

USC American College Health Association  
National College Health Assessment Report:  
*Health Sciences Campus & USC School of Dentistry*

2006

*Health Promotion and Prevention Services  
University Park Health Center  
A Division of Student Affairs  
University of Southern California*

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## Executive Summary

The American College Health Association National College Health Assessment (ACHA-NCHA) was conducted by Health Promotion and Prevention Services on the Health Sciences Campus in the spring of 2006. The resulting data provide a picture of the health-related attitudes, perceptions, and behaviors of USC graduate students on a variety of topics, such as safety, mental and physical health, sexual behaviors, substance use, and nutrition.

The following report includes a number of key findings:

### Impediments to Academic Performance

Both 2002\* and health sciences professional (HSP\*\*) students report that the factors which most negatively impact their academic functioning are stress, cold/flu/sore throat, concerns for a troubled friend or family member, sleep difficulties, relationship difficulty, and depression/anxiety disorder/seasonal affective disorder. Of note, 20.8% of HSP students report that stress had a negative effect on academic performance.

### Health Information and Safety

**Helmet Usage** – Within the last school year, 38.6% of HSP students never wore a helmet when riding a bicycle and 77.9% never wore a helmet when in-line skating.

### Mental and Clinical Health Issues

**Mental Health** – Among respondents who have previously been diagnosed with depression, 40.2% of HSP students reported currently taking medication and 34% of HSP students reported currently being in therapy for their depression.

**Clinical Health** – The most frequently cited health problems experienced by both 2002 and HSP students were back pain, allergy problems, sinus infections, and depression. However, 92.1% of 2002 and 93.8% of HSP students described their general health as being excellent, very good, or good.

### Sexual Behavior and Contraception

**Sexual Behaviors** – 88% of 2002 and 84.1% of HSP students have had either zero or one sexual partner within the last school year. However, 75.6% of 2002 and 73.6% of HSP students perceived that the typical USC student has had two or more partners. In addition, of those HSP students who had vaginal intercourse in the last 30 days, 29.9% always used a condom.

### Alcohol, Tobacco, and Other Drugs

**Alcohol Consumption** – Among HSP respondents, 80.5% had 0 to 4 drinks the last time they partied, although 41.8% of students perceived that the typical USC student had 5 or more drinks the last time they partied.

**Cigarette Smoking** – Among respondents, 9.1% of 2002 students and 7.6% of HSP students reported that they smoked cigarettes one or more days in the last month, with an additional 3.6% of 2002 students and 1.2% of HSP students who reported smoking on a daily basis. However, most students have never smoked cigarettes (72.8% of 2002 students and 70.9% of HSP students).

### Weight, Nutrition, and Exercise

HSP students reported that to lose weight within the last month they exercised (57.8%), dieted (37.1%), purged (1.3%) or took diet pills (2.4%).

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\*Wherever noted, 2002 refers to those graduate/professional students who were in the 2002 sample.

\*\*Wherever noted, HSP refers to those Health Sciences campus and Dental graduate/professional students who are included in the 2006 sample.

### **Perceptions of the “Typical” USC Student**

In addition to self-reported behaviors, students were asked about their perceptions regarding the behaviors of the typical USC student. Overall, it was found that there were misperceptions about sexual behaviors, as well as alcohol, tobacco, and other drug use. For instance, 8.2% of HSP students perceived that the “typical” USC student smoked marijuana on a daily basis during the last 30 days. However, only 0.2% of HSP students reported that they actually engaged in smoking marijuana on a daily basis.

Throughout the report, there are footnotes under each table or bar chart that refer to the corresponding question in the survey instrument. If you have any additional questions regarding the data provided in this report, please contact Paula Swinford, Director of Health Promotion and Prevention Services at 213/740-4777 or <swinford@usc.edu>.

## Introduction

If the true mission of any college health program is to “advance the health of students,” data describing the health behaviors and status of the student population is a necessary tool. This data helps to inform policy makers, administrators, faculty, staff and students about current health behaviors and helps to set programmatic priorities.

The American College Health Association National College Health Assessment (ACHA-NCHA) is a national research initiative intended to assist institutions of higher education in collecting data about the health of their students. The ACHA-NCHA allows each campus to generate prevalence rates for a variety of health issues at the institution, such as alcohol and tobacco use, sexual behavior, body weight, and mental health.

The goal of this assessment is to provide data on the prevalence and perceptions of student health behaviors. In addition, this survey can provide current information on students' health status, misperceptions about student behavior, and identify concerns and strengths within the campus community. This data can aid the campus by providing a firm basis for planning and evaluating services that can positively impact students' safety, well-being and academic performance.

This report provides data on the population of students at the Health Sciences Campus and the USC School of Dentistry in 2006. Wherever noted, the 2002 sample refers to graduate students on the University Park and Health Sciences campuses and highlights differences in the 2002 and 2006 student populations. It is important to note that the 2002 and 2006 samples were pulled at different times. The 2002 sample consists of graduate students on the Health Sciences and the University Park campuses. The 2006 sample consists of students on the Health Sciences campus and the USC School of Dentistry, and is abbreviated as HSP.

This report consists of five sections. The first section compares the 2002 and HSP students over time. The second section analyzes Medical (MD) students in comparison to non-MD. Section three looks at Doctor of Pharmacy (PharmD) students as compared to non-PharmD students. Section four compares Dental Surgery (DDS) students to non-DDS students. Finally, section five compares the Occupational Therapy and Physical Therapy (OT/PT) students to non-OT/PT students.

This report summarizes key points from the survey collected in 2006 as compared to the survey collected in 2002. Due to the length of the survey not all data points have been included. Analyses of additional questions as well as copies of the instrument are available for interested readers through Health Promotion and Prevention Services in the University Park Health Center at 213-740-4777.

## Methods

*Questionnaire design.* The ACHA-NCHA questionnaire consists of fifty-eight questions divided into seven sections:

- demographic characteristics
- impediments to academic performance
- health information and safety
- mental and clinical health issues
- sexual behavior and contraception
- alcohol, tobacco and other drugs
- weight, nutrition, and exercise

Four additional questions were added to the 2006 survey regarding alcohol and sexual behavior, as well as exposure to infectious material.

*Procedure.* The survey was conducted at the University of Southern California in the spring of 2006. The ACHA-NCHA was emailed to the population of undergraduates and graduates on Health Sciences Campus and the USC School of Dentistry. All 3814 students were emailed a letter alerting them to the forthcoming survey, as well as a subsequent email after receiving the survey in an effort to increase the return rate. Students who returned the survey were given the option of entering a raffle to win two \$500 gift certificates to the USC bookstore as incentives. Email addresses were used to maintain the

confidentiality of respondents.

*Response rate.* In 2006, 980 completed surveys were returned for a response rate of 25.7%. Of those who responded, 14.1% indicated undergraduate status, 82.9% reported graduate status, and 3% did not disclose their year in school. For purposes of this report, those who reported undergraduate status or did not disclose their year in school were removed from the sample.

*Representativeness.* It appears that the data collected does not fully represent the USC Health Sciences Campus and Dental School student population, based upon the representativeness analysis performed on the 2006 data. The largest biases occurred with regards to owning unit, class, ethnicity, and gender. The numbers of students in the schools of medicine, dentistry, and pharmacy were also different than the representation at USC, with percent differences of 13.6%%, -6.1%, and -8.3%%, respectively. With regards to class, there was an underrepresentation of doctoral students, 60.8% who returned the survey as opposed to the 71.3% representation of USC. There was an overrepresentation of Asian students, 35.2% as opposed to the 20.9% representation of USC. The numbers of females was also higher than the representation at USC, with a percent difference of 6.1%. When analyzing this type of data it is expected that a GPA bias will exist. However, in our sample a very small bias is present, but it is less than what normally occurs in other samples drawn from the same student group.

