

## RESEARCH ARTICLE

# Mind and Body

## Wellness Center Trends in U.S. Higher Education

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*Serving the needs of the whole person—mental health, medical care, recreation and fitness, and other services—is critical to both student and institutional success.*

### INTRODUCTION

WHILE THE TRADITIONAL PRIMARY ROLE of an undergraduate education is to provide academic instruction, factors outside of the strictly academic contribute to success during and after college. In our 20 years of providing research, data, and analysis for college and university planning, we have observed that wellness—including mental health counseling, medical care, fitness and recreation, and other services—is now recognized as a crucial component of the services institutions provide to students and integrated more and more fully into campus life.

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This article draws on information from various sources, including detailed research on 18 higher education institutions and interviews of three college and university wellness center directors, to discuss current trends in wellness centers at U.S. colleges and universities. The reader may consider questions such as these: What unique circumstances, including location, community approvals, and student preferences, determine the design of a wellness center on a specific campus? How will campuses meet increasing demands for services like mental health counseling? In

preparation for renovation or new construction, higher education professionals and architects should implement a data-driven process to document the needs of the populations they serve. Here we discuss how colleges and universities throughout the United States are establishing best practices and building state-of-the-art facilities that serve the needs of the person as a whole.

### BEGINNINGS OF THE WELLNESS CENTER

Today's commonly used definition of "wellness" as a lifestyle and field of study was shaped in the 1950s when, according to the *New York Times Magazine*,

Halbert L. Dunn, chief of the National Office of Vital Statistics, was looking for new terminology to convey the positive aspects of health that people could achieve, beyond simply avoiding sickness. In a series of papers and lectures in the late '50s, Dunn sketched out his concept of "high-level wellness," defined as "an integrated method of functioning, which is oriented toward maximizing the potential of which the individual is capable." (Zimmer 2010, ¶ 4)

In 1975, the first-of-its-kind Wellness Resource Center was opened in California by John W. Travis, a graduate of the Johns Hopkins Medical School's preventive medicine

residency program, who wanted to implement Dunn's ideas about wellness.

Initially, the term "wellness" was associated with faddish, hedonistic, or non-scientific practices in California, where it first gained popularity. However, it gained credibility when the National Wellness Institute (n.d.) (NWI) opened in 1977 at the University of Wisconsin–Stevens Point. The NWI hosted conferences, advanced theories of wellness, and by the 21st century was accrediting undergraduate health promotion and wellness programs and certifying professional wellness practitioners. The *Berkeley Wellness Letter* began circulating wellness information in 1984. Wellness facilities and programs took off throughout the 1980s (University of Wisconsin–Stevens Point, n.d.)

The increasing number of new wellness centers in the 1980s, often associated with hospitals (Hamilton 1985), corporations (Kramon 1987), or universities (and sometimes religious organizations, senior housing complexes, hotels, or other entities), included amenities such as doctors' offices; clinics and eye care centers; stores retailing sporting equipment and health foods; classrooms for instruction in smoking cessation, nutrition, weight control, sobriety, pain management, and stress reduction; spa services; and sports facilities and health club features like pools, tennis courts, jogging tracks, and exercise machines.

The first university-affiliated wellness center opened in 1991 at Oklahoma State University (2017). Oklahoma State's Sereteen Wellness Center provides extensive facilities and counseling in fitness and nutrition. The trend caught on at other institutions, many of which had built fitness and recreation centers in the 1980s. The expansion of wellness services, including mental as well as physical health, continues today.

## BACKGROUND ON WELLNESS IN EDUCATION AND THE WORKPLACE

### ELEMENTARY AND HIGH SCHOOL MODELS OF HEALTH

In U.S. public elementary and high school education, the current strategy for promoting the health and wellness of students is known as the Whole School, Whole Community, Whole Child (WSCC) model, according to the Centers for Disease Control and Prevention (2015). Schools recognize that the physical and emotional needs of students must sometimes take precedence over academic needs, as a child in crisis cannot learn and may disrupt classmates' learning. School nurses can directly assess medical conditions, and staff must have proactive techniques to help students address the emotional and physical toll of stress. Many schools have dedicated psychiatrists and counselors as well as amenities such as treadmills, yoga, meditation (Bloom 2016), and gardening programs for stress reduction; as a result, student behavioral challenges may be drastically reduced. In loco parentis private boarding schools especially offer extensive repertoires of services for boarding students in addition to the usual high school health curriculum and basic care. Students should be provided with continuity of care, even after graduating to college-level independence.

