity and Hypertension**: Significant risk factors contributing to chronic disease prevalence.

- **Awareness Gaps**: Limited understanding of available programs hinders proactive health management.

4. Impact of COVID-19

- The pandemic disrupted healthcare utilization, underscoring the need for adaptive strategies to maintain continuity of care.

Challenges

- **Low Program Participation**: Limited enrollment in disease management programs despite high rates of chronic conditions.

- **Barriers to Engagement**: Factors such as time constraints, stigma, and insufficient program awareness hinder participation.

- **Mental Health Needs**: Rising prevalence of depression and stress highlights gaps in mental health support services.

Recommendations

1. Expand Chronic Disease Management

- Increase enrollment in disease management programs, particularly for diabetes, hypertension, and mental health.

- Enhance proactive health screenings for early detection and intervention.

2. Promote Lifestyle Changes

- Launch targeted wellness programs focusing on obesity and hypertension prevention.

- Partner with healthcare providers to deliver educational workshops on nutrition, exercise, and chronic disease prevention.

3. Improve Data and Insights

- Leverage advanced analytics to track health outcomes, monitor costs, and identify high-risk populations.

- Conduct regular benchmarking against regional and industry standards to evaluate program efficacy.

4. Enhance Mental Health Services

- Increase access to mental health resources, emphasizing support for depression and stress management.

- Reduce stigma through awareness campaigns that normalize seeking help for mental health concerns.

UC RIVERSIDE

SOCIAL DRIVERS OF HEALTH REPORT

The UC Riverside Social Drivers of Health Report evaluates the relationship between social determinants and the health outcomes of UCR employees and communities. Covering the measurement period from January 1, 2023, to December 31, 2023, this report emphasizes how factors like economic stability, education, and neighborhood conditions influence health, well-being, and productivity. It provides actionable insights to address unmet needs and foster a healthier workforce and community.

Findings

1. Social and Economic Drivers of Health

- **Neighborhood Impact**: Employees in deprived neighborhoods (NDI 5) experience higher rates of chronic stress, prediabetes, and missed workdays.

- **Economic Barriers**: Housing instability, food insecurity, and poverty are significant challenges affecting health outcomes.

- **Community Conditions**: Factors such as crime rates, pollution, and limited access to healthy foods contribute to poor health metrics in certain areas.

2. Lifestyle and Health Outcomes

- **Modifiable Risk Factors**: High BMI, hypertension, poor diet, and tobacco use account for over 25% of healthcare costs.

- **Physical Inactivity**: Sedentary lifestyles among employees in high-deprivation areas result in elevated healthcare costs.

- **Chronic Conditions**: Depression, high blood pressure, and diabetes are prevalent, disproportionately affecting those in disadvantaged neighborhoods.

3. Disparities Across Neighborhoods

- Employees living in neighborhoods categorized as NDI 4 or 5 face significantly worse health outcomes compared to those in NDI 1 or 2.

- ZIP codes with the highest concentration of employees in NDI 5 include 92557 and 92503.

4. Employer-Sponsored Program Gaps

- 44% of employees with employer-sponsored health insurance report at least one unmet social need, while 20% face two or more unmet needs.

- Utilization of available wellness and Employee Assistance Programs (EAP) is limited, primarily due to low awareness and accessibility barriers.

Recommendations

1. Employee-Focused Strategies

- **Expand Wellness Programs**: Include targeted initiatives addressing mental health, chronic disease management, and physical activity.

- **Promote Access to Resources**: Use wellness champions and EAP services to connect employees to community supports like housing assistance and food security programs.

- **Flexible Work Policies**: Introduce telecommuting, paid sick leave, and flexible schedules to reduce stress and support work-life balance.

2. Community-Focused Strategies

- **Address Community Needs**: Partner with local organizations to provide technical assistance, funding, and resources for underserved areas.

- **Invest in Housing and Food Security**: Support initiatives like affordable housing projects and supplemental nutrition programs.