(Please refer to Appendix A for the representativeness table).

*Analytic strategy/data preparation.* This report focuses on the surveys that were conducted in 2006. Appropriate chi-squared tests or t-tests of statistical significance have been performed to determine the magnitude and direction of differences between 2002 students and HSP students. T-tests were performed on nominal data (responses to some scaled questions) and chi-squared tests were performed on categorical data (i.e. responses of yes/no, did/did not, etc). Throughout the report, p-values are reported in the charts or at the bottom of graphs.

## Demographics

Descriptor	Category	2002 (n=337)	2006 (n=779)
<i>Age</i>	Under 21	0.0	0.0
	21-29	70.6	84.2
	30 and higher	29.4	15.8
<i>Gender</i>	Female	61.7	66.1
	Male	38.3	33.9
<i>Year in school</i>	1st year undergraduate	0.0	0.0
	2nd year undergraduate	0.0	0.0
	3rd year undergraduate	0.0	0.0
	4th year undergraduate	0.0	0.0
	5th year or more	0.0	0.0
	Graduate	100	100
<i>Full-time student status</i>		86.6	97.8
<i>Ethnicity</i>	White – not Hispanic (includes Middle Eastern)	42.7	48.4
	Black – not Hispanic	2.1	2.7
	Hispanic or Latino	9.2	7.3
	Asian or Pacific Islander	43.6	40.4
	American Indian or Alaskan Native	0.3	0.4
	Other	2.7	4.9
<i>International student status</i>		22.6	11.7
<i>Membership in fraternity or sorority</i>		10.4	17.7
<i>Current relationship</i>	Single	45.1	42.2
	Married/domestic partner	22.0	21.1
	Engaged/committed dating relationship	31.2	35.9
	Separated	0.6	0.1
	Divorced	1.2	0.5
	Widowed	0.0	0.1
<i>Sexual orientation</i>	Heterosexual	95.8	97.6
	Gay/lesbian	0.6	0.9
	Bisexual	1.5	0.9
	Transgendered	0.0	0.0
	Unsure	2.1	0.6
<i>Living situation</i>	Campus residence hall	2.4	2.7
	Fraternity or sorority house	0.0	0.3
	Other university housing	2.1	2.3
	Off-campus housing	74.8	73.8
	Parent/guardian's home	11.3	14.0
	Other	9.5	6.9
<i>Paid hours worked per week</i>	None	39.5	54.6
	1 to 19	26.1	25.4
	20 or more	34.4	20.0
<i>Volunteered 1 or more hrs/week</i>		29.4	39.9

All results are reported as percentages.

The discrepancy between the total number of participants reported on p.5 of this booklet and the total number of participants reported in this table exists because those participants who did not complete all questions on the Demographics section of the survey were excluded from this demographic analysis.

Section 1:  
*Comparison of the 2006 Graduate Student Sample to  
the 2002 Graduate Student Sample*

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# Impediments to Academic Performance

**“Within the last school year, have any of the following affected your academic performance?” (i.e., received an incomplete, dropped a course, received a lower grade in a class, on an exam or on an important project)**

*Refer to Question 44 of the survey.*

	2002 %	2006 %	P-Value
Alcohol use	1.0	1.3	<.05
Allergies	1.9	2.5	NS
Physical assault	0.0	0.4	NS
Sexual assault	0.0	0.3	NS
Attention Deficit Disorder	1.9	4.1	NS
<b>Cold/Flu/Sore throat</b>	<b>11.0</b>	<b>19.1</b>	<b>&lt;.01</b>
<b>Concern for a troubled friend or family member</b>	<b>9.6</b>	<b>16.3</b>	<b>&lt;.01</b>
Chronic illness (diabetes, asthma, etc.)	1.0	2.0	NS
Chronic pain	1.8	2.8	NS
<b>Death of a friend or family member</b>	<b>4.2</b>	<b>5.3</b>	<b>&lt;.05</b>
<b>Depression/Anxiety Disorder/Seasonal Affective Disorder</b>	<b>8.3</b>	<b>11.3</b>	<b>NS</b>
Drug use	0.6	0.5	NS
Eating disorder/problem	1.0	0.5	<.05
HIV infection	0.0	0.1	NS
Injury	0.3	2.9	<.01
<b>Internet use/computer games</b>	<b>5.8</b>	<b>10.0</b>	<b>&lt;.01</b>
Learning disability	0.8	1.7	NS
Mononucleosis	0.0	0.4	NS
Pregnancy (yours or your partner's)	2.1	0.7	<.05
<b>Relationship difficulty</b>	<b>11.7</b>	<b>12.0</b>	<b>&lt;.05</b>
Sexually transmitted disease	0.3	0.0	NS
<b>Sinus infection/ear infection/bronchitis/strep throat</b>	<b>3.7</b>	<b>4.5</b>	<b>NS</b>
<b>Sleep difficulties</b>	<b>8.6</b>	<b>13.4</b>	<b>NS</b>
<b>Stress</b>	<b>18.7</b>	<b>20.8</b>	<b>NS</b>
<b>Other</b>	<b>6.9</b>	<b>5.2</b>	<b>NS</b>

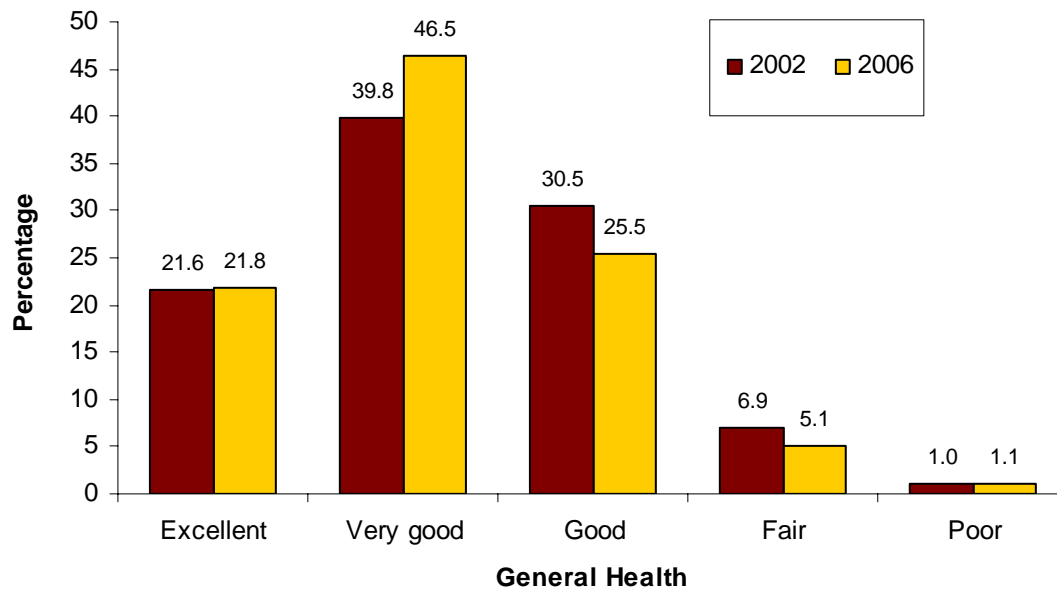
*Bold items represent the top ten items.*

# Health Information and Safety

## General Health -

Refer to Question 1 of the survey.