### WORKPLACE WELLNESS

Corporations have offered organized wellness services to workers for decades. A *New York Times* article from 1987 describes the Wellness Center available to Coors employees with its gym and indoor track; programs on smoking, alcohol abuse, nutrition, and weight loss; and subsidized breast exams (Kramon 1987). Today, given the structure of the U.S. health care system in which more than half of all Americans receive health insurance through employers, according to the U.S. Census Bureau (Smith and Medalia 2015), wellness programs are a large and growing part of the workplace. From fitness classes to meditation and nap rooms to nutrition-conscious cafeterias, many employers are

integrating various aspects of wellness into their plans for employee care with an eye toward prevention and their long-term bottom line. *Corporate Wellness Magazine* is dedicated to documenting these trends.

### COLLEGE AND UNIVERSITY MODELS OF HEALTH

For the many students who move onto campus upon matriculation, questions arise about creating a new support system. If there is a crisis, family members can only do so much from a distance; roommates and friends can only do so much as caring peers; medical or mental health professionals relied on in the past may be inaccessible; and faculty members may not be the appropriate outlet for distress during illnesses or life events. That is where the staff of the wellness center can step in to provide medical assistance and psychological support.

Colleges and universities will sometimes expand or restructure their medical and mental health care offerings in response to crises at their own or another institution (Skorton and Altschuler 2013). Such crises can include natural disasters, school shootings, sexual assaults, and hate crimes. The need for prevention and treatment of substance abuse and sexual assault, as well as all kinds of other services, may be all the more obvious in the wake of a catastrophe.

All aspects of campus life factor into a well-rounded, positive college experience. Physical education requirements promote student health. In residential life, social programming encourages student engagement. In housing, expanded options such as accessible housing, comfort-animal-friendly housing, substance-free housing, quiet housing, “wellness housing,” and others provide all students with a supportive environment. Other aspects of health can also become the responsibility of the institution, such as nutrition (students are mainly limited to eating on or near campus and so depend on campus dining). All of these aspects of health must be considered in a comprehensive plan for wellness.

Colleges and universities must put thought and care into their policies and offerings for students with varying needs. Campus wellness centers should respond to student needs by surveying students directly, meeting with student leaders to discuss concerns, or tracking usage patterns to infer demand for specific services. Current best practices can also be identified through peer benchmarking. These methods ensure that student wellness needs are met.

### COMMON FEATURES OF COLLEGE AND UNIVERSITY WELLNESS CENTERS TODAY

Wellness centers encompass a variety of services. Most college and university wellness centers referred to in this article offer mental health services, medical health services, or both. They may also include any combination of fitness and recreation facilities, academic classes, dining options, spa services, and more. Wellness centers serve a variety of populations, most commonly undergraduates but also graduate and professional students, faculty, and staff. They host classes, discussion groups, and events throughout the year on a variety of wellness-related topics. While the specific wellness centers described in this article are based in a single building as a unified entity, many institutions provide “wellness services” or even a “wellness center” that exists online and may be overseen by dedicated staff working in more than one office both physically and nominally. Figure 1 shows which services are housed within the wellness centers of 12 universities and colleges (excluding related services located in other buildings).

Figure 1 **Wellness Center Services at 12 Universities and Colleges**

SCHOOL	Facilities and Services (✓ for Yes, ~ for tie-in or partial service)		
	Fitness / Recreation	Medical Care	Mental Health
Auburn University <i>The Auburn Recreation and Wellness Center</i>	✓	~	~
Bridgewater State University <i>Wellness Center</i>	~	✓	✓
Carleton College <i>Student Health and Counseling</i>	~	✓	✓
Lincoln University <i>The Health and Wellness Center</i>	✓	✓	✓
Oklahoma State University <i>Seretean Wellness Center</i>	✓	~	~
Stanford University <i>Vaden Health Center</i>	~	✓	✓
University of Iowa <i>Campus Recreation and Wellness Center</i>	✓	~	~
University of Southern California <i>Office for Wellness and Health Promotion</i>	~	~	~
University of Wisconsin–Stevens Point <i>Allen Center</i>	✓	~	~
Vanderbilt University <i>Center for Student Wellbeing</i>	✓	✓	~
Winona State University <i>Integrated Wellness Complex</i>	✓	~	~
Yale University <i>Student Wellness at Yale Health</i>	~	✓	✓
<b># of Schools with Each Type</b>	<b>7</b>	<b>6</b>	<b>5</b>

## MENTAL HEALTH

Many wellness centers serve either as the main provider of mental health services to the school community or as a supplemental service independent of a dedicated counseling center. Marit Lysne, director of student health and counseling at Carleton College in Minnesota, notes that demand for these services continues to increase nationwide and that “this mental health work helps students flourish in their academic life” (pers. comm., May 5, 2017).