- **Enhance Transportation**: Implement or subsidize carpooling, rideshare options, and public transportation incentives to reduce commute-related stress.

3. Data-Driven Approaches

- **Monitor Social Needs**: Establish systems to track unmet needs and evaluate the impact of interventions on employee health and productivity.

- **Heat Map Analysis**: Use NDI metrics to identify high-need areas and prioritize resource allocation effectively.

4. Broaden Engagement

- **Increase Awareness**: Leverage internal communication tools to educate employees about wellness programs and available community resources.

- **Incentivize Participation**: Introduce rewards for engaging in health-promoting activities, such as fitness programs or preventive screenings.

VALUE SUMMARY REPORT

The UC Riverside Value Summary Report evaluates the effectiveness and impact of UCR's employee health programs during the measurement period from July 1, 2022, to June 30, 2023. By leveraging electronic health records (EHRs), the report benchmarks UCR's health outcomes, member engagement, and program utilization against Kaiser Permanente's regional and industry averages. It also quantifies the monetary and health benefits of preventive care, chronic disease management, and medication adherence.

Findings

1. Prevention and Early Identification

- **Immunization Impact**:
    - Flu immunization rates were 31.5%, with significant potential to reduce sick days through increased vaccination uptake.
    - Childhood immunization rates exceeded 89%, demonstrating strong adherence to preventive health measures.

- **Cancer Screening**:
    - Screening rates for breast, cervical, and colorectal cancers surpassed regional and industry averages, emphasizing UCR's commitment to early detection and cost savings through reduced late-stage treatment.

2. Chronic Disease Management

- **Enrollment and Outcomes**:
    - Disease management programs for conditions like diabetes, hypertension, and depression showed high enrollment rates, contributing to improved health outcomes.
    - Medication adherence rates for hypertension and diabetes were near or above industry averages, significantly reducing hospitalizations and associated costs.

- **Lifestyle Modifications**:
    - Addressing modifiable risk factors, such as poor diet and inactivity, could further enhance outcomes and reduce costs related to chronic diseases.

3. Engagement and Personalized Care

- **Online and Telehealth Services**:

- High utilization of online tools, such as lab results access and secure messaging, improved member satisfaction while reducing office visits and associated costs.

- Programs like wellness coaching and lifestyle interventions (e.g., smoking cessation and stress management) were underutilized, indicating potential for broader engagement.

- **Efficiency in Primary Care**:

  - Integrated care reduced duplicate testing and enhanced collaboration between primary and specialty care providers, saving an estimated $66,304 in healthcare costs.

4. Pharmacy Utilization

- **Adherence and Medication Management**:

  - Medication adherence rates for asthma and hypertension surpassed regional and industry benchmarks, ensuring better control of chronic conditions.

  - Mail-order pharmacy services accounted for over 70% of prescription refills, saving employees time and improving adherence.

Recommendations

1. **Enhance Preventive Care Uptake**:

   - Increase vaccination rates by launching awareness campaigns and providing on-campus immunization clinics.

   - Expand outreach for cancer screening programs to sustain and improve early detection rates.

2. **Strengthen Chronic Disease Programs**:

   - Enhance lifestyle management initiatives targeting obesity, physical inactivity, and poor dietary habits.

   - Increase awareness and accessibility of disease management programs to maximize participation.

3. **Expand Digital and Telehealth Engagement**:

   - Promote greater use of online health management tools and telehealth services to improve access and reduce costs.

- o Enhance wellness coaching programs by addressing barriers to engagement, such as scheduling and awareness.

4. **Optimize Pharmacy Services**:

    - o Continue promoting mail-order pharmacy services to improve convenience and adherence.

    - o Integrate medication adherence support into routine care for chronic disease patients.

