ANU Health and Wellbeing Communication with Students

Amanda Tully

Submitted for undergraduate SCOM3003: Special Topics in Science Communication Research Project, Australian National University, November 2013.

For the use of the ANU Medicine, Health and Wellbeing Learning Community and other university stakeholders.



Executive Summary

Health and wellbeing communication with ANU students is currently undertaken by a range of stakeholders.

Contemporary health promotion is based on an ecological perspective where is it is necessary to consider the individual, intrapersonal and community levels of influence on health-related behaviours. Therefore a strategic approach to health communication is useful as it can provide frameworks for communicators to target these multiple levels of influence.

This report documents the current strategies and tactics used by a range of ANU health stakeholders to communicate with students about health and wellbeing. Being aware of current communication with students is the first step in being able to develop more comprehensive strategies in the future.

Representatives from the Division of Student Services (DSS), University Counselling Centre, ANU Health Centre, Disability Services, ANU Sport, ANUSA, PARSA, the International Students' Department (ISD), Griffin Hall, Burton and Garran Hall (B&G), UniLodge and Centre for Mental Health Research (CMHR) were interviewed about their communication experiences and ideas for the future. Effective strategies and common challenges were identified and future ideas were collected.

Currently each stakeholder attempts to communicate their own health and wellbeing messages. These messages vary and overlap. A range of tactics are used by stakeholders to communicate with students.

Effective strategies identified by stakeholders included:

- **Multi-channelled approaches-** using a variety of mediums to share the same message simultaneously
- **Face-to-face interactions** including using word of mouth and training student leaders to spread messages amongst students
- Targeted messages- making messages relevant and timely for particular groups of students
- Collaboration between groups, services and academic colleges- finding shared goals and using these as a basis for communication
- **Developing student identification with a supportive community** encouraging a culture of help-seeking and awareness of health and wellbeing.

The most common challenges of communicating with students included:

- Message dilution- too many messages attempting to attract students simultaneously
- **Irrelevant and untimely messages-** messages that do not seem relevant to students or students have higher priorities
- **Off-Campus students-** messages are less accessible to this groups of students
- **Culture and stigma-** preconceived ideas and attitudes to health and wellbeing presenting a barrier to the reception of some messages
- **Resource limitations-** including time, staffing, costs, coordination and spaces

Currently a variety of different mechanisms are being used to evaluate communication. The most common method is keeping track of attendance at events and the numbers of students using services. Suggestions to improve evaluation included seeking out explicit student feedback and keeping records of student help-seeking to compare between differing demographics.

Stakeholders would like to see future communication of broader messages with students to develop the connection between academic success and health, as well as to encourage help-seeking behaviour. There is also a shared concern that more communication is needed to increase awareness of mental and sexual health issues amongst students.

Suggested strategies for improving future communication include increasing collaboration and centralising communication delivery; having more integrated online spaces and using these more creatively; supporting the development of peer support networks; and working more closely with academic colleges to integrate health and wellbeing.

Recommendations

Based on the experiences of stakeholders and the health promotion literature, an effective strategy should aim to achieve the following:

- Consult with diverse groups of students to gain an understanding of how to more effectively target communication.
- Focus communication efforts on students' intrapersonal and community interactions explore possibilities for integrating this into academic experiences.
- Develop structures that support increased collaboration between groups, services and academic colleges.
- Collaboratively develop an online health and wellbeing environment. With an awareness of the ongoing development of CMHR's Virtual Clinic.
- Share ongoing evaluation of new communication strategies and tactics.

Table of Contents

Executive Summary	iv
Introduction	1
Current Messages and Tactics	3
Messages	3
Division of Student Services	3
University Counselling Centre	3
Disability Services	4
ANU Health Centre	4
ANU Sport	4
ANUSA	4
PARSA	5
International Students' Department	5
Griffin Hall	5
Burton and Garran Hall	6
UniLodge	7
Centre of Mental Health Research	7
Tactics	8
Effective Strategies	9
Multi-channelled approaches	9
Face-to-face interactions	9
Targeting messages	10
Collaboration between groups, services and academic colleges	11
Developing student identification with a supportive community	11
Current Challenges to Communication	13
Message dilution	13
Irrelevant and untimely messages	13
Off-campus students	14
Culture, diversity and stigma	14
Resource limitations	15
Evaluation	17
Current evaluation	17
Suggested areas for improvement	17
Future Ideas and Strategies	18
Suggested messages	18

Suggested future strategies	19
Discussion	21
Theoretical framework	21
Multi-channelled and targeted communication	22
Intrapersonal and community interactions	22
Increased collaboration between groups, services and academic colleges	23
Conclusions and Recommendations	25
References	26
Appendix A: Interview questions	27
Annendix B: List of interviewees	28

Introduction

Health and wellbeing communication with ANU students is currently undertaken by a range of stakeholders, each with their unique goals and tactics. Communication is not currently coordinated and therefore there is no overarching strategy or goal.

Contemporary health promotion is based on an ecological perspective where the focus is not on educating individuals but instead changing organisational behaviour through the physical and social environments of communities (National Cancer Institute 2005). From this perspective it is necessary to consider the individual, intrapersonal and community levels of influence on health-related behaviours. An ecological perspective supports the idea that health and wellbeing communication needs to be designed on multiple levels if it is to be most effective in influencing student behaviour. A strategic approach to health communication is useful as it can provide frameworks for communicators to target these multiple levels of influence.

As stakeholders currently mostly work autonomously to communicate with students there is the risk that stakeholders may be competing for student attention or missing opportunities to influence more students at intrapersonal and community levels. Important health and wellbeing messages may be confused or lost in this process.

This report will document the current strategies and tactics used by a range of stakeholders to communicate with ANU students. Effective strategies and common challenges will be identified and ideas for the future will be collated around key themes. These insights will then be discussed in relation to the ecological perspective on communication to inform recommendations.

The purpose of this report is to provide a primary survey of current communication. This can then help provide a platform from which future communication strategies can be designed to further the goals of the ANU Medicine, Health and Wellbeing Learning Community (MHW LC) and other university stakeholders.

A goal of the MHW LC is to facilitate networks between student groups, academic colleges and student services to improve the health and wellbeing of the ANU community.

Additionally, the ANU Mental Health Working Party was established in August 2013. The Working Party drafted an *ANU Mental Health Strategy 2013-2015* which was submitted to the University Education Committee in October. A key recommendation of the Mental Health Working Party was that a comprehensive mental health communication strategy be developed.

Representatives from stakeholder groups across the university were interviewed about their current health and wellbeing communication and ideas for the future. See *Appendix A* for list of the interview questions.

A representative from each of the following groups was interviewed, see list of names and roles. A representative from each of the Division of Student Services, the ANU Health Centre, the University Counselling Centre and the Disability Services Centre were chosen to represent the views of the health services available to students. A representative from ANU Sport was interviewed as it plays a key role in providing programs that proactively improve students' physical and social wellbeing. Representatives from the ANU Students Association (ANUSA), the

Postgraduate and Research Students' Association (PARSA) and the International Student Department (ISD) were identified as representative student bodies that attempt to support student wellbeing. A representative from Griffin Hall was interviewed to provide a perspective on communicating with off campus students. Representatives from Burton and Garran Hall (B&G) and UniLodge were identified to capture differing communication strategies used within residential accommodations. A representative from the Centre for Mental Health Research (CMHR) was also interviewed as they provide online evidence- based materials to assist with mental health. They are also currently developing the Virtual Clinic program which has the potential to play a key role in future communication.