Mental health services are frequently used by students. The National Survey of College Counseling Centers reported in 2014 that 11 percent of college students (out of 3.3 million students at 275 responding centers in the United States and Canada) sought individual or group counseling during the year, and 30 percent of students attended programming, including workshops, orientations, presentations, and other events with counseling center staff (Gallagher 2014).

- » *Mental health disorders.* The most common mental health disorders typically develop when people are in their teens through mid-twenties (Johns Hopkins

Medicine, n.d.). This may be due to physiological changes and stressful transitions after high school. Diagnosis of various disorders among college students is common and rising, according to the Association for University and College Counseling Center Directors (AUCCCD) 2015–2016 survey: “Anxiety continues to be the most predominant and increasing concern among college students (50.6 %), followed by depression (41.2 %), relationship concerns (34.4%), suicidal ideation (20.5%), self-injury (14.2%), and alcohol abuse (9.5%)” (Reetz et al. 2016, p. 15). Sixty-four percent of directors at the (primarily U.S.) institutions responding to the AUCCCD survey report that psychiatric services were offered on their campus in 2015–2016, a number that has also been increasing. The AUCCCD reports that 40 percent of centers were integrated clinically, administratively, or both with a health service. Wellness centers that provide mental health services strive to do so in a way that is effective and private, but often need to refer patients to outside sources for long-term care in severe cases.

- » *Sleep hygiene.* The need for stress reduction is clear to anyone familiar with campus culture; student wellness centers often emphasize sleep as a way to reduce stress and improve academic performance (YaleNews 2016). The toxicity of many campus sleep cultures was summed up eloquently by a Yale student who told the *Yale Daily News*, “there is almost a commoditization of exhaustion as an indicator of status. There seems to be an implicit social script telling us that we should be tired and exhausted all the time and that if we aren’t—if we are well rested and not stretched overly thin between classes and extracurriculars and jobs and friends—that we’re doing something wrong, or at least not doing as much as we could or should be doing” (Gavin 2016, ¶ 32). Yale focuses on sleep as a main pillar of its student wellness services, and while Yale stands out for the quality of its programming and informational website, it is not unique in focusing on this issue. Institutions such

as the University of St. Thomas (2017) in Minnesota benefit from faculty who are leading experts on sleep and can directly improve the quality of life on campus.

The University of Iowa (2017) offers students the Refresh program, generally accessed through a phone app that records the user’s sleep log and heart rate monitor data and then guides the user through a personalized sleep improvement plan. As part of the program, students can also meet with a Refresh consultant. At Carleton College, the director of student health and counseling, Marit Lysne, notes that she is always looking to “get more creative about ways to manage stress, manage sleep and exercise, to not have students erode their mental and physical health in order to be academically viable” (pers. comm., May 5, 2017).

- » *Spirituality, meditation, spa services, and other.*

Many wellness center counselors (as is common among mental health professionals) will work collaboratively to refer students to school chaplains to provide holistic mental health treatment. As an example, the director of Lincoln University’s Health and Wellness Center notes the school’s language on assessment and referral (Lincoln University, n.d.). Many schools offer meditation rooms, which may be located within a wellness center or offered in a chapel or facility dedicated to religion and spirituality. Mindfulness and meditation are increasingly popular and can be a life-changing experience, improving sleep and focus and reducing stress. For stress reduction, some schools also offer spa services (e.g., massage [The University of Iowa, n.d.(c)], facials, aromatherapy [Yale University 2017a], acupuncture [Harvard University Health Services, n.d.]) to students and other populations. Often these services are located in the wellness center, but many can be located in other areas of campus, such as nap pods in the library (Sayej 2016). Animal therapy (e.g., the University of Southern California’s [n.d.] “Wellness Dog”) and other programs add to the tools schools use to foster emotional resilience.



## SEXUAL HEALTH

- » *Healthy options.* Many wellness centers make sexual health a priority, often dispensing free sexual health products, conducting free STI testing parties (Yale University 2017b), and providing a wealth of information to the student population. In addition, many wellness centers either directly provide information or counseling targeted to the LGBTQA community or refer to campus organizations that specifically provide services for these populations.
- » *Sexual assault.* With sexual assault crises regularly making news, colleges and universities must continue to evaluate how they prevent, adjudicate, and treat these issues to ensure fairness and privacy. Wellness centers can play a role in providing information, resources, and counseling to survivors. They also can play a crucial role in prevention through mandatory training and other programming and initiatives.