“Considering your age, how would you describe your general health?”



## Health Maintenance and Self-Care -

Refer to Question 42 of the survey.

	Yes Responses, excludes “I don’t know” %			“I don’t know” Responses %	
	2002	2006	P-value	2002	2006
Dental exam and cleaning in the last year	67.8	71.2	NS	0.8	1.1
Vaccinated against hepatitis B	80.4	95.1	<.001	15.3	4.0
Routine GYN exam in the last year (females)	65.1	67.5	NS	0.0	0.4
Vaccinated against meningococcal meningitis	31.3	49.9	<.001	33.0	12.9
Breast self-exam in the last month (females)	39.3	43.1	NS	0.0	0.5
Testicular self-exam in the last month (males)	24.4	44.9	<.001	6.1	1.8

## Health Topic Information from USC -

Refer to Question 2 of the survey.

**“On which of the following health topics have you ever received information from your college or university?”**

	2002 %	2006 %	P-value
AIDS or HIV infection prevention	23.8	27.9	NS
Alcohol and other drug use prevention	23.0	31.1	<.01
Dietary behaviors and nutrition	13.8	31.6	<.001
Injury prevention and safety	12.3	23.8	<.001
Physical activity and fitness	18.8	34.2	<.001
Pregnancy prevention	15.8	15.2	NS
Sexual assault/relationship violence prevention	22.8	25.9	NS
Sexually transmitted disease (STD) prevention	22.5	26.2	NS
Suicide prevention	8.5	13.2	<.05
Tobacco use prevention	13.3	26.6	<.001
Violence prevention	14.8	28.2	<.001
None of the above	100.0	29.5	<.001

Columns sum to more than 100% because multiple responses were possible.

Drug-Free Schools document is sent out to all students, faculty and staff each academic year.

## Sources of Health-related Information -

Refer to Question 4 of the survey.

**“Do you usually get health-related information from any of the following sources?”**

	2002 %	2006 %	P-value
Parents	59.4	56.7	NS
Magazines	57.4	53.0	NS
Friends	59.2	61.2	NS
Leaflets, pamphlets, flyers	53.9	42.5	<.001
Television	47.9	44.0	NS
Health center medical staff	55.1	72.5	<.001
Internet/world wide web	64.8	87.2	<.001
Health educators	49.6	72.4	<.001
Other	50.0	44.0	NS
Faculty/coursework	46.1	78.8	<.001
Resident assistants/advisors	8.0	22.9	<.001
Campus peer educators	9.1	23.1	<.001
Religious center	9.0	6.1	NS

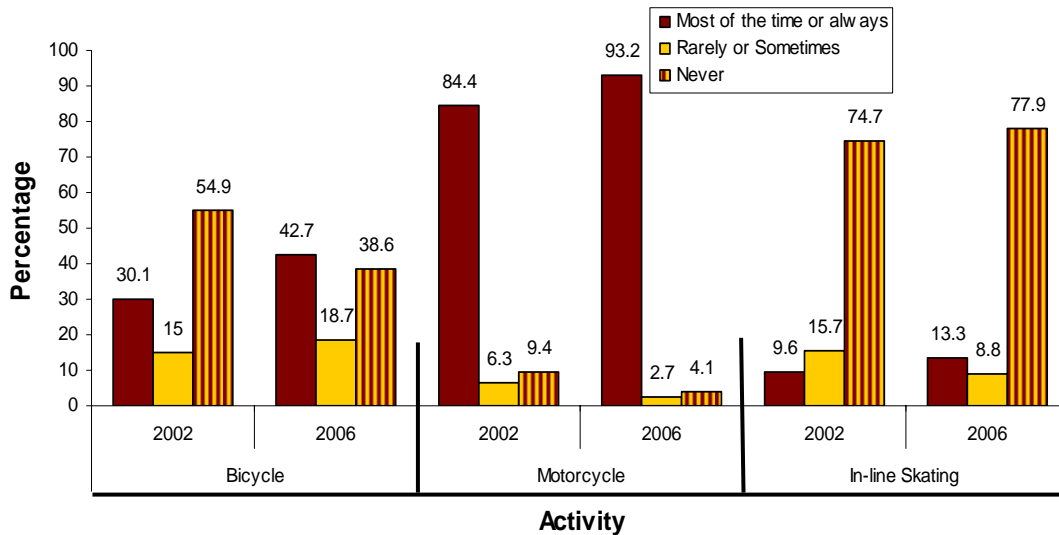
Columns sum to more than 100% because multiple responses were possible.

- **Seatbelt Safety** – 99.0% of 2002 students and 98.7% of HSP students wore a seatbelt **most of the time** or **always** when riding in a car within the last school year.  
*Refer to Question 5 of the survey.*
- **Helmet Usage** – 54.9% of 2002 students and 38.6% of HSP students **never** wore a helmet when riding a bicycle and the majority (74.7% of 2002 and 77.9% of HSP students) **never** wore a helmet when in-line skating.  
*Refer to Question 5 of the survey.*

### Safety Helmet Usage -

*Refer to Question 5 of the survey.*

**[If you rode a bike, motorcycle, or used in-line skates] “within the last school year, how often did you wear a helmet?”**



There was a significant difference between year of sample and helmet usage with in-line skating ( $p < .001$ ) or bicycles ( $p < .05$ ).

- **Physical Fights or Assaults** – 2.3% of 2002 students and 1.9% of HSP students reported being involved in a physical fight. Within the last school year, 1.8% of 2002 students and 2.1% of HSP students reported that they were physically assaulted (does not include sexual assault).  
*Refer to Question 6 of the survey.*

# Mental and Clinical Health Issues

## Mental Health -

**“Within the last school year how many times have you...?”**

*Refer to Question 40 of the survey.*

	2002 %		2006 %	
	1-6 times	7 or more	1-6 times	7 or more
Felt so depressed that it was difficult to function	32.2	8.9	29.4	9.6
Seriously considered attempting suicide	5.7	0.5	6.4	0.6
Attempted suicide	0.0	0.3	0.0	0.0