Interviewees

Student services:

Division of Student Services Dr Laura-Anne Bull (Registrar)

University Counselling Centre Heather McLeod (Head)

Disability Services Julie Harrison (Operations Manager)

ANU Health Centre Andrew Fernie (Manager)

Student representative bodies:

ANUSA Aleks Sladojevic (President)

PARSA Wayne Joseph (Student Welfare Advisor)
International Students' Department Muhammad Taufiq bin Suraidi (President)

Student residences/ groups:

Griffin Hall Oscar Morgain (President, Members Committee)

Burton and Garran Hall Dave Segal (Deputy Head)

Kate Snailham (President, Members Association)

UniLodge Matthew Wilkinson (Assistant General Manager)

and Undisclosed

Other:

ANU Sport Michael Brady (CEO)

Centre Mental Health Research Lou Farrer

^{*}Selected quotes taken from interviews will be used to illustrate common ideas. More details notes and interview transcripts are available on request.

Current Messages and Tactics

Understanding the unique goals of individual stakeholders is an important first step in developing more strategic communication plans. Documentation of differing goals could be used to help create a picture of where goals overlap, assist in identifying gaps and also provide direction as to where strategies should be focused.

Stakeholders were each asked what key health and wellbeing messages they currently try to communicate to students and what tactics or channels they use to do this.

In this context, messages are ideas or services that stakeholders wanted students to be aware of or act upon.

Tactics and channels were the individual mediums that stakeholders used to share these messages, for example, print and online advertising or word of mouth. The terms tactics and channels will be used interchangeably throughout this report.

Communication tactics are the methods or mediums used to communicate an individual message such as advertising an event on Facebook. Whereas a strategy is the overarching approach used to achieve a broader goal. This could involve numerous tactics, such as a communication strategy could be to use multiple networks and channels to reach international students with a particular message.

Messages

The following messages were identified by stakeholders as key to their current communication with students.

Division of Student Services

The Division of Student Services over sees the health services available to students. As such many of the messages it communicates are about making students aware of these services for example through the facilitation of all-student emails. However beyond this Dr Laura-Anne Bull explains that staff at DSS have started to 'think about how we can be a bit more proactive, and have preventative measures out there to help students see the light between that sense of wellbeing and academic achievement' (Dr Laura-Anne Bull, DSS). This message is targeted at all students with a particular focus on transitioning new students.

University Counselling Centre

The key messages ANU Counselling conveys are the 'management of anxiety and depressive symptoms, and learning relaxation skills' (Heather McLeod, ANU Counselling). The centre runs a variety of group workshop programs for students throughout the semester, including life and exercise programs, procrastination and anxiety management, programs on how to sleep well and relaxation classes.

Additionally, Get-Up and Go is an ongoing walking program targeted at isolated students who may want to get involved in exercise. The program is advertised widely at Market Day in O Week, through an all-student email, Facebook and posters. A student is employed to help run the program in conjunction with a counsellor.

The message about the availability of ANU counselling services is particularly targeted at new students.

Disability Services

'The role of the Disability Service Centre here at ANU is a legal obligation. Unlike many other service centres, by law we are required to be here and required to put in under disability discrimination legislation reasonable adjustments to address the disadvantage of students.' (Julie Harrison, Disability Services)

The key message Disability Services would like to communicate with students with disabilities is:

'Students to know that this service is available to them, I want them to know that by coming in here we won't be judging them, it's confidential and it's on a needs only basis that anyone actually knows what their disability is... [that it is our role] within our limits of reasonable adjustments to make sure they are able to participate fully at ANU.' (Julie Harrison, Disability Services)

ANU Health Centre

The ANU Health Centre has communicated with students about the availability of services, including health promotion clinics.

Health promotion clinics are not limited to a particular health theme, but instead focus on 'whatever topic the students wants to discuss, from quitting smoking, sexual health particular medication cholesterol and blood pressure checks, height and weight checks' (Andrew Fernie, ANU Health).

ANU Sport

The main health and wellbeing message that ANU Sport currently communicates is about getting involved and leading a balanced lifestyle. Michael Brady (ANU Sport) explained that, 'we realise the university has a strong academic record, so it is about trying to compliment that'.

'I'm sure advice to students who are struggling psychologically is to do two things. One, get connected and [two] is undertaking exercise, and sport and recreation are fantastic ways to do that'. (Michael Brady)

ANU Sport has a range of group fitness programs and over 30-35 affiliated clubs for students to get involved in.

ANUSA

This year ANUSA's focus has been on 'being proactive about student health and mental health and wellbeing' (Aleks Sladojevic, ANUSA). The focus has been on preventative messages to undergraduate students.

ANUSA has aimed to 'try and make students feel like they are a part of a community and not to think about am I being healthy, am I doing exercise' (Aleks Sladojevic, ANUSA). Initiatives such as the free breakfast program and yoga program have contributed to this message.

ANUSA has also attempted to communicate to students that 'there is help available, this is where the help is available and this is how you can access it' (Aleks Sladojevic, ANUSA). The rebranding of the ANUSA welfare office to Student Assistance was central to this.

Another important health message that ANUSA have been working on, is to break down the stigma around mental health. To achieve this, ANUSA has attempted to talk about mental health in the context of maintaining good study habits and how to plan in advance. Aleks Sladojevic explains that ANUSA is trying to communicate that good study habits 'tie into your general health as well as your mental health'. An ANUSA Mental Health Committee has been established. The committee meets regularly and has helped to co-ordinate an ANUSA Mental Health Day and develop the student Mental Health guide.

Other health messages conveyed at social events are messages about responsible drinking and drug use that were communicated during O Week and reinforced through a presentation during Bush Week.

PARSA

The message PARSA is currently trying to communicate to postgraduate and research students is to address a range of areas of health and wellbeing. This includes mental health, social health and physical health with a particular focus on 'addressing knowledge gaps' (Wayne Joseph, PARSA).

One of the tactics PARSA has used to address this is through Health Fairs.

'Overall the health fairs were about letting students know about the services that are out there, and getting quick information to students and the services that are available to them. So we asked stakeholders to do what they usually do, but we asked them to be mindful of international students and domestic students and consider what would be more attractive.' (Wayne Joseph, PARSA Student Welfare Advisor)

To address physical health PARSA has run Men's and Women's Fitness classes, relaxation and dance classes to teach students how to de-stress and take a break during exam time. Wayne Joseph explained that PARSA has aimed to 'address the fun and social networking side but also the fitness component to it'. PARSA also offers networking events that support student wellbeing. These include welcome BBQs, social evenings and trips away.

International Students' Department

Currently ISD 'do not have a particular message to send out in regards to mental, health and wellbeing. We just re-communicate what ANUSA is doing through our channels and what else the university is doing' (Muhammad Taufiq bin Suraidi, ISD).

The main concern of the ISD is to give students a sense of confidence and safety, so that they know they have the support of a powerful student body in times of difficulty. By providing this voice, 'hopefully through that they will feel like they are on equal footing with the guy next to them' and from their students should be able to engage more effectively with the university.

Griffin Hall

Griffin Hall is a community that student's living off campus can choose to join.

The key message Griffin Hall tries to communicate with students is 'one of involvement' we 'try and encourage students to have a sense of community as much as possible' (Oscar Morgain, Griffin Hall).

'Once people are there and engaged and feel like they are a really active part of the community, then from there it is really easy to disseminate messages about health and wellbeing that I think are really prolific in young people'.

Oscar Morgain explained that with Griffin Hall it is not about trying to dominate one realm because many off campus students have multiple social networks, instead it is about 'making sure that in any aspects of their lives they know that there is a safety net and a support network here... provided by their peers'.

Although most tactics directly target Griffin Hall members, the interconnectedness between Canberra students means by encouraging students to engage with the community this may allow them to filter through the broader off campus student community. For example, 'Having a friend at Griffin Hall doesn't mean you have to join, but it might mean you know there is a free sexual health clinic going on' (Oscar Morgain).