## MEDICAL CARE

- » *Medical services.* Many schools offer health care services within wellness centers; often services are free. Some schools offer nutrition/weight loss coaching in addition to personal training services. Many school wellness centers include a pharmacy (not a free service).
- » *Medical records.* As part of providing medical care, most institutions today provide an online patient portal that allows people who use their services to have full and private access to their own medical records and, in some cases, to schedule appointments online. Keeping patients fully informed allows them to participate actively in their own care and gives them ownership over their personal information. Any school considering expanding or restructuring its medical care must consider the most legal, confidential, and efficient ways to keep and share medical records.

## FITNESS AND RECREATION

As noted above, many schools combine fitness and recreation facilities in the same building as physical and mental health services in a holistic approach to caring for community members in both mind and body. For example, yoga classes are a physical fitness activity as well as a direct method of stress reduction and meditation.

Some wellness centers are large facilities that include fitness and recreation; some are simply a specific office located within a larger fitness and recreation facility; and some buildings called wellness centers specifically offer fitness and recreation as their only services. The Lincoln University Health and Wellness Center, for example, offers medical and mental health services, fitness and recreation, and health education all within the same building (although there are additional athletic facilities elsewhere on campus). Lincoln provides these services to students, faculty, and staff; many of the fitness classes are taught by professors as a way to make use of existing skills. Director Gerard Garlic notes that such interactions enrich the campus experience by allowing professors and students to connect outside the classroom; they can also be a way to introduce students to a professor with whom they have something in common who might serve as a mentor (pers. comm., May 19, 2017). Housing all of these integrated services together is convenient and may attract people who might otherwise not take advantage of them.

## HEALTH EDUCATION

- » *Programming and academic classes.* Most wellness centers offer health education to students and other populations, starting with their website and extending to classes, discussion groups, and events. Wellness centers teach and train students and others on topics as diverse as preparing for international travel, healthy cooking, substance abuse, sleep hygiene, and more.

- » *Websites.* A major role of university health services is to disseminate information to the school community and the world at large, essentially as a form of extension service for medical research. Columbia University (n.d.), for example, has an advice website, Go Ask Alice!, where health questions are answered by a team of Columbia experts. This resource is useful for everyone affiliated with Columbia and for the global community well beyond the institution. Other institutions have created their own programs modeled after Columbia's. People must be well informed in order to optimize their own well-being. To this end, websites should be redesigned when necessary to stay up-to-date and user friendly.

#### STAFF AND PEER EDUCATORS

- » *Staff.* The number of staff dedicated to aspects of wellness has been on the rise over the last few decades, and it continues to rise. In 2014, the National Survey of College Counseling Centers reported that the average ratio of counselors to students is 1 to 2,081 students, with smaller schools having much better ratios (this ratio is elevated because of the inclusion of two-year schools) (Gallagher 2014). The average ratio of mental health professionals to students (2013) is 1 to 1,600. Sixty-five percent of responding directors are women as are 70 percent of overall staff. Most directors are counseling psychologists, professional counselors, or clinical psychologists.
- » *Peer educators.* Many of the schools surveyed have student employees who provide programming for peers in many areas of health and wellness. They are known by such titles as “peer educators,” “student health advocates,” “health ninjas,” and “student wellness advocates.”

#### HOURS AND FEES

Most wellness centers surveyed have hours that vary by each service offered and the time of year. Generally, academic year hours will approximate regular business hours, and summer hours may be limited. Many centers offer a 24/7 crisis phone line. Many of the centers surveyed for this report offer an electronic check-in kiosk at the main entrance that allows students to independently check in and perform basic tasks in addition to a staffed reception desk; most offer online as well as in-person and phone appointment scheduling.

Most wellness centers offer free services to affiliates. Students, faculty, and staff can take advantage of free medical care, mental health services, and athletic facilities. However, certain services, such as long-term psychological treatment or massage therapy, may be on a fee basis. Services with fees tend to be the exception, not the rule.

Regarding mental health services, according to the 2014 National Survey of College Counseling Centers, “4.7% of counseling centers charge a fee for personal counseling. This is down from 10% in 2003 and from its peak of 17% in 1996. The mean fee charge was \$20 and the mean income was approximately \$90,000. Only 2.6% of centers collect third party payments.” Further, “40% of centers are supported either partially or fully by a mandatory fee; 21% comes from student health fees, 17% from general student life fees, and 2% from a fee specifically identified as a counseling center fee” (Gallagher 2014, p. 4).