KP.ORG MEMBER ACTIVITY REPORT

The UC Riverside KP.org Member Activity Report evaluates the digital engagement of UCR employees with Kaiser Permanente's online tools and mobile applications during the measurement period of January 1, 2023, to December 31, 2023. The report provides insights into the use of kp.org and related features for health management, emphasizing the role of digital engagement in improving health outcomes, reducing costs, and enhancing member satisfaction.

Findings

1. Digital Engagement Rates

- **Registration**: 90% of eligible members (age ≥13) were registered on kp.org by the end of 2023, a slight increase from the previous year (87.8% in 2022).

- **Activity**: While overall member registrations improved, sign-ins decreased by 3.4%, highlighting a potential engagement gap.

- **Usage Metrics**:

    o Online prescription refill orders increased by 66.5% year-over-year, with mail-order pharmacy usage rising by 65.0%.

    o Lab test results viewed online increased by 14.9%.

2. Time and Cost Savings

- **Telehealth Benefits**: Digital tools saved an average of $158 per in-person visit and two hours of work time, emphasizing the efficiency of virtual care options.

- **Patient Outcomes**: High engagement with digital health tools correlated with improved medication adherence, reduced hospital admission rates, and better management of chronic conditions.

3. Demographic Insights

- **Age and Gender**: Younger members and men were less likely to engage with kp.org compared to older members and women.

- **Chronic Conditions**: Members with chronic conditions showed higher engagement rates, aligning with the need for regular health management.

Recommendations

1. Increase Awareness and Access

- Promote kp.org and app features, such as appointment scheduling, medication refills, and lab result access, through internal campaigns and workshops.

- Tailor outreach efforts to younger employees and men, who show lower registration and usage rates.

2. Improve User Experience

- Simplify navigation on kp.org and the mobile app to enhance usability and encourage repeat engagement.

- Address barriers to digital access, such as internet availability, to ensure equitable participation.

3. Leverage Digital Tools for Preventive Care

- Integrate digital reminders for preventive screenings and immunizations, building on UCR's strong performance in these areas.

- Expand telehealth services to include virtual wellness coaching and chronic disease management programs.

4. Monitor and Optimize Engagement

- Regularly analyze usage data to identify trends and target under-engaged populations.

- Use feedback from users to continuously refine digital tools and align them with member needs.

UC RIVERSIDE

PREVENTION AND LIFESTYLE RISKS REPORT

The UC Riverside Prevention and Lifestyle Risks Report provides a comprehensive assessment of modifiable risk factors and preventive health measures among UCR employees and their dependents. Covering the measurement period from January 1, 2023, to December 31, 2023, the report evaluates metrics such as weight management, physical activity, chronic disease screening, and immunizations. It highlights areas of success and identifies opportunities for improvement to enhance health outcomes and reduce associated healthcare costs.

Findings

1. Modifiable Lifestyle Risks

- **Overweight and Obesity:**
    - 74.1% of UCR adults are classified as overweight or obese, slightly below the regional average (75.9%) but higher than the national average (71.6%).
    - Obese employees incur 67% higher healthcare costs than their healthy-weight peers.
- **Physical Inactivity:**
    - 66.6% of adults do not meet the minimum exercise recommendations, surpassing the regional average (66.0%) but below the national average (46.7%).
    - Sedentary lifestyles contribute significantly to chronic disease risks, including cardiovascular disease and diabetes.

2. Preventive Services Utilization

- **Immunizations:**
    - Flu immunization rates declined to 48.1%, despite surpassing regional (34.4%) and industry (35.7%) averages.
    - Childhood immunization rates were 73.5%, exceeding the regional average (56.9%) but slightly below industry benchmarks (72.8%).
- **Cancer Screenings:**
    - UCR outperformed regional and industry averages in breast (84.1%), cervical (80.2%), and colorectal cancer screenings (72.4%).