Griffin Hall attempts to promote a safe drinking culture, safe sex, safe campus awareness and more generally encourage students to be more conscious about mental health and wellbeing.

Burton and Garran Hall

The central medium for communicating to students about health and wellbeing at halls and colleges is through the leadership teams. In most residential communities the key teams this communication comes from are the pastoral care team and the elected residents committee.

The Deputy Head and residents committee President from B&G were interviewed to provide insights into the communication environments in such residential communities.

Pastoral Care Team:

The pastoral care team is essential to promoting a message of help-seeking. Senior Residents (SRs) are responsible for updating the Deputy Head of Hall on the wellbeing of residents. SRs monitor whether residents are suffering from physical illness, signs or symptoms of mental illness, homesickness or isolation. This message is conveyed from the moment residents arrive at the hall, where they meet their SRs other residents on their floor. The purpose of the SR, contact hours and the primary point of contact, the Duty Student are all explained to new residents, in initial floor meetings, face to face conversations and an administration introduction. This message is also conveyed online and through a welcome letter, further reinforced throughout the year:

'If there is an issue with a student, it is reinforced that the student should seek out their senior resident as the first point of contact to have a chat with. It is all about developing a culture of that is what you do at B&G.' (Dave Segal, B&G)

Burton and Garran Hall Members Association (BAGMA):

BAGMA is the elected residents committee which is responsible for organising social events and opportunities in the hall. Administration tries to ensure that BAGMA 'are running activities based on the concept of building community through getting as much engagement as possible' (Dave Segal, B&G).

Activities include social, arts and cultural, sports, Greens Committee and community events and activities. Through these events the residents committee attempts to foster a 'sense of wellbeing in the hall' (Kate Snailham, B&G).

'The residents committee does try and reach every single person... living in college... meeting people is really important, it provides a temporary home'.

The timing of events is designed in conjunction with other leadership teams and many events are held in O Week where a focus is on 'trying to incorporate the new students that have arrived, and help them to become a part of the community through a sense of belonging' (Kate Snailham, B&G).

BAGMA promotes other health and wellbeing messages including:

- General support for the SRs by 'encouraging students to go and talk to their pastoral care advisors' (Kate Snailham, B&G).
- Responsible drinking- including not advertising events as being predominantly about the consumption of alcohol.
- The Executive members on BAGMA make an effort to encourage fellow committee members to be aware of their own health and wellbeing.

UniLodge

UniLodge is a much larger residential community and residents do not share a communal eating area. As a consequence communication practices differ from other residences. The Assistant General Manager was interviewed to provide insight into communication in this community.

UniLodge does not currently try and communicate any overarching health and wellbeing messages to students however it does use a series of tactics to communicate a variety of health and wellbeing ideas to its residents throughout the year:

- Pastoral care team- checks how residents are going
- Reminders about drinking responsibly, no drugs and no smoking at UniLodge
- Shares messages from other services and areas of ANU including Counselling and ANU Sport
- One off information sessions and workshops on different health related topics e.g. sexual health
- Residents' committee organises social, sports and arts events and opportunities as well as Cooking classes which were trialled in 2013.

Centre for Mental Health Research

The Centre for Mental Health Research (CMHR) is in the process of making its presence more broadly known to students within the ANU Community. Currently the centre communicates the messages that it is important to seek help for mental health problems and that there is a lot of good quality accessible online help available. It also communicates the idea that 'not everything on the internet is trustworthy and it is important to use evidence based mental health programs'. (Lou Farrer, CMHR).

The CMHR attempts to communicate this message to all students. However the uniVirtual Clinic which is currently in the development process will target 18-25yr old ANU students. The centre also promotes existing online tools such as MoodGym and E-Couch.

Tactics

Stakeholders use a range of mediums at different times of the semester in an attempt to communicate these messages with students. These are summarised in Table 1 below.

It is important to note that much of the online and print material is used to advertise services or events. Comparably events, training and networks are used to try and encourage certain health and wellbeing attitudes and behaviours. More detailed information about tactics and channels can be made available on request.

Table 1 Communication tactics currently used by stakeholders

Tactic/Channel	Stakeholders	
ONLINE		
Website	Counselling, ANU Health, ANUSA, PARSA, CMHR, B&G, Griffin Hall	
Facebook	ANU Sport, ANUSA, PARSA, B&G, Griffin Hall, UniLodge, CMHR	
Twitter	ANU Sport	
ANU Billboard	PARSA	
Personal emails	Disability Services (students who disclose a disability on UAC)	
Online Wattle SET modules	DSS	
All-Student emails	Counselling, ANU Health, ISD	
Member emails	ANU Sport	
PRINTED MATERIAL		
Notes on student doors	B&G	
Calendar of events	B&G, Griffin Hall	
Advertising in Woroni	ANU Sport, CMHR	
Business Cards	ANUSA	
Physical Billboards/ Noticeboards	ANUSA, Griffin Hall, B&G, UniLodge	
Posters	ANUSA, PARSA, B&G, UniLodge	
Postcards	DSS, Counselling, CMHR	
Handouts and brochures	Counselling, Disability Services, ANU Sport, ANU Health	
Hardcopy publications	ANUSA (Mental Health Guide)	
TV screens in libraries	Counselling	
EVENTS		
O Week College Welcomes	Counselling (when invited)	
O Week panel	Counselling, Disability Services, Health	
Market day	ANU Sport	
Sports Festival	ANU Sport	
Attending events e.g. Health Fair	Counselling, Disability Services, ANU Health, CMHR, ANU Sport	
STUDENT NETWORKS		
Networks of affiliated clubs/societies	ANU Sport, ISD	
Pastoral care teams	B&G, UniLodge, Griffin Hall	
Word of Mouth	Counselling, Disability Services, ANU Sport, B&G, Griffin Hall	
COLLABORATION BETWEEN GROUPS AND ACADEMIC COLLEGES		
Work with academic colleges	DSS, Counselling, Disability Services	
Lecture announcements	Counselling (sometimes)	
Course guides	Counselling	
Referrals from other services	Counselling, Health, Disability Services, CMHR	
TRAINING		
Training of student leadership teams	B&G	
Staff training workshops	Disability Services	

Effective Strategies

Stakeholders were asked to explain which aspects of their communication they believed were most effective in communicating their health and wellbeing messages to students. The following common themes were identified as being effective:

- **Multi-channelled approaches-** using a variety of mediums to share the same message simultaneously
- **Face-to-face interactions** including using word of mouth and training student leaders to spread messages amongst students
- **Targeted messages** making message relevant and timely for particular groups of students
- Collaboration between groups, services and academic colleges- finding shared goals and using these as a basis for communication
- **Developing student identification with a supportive community** encouraging a culture of help seeking and awareness of health and wellbeing.

Multi-channelled approaches

All services and groups interviewed reported trying to use multiple channels in an attempt to reach students.

'The ANU student body is so diverse. The consistent feedback we get is that students want lots of different options' (Lou Farrer, CMHR). Sending messages across a variety of mediums allows messages to reach students who may not be active in one medium. 'I have a marketing background, so I think if you really want to promote something you need to have one theme at a time...have one theme and you need to have email, Facebook and the posters to back it. We need to try all mediums because some people are not going to check their emails but they will use Facebook. They might see a poster which might remind them to look at the Facebook page'. (Matthew Wilkinson, UniLodge)

The effectiveness of putting the same message across multiple mediums was also experienced by ANU Sport, Griffin Hall, ANUSA and DSS.