#### PATIENT SATISFACTION

A crucial part of providing high-quality health care is the regular measurement of patient satisfaction with the goal of increasing satisfaction. The American College Health Association runs surveys for colleges and universities on student health, including the Patient Satisfaction Assessment Service (American College Health Association 2016) and

the National College Health Assessment (American College Health Association 2014).

The University of California, Los Angeles (n.d.(b)), runs a Patient Feedback Survey that gathers information on patient experiences at the Arthur Ashe Student Health & Wellness Center. This practice allows the center to identify potential areas of improvement and maintain high standards for patient satisfaction. The Patient Feedback Survey from January 2015 (total responses 318) showed that the Ashe Center (2015) met its target of a 90 percent “Good” or “Very Good” response to seven out of eight items asking about patients’ experiences with the staff caring for them, suggesting that the center should continue to operate as it currently does. (See the case study of the Ashe Center later in this article for detailed responses.)

Students especially will often advocate for their own health needs through student newspapers and organizations and other modes.

## CASE STUDIES OF WELLNESS CENTERS: HISTORY, ARCHITECTURE, AMENITIES

### CARLETON COLLEGE

Carleton College’s Student Health and Counseling (SHAC) center is nestled within a larger complex of buildings at the main entrance to campus (figure 2). Originally called the Wellness Center, it formed in 1995 when health and counseling services merged. SHAC was given its current name in 2011 following a regular departmental review (Herrera-Heintz 2011). The review incorporated input from students, staff, and faculty as well as benchmarking information on a dozen of the top liberal arts colleges.

Figure 2 **Student Health and Counseling, Davis Hall, Carleton College, Northfield, Minnesota**



Source: Carleton College 2017b



The 2011 review and updates were intended to provide greater access to care through expanded hours and additional staff and to clarify that SHAC served students rather than other populations by adding “Student” to the center’s name. SHAC now offers free routine medical and mental health services to the 2,000 students at this rural Minnesota college. The SHAC website states its mission: “We are committed to providing services that help students meet their physical and mental health needs from a holistic perspective, with a focus on education for lifelong learning and optimum health” (Carleton College 2017b, ¶ 3).

SHAC functions as part of a network of external entities and collaborative offices on campus. Carleton’s new Office of Health Promotion, which opened in 2016, administers events, programs, and initiatives promoting overall well-being (including managing a grant for an Alcohol and Other Drug Prevention task force) (Carleton College 2016). The campus dining service has a dietician who can consult with students when needed. An external service has provided urgent after-hours mental health care since 2015, alleviating pressure on the Carleton psychologists who had been doing on-call work. In addition, Residential Life, Facilities, the Minnesota Department of Health, and others collaborate with SHAC to address public health issues.

As part of this collaborative approach, SHAC will sometimes refer students to other local providers for specialized care. To ensure that care is coordinated, for the last two years SHAC’s medical administrative assistant has offered care navigation and self-advocacy services to students. Students may require such assistance to identify a specialist for medical care, to enable payment of a bill for off-campus care through insurance, or for other tasks. The assistant meets individually with students to guide them through tasks that a parent or guardian might have coordinated in the past.

Another service that Carleton has added to its offerings in the past several years is online mental health screening. In addition, the Office of Health Promotion recently ran a

sleep environmental scan of students using a questionnaire developed by the Center for College Sleep at the University of St. Thomas (2017) in St. Paul. By regularly gathering student data, SHAC positions itself to effectively meet student needs.

Carleton regularly updates its health records system, ensuring that records are maintained in an accessible format in order to provide quality care. Carleton switched to electronic health records concurrently with the other changes made in 2010–2011. Since then, the records system has been further enhanced and made more user friendly by company-issued updates. As of spring 2017, medical appointments can be scheduled online, and in the future counseling appointments may also have an online scheduling option.