3. Chronic Disease Risks

- **Diabetes:**

- o 28.7% of employees tested for prediabetes had borderline or high glucose levels, lower than the regional (33.5%) and industry (30.3%) averages.
  - o Early lifestyle intervention can reduce the risk of progression to diabetes by 20%.
- **Cholesterol and Blood Pressure:**
  - o 31.8% of screened employees had borderline to high cholesterol, below the regional and industry averages.
  - o Only 7.2% of screened members had undesirable blood pressure readings, outperforming regional (10.3%) and industry (10.6%) benchmarks.

4. Smoking Prevalence

- Smoking rates dropped to 4.0%, well below the regional (5.9%) and national (13.7%) averages, demonstrating effective tobacco cessation strategies.

Recommendations

1. Address Modifiable Risk Factors

- Implement weight management programs targeting obesity through nutritional counseling, physical activity incentives, and weight-loss resources.
- Promote exercise as a vital sign by offering discounted memberships to fitness centers and increased access to physical activity tools.

2. Enhance Preventive Services

- Expand outreach for flu and childhood immunizations to sustain progress in preventive health.
- Develop reminder systems for cancer screenings and chronic disease testing to improve adherence rates.

3. Improve Chronic Disease Management

- Increase lifestyle intervention programs for employees with prediabetes and high cholesterol.
- Utilize integrated electronic health records to identify and support at-risk populations.

4. Broaden Engagement Strategies

- Introduce targeted campaigns to address barriers to exercise and vaccination, focusing on underserved demographics.
- Leverage digital platforms for education, tracking, and communication about lifestyle changes and preventive care.

UC RIVERSIDE

COMPREHENSIVE ACTION PLAN
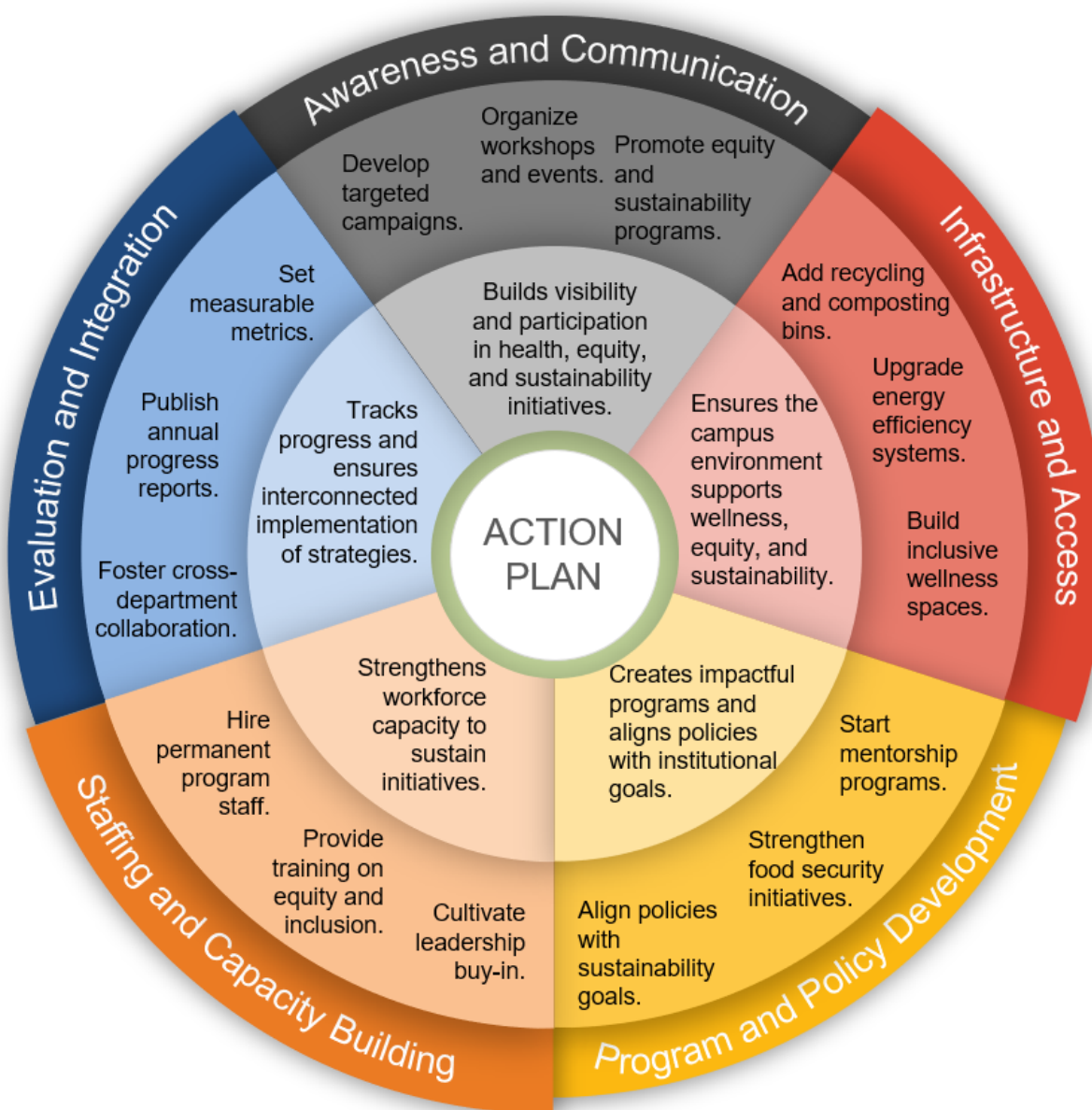
Figure 2. *Comprehensive Action Plan Framework for R'Healthy Campus.*
This diagram illustrates the five key segments—Awareness and Communication, Infrastructure and Access, Program and Policy Development, Staffing and Capacity Building, and Evaluation and Integration—aligned with the central goal of creating an inclusive, health-promoting, and sustainable campus environment. Each segment outlines targeted actions to achieve this goal.