Face-to-face interactions

Most groups and services reported using online communications channels such as websites, email and social media. However many groups also reported on how valuable they have found face-to-face communication in engaging students.

Many stakeholders mentioned how word of mouth was an invaluable resource. 'The best way to communicate with people is through word of mouth. So if you have a decent product, people are going to pass the word on.' (Michael Brady CEO, ANU Sport) Similarly, this was seen as one of the strengths of the ANUSA Mental Health Committee, 'One of the benefits of people meeting and coming together in a committee is that you get dispersion of information via personal networks which is important' (Aleks Sladojevic, ANUSA). Likewise Heather McLeod (Counselling Centre) explained that that most students seem to hear about the counselling service through word of mouth. Communication amongst students was found to be a really important resource in student communities with the Griffin Hall common room being an important place for students to share information amongst one another (Oscar Morgain, Griffin Hall). For B&G this form of communication is just as invaluable, 'O Week is very successful event for B&G... First years

know what is going on, and a lot of the time is spent one-on-one saying that it is a good idea to get involved.' (Kate B&G)

The power of peer communication for engaging students is evident in the experiences of PARSA, ANUSA, B&G, UniLodge and ISD.

Another important part of successful face-to-face interactions that was identified as being effective was the significance of training student leaders, so that when students interact there is an awareness of health and wellbeing issues and help seeking behaviours. This was clear in the case of B&G where leadership teams are trained to be aware of issues and in community building. The training for the pastoral care team has improved over the past five years (Dave Segal, B&G). ISD President Muhammad Taufiq bin Suraidi explained how he had heard that there had been a spike in the number of international students approaching and using pastoral care at B&G and that Keith Conley (2013 Head of Burton and Garran Hall) had explained that B&G now 'has a mental health awareness campaign which is happening so a lot more students are aware..... Student feel more comfortable approaching, somebody about this issue.' This is a clear example where training students can be an effective communication strategy for engaging students in health and wellbeing messages.

Targeting messages

Ensuring that the health and wellbeing messages communicated to students are relevant, timely and communicated via the appropriate channel was also identified as being essential to an effective strategy.

Timing

'The more we engage with students the more we are learning what strategies work for them at different times of the year.' (Lou Farrer, CMHR) Asking students to participate in focus groups in exams periods was found to be ineffective.

Making emails to UniLodge residents weekly rather than haphazard was an effective tactic. 'Residents have started to view it as the one source of information.... The regularity I suppose helps a bit'. (Acting Residential Life Manager, UniLodge)

Communicating to students when health is a priority was also found to be important for ANU services. For example Andrew Fernie (ANU Health) explains, 'If you don't have a medical condition, health is right there down the list. But if you do have a health condition or a chronic illness, that is one of the things they will do, is try and find the health service'. Therefore trying to communicate to some students at the beginning of semester about health services when it's not a priority may not be effective.

Suitable mediums

Different messages may be more appropriately communicated across different channels. For example although emails may not be the most effective way of advertising an event, 'For reactive stuff like don't jump in Sullivans Creek, emails work best, you know it's going out to 80% of people tomorrow' (Acting Residential Life Manger, UniLodge).

Similarly B&G has found communicating with students about large social events is effective if notices are put on students doors. Comparably messages about getting involved in certain sporting teams are more effectively advertised by word of mouth. (Kate Snailham, B&G)

Relevant messages

In connection to the last two themes is the importance of making sure messages are relevant to the students they are trying to engage with. If they are relevant, then students will see the added value in engaging with the ideas.

A clear example of where targeted communication has worked most effectively is through the personal emails sent out by Disability Services to students who self-identify on their UAC forms as having a disability, 'we started doing that last year and that has been phenomenal' (Julie Harrison, Disability Services).

Similarly Griffin Hall Committee President Oscar Morgain has trialled one line emails to students seeking direct feedback on events after they occurred. This message was relevant simple and targeted, 'Single line emails are the most effective tool for accessing information that we have statistically speaking. People are more likely to reply to a single line email than anything else'.

Collaboration between groups, services and academic colleges

As many of the goals and objectives of different stakeholders overlap, the value of working together was highlighted by some of the groups interviewed. In particular the value of collaboration was identified as a highly effective communication strategy for University Counselling and Disability Services and the ISD.

Currently the University Counselling Centre and Disability Services engage with academic colleges, particularly at the Associate Dean Education level. This has been effective helping the colleges become more 'aware of the services that we provide and from there they can refer students appropriately in terms of where they need to get help' (Dr Laura-Anne Bull, Registrar Student Services).

Disability Services has also run workshops with front counter service staff as well as hosting a speaker event on autism last year. 'We invited both professional and academic staff from across the university to that. We had 160 professional staff attend, and 100 academics. Which was wonderful because ... they then went back out and shared what they learnt which is wonderful'. (Julie Harrison, Disability Services)

Another important example where collaboration has been effective in communicating with students is the collaboration between the ISD and international clubs and societies. Although these channels are not yet utilised to communicate about health and wellbeing, they provide an example of where working together to utilise different social networks can be effective. Clubs and societies are invited to set up booths at the ISD welcome event at the beginning of each semester. The ISD also uses the clubs and societies to channel messages to students. 'We do our best to complement each other. Where it is more effective to go through the clubs we do it there, because it will actually save us resources on our end.' 'We work closely with each community to help send out message with them' (Muhammad Taufiq bin Suraidi, ISD).

Developing student identification with a supportive community

Another effective strategy that was highlighted by representatives of both Griffin Hall and Burton and Garran Hall was the value of helping students identify with a supportive community. If students identify with a group, not only do they share some of the values of the group and

have strong social networks, it is also easier to disseminate health and wellbeing messages through peers.

Student leadership was identified as being central to doing this. As Oscar Morgain (Griffin Hall) explains, 'Actually having people who want to engage and get behind an initiative makes it much more powerful. When someone who is not involved sees someone who they perceive as being in a leadership position or as being active in a community doing something, getting behind it, they are much more likely to ask about it'. In reference to the Griffin Hall discussion Facebook page he describes its purpose as 'not necessarily about trying to disseminate one large message but just that people are a part of a community'.

Students who identify as being a part of supportive communities are much more likely to seek help, therefore an effective communication strategy of investing in the training and guidance of student leaders was identified. Dave Segal (B&G) explains that administration tries to raise awareness in their residents committee 'to ensure that events they are running are based on the concept of community through getting as much engagement as possible'.

Current Challenges to Communication

Stakeholders were asked to identify challenges and barriers they experienced in communicating health and wellbeing messages with students. The following common themes were identified:

- Message dilution- too many messages attempting to attract students simultaneously
- **Irrelevant and untimely message-** messages that do not seem relevant to students or students have higher priorities
- Off-Campus students- messages are less accessible to this groups of students
- **Culture and stigma-** preconceived ideas and attitudes to health and wellbeing presenting barrier to the reception of some messages
- Resource limitations- including time, staffing, costs, coordination and spaces

Message dilution

At the ANU groups are constantly competing for students' time and attention. Many stakeholders reported that their health and wellbeing messages are diluted amongst this chaos and in some cases are even diluted by competing health messages.

'At CMHR we beat our drum and say mental health is important and it is, but so many other health messages are important to students as well...We are all trying to push messages simultaneously and to do that without overwhelming people is a challenge.' (Lou Farrer, CMHR)

Other areas of the university, clubs and societies are also challenged in getting their messages to students. Representatives from UniLodge, ANU counselling and B&G all reported on this challenge. 'We have so much going on that often messages get confused, and people get distracted from the other activities going on.' (Kate Snailham, BAGMA)

This concern was particularly apparent when discussing the challenges of using emails and social media (ANUSA, PARSA, CMHR).