## Depression Diagnosis and Treatment -

*Refer to Question 41 of the survey.*

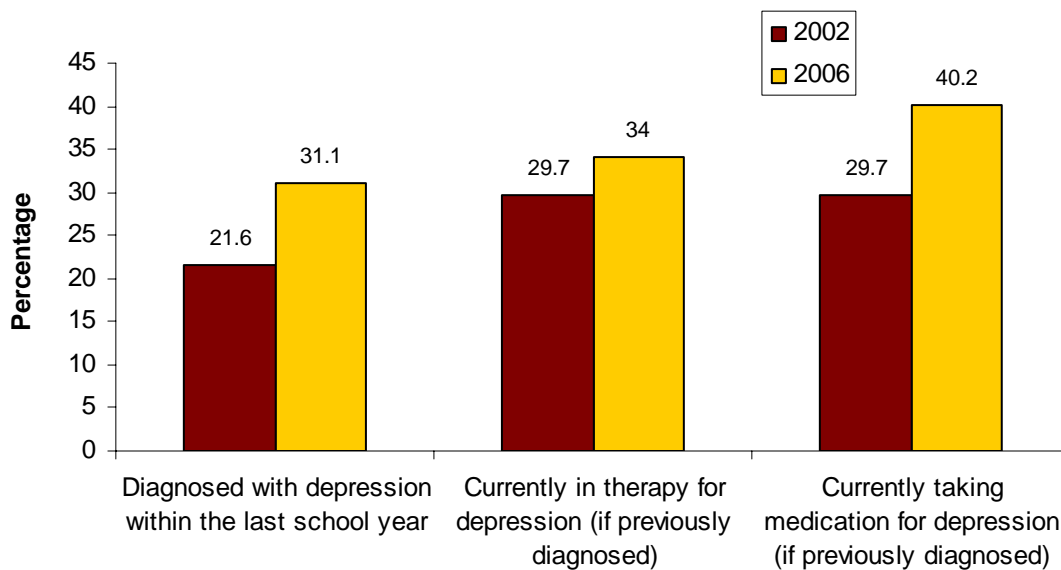
- **Depression History** – 9.5% of 2002 students and 12.5% of HSP students surveyed responded yes to “Have you ever been diagnosed with depression?”  
*Refer to Question 41 of the survey.*

**The students who have previously been diagnosed with depression (11.6%) responded to the following questions:**

**“Have you been diagnosed with depression within the last school year?”**

**“Are you currently in therapy for depression (if previously diagnosed)?”**

**“Are you currently taking medication for depression? (if previously diagnosed)”**



**Data represents the percentage of students who answered “yes” to previously being diagnosed with depression.**

## Abusive Relationships and Unwanted Sexual Advances or Sexual Assault -

Refer to Question 7 and Question 8 of the survey, respectively.

***“Within the last school year, have you experienced...?”***

	2002 %	2006 %	P-value
Verbal threats for sex against your will	2.3	1.3	NS
Sexual touching against your will	4.1	4.5	NS
Attempted sexual penetration against your will	1.0	1.1	NS
Sexual penetration against your will	0.5	0.5	NS

***“Within the last school year, have you been in a relationship that was...?”***

	2002 %	2006 %	P-value
Emotionally abusive	8.2	7.6	NS
Physically abusive	1.3	0.8	NS
Sexually abusive	0.3	0.7	NS

## Reported Frequency of Health Problems -

Refer to Question 43 of the survey.

	<b><i>“Within the last school year, have you had any of the following?”</i></b>			<b><i>“Have you ever been diagnosed with any of the following?”</i></b>		
	2002 %	2006 %	P-Value	2002 %	2006 %	P-Value
Allergy problems	40.1	45.0	NS	33.7	34.3	NS
Anorexia	1.3	1.5	NS	1.6	1.2	NS
Anxiety disorder	7.8	9.1	NS	5.1	5.4	NS
Asthma	7.6	8.2	NS	10.6	12.6	NS
Back Pain	40.2	41.6	NS	18.3	17.2	NS
Bronchitis	5.5	6.2	NS	17.1	15.9	NS
Bulimia	0.8	1.8	NS	0.8	1.2	NS
Carpal Tunnel Syndrome	4.1	7.9	<.05	4.5	6.7	NS
Chlamydia	0.0	0.4	NS	2.9	1.8	NS
Chronic Fatigue Syndrome	2.6	4.9	NS	0.8	1.5	NS
Depression	13.5	13.3	NS	9.6	11.8	NS
Diabetes	0.5	0.2	NS	0.5	0.4	NS
Ear Infection	5.7	4.2	NS	20.6	23.9	NS
Endometriosis	0.8	0.5	NS	0.8	0.7	NS
Fracture	1.3	2.3	NS	13.9	16.8	NS
Genital herpes	2.9	0.4	<.001	3.7	0.6	<.001
Genital warts/HPV	0.5	2.1	<.05	4.2	3.0	NS
Gonorrhea	0.3	0.0	NS	0.8	0.2	NS
Hepatitis B or C	2.1	0.2	.001	3.7	1.0	.001
High blood pressure	2.8	6.2	<.05	3.2	3.8	NS
High cholesterol	4.7	7.1	NS	6.2	7.2	NS
HIV infection	0.3	0.0	NS	0.3	0.1	NS
Mononucleosis	0.0	0.5	NS	4.8	7.7	NS
Pelvic Inflammatory Disease	0.3	0.0	NS	0.5	0.2	NS
Seasonal Affective Disorder	1.6	3.3	NS	1.1	1.3	NS
Sinus infection	14.6	18.3	NS	20.3	26.0	<.05
Strep infection	5.7	9.4	<.05	22.9	29.4	<.05
Substance abuse problem	1.3	1.5	NS	1.6	1.2	NS
Tuberculosis	0.5	0.1	NS	3.2	0.5	<.001

Columns sum to more than 100% because multiple responses were possible.

Discrepancies between reported frequency of health problems within the last school year and lifetime diagnosis may be due to self-diagnosis versus professional health care provider diagnosis.

# Sexual Behavior and Contraception

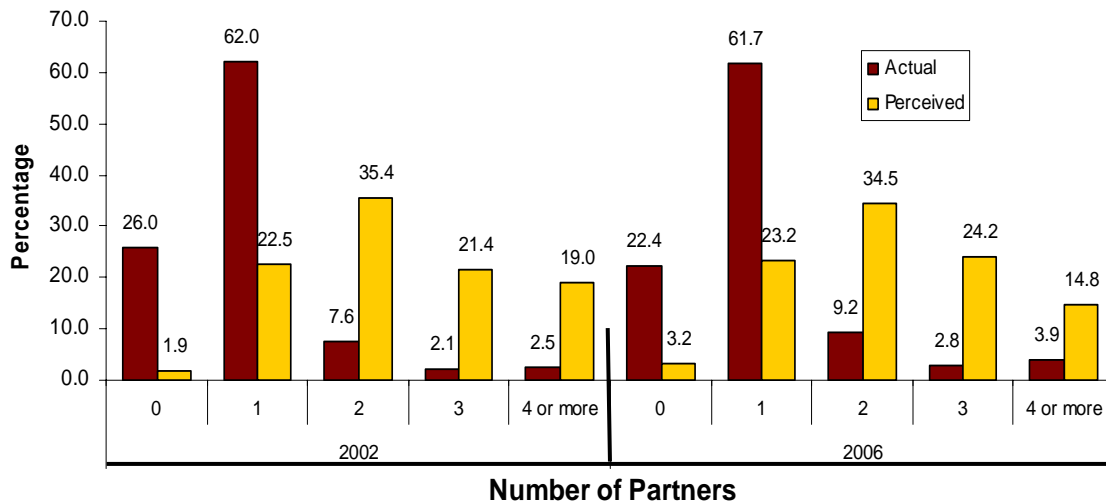
- Unintended Pregnancy** – Among respondents who have had vaginal intercourse, 1.6% (2.7% of 2002 students and 1.1% of HSP students) have unintentionally become pregnant or gotten someone else pregnant within the last school year.  
*Refer to Question 30 of the survey.*
- Emergency Contraception** – Among respondents who indicated that they are sexually active, 5.2% of 2002 students and 8.0% HSP students have used or had a partner who used emergency contraception (“morning after pill”) within the last school year ( $p < .05$ ).  
*Refer to Question 29 of the survey.*

## Number of Sexual Partners v. Perceptions -

*Refer to Question 20 and Question 22 of the survey, respectively.*

**“Within the last school year, with how many partners, if any, have you had sex (oral, vaginal, or anal)?”**

**“Within the last school year, with how many partners do you think the typical student at your school has had sex (oral, vaginal, or anal)?”**



In the graph above, undergraduate and graduate results were combined.