UC RIVERSIDE

The comprehensive action plan for R'Healthy Campus (**Figure 2**)is structured around five key segments, each of which plays a crucial role in achieving the overarching goal of creating an inclusive, health-promoting, and sustainable campus. The segments are interconnected, emphasizing the importance of a holistic approach to addressing systemic challenges and fostering long-term progress.

1. Awareness and Communication

A lack of awareness about available programs and initiatives is a significant barrier to participation in equity, health, and sustainability efforts. To address this, UCR must prioritize the development of targeted campaigns designed to inform and engage the campus community. These campaigns should highlight the benefits of participation, provide clear information about accessing resources, and showcase success stories to build trust and credibility.

Workshops, fairs, and other campus-wide events should be organized to create interactive platforms where students, staff, and faculty can learn about initiatives, share feedback, and engage in collaborative activities. Digital platforms, including social media, email newsletters, and campus websites, should be leveraged to disseminate information efficiently and reach a broader audience. By enhancing visibility, these efforts will promote greater engagement and foster a sense of collective responsibility across the campus.

2. Infrastructure and Access

Infrastructure plays a critical role in supporting health, equity, and sustainability goals. UCR must invest in expanding recycling and composting facilities to meet its waste reduction objectives and improve environmental sustainability. Energy efficiency upgrades, such as motion-sensor lighting and renewable energy installations, are essential for reducing the campus's carbon footprint while lowering operational costs.

Inclusive wellness spaces should be designed to accommodate the diverse needs of the campus population. These spaces could include multi-functional health centers, quiet rooms for mental health support, and accessible recreational facilities. Additionally, extending service hours for programs like CAPS and Case Management, alongside increasing staffing levels, will ensure that more individuals can access these vital resources when they need them. Such investments create a supportive environment that aligns physical spaces with institutional values.

3. Program and Policy Development

UCR's programs and policies must align with the unique needs of its diverse population. Equity-focused initiatives, such as mentorship and financial aid programs for underrepresented groups, are vital for addressing systemic disparities. These programs should be tailored to meet the needs of marginalized communities, including BIPOC, LGBTQ+, and first-generation students.