Irrelevant and untimely messages

Many stakeholders identified experiences where the communication tactics and messages they chose to communicate were not relevant to the student and therefore were not effective. These experiences represent those challenges that arise when not employing a strategy that involves clearly targeting messages. Timing, medium and choice of message are all significant.

For example, Lou Farrer explains how CMHR sometimes finds it 'a bit more difficult to access the students who are perhaps less aware of mental health issues'. If students don't already see mental health as important different strategies may need to be adopted compared to students who have had a lot of experience in this area.

Messages may also not be a high priority for students at a particular time of the semester. 'There might be something that is a priority for us, but not for them...I might be trying to get a message out, but they might not think it's important because they have an exam or something else on' (Matt Wilkinson, UniLodge). Similar challenges with choosing appropriate mediums and relevant messages were expressed by Disability Services, PARSA and the Counselling Centre.

Off-campus students

A key challenge to communicating messages was the inaccessibility of off-campus students. As identified previously peer to peer and multi-channelled communication were key strengths of current communication strategies, however students who live off campus are less exposed to messages. This is particularly the case if the messages they are receiving are through online mediums where the messages are being diluted.

'How do we help students who maybe don't live on campus, but live locally... They are engaged with their studies but they are perhaps not as engaged with the university.' (Lou Farrer, CMHR)

'Certainly the people on campus have an advantage about finding out about services... also because there are staff in the residences who know of the services.' (Heather McLeod, University Counselling Centre).

This concern was also expressed by PARSA. 'Research students tend to only know students within their department. If they live on campus somewhere, it increases the chances that they will interact with others. If they do not, then they develop further isolation... If they live off campus, it is very hard. There is no common space for postgraduate students except the University House lounge' (Wayne Joseph, PARSA).

ANUSA, ANU sport and DSS identified similar difficulties with reaching off campus students.

Culture, diversity and stigma

Other key challenges identified by stakeholders revolved around university culture, differing expectations and attitudes of students from diverse backgrounds and stigma around areas such as mental health and disabilities.

University Culture

Broad aspects of the current academic and student culture were identified as communication challenges that need to be worked with. References to academic culture included the value staff and students place on academic success and research. Whereas student culture referred to ideas such as the expectations and assumptions some students bring to university or leadership positions. The following specific challenges were identified.

Academic culture:

- 'The fact that we have a highly evolved academic structure... You can't knock the academic behaviours because it is what makes this university the success that it is. For me it is how to balance that with the needs of the students' (Dr Laura-Anne Bull, DSS)
- 'We tell ourselves that we are going to take some time out, but in reality, when assignments are due, we are not going to do that' (Wayne Joseph, PASRSA)
- 'The high ATAR of students who attend ANU means that students who find it more challenging, particularly international students might feel uncomfortable approaching students in leadership positions, many of whom maintain a distinction average' (Muhammad Taufiq bin Suraidi, ISD)

Student culture:

- Some local students come to university with the intention of reinventing themselves, 'Other people go "I know my friends, why do I need to know others?" (Oscar Morgain, Griffin Hall)
- 'One challenge is the students desire to be part of the community" (Dave Segal, B&G)
- 'Often young people and they are only in those positions for a short period of timethey want to make a difference. And sometimes that can result in the desire to be recognised for some change that has happened. Whereas, better things happen when they are done collaboratively. So long as no one is worried about who is getting credit... It would be great to break that down if we could and make sure that everyone involved gets some recognition'. (Michael Brady, ANU Sport)

Diversity and stigma

The diverse range of cultural backgrounds of ANU students presents many challenges to health and wellbeing communication. Perceptions of health are different across cultures and backgrounds, particularly in relation to mental health and disability.

Stigma around mental health is significant amongst both domestic and international students.

'If we take young people as a whole, young people that go to university are even less likely to seek help for mental health problems.' (Lou Farrer, CMHR)

The Counselling Centre and student representative groups explained that many students don not understand the role of counselling.

I think most people believe that you seek out counselling once you have been diagnosed with a serious mental illness, and that it is the only time you go to counselling. This is wrong. You can seek out counselling whenever you want. I know there is a lot of cultural stigma against counselling but I think it is worse among international students.' (Kate Snailham, B&G).

Stigma around mental health and disability is a particular challenge for some international students.

'There are students with mental health issues who are not recognised in their own countries...International students is a particularly difficult one as they see disabilities as having no arms, no legs, being in a wheelchair, vision, hearing impaired, they don't see mental health or what we see as hidden disabilities of illness or mental health as real disabilities.' (Julie Harrison, Disability Services)

Resource limitations

Resource limitations were identified by stakeholders as key challenges to communication with students. This included staffing and time limitations, organisational challenges in student organisations, lack of on campus spaces and difficulties with websites and email systems.

Staffing and time

The University Counselling Service, Disability Services and ANU Health all explained that they don't have the time or staff to commit to planning communication strategies as they would prefer.

'Other places in the university can decide to allocate time to planning days, we can't do that. We have a practice meeting once a month.' (Andrew Fernie, ANU Health)

'We don't have the resources to put ourselves out there in a way that makes us publically visible.' (Heather McLeod, ANU Counselling)

Both CMHR and ANU Health explained that in an ideal world they would 'have someone whose fulltime job it was to disseminate resources' (Lou Farrer, CMHR).

Student organisations

Coordinating groups of students was identified as a key challenge for PARSA and ANU Sport.

ANU Sport works to build a relationship with students in residential halls however student positions in halls 'change every 12 months so we have to keep establishing new relationships. And everyone has different ways of filtering their communication' (Michael Brady, ANU Sport).

Mustering support and initiatives was also challenging for PARSA; Wayne Joseph explains that he has 'learnt it's best to plan 5 months in advance'. However there are other challenges with having a limited number of staff and working with a team that is half volunteers.

Spaces

Both PARSA and Griffin Hall identified a lack of spaces on campus for postgraduate and off campus students as a challenge to more effective communication.

Websites and email

Both ANU Health and PARSA highlighted the difficulties in getting changes and additions to websites.

Andrew Fernie (ANU Health) explained that, 'Trying to get support for your website through the ANU can be a long and drawn out and it is very hard to change things.' Security and sensitivity issues exacerbate these difficulties for ANU Health.

ANU Sport finds that as they are not a part of the university, not having access to all-student email facilities creates a significant challenge to reaching more students who are not already engaged in their programs (Michael Brady).

Evaluation

Stakeholders were asked if they had any formal or informal mechanisms in place to evaluate their current health and wellbeing communication with students.

Current evaluation

The most common form of evaluation was keeping track of attendance at events and programs. The Following evaluation mechanisms are currently being utilised:

- Attendance at events /Number of students using services- sometimes including a breakdown of international versus domestic students (UniLodge, B&G, Disability, ANU Sport, ANU Health, University Counselling Service, PARSA, Griffin Hall and ANUSA)
- Number of students on email lists (PARSA, ISD)
- Number of Facebook likes (ANU Sport, PARSA, ANUSA, UniLodge)
- Activity on Facebook group (Griffin Hall)
- Percentage of students who open emails (UniLodge)
- Familiarisation of students with services in conversation (CMHR)
- Monitoring web traffic (ANUSA)
- Project based evaluation (DSS)
- Ongoing monitoring of student participation and culture including willingness of people to respond to feedback and number of incidents (B&G)
- Response rate to one-line emails asking for feedback on events (Griffin Hall)
- Surveying students (University Counselling Centre- in past years)
- Percentage of students who engaged with SET for ANU wattle modules (DSS)

Areas for improvement

The following areas of evaluation were identified as areas that could be improved:

- Records of the percentage of international and domestic students who approach their
 pastoral care teams in regards to any issue- in order to provide a more accurate gauge of
 whether international students are seeking support as needed. (Muhammad Taufiq bin
 Suraidi, ISD)
- Specifically seeking out feedback from students on specific programs and what they are looking for (Dr Laura-Anne Bull, DSS).