As with other student health and counseling centers around the country, the demand for SHAC services has grown steadily over recent decades. In 2015–2016, 24 percent of students made use of counseling services and 53 percent made use of medical care. In the past, some students had expressed that the supply of services did not meet their expanding demand for appointments at extended hours, as described in a 2013 article in the *Carletonian*: “While Student Health and Counseling does not have waitlists ... students have difficulty finding a time for an appointment” (Strauss 2013, ¶ 13). The same article noted that “While small liberal arts colleges have an average ratio of one counselor for 912 students, Carleton has one counselor for every 550 students, significantly better than average (¶ 4).... On average, nine to twelve percent of students seek counseling at small colleges. Twenty percent of students at Carleton sought counseling last year (¶ 5).... Almost no other college health or counseling center has weekend hours and students can access medical services in the Northfield community at all hours and Carleton offers evening/weekend crisis phone counseling services (¶ 9).... Only sixty percent of colleges and universities provide some psychiatric services to students” (¶ 11). Anticipated future need at Carleton could be addressed by expanded staffing and space.

Marit Lysne, director of SHAC, comments, “People outside of higher ed might say, ‘Why are colleges providing health and counseling services?’ But people’s mental and physical health absolutely impacts their academic abilities. This kind of work helps individuals flourish and thrive and helps them stay in school. We’re doing the work of retention for Carleton” (pers. comm., May 5, 2017). Particularly given Carleton’s academically rigorous 10-week term schedule, students may risk eroding their mental and physical health to be academically viable. In the future, Lysne hopes to continue collaborating with the Office of Health Promotion (and its team of staff, Student Wellness Advocates [Carleton College 2017c], and therapy dog [Carleton College 2017a]); focus more on prevention as part of the “flourishing” model of wellness; seek creative ways to manage stress, sleep, and exercise; and generally enrich and expand SHAC services to benefit students.

*People’s mental and physical health absolutely impacts their academic abilities. This kind of work helps individuals flourish and thrive and helps them stay in school.*

#### LINCOLN UNIVERSITY

The Health and Wellness Center at Lincoln University (2017) in Pennsylvania, designed by Moody Nolan and Renaissance 3 Architects and completed in 2011, sports a light blue and white color scheme, bright, naturally-lit open spaces, and high ceilings that dispel any outdated notions of cramped and dark locker rooms or claustrophobic gyms (figure 3). The former athletic facility and health sciences building had lacked adequate space to meet demand and did not encompass medical and mental health services. The decision was made to combine all these aspects of wellness in one facility that would attract the entire Lincoln community.

Figure 3 **Health and Wellness Center, Lincoln University, Pennsylvania**



Source: Moody Nolan 2017

According to Moody Nolan's (2017) website, the main level of the Health and Wellness Center houses fitness, physical education, the wellness center, and food service. Fitness facilities include a multipurpose activity court, multipurpose rooms, locker rooms, a bouldering surface, and a rock-climbing wall. Academic facilities include classrooms with perimeter A/V collaboration systems, physical education laboratories, and a 100-seat, high-tech, tiered lecture hall. Wellness facilities include exam rooms, a CPR training room, physician offices, a laboratory, and a pharmacy. Dining options within the Health and Wellness Center currently include a multi-station server, dining room, and café. The upper level of the center houses additional physical education space, the counseling center, fitness areas, and an elevated track. There are lounges, high-performance A/V and flexible technology systems, and sustainable features (including daylighting strategies, low-flow plumbing, and high-efficiency mechanical systems) throughout the building. To add to the outdoor gathering spaces and sustainability features, "an existing detention pond will be reconstructed as a water feature central to the newly expanded south campus" (Moody Nolan 2017, ¶ 2). The building is designed to provide for many different needs all in one.

The fitness class offerings at the center, such as Zumba and Tai Chi, respond to student demand. Some of the fitness classes are taught by professors; for example, "The Talented Faculty and Staff Giving Back Series" of self-defense, Zumba, yoga, and other classes draws on resources within the campus community. The center also observes the offerings at the nearby YMCA and considers it a collaborative partner in providing programming to the Lincoln University community.

Events such as blood drives, screenings, sexual awareness seminars, and other communal outreach activities at the center sometimes bring in hundreds of attendees. Smaller groups also meet in the center, for example the Fellowship of Christian Athletes, which met there in the past; different interests and needs are met by the ample, flexible space provided.

Student workers provide an hourly headcount of those using the fitness machines, glean information on regular traffic patterns. When the center first opened, traffic was higher than average and has now stabilized at a predictable rate. The expectation is that opening the new food court in September 2017—which will provide healthy eating options including wraps, salads, smoothies, grilled foods, and sushi—will bring more traffic into the Health and Wellness Center, and yet more people will find it convenient to take advantage of the fitness and health services offered there. According to its director, Gerard Garlic, in the future Lincoln University's Health and Wellness Center will continue to look for the newest health and wellness activities to energize the campus community, help students with additional practical applications of health sciences (e.g., the personal training curriculum), bring in more traffic, and expand offerings to serve the community to the fullest. He states, "For those who use the Health and Wellness Center, it gives them a holistic approach to taking care of their body and their mind. We as a university try to provide services through Residence Life, Wellness, and other departments that come together to give the student this holistic campus experience" (pers. comm., May 19, 2017).