- Sexual Partners** – While 84.1% of HSP students have 0-1 sexual partners, 73.5% of HSP students perceive that the typical student has had 2 or more partners.  
*Refer to Question 20 and Question 22 of the survey, respectively.*

## Contraceptive/Birth Control Methods -

Refer to Question 28 of the survey.

***“If you have had vaginal intercourse, what method did you or your partner use to prevent pregnancy the last time?”***

	2002 %	2006 %	P-Value
Condoms (male or female)	38.3	35.2	NS
Birth control pills	34.8	43.5	<.01
Withdrawal	14.3	13.2	NS
Nothing	3.5	3.5	NS
Spermicide (e.g. foam)	1.5	2.9	NS
Fertility awareness (calendar, mucous, basal body temperature)	6.5	3.4	<.05
Depo Provera (shots)	2.8	1.1	<.05
Other method	2.5	3.3	NS
Diaphragm/Cervical cap/Sponge	0.8	0.5	NS
Norplant (implant)	0.0	0.4	NS

Percentages represent students who have had vaginal intercourse.

Columns sum to more than 100% because multiple responses were possible.

17.3% of 2002 students and 16.3% of HSP students reported that they have not had vaginal intercourse.

## Condom Use -

Refer to Question 25 of the survey.

***“Within the last 30 days, if you are sexually active, how often did you or your partner(s) use a condom during oral sex, anal intercourse, or vaginal intercourse?”***

	2002 %		2006 %	
	Engaged in this sexual activity	Always used a condom	Engaged in this sexual activity	Always used a condom
Oral Sex	50.7	1.6	52.3	2.1
Anal Intercourse	10.2	21.6	9.4	18.4
Vaginal Intercourse	56.3	26.3	59.9	29.9

# Alcohol, Tobacco, and Other Drugs

## Substance Use v. Perceptions of Use -

Refer to Question 9 and Question 10 of the survey, respectively.

<b>Within the last 30 days among 2002 graduate students:</b>							
<b>Substance</b>	<b>Actual Use:</b> How many days did you use the following substances?				<b>Perception of Use:</b> How often do you think the typical student at your school used the following substances?		
	<b>Never</b>	<b>Not in last 30 days</b>	<b>One or more days</b>	<b>Used daily</b>	<b>Never</b>	<b>One or more days</b>	<b>Used daily</b>
Alcohol	22.3	15.9	61.3	0.5	3.8	72.4	23.8
Cigarettes	72.8	14.5	9.1	3.6	14.1	67.2	18.7
Cigars	86.3	11.2	2.5	0.0	58.4	39.6	2.1
Smokeless tobacco	94.9	4.1	1.1	0.0	67.1	30.6	2.3
Marijuana	76.3	15.8	7.4	0.5	34.6	59.2	6.2
Amphetamines	92.9	6.3	0.6	0.3	57.0	39.7	3.4
Rohypnol, GHB, Liquid X	98.5	1.5	0.0	0.0	78.8	20.7	0.5
Ecstasy	93.5	5.0	1.4	0.0	60.7	38.1	1.2
Cocaine	94.4	4.8	0.8	0.0	76.0	22.9	1.0
Other drugs	91.6	7.3	0.8	0.3	56.5	42.7	0.8

All results are reported as percentages.

There was a statistically significant difference between year and cigarettes, cigars ( $p < .01$ ), or marijuana ( $p < .05$ ) for 2002 and HSP students. There was also a statistically significant difference in perception of use for cigarettes ( $p = .001$ ), other drugs ( $p < .01$ ), or amphetamines ( $p < .05$ ).

<b>Within the last 30 days among HSP students:</b>							
<b>Substance</b>	<b>Actual Use:</b> How many days did you use the following substances?				<b>Perception of Use:</b> How often do you think the typical student at your school used the following substances?		
	<b>Never</b>	<b>Not in last 30 days</b>	<b>One or more days</b>	<b>Used daily</b>	<b>Never</b>	<b>One or more days</b>	<b>Used daily</b>
Alcohol	15.5	16.8	67.3	0.4	6.2	71.3	22.5
Cigarettes	70.9	20.2	7.6	1.2	22.9	62.9	14.2
Cigars	78.8	19.2	1.8	0.1	58.6	40.3	1.1
Smokeless tobacco	92.9	6.5	0.4	0.1	67.7	30.3	1.9
Marijuana	69.4	23.7	6.6	0.2	33.9	57.9	8.2
Amphetamines	94.6	3.8	1.2	0.4	65.6	31.7	2.7
Rohypnol, GHB, Liquid X	98.5	1.3	0.0	0.1	82.1	17.2	0.7
Ecstasy	93.1	6.1	0.8	0.0	59.0	39.0	2.0
Cocaine	95.2	3.9	0.8	0.1	74.7	24.1	1.2
Other drugs	93.4	5.3	0.9	0.4	65.4	32.7	1.9

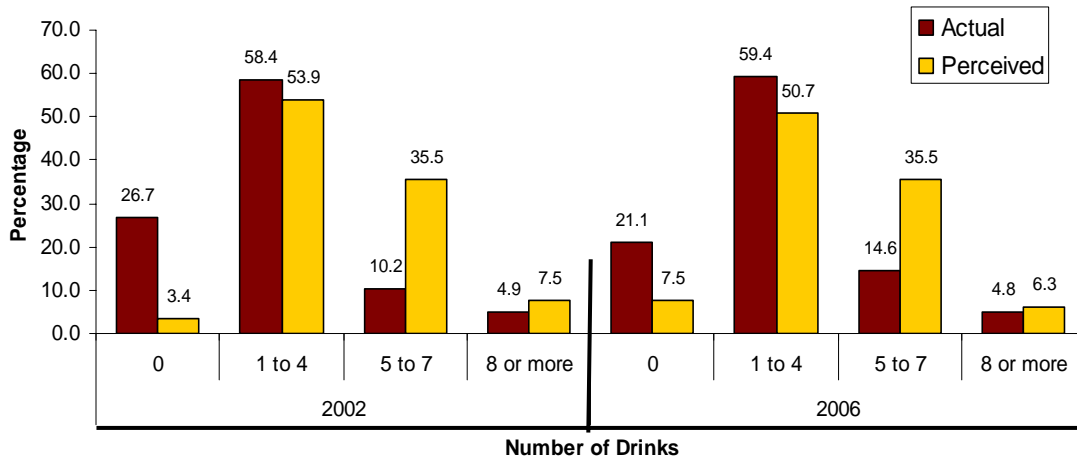
All results are reported as percentages.

## Alcohol Consumption v. Perceptions of Alcohol Consumption -

Refer to Question 13 and Question 15 of the survey, respectively.