Future Ideas and Strategies

Suggested messages

Stakeholders were asked to think broadly about what other health and wellbeing messages they would like to see communicated with ANU students in the future. Responses included the following themes:

• Linking health and wellbeing, and academic success (ANUSA, PARSA, ANU Sport and DSS)

Wayne Joseph (PARSA) explains that he would like there to be a culture around health and wellbeing at ANU. This is encapsulated in the idea 'that you don't come to ANU with the idea to lock yourself in your room and study and that is achievement'. Instead he would like to see achievement redefined as 'days a week you are out with friends, or at the gym, or a cooking class... at least trying to get that balance'. Similarly Michael Brady (ANU Sport) explains that, 'we do not think we are held in high esteem by the university because we are not academically based. Breaking down that perception is the hardest thing.' Developing a culture that links academic success to health and wellbeing is essential to achieving this.

• Developing help seeking culture amongst students (Disability Services, CMHR, B&G, ISD, DSS)

Dave Segal (B&G) explained that he would like students to understand that early intervention is the key to addressing all problems whether they academic, physical health or mental health problems. Similarly, Muhammad Taufiq bin Suraidi (ISD) would like to see all international students 'comfortable enough to approach their SR because they see them as a trusted mentor'. Julie Harrison (Disability Services) explains that she would like help to be more accessible to students. So that when they are experiencing difficulties there is someone they can go to that will understand all the services well enough to explain all the help that is available.

• Mental health awareness

Existing stigma and general lack of mental health awareness will be significant communication challenges. Further ideas stakeholders would like communicated in this area include:

- Providing all students with skills, whether that is skills around emotional management, relationships or skills around finding out who they are. Increasing student awareness about the role of counselling as a tool for achieving this. (Heather McLeod, University Counselling Service)
- Increasing mental health first aid training throughout ANU (Dave Segal, B&G)
- Focusing more on preventative and proactive (Dr Laura-Anne Bull, DSS)
- Communicating to students who are helpers that 'there are people out there who can support you to support your friends' (Lou Farrer, CMHR)
- Increasing awareness about supporting mental health among student leaders (Kate Snailham, BAGMA)
- Reducing stigma for international students at UniLodge about accessing mental health services (Matt Wilkinson, UniLodge)

 Creating a culture around mental health awareness for international studentsincluding culturally sensitive messages in conjunction with awareness by the student and academic community (Muhammad Taufiq bin Suraidi, ISD)

• Other areas of health:

- Sexual health, attitudes to sex and increasing understandings of what constitutes harassment (UniLodge, B&G, ISD and ANUSA)
- Physical health- belief this currently flies under the radar (ANUSA)
- Increased communication with international students around nutrition, drugs, smoking and alcohol (UniLodge)

Future strategies

Stakeholders were asked what strategies they believed would be effective in communicating with students in the future if there were no resource limitations.

Collaboration and Centralisation

Many stakeholders suggested the need for greater collaboration amongst stakeholders to achieve common goals.

'The university has its own communications office and I'd like to see a bit more central management from that point of view, because we do live on a campus where there is so much information, and I think there needs to be someone or some department overseeing that information so that where there are overlaps we can create more targeted messages which could be really effective.' (Aleks Sladojevic, ANUSA)

Concerns about students not wanting to be moved from one place to the next to get information on events and advice around health and wellbeing were expressed by representatives from UniLodge, Disability Services, Counselling and B&G. Ideas for greater collaboration were also expressed by ANU Health, PARSA and ANU Sport.

Online communication

The suggestion of having a single ANU health and wellbeing page was put forward by many stakeholders. Having a single space where students get all the information they needed was seen as important for student engagement. Dr Laura-Anne Bull (DSS) explained that there were plans for a health and wellbeing page to hopefully go live in February 2014.

Other suggestions for using online mediums included:

- Including YouTube videos to provide an introduction to the ANU Health Centre
- Using videos to show students what counselling sessions are about
- Having online chat forums where students can support one another (Disability Services)
- Integrating health and wellbeing related events and programs in the ANU Billboard so students can plan what they attend (UniLodge)
- Using video to show students what it is like being involved in certain events (B&G)
- Improving *Set for ANU*, by making it more accessible and having online webinars instead (DSS)
- Creating a concise media platform with an independent website, mixed in with Facebook group, calendars, connective data base and academic and social events (Griffin Hall)

Peer-support

Dr Laura-Anne Bull (DSS) explains that 'peer-to-peer stuff is really important but we don't use it enough'.

Interestingly students groups that experience the biggest difficulties reaching students, including Griffin Hall, ISD and PARSA all suggested the need to increase the use of peer networks to improve communication.

The importance of improving academic support for students within the Griffin Hall community by connecting them with later year students was emphasised. Oscar Morgain (Griffin Hall) also explained the benefits of providing more opportunities for all students to build social networks,

'Anything the university can do to put people in small groups for periods of time where discussion is encouraged with people who they will see around is so important'...'if you are a part of a seven person discussion group going on, and someone asks you your name and asks why you chose to take this course and you hear the same thing from everyone else around you, the barriers are broken down almost instantly.'

Wayne Joseph (PARSA) suggested more engagement with residences was needed to reach networks of postgraduate students for peer-to-peer communication to take place.

Similarly the importance of tapping into and support existing peer networks to communicate about health and wellbeing was emphasised by Muhammad Taufiq bin Suraidi (ISD).

I think clubs and societies, they are your network, they are your seniors, I speak for international students, they look for international clubs and societies for help, for guidance. The question becomes "Are the leaders of clubs and societies receiving adequate support from the university?", and I would say, no Some presidents aren't even aware of mental health issues...I think clubs and societies are the best grassroots this school can expect to get, but without training [student leaders] they are ineffective grassroots'.

Working with academic colleges

Another common suggestion for future health communication was working closely with academic colleges to reach students. Ideas and planned initiatives included:

- ANU Sport is looking at starting up a Vice Chancellor's Challenge, which will be a college based sporting events and is looking to find other ways to be more relevant to the academic community
- Muhammad Taufiq bin Suraidi (ISD) suggests that there is an important role for lecturers in creating a culture around mental health awareness so that 'people feel a bit more comfortable'
- ANUSA highlights the importance of first lectures each semesters as opportunities to engage with the majority of students
- Role of the new Mental Health Advisor to do outreach with academic colleges (DSS)
- Dr Laura-Anne Bull said that the literature supports integration of health and wellbeing into colleges and that DSS might look at starting a pilot program where it is embedded in a course in the future

Discussion

In order to understand the experiences of ANU stakeholders and how their insights may be useful in informing future communication strategies it is necessary to review these in the context of current health promotion literature. An overview of the key theoretical approaches to health promotion will be provided to contextualise the themes identified by ANU stakeholders.

Theoretical framework - An ecological perspective

Contemporary health promotion is based on an ecological perspective where the focus is not on educating individuals but instead changing organisational behaviour through the physical and social environments of communities (National Cancer Institute 2005). This perspective emphasises the interaction and interdependence of all levels of health problems where behaviour both affects and is affected by multiple levels and 'individual behaviour both shapes and is shaped by the social environment' (National Cancer Institute 2005). From this perspective it is necessary to consider the individual, intrapersonal and community level of influence on health-related behaviours.