**AUBURN UNIVERSITY**

The Recreation and Wellness Center at Auburn University, designed by HOK (2017), opened in 2013 (figure 4). A playful red running track winds as a smooth, maze-like balcony around the atrium, giving the building's interior the look of an indoor playground. The center also includes two 50-foot rock-climbing towers, an outdoor pool with climbing wall, a PGA golf simulator, a wide array of cardio equipment, an extensive selection of strength equipment, 150+ group fitness classes, a personal training studio, multipurpose indoor courts, a game room including foosball and table tennis, an open-air courtyard in the middle of the building, meeting rooms, and terraces. Staff provide classes and training in fitness, and the Wellness website has videos on how to exercise and stay fit.

Figure 4 **Recreation and Wellness Center, Auburn University, Auburn, Alabama**



Source: HOK 2017



## STANFORD UNIVERSITY

The Vaden Health Center, designed by architects Hawley Peterson Snyder (2008), opened in 2002 (figure 5), replacing the older Cowell facility that was no longer serving the needs of those using it. The new facility provides medical care and mental health services to students (Stanford University, n.d.(b)). At Stanford, fitness and recreation are housed in a different building. However, the BeWell website (Stanford University, n.d.(a)) lists the staff involved in offering all of

these services, and they work in concert to promote health and wellness.

The Health Center provides a wide array of services from a 24-hour phone line for students in crisis to courses, workshops, discussion groups, and internships through the iThrive program (Stanford University, n.d.(c)). The center contains a pharmacy along with a variety of medical services.

Figure 5 **Vaden Health Center, Stanford University, Stanford, California**



Source: Hawley, Peterson, Snyder 2008; photographer, David Wakely



## UNIVERSITY OF CALIFORNIA, LOS ANGELES

The Arthur Ashe Student Health and Wellness Center, with its distinctive blocky columns framing the entrance, has a crisp and modern interior, a sterile white like that of a hospital (figure 6) (University of California, Los Angeles 2012). The building was completed in 1993, and the amenities have been updated since to reflect the latest technology. Appointments can be made online, and clients can check in at screens positioned in the entranceway. With a user-friendly website and regular class offerings, as well as perks like free feminine hygiene products, the center keeps itself in the consciousness of students, posting regularly on the Ashe Center Facebook page (University of California, Los Angeles, n.d.(a)) and Twitter.

Figure 6 **Arthur Ashe Student Health & Wellness Center, University of California, Los Angeles, California**



Source: Stir Architecture 2016; photographer, Erhard Pfeiffer

The Patient Feedback Survey from January 2015 (total responses 318) showed that the Ashe Center (2015) met its target of a 90 percent “Good” or “Very Good” response to the following items:

- » Communicate clearly about your treatment and care? (96 percent)
- » Would you recommend the Ashe Center to others? (94 percent)
- » Connect with you, call you by name, and address you graciously? (94 percent)
- » Ask permission before examining you and inquire if you had any questions, needs, or concerns? (94 percent)
- » Respond quickly to your requests and questions? (94 percent)

- » Exit courteously with an explanation of the next steps? (94 percent)
- » Our concern for your privacy? (93 percent)

Overall, the survey respondents rated the Ashe Center very highly.

## THE UNIVERSITY OF IOWA

The University of Iowa (n.d.(b)) Campus Recreation & Wellness Center (CRWC) designed by RDG Planning & Design (2017) opened in 2010 (figure 7). The Wellness Center on the building’s first floor provides fitness assessments, nutrition counseling, and a variety of other wellness offerings to students, faculty, and staff (The University of Iowa, n.d.(d)).

Figure 7 **Campus Recreation & Wellness Center, The University of Iowa, Iowa City, Iowa: Entrance**



Source: The University of Iowa, n.d.(d)

The larger CRWC facility also includes extensive fitness facilities, massage therapy (for a fee), and state-of-the art swimming facilities, with areas that provide a spa-like hot tub experience and others that evoke the cheerful and child-friendly environment of a water park (figure 8). The building also includes a lactation room and single-user, gender-inclusive restrooms (The University of Iowa, n.d.(a)).