*“The last time you ‘partied/socialized,’ how many alcoholic drinks did you have?”*

*“How many alcoholic drinks do you think the typical student at your school had the last time he/she ‘partied/socialized’?”*

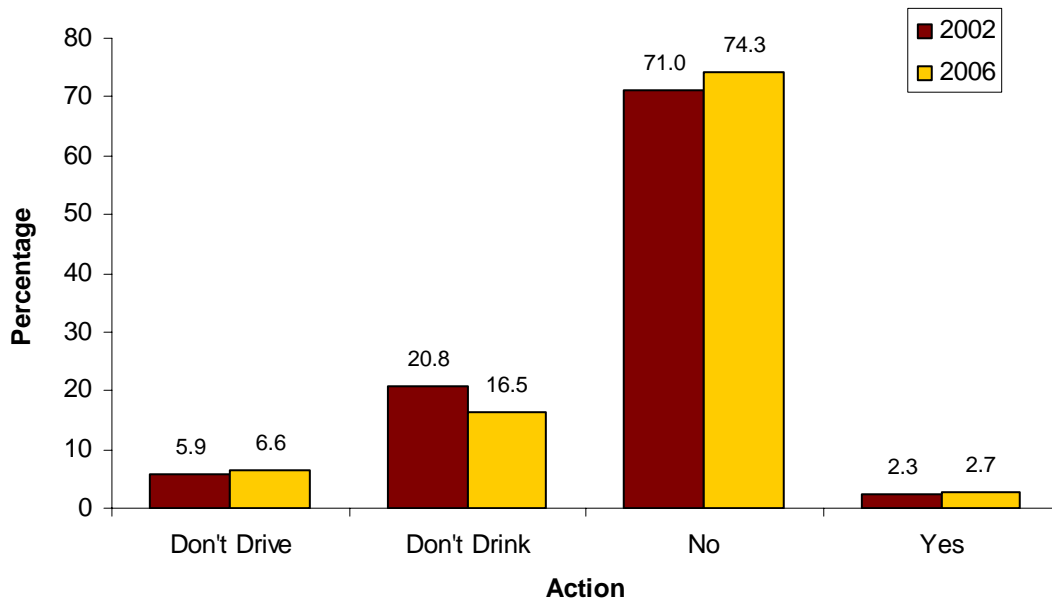


There were statistically significant difference between year and perceived consumption of alcohol ( $p < .001$ ).

## Drinking and Driving -

Refer to Question 11 of the survey.

*“Within the last 30 days, did you drive after having 5 or more drinks?”*

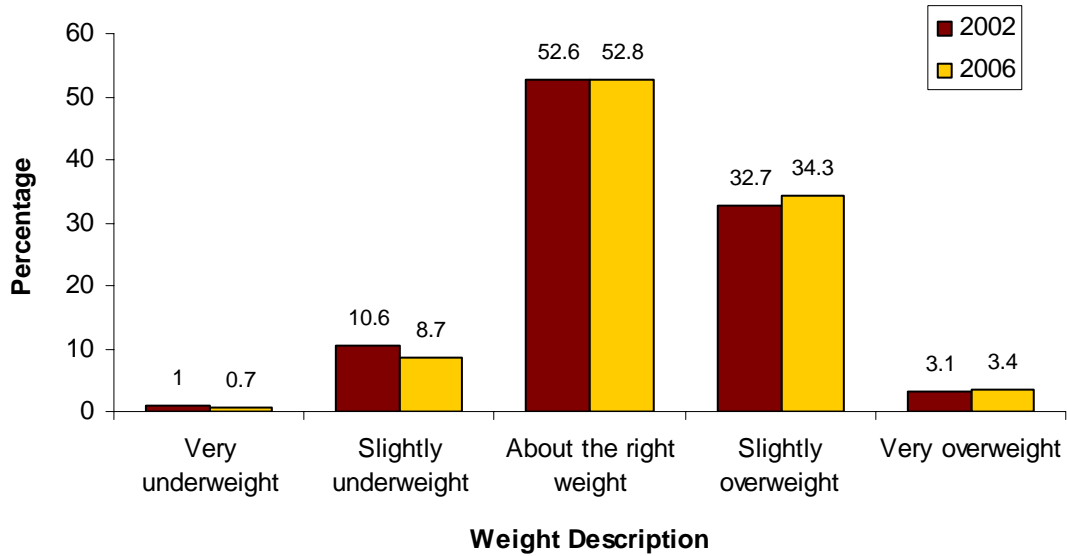


# Weight, Nutrition, and Exercise

## Weight -

Refer to Question 35 of the survey.

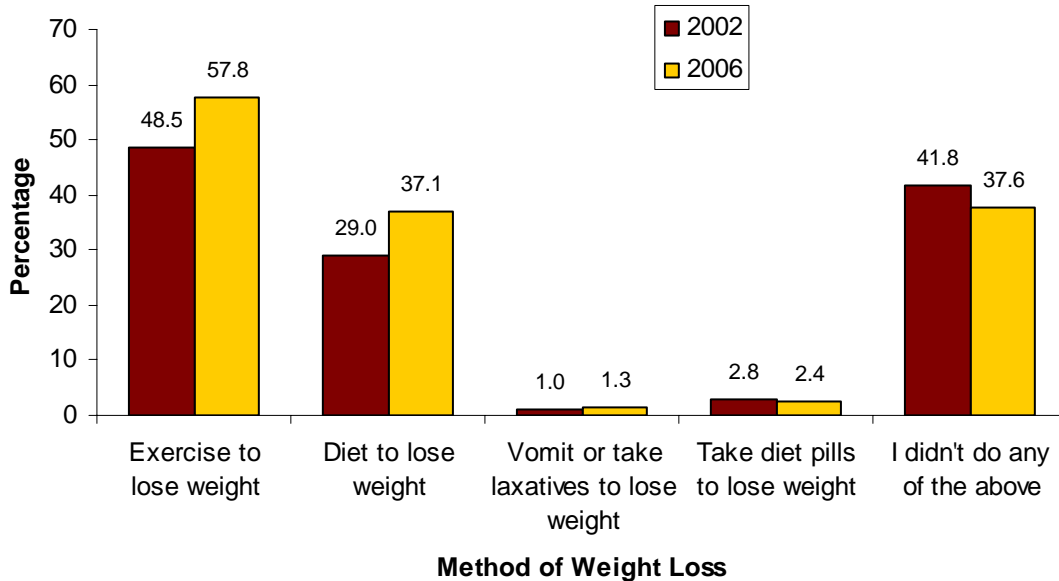
*"How do you describe your weight?"*



## Weight-related Behaviors -

Refer to Question 37 of the survey.

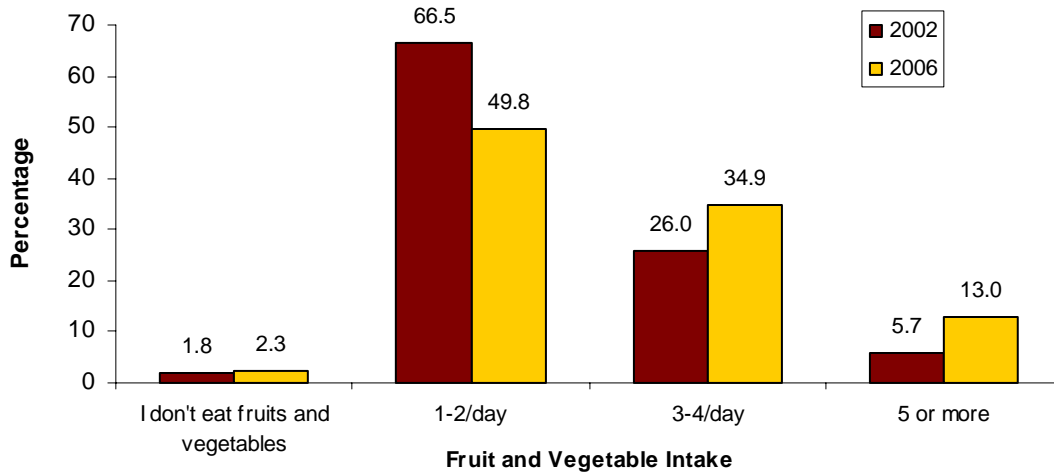
*"Within the last 30 days, did you do any of the following?"\**



## Fruit and Vegetable Intake -

Refer to Question 38 of the survey.