From this perspective, it is clear that many individual ANU stakeholders' concerns with using a range of tactics to promote their chosen health and wellbeing related messages may be limited. For example tactics that involve advertising and/or hosting events to disseminate information to students may not be as effective on their own as they don't address social and environmental influences on health behaviour. At an individual and interpersonal level most theories that underpin effective health promotion can be classified as Cognitive Behavioural which is the idea that although knowledge does influence behaviour, perceptions, motivations, skills and social environments are also significant influences on behaviour (National Cancer Institute 2005). A study of first year college students found self-efficacy to be an important predictor of physical health behaviours (Von Ah et al. 2004). Therefore strategies that employ tactics that only target one level of influence, for example providing pamphlets on what are acceptable drinking behaviours, are unlikely to be as effective as strategies that target multiple levels, such as a talk given by someone who can relate their experiences with alcohol to students, therefore connecting at an intrapersonal level.

An ecological perspective supports the idea that health and wellbeing communication needs to be designed on multiple levels if it is to be most effective in influencing student behaviour. From this perspective the evaluation strategies adopted by many ANU stakeholders that involve keeping attendance at events or number of people exposed to a message may not provide a comprehensive measure of the effectiveness of these communication tactics, as they don't account for interpersonal or community levels of influence. Therefore evaluation strategies that examine the overall health of the community, for example reflecting on anecdotal changes in overall student perceptions of health and wellbeing behaviours, such as drinking culture at B&G, may be more useful. Other strategies such as comparing records and use of student services are also useful as they measure student health behaviours directly, although they are limited to only providing an indication of health and wellness in the broader student population. Despite limitations in the ways stakeholders evaluate their communication, stakeholder experiences still provide a useful insight into what is effective, if analysed from an ecological perspective and compared with other communication studies and practices.

However it is important to recognise that engaging with students directly about health and wellbeing attitudes and experiences with current communication is also necessary before designing an effective communication strategy in the future.

Multi-channelled and targeted communication

ANU stakeholders identified their use of multi-channelled communication and targeting messages as effective communication strategies. Conversely, making messages relevant and timely was identified as a common challenge. It is important to investigate directly what students' needs are to overcome these challenges; from a social marketing perspective, planning a strategy needs to start with consumer research and market analysis (National Cancer Institute, p. 32).

Although using multiple communication mediums to communicate the same message was identified as effective, stakeholders also suggested that message dilution was an issue. This could be overcome by the increased coordination of communication between groups and services to communicate less but more targeted messages. Experiences of stakeholders provide some examples of effective use of mediums, messages and timing to reach students, for example, promoting involvement in sports clubs and societies during orientation week. However more research is needed in order to identify what communication will be most effective with students. Recent research suggests that student engagement may be more effectively modelled on assessment cycles rather than over the semester (Penn-Edwards 2013). This is evidence that more can be done to engage with student perspectives.

Targeting communication at sub groups within communities can be highly effective. This is evident in the successful recruitment processes of international clubs and societies at ANU. Targeting communication involves thinking about the relevance of communication to particular groups then deciding on the tactics that will be most appropriate. There is evidence that strategy is effective as long as the individual feels they can relate to the group that is being targeted (Kreuter and Wray 2003). Another approach that is starting to be used more commonly is tailoring communication. This involves customising the source, message and channel to make it relevant to the individual. Kreuter and Wray (2003, p.227) found that, 'health communication strategies that succeed in making information relevant to their intended audience will be more effective than those that do not' and 'tailoring is a proven approach to enhancing message relevance'. However there are challenges to designing tailored communication. A few ANU stakeholders mentioned that they would like to see a central online health and wellbeing space created where students could find information based on their circumstances of how they were feeling. This form of tailored communication is also something that CMHR is currently developing with their Virtual Clinic. At present very few studies are being conducted on how tailored communication operates in practice, although there have been many trials. Noar et al. (2011) explain that the development of tailored communication messages is challenged by resource limitation and the complexities of addressing more than one health behaviour. Despite this, tailored strategies are effective and it is worth considering how communication with ANU students can be targeted on a variety of levels.

Intrapersonal and community interactions

Effectiveness of strategies that involved face-to-face communication and developing student identification with a community were identified by stakeholders. The challenges of communicating with off campus students who generally do not have as many opportunities to

engage in these channels of communication were also highlighted. Suggestions regarding providing more space and opportunities for this to occur were made by representatives from Griffin Hall and PARSA. Comparatively, ISD President Muhammad Taufiq bin Suraidi explained that he believes that clubs and societies could provide important health and wellbeing communication channels if they are adequately supported by the university.

Social cognitive theory is one of the most influential theories of health behaviour. It assumes that individuals exist within and are influenced by their social environment and that the opinions, thoughts, behaviours, advice and support are all influential and that they have reciprocal effects on others (National Cancer Institute 2005, p. 15). Using social networks as communication channels is therefore necessary to any form of effective health communication strategy. At a community level it is important to evaluate how social systems function and identify common goals and issues so that broader messages can be communicated. Diffusion innovation theory, which looks at how new ideas spread in an organisation, explains that effective communication requires both formal and informal channels of communication, and should include both wide-scale tactics and interpersonal interactions (Nation Cancer Institute 2005, p. 28).

The need to focus communication on broader populations as well as individuals is also reinforced through studies on reducing stigma, particularly around mental health. Kalra et al. (2012, p. 81) reviewed research on early intervention and public education for reducing mental health issues and concluded that 'education strategies need to focus on individual, societal and environmental aspects'. They explained that the while targeted individual intervention is necessary, a focus on the whole population should not be forgotten. This approach is evident in the *Draft ANU Mental Health Strategy 2013-15* where an emphasis has been placed on targeting all staff and students for 'Mental Health Awareness and Literacy' and developing 'Supportive Inclusive Campus Climate and Culture' (ANU Mental Health Working Party 2013).

The identified effectiveness of pastoral care teams in ANU campus communities also supported the importance of helping students engage with intrapersonal and community communication networks. Another example where social networks have been effective is in the increased mental health literacy of B&G students, it is thought this might be related to an increase in international students seeking help (Muhammad Taufiq bin Suraidi, ISD). A study conducted by Potvin-Boucher et al. (2010) evaluating the results of a mental health literacy program on postsecondary students found that the majority of participants discussed the program with a friend. The power of social networks to engage students in health and wellbeing behaviours is valuable. Developing strategies to engage off campus students is a worthwhile priority for improving the effectiveness of current health and wellbeing communication at ANU.

Increased collaboration between groups, services and academic colleges

ANU stakeholders emphasised the effectiveness of working with other groups, services and academic colleges and many suggested a willingness to work with academic colleges in the future. There were also suggestions that a culture that develops the links between academic success and health should be encouraged. The idea of developing a culture around health and wellbeing supports the ecological perspective that explains how community level influences are important on individual health and wellbeing.

In the university setting, evidence exists demonstrating the link between student academic performance and their health and wellbeing. A study of 30 entry level students at a public university showed that mental health was integral to students' health risk behaviours, academic performance and overall wellbeing (McDermott 2008). In practice this link has also long been apparent to university student support and service providers. Shroeder (1999, p.16) showed that a number of effective educational partnerships between academic and student affairs improved student satisfaction and academic achievement as well as enhanced students cognitive and psychosocial development. By fostering student academic and social integration students become more confident in seeking help; this is evident in the experiences shared by representatives of B&G and Griffin Hall. The common difficulty of getting health and wellbeing messages to off campus students because they are less engaged also exemplifies this point.

Dr Laura-Anne Bull (DSS) explained that the academic strength of ANU is a challenge for communication between areas of the university. This is supported by research by Shroeder (1999, p. 9) who explains that 'specialisation often results in functional silos or mine shafts which has the effect of curtailing communication and collaboration between areas'. Although this challenge is apparent at ANU, there is significant literature supporting the effective implementation of health, wellbeing and student support messages into academic areas.