Figure 8 **Campus Recreation & Wellness Center, The University of Iowa, Iowa City, Iowa: Swimming Facilities**

Source: RDG Planning & Design 2017

During the design process, the architects responded to community concerns that the new building might not harmonize with its surroundings by hosting an on-campus design charrette event. Afterward, the designers incorporated input from faculty, staff, and students to enhance the prominence and grandeur of the corner entrance and façade to fit in with existing campus buildings (Scott and Lehnertz 2016). The building won awards for its beautiful and efficient use of the project site footprint it was given. The massive “River of Life” mosaic in the entrance hall provides a splash of colorful artwork emphasizing natural forms to welcome visitors (The University of Iowa 2010). The extensive use of glass in the building’s exterior and interior surfaces allows light in and displays the interior to the outside world, creating an inviting and easy-to-navigate layout. The building promotes social interaction and easy navigation through open spaces with translucent divisions.

## **FUTURE PROJECTS: UNIVERSITY OF WISCONSIN–STEVENS POINT**

The University of Wisconsin–Stevens Point, where the National Wellness Institute began in 1970, approved a plan in 2015 to build a new Student Health and Recreation Center (Kahler Slater 2015). This will address concerns that the current facility, the Allen Center, does not have adequate capacity to serve the school community at its current size and level of demand.

The planned facility will include the following features, as well as some additional features not listed here: child care center (play room, nursing room, laundry, kitchen, nap room, etc., classrooms for ages six weeks to four years, outdoor playgrounds for infants through preschool); student health services (triage room, vitals/scale alcove, observation room,

exam room, procedure rooms, physical therapy/athletic training room, private care provider offices, pharmacy); counseling center (psychiatrist office/consult, waiting, crisis waiting room, check-in kiosks, checkout/billing, counseling director, psychologists/counselors, ADHD testing room, training therapy, group therapy room, relaxation therapy room); and sustainable building features. The building will include a lobby, welcome desk, lounge, café, shared classroom, fitness center (cardio, strength, stretch, fitness studios, four-court gym, jogging track, men/women/unisex locker rooms, laundry), an outdoor recreation equipment rental/storage and trip planning service, and a dietician/demonstration kitchen.

Additional staff will be hired to serve the needs of those using the new, expanded facility. Health services will bring on additional licensed practical nurses, administrative staff, and student staff; it will maintain the existing level of pharmacy techs, medical laboratory scientists, and academic staff. Counseling will increase the number of academic staff, administrative staff, training interns, and student educators. Child care staff will also increase (student staff will go from 50 to 70). This expansion will better serve the needs of all university affiliates by providing well-staffed, up-to-date services and programming.

## QUESTIONS FOR CONSIDERATION

If you have examples of the trends discussed in this article that you would like to share—photos or descriptions—we would be pleased to add them to our collection. If your wellness center and services are entirely different from those described here, we would be interested to hear about that, too.

Some other topics we would like to hear about include:

- » Are there examples of innovative wellness programming with empirical data confirming effectiveness?

- » How does demand for different wellness services (fitness, medical care, mental health, etc.) vary for different demographic groups of students?
- » Which wellness services (fitness, medical care, mental health, etc.) are expected to see the fastest increases in demand, and how will that demand be met?
- » How do specific campuses address high building costs and scarce land?
- » How do institutions initiate regular conversations with stakeholders and peers to learn from example and stay proactive in preventing student crises?

## CONCLUSION

As colleges and universities innovate and expand their wellness services to provide for the needs of current and future students, it is important to stay aware of current trends and learn lessons from other institutions through peer benchmarking. Schools should regularly assess the needs of students, faculty, and staff who use their wellness facilities through surveys and interviews and evaluate whether there are unmet needs. More students than ever rely on school offices for their medical care and mental health services, and there must be plans in place to meet their needs, especially in the face of a rapidly changing health care and mental health landscape. Two of the three wellness center directors interviewed for this article noted that their biggest challenge is working within the available space and staff. When constructing new facilities, it is important to consider what the overall structure of wellness services at the school should be: which functions are already adequately provided in other ways and which could use restructuring. A wellness center should include the right spaces to provide for all the functions that will be housed there, have the appropriate amount and type of staff, and provide varied and targeted programming. Features such as technology (computerized check-in kiosks for appointments, classrooms enhanced with technology, etc.), sustainability, and accessibility should also

be considered when planning for a new or renovated building. With adequate data and a well-described vision, colleges and universities can plan for a future of health and wellness for all who use their services.

*More students than ever rely on school offices for their medical care and mental health services, especially in the face of a rapidly changing health care and mental health landscape.*

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