**“How many servings of fruits and vegetables do you usually have per day?”**

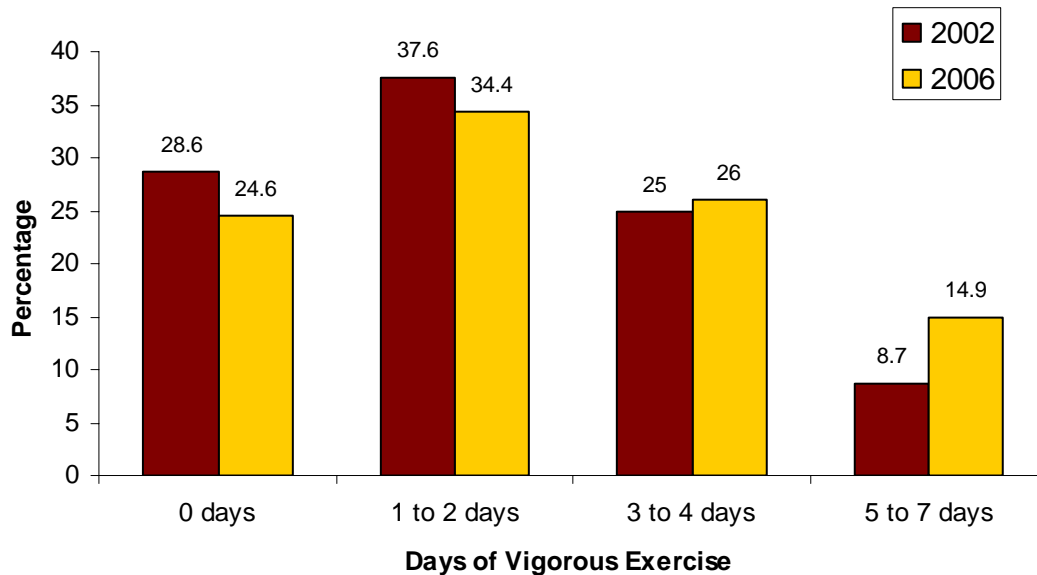


- Fruit and Vegetable Intake** – The daily USDA recommended allowance of fruit and vegetables is 5-9. In 2002 only 5.7% of students and 13.0% of HSP students ate the recommended allowance of 5 or more servings per day ( $p < .001$ ). Refer to Question 38 of the survey.

## Exercise Habits -

Refer to Question 39 of the survey.

**“On how many of the past 7 days did you participate in vigorous exercise for at least 20 minutes or moderate exercise for at least 30 minutes?”**



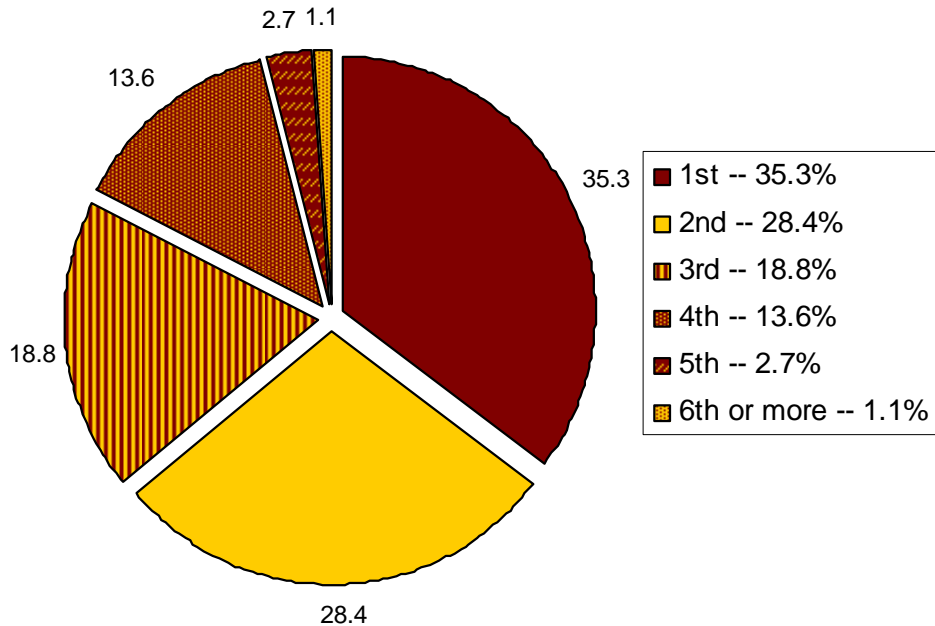
- Strengthening and Toning Exercises** – 57.3% of 2002 students and 65.0% of HSP students exercise to strengthen and tone muscle one or more days per week ( $p < .05$ ). Refer to Question 39 of the survey.

# Additional Questions

## Year in Graduate Program -

Refer to Question 60 of the survey.

**“If you are in a graduate program, what is your current year?”**



## Alcohol and Sexual Activity -

Refer to Question 61 of the survey.

<b>“[If you were sexually active] within the last school year, did you consume alcohol or other drugs before, during, or after sexual activity?”</b>					
	<b>Never</b>	<b>Rarely</b>	<b>Sometimes</b>	<b>Mostly or always</b>	<b>Not sexually active</b>
DDS students	40.1	17.5	23.4	3.6	15.3
MD students	18.0	27.8	36.6	4.1	13.4
PharmD students	25.8	14.8	26.6	2.3	30.5
OT/PT students	22.9	28.4	25.7	6.4	16.5
Other*	32.6	20.8	21.6	2.5	22.5

\*Other refers to all other degreed programs that fall within the USC School of Dentistry, Keck School of Medicine, USC School of Pharmacy, and the Independent Health Professions Program.

## Limitations

Surveys are only useful to the extent that they reflect the opinions of the population. While we have established that the sample is representative of the USC Health Sciences Campus in terms of demographics and college major, the degree of representativeness in terms of health-related attitudes and opinions is unknown. The survey results do correlate to similar studies completed by the Centers for Disease Control and Prevention and the American College Health Association. When a survey includes questions on sensitive subjects such as drug use and sexuality, there is always the possibility that a response bias has influenced the results. However, the literature shows that an anonymous health behavior survey, such as the ACHA-NCHA, gives the responder an opportunity to share more accurate information than would otherwise be provided. In general, the best way to minimize the chances of a response bias is to achieve a high response rate. The response rate of approximately thirty percent achieved in these surveys, while typical of USC surveys, is not of sufficient size to ensure representativeness on all important factors. It is therefore recommended that the results described in this report be thought of as preliminary until further research is done.

## Conclusion

A student's health has a great impact on their academic functioning and performance. Therefore, this data can be utilized by various departments and organizations on campus to form partnerships and collaborations in order to provide a more integrative approach to advancing the health of the students.