Food security programs should also be expanded through partnerships with local organizations and the creation of affordable, nutritious dining options on campus. Addressing food insecurity not only improves health outcomes but also supports academic performance and well-being. Additionally, sustainability-focused programs, such as green commuting initiatives and waste reduction pilots, should be prioritized. These efforts demonstrate a commitment to environmental stewardship while providing tangible benefits to the campus community.

Policies that promote health, equity, and sustainability should be integrated into UCR's strategic framework. This alignment ensures that systemic support is in place to sustain progress and institutionalize best practices.

4. Staffing and Capacity Building

Staffing is a cornerstone of any successful initiative. UCR must invest in hiring permanent staff dedicated to sustainability, equity, and wellness programs. Stable staffing ensures

the continuity and scalability of these initiatives and allows for consistent engagement with the campus community.

Comprehensive training programs for staff and faculty are also essential. These should focus on best practices for equity, diversity, inclusion, and health promotion, equipping employees with the tools they need to address the complex challenges faced by the campus. Leadership buy-in is equally critical; fostering cultural competency and aligning institutional priorities with action plans ensures that senior administrators actively champion these efforts.

5. Evaluation and Integration

Measuring progress and ensuring accountability are essential for sustaining momentum and refining strategies. UCR should establish robust metrics to evaluate program utilization, effectiveness, and satisfaction across all domains. These metrics will provide data-driven insights that inform decision-making and ensure alignment with institutional goals.

Publishing annual progress reports is another vital step. These reports should summarize key achievements, highlight areas for improvement, and outline future priorities. Transparent reporting builds trust among stakeholders and demonstrates UCR's commitment to continuous improvement.

Cross-departmental collaboration is key to integrating equity, health, and sustainability efforts into a cohesive framework. By breaking down silos and fostering interdisciplinary partnerships, UCR can maximize the impact of its initiatives and create a unified approach to addressing complex challenges.

REFERENCES

American Council on Education. (2024). Status report on racial and ethnic equity in higher education. Retrieved from https://www.acenet.edu

American Psychological Association. (2022). Mental health challenges and resources for college students. *Monitor on Psychology*. https://www.apa.org

Bansal, S., & Sinha, P. (2023). Economic mechanisms for enhancing sustainability adoption in universities: Evidence from global case studies. *Renewable and Sustainable Energy Reviews, 161,* 112479. https://doi.org/10.1016/j.rser.2022.112479

Leal Filho, W., et al. (2021). Barriers to sustainability in universities: A review of current trends and opportunities. *Resources, Conservation & Recycling, 164,* 105169. https://doi.org/10.1016/j.resconrec.2020.105169

Mishra, R., & Kumar, S. (2020). Strategies for improving campus waste management systems: A review. *Journal of Cleaner Production, 277,* 124073. https://doi.org/10.1016/j.jclepro.2020.124073

NASPA. (2021). Mental health stigma and resource utilization among university staff. Retrieved from https://naspa.org

Stevenson, R. B., & Brody, M. (2022). Cultivating sustainability culture in academic institutions: A framework for transformative change. *Journal of Environmental Education, 53*(2), 103–115. https://doi.org/10.1080/00958964.2022.2023420

Tulane University Public Health. (2023). Addressing food insecurity in higher education. *Public Health Research Blog*. https://publichealth.tulane.edu

Velazquez, L., Munguia, N., & Sanchez, M. (2021). Fostering sustainability through university-level sustainability offices: Challenges and best practices. *International Journal of Sustainability in Higher Education, 22*(3), 489–508. https://doi.org/10.1108/IJSHE-12-2020-0459

Zhang, Y., & Han, J. (2021). Bridging the gap: The role of accessibility in enhancing sustainability efforts in higher education. *Environmental Research Letters, 16*(11), 115001. https://doi.org/10.1088/1748-9326/ac2b39

UC RIVERSIDE