Most students reported their general health as being excellent, very good, or good. However, there are a number of specific health issues such as stress, sleep, depression and anxiety that negatively impact the lives of students and should continue to be addressed in programmatic ways by faculty and staff. The rate of depressive symptoms and suicidal ideation experienced by graduate students underscores the need for continued resources, services, and support in the area of mental health. Finally, with respect to the misperceptions held by students around the behaviors of their peers, continued efforts by the campus community to create and support an accurate picture of USC students are greatly needed.

*The mission of the University of Southern California is the "development of human beings and society as a whole through the cultivation and enrichment of the human mind and spirit." In order to truly facilitate this mission, the health of students must be a top priority. The data provided by the American College Health Association National College Health Assessment is a tool for all departments and organizations to use in order to advance the health of our students as it enhances student learning and aids in their growth as well-functioning individuals in society.*

## **References**

ACHA-NCHA website: [http://www.acha.org/projects\\_programs/assessment.cfm](http://www.acha.org/projects_programs/assessment.cfm)

USC University Park Student Health Center website:  
<http://www.usc.edu/uphc>

Health Promotion and Prevention Services website:  
<http://www.usc.edu/hpps>

Counseling Services website:  
<http://www.usc.edu/scs>

If you have any questions about this document and/or the data presented please contact HPPS at 213-740-4777.

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The ACHA-NCHA committee, chaired by Patricia Ketcham

A special thanks to the entire Health Promotion and Prevention Services staff for their continued support and feedback.

Thank you to all the students who sent in completed surveys; your efforts help us to serve you better.

## Appendix A

### Representativeness of the 2006 Sample

<b>Descriptor</b>	<b>All Students</b>	<b>Returned Survey</b>	<b>Difference</b>
<b>Class</b>			
Doctoral	71.3	60.8	-10.5
Masters	16.1	20.1	4.0
Professional	2.5	1.4	-1.1
Freshman	0.5	1.0	0.5
Sophomore	2.1	4.4	2.3
Junior	3.3	5.3	2.0
Senior	4.1	7.0	2.9
<b>Gender</b>			
Female	61.9	68.0	6.1
Male	38.1	32.0	-6.1
<b>Cumulative GPA by class</b>			
Doctoral	3.60	3.47	-0.13
Masters	3.50	3.60	0.10
Professional	3.47	3.51	0.04
Freshman	2.97	2.93	-0.04
Sophomore	3.10	3.10	0.00
Junior	3.13	3.23	0.10
Senior	3.21	3.30	0.09
<b>Ethnicity</b>			
Native Amer.	0.6	0.5	-0.1
Asian	20.9	35.2	14.3
Black	5.1	2.7	-2.4
Latino	10.2	7.9	-2.3
International	16.1	12.8	-3.3
Unknown	7.3	7.2	-0.10
White	39.9	33.8	-6.10
<b>Owning Unit</b>			
MED	41.7	55.3	13.6
DENT	21.8	15.7	-6.1
DHRP	14.0	14.8	0.8
PHAR	22.5	14.2	-8.3

All results are reported as percentages except GPA.

Graduate, Doctoral, and professional students were listed as "graduate, adult special, or other."

## Appendix B

### Healthy Campus 2010: Update 2006

In 2000, the staff of the University Park Health Center met to discuss the application of *Healthy Campus 2010* to the USC campus. In addition, there were discussions within Student Affairs and Student Health Advisory Committee (SHAC). After multiple discussions, seven key goals were set as priorities for the next few years. Since we are at the mid-point for completion of HC 2010, it is important to look at the baseline data to plot our progress thus far. Please note that USC baseline data does not include Health Sciences Campus. While it is not possible to note a statistically significant change, this document serves a snapshot of Health Sciences Campus in comparison to the rest of USC and the national population.

(Please refer to *Healthy Campus 2010 Priorities* on the UPHC website for more information).

#### **Goal 1: Increase Health Insurance**

To improve access to comprehensive, high-quality health care service...we will increase the proportion of USC students with health insurance.\*

	Actual in 2000 (Baseline)	Actual HSP in 2006	Targets for 2010
USC	81.9%	<b>97.9%</b>	100%
National college population	83.3%		100%

\*In the Fall of 2001, USC mandated that all students enroll in either the USC student Health Insurance Plan or in a health insurance plan with comparable coverage, thereby in policy meeting the 2010 target.

\*Refer to Question 58 of ACHA-NCHA.

#### **Goal 2: Decrease Alcohol and Drug Use through increased access to information**

To increase quality, availability, and effectiveness of educational and community-based programs designed to prevent and improve health and quality of life...we will increase the proportion of USC students who receive information from USC on alcohol and other drug use prevention.\*

	Actual in 2000 (Baseline)	Actual HSP in 2006	Targets for 2010
USC	32.7%	<b>31.3%</b>	55%
National college population	47.5%		55%

\*USC Drug Free is mailed to every USC student, staff, and faculty annually in January per the Drug Free Schools and Communities Act of 1988. The ACHA-NCHA data measures students' perceptions of alcohol and other drug use prevention information received.

AlcoholEdu course is required of all first year and transfer students as of fall 2004.

Refer to Question 2 of survey.

#### **Goal 3: Decrease Unintentional Pregnancies**

To improve pregnancy planning and spacing and prevent unintended pregnancy among all women, we will reduce unintentional pregnancies among female students at USC.

	Actual in 2000 (Baseline)	Actual HSP in 2006	Targets for 2010
USC	2.2%	<b>0.6%</b>	1.7%
National college population	2.5%		1.7%

\*Refer to Question 30 of ACHA-NCHA

**Goal 4: Increase Physical Fitness**

To improve health, fitness, and quality of life through daily physical activity in the entire population...we will increase the proportion of USC students who engage in moderate physical activity at least 3 days per week for 30 minutes OR vigorous physical activity at least 3 days a week for 20 minutes.

	Actual in 2000 (Baseline)	Actual HSP in 2006	Targets for 2010
USC	32.7%	<b>40.9%</b>	45%
National college population	40.3%		55%

\*Refer to Question 39 of survey.

**Goal 5: Increase Fruit and Vegetable Consumption**

To promote health and reduce chronic disease associated with diet and weight...we will increase the proportion of USC students who consume at least five daily servings of fruit and vegetables.

	Actual in 2000 (Baseline)	Actual HSP in 2006	Targets for 2010
USC	6.5%	<b>13.0%</b>	10%
National college population	7.4%		25.5%

\*Refer to Question 38 of survey.

**Goal 6: Decrease Sexual Assault**

To reduce disabilities, injuries, and deaths due to unintentional injuries and violence...we will reduce the annual rate of rape, or sexual assault other than rape on the USC campus.

Rape and Attempted Rape

	Actual in 2000 (Baseline)	Actual HSP in 2006	Targets for 2010
USC	2.7%	<b>1.1%</b>	2.3%
National college population	3.5%		2.3%

Sexual Assault Other Than Rape

	Actual in 2000 (Baseline)	Actual HSP in 2006	Targets for 2010
USC	8.8%	<b>4.5%</b>	5.6%
National college population	9.6%		5.6%

\*Refer to Question 7 of survey

**Goal 7: Decrease Depression through increased access to treatment**

To improve mental health and ensure access to appropriate, quality mental health services...we will increase the number of USC student who receive treatment for their recognized depression.

	Actual in 2000 (Baseline)	Actual HSP in 2006	Targets for 2010
USC	51.8%	<b>47.6%</b>	66%
National college population	41.4%		50%

\*Refer to Question 41 of survey