Frost (2010) reviews the current literature on successful collaborations between student services and academic areas in higher education, and demonstrates the variety of options available to universities. Successful collaborations have included first year experience programs which include things such as orientation programs, first year seminars that include time management and using support services and various forms of peer assisted learning programs. Other collaborations grouped students into learning communities that meet regularly with peers and integrated aspects of student life into courses. Another effective type of collaboration was 'service learning' where students are given opportunities to apply skills and knowledge in practical ways within the university leading to a greater sense of community (Frost 2010, p. 42). An additional way academic colleges, groups and services could collaborate is by using course structures to target the timing of communicating health and wellbeing messages to students. Penn-Edwards et al. (2013) explain that in their experiences and from conducting focus groups, student engagement with universities does not necessarily operate on a semester cycle but instead on smaller assessment cycles. Therefore the current focus by stakeholders on promoting messages at different times of the semester may not be targeting students as intended. Instead collaboration with academic colleges on a course scale may have the potential to be more effective in targeting this communication.

The strength of collaboration between groups, services and academic colleges is that it targets communication to students where students are already most engaged with the university. By targeting students in their courses these types of strategies provide opportunities for students to create strong social networks that in general increase student self-efficacy and therefore overall wellbeing. Collaboration with academic colleges is a communication strategy that stakeholders at ANU are yet actively engaging in. Based on the literature there are a range of options that could be explored.

Conclusions and Recommendations

Currently different ANU stakeholders are trying to communicate a range of differing and overlapping health and wellbeing messages to students. Each group uses its own range of tactics to communicate these messages. Some of these tactics are employed more strategically than others. Overall students are being exposed to a range of messages simultaneously and through a variety of different channels.

Stakeholders identified using multiple channels, face-to-face interactions, targeting messages, collaborating with other groups and developing student communities as the most effective strategies currently being used. This is consistent with the ecological perspective of health promotion which acknowledges that effective communication interacts with students on an individual, intrapersonal and community level.

The most common challenges experienced by stakeholders include message dilution, messages being irrelevant and untimely, reaching off-campus students, existing culture and stigma, and resource limitations.

In general, stakeholders would like to see broader messages communicated with students that develop the links between academic success and health as well as encourage help seeking behaviour. There is also a concern that more communication is needed to raise mental health awareness and other overlooked areas of health, including sexual health and attitudes.

Strategies stakeholders believe could be used more effectively are increased collaboration and centralisation of communication delivery, more effective and creative uses of online channels, increased development of peer support networks and working more closely with academic colleges.

Effective implementation of these ideas will require greater coordination and the development of a more comprehensive communication strategy that focuses on these identified strengths and is deliberately designed to tackle the common challenges.

Recommendations

It is evident that health and wellbeing communication with ANU students could be enhanced. Based on the experiences of stakeholders and the health promotion literature, an effective strategy should aim to achieve the following:

- Consult with diverse groups of students to gain an understanding of how to more effectively target communication. For example running a series of focus groups.
- Focus on students' intrapersonal and community interactions explore possibilities for integrating this into their academic experiences.
- Develop structures that support increased collaboration between groups, services and academic colleges.
- Collaboratively develop an online health and wellbeing environment. With an awareness of the ongoing development of CMHR's Virtual Clinic.
- Share ongoing evaluation of new communication strategies and tactics.

References

ANU Mental Health Working Party. 2013. Draft ANU Mental Health Strategy 2013-15. Unpublished document. Submitted to the University Education Committee, October 2013.

Frost, Robert A; Strom, Stephen L; Downey, JoAnna; Schlutz, Deanna D. and Holand, Teresa A. 2010. 'Enhancing student learning with academic and student affairs collaboration'. *The Community College Enterprise*, Spring 2010, pp. 37-51.

Kalra, G; Christodoulou, G; Tsipas, V; Christodoulou, N; Lecic-Tosevski, D; Mezzich, J and Bhurga, D. 2012. 'Mental health promotion: Guidance and strategies'. *European Psychiatry*, vol. 27, pp. 81-86.

Krueter, Matthew W. and Wray, Ricardo J. 2003. 'Tailored and Targeted Health Communication: Strategies for Enhancing Information Relevance'. *American Journal of Health Behaviour*, vol. 27, no. 3, pp. 227-232.

McDermott, Jeanine S. 2008. Explicating Global Wellbeing in College Students Using Health Risk Behaviours and Adjustment to College. The University of North Dakot. ProQuest. UMI Dissertations Publishing, 3353634. Retrieved online fromhttp://search.proquest.com/docview/304538327?accountid=8330.

National Cancer Institute. 2005. *Theory at a Glance: A Guide For Health Promotion Practice (Second Edition)*. Viewed online 26th September, http://www.cancer.gov/cancertopics/cancerlibrary/theory.pdf>.

Noar, Seth M; Harrington, Nancy Grant; Van Stee, Stephanie K. and Aldrich, Rosaline Shermanski. 2011. 'Tailored Health Communication to Change Lifestyle Behaviors', *American Journal of Lifestyle Medicine*, vol. 5, pp. 112-122.

Penn-Edwards, Sorrel and Donnison, Sharn. 2013. 'Engaging with Higher Education Academic Support: a first year student teacher transition model'. *European Journal of Education*, vol. 46, no. 4, pp. 566-580.

Potvin-Boucher, Jacqueline; Szumilar, Magdelana; Sheikh, Tadbinda and Kutcher, Stan. 2010. "Transitions: A Mental Health Literacy Program for Postsecondary Students'. *Journal of College Student Development*, vol. 51, no. 6, pp. 723-727.

Shroeder, C. C. 1999. 'Partnerships: An Imperative for enhancing student learning and institutional effectiveness'. *New Directions for Student Services*, vol. 87, pp. 5-18.

Von Ah, Diane; Ebert, Sheryl; Ngamvitroj, Anchalee; Park, Najin and Kang, Duck-Hee. 2004. 'Predictors of health behaviour in college students'. *Journal of Advanced Nursing*, vol. 48, no. 5, pp. 463-474.

Appendix A: Interview Questions

- 1. What health and/or wellbeing related messages do your group/service attempt to community to ANU students?
- 2. Who are your target audiences for these messages?
- 3. How do you attempt to reach these audiences? (e.g. mediums, materials, channels, timing)
- 4. In your experience how effective have these communication strategies been in communicating your messages to your target?
- 5. Why do you think these strategies were successful/ unsuccessful? What challenges are there?
- 6. Do you have any formal or informal strategies in place to evaluate your current communications?
- 7. Are there any other relevant health/wellbeing messages that you believe should be communicated to students?
- 8. What limits your service/group from doing this? Do you have any ideas how these messages could be communicated at ANU in the future?

Appendix B: List of Interviewees

Brady, Michael. Chief Executive Officer, ANU Sport and Recreation Association. Interviewed on 25th October 2013.

Bull, Laura-Anne. Registrar Student Services, Division of Student Services. Interviewed on 30th October 2013.

Farrer, Lou. Centre for Mental Health Research. Interviewed on 21st October 2013.

Fernie, Andrew. Manager, University Health Centre. Interviewed on 18th October 2013.

Harrison, Julie. Operation Manager, Disability Services. Interviewed on 24th October 2013.

Joseph, Wayne. Student Welfare Advisor, ANU Postgraduate and Research Students' Association. 2013. Interviewed on 16th October 2013.

McLeod, Heather. Head, University Counselling Centre. 2013. Interviewed by Amanda Tully on 17th October 2013.

Morgain, Oscar. President, Griffin Hall Members Committee. Interviewed by Amanda Tully on 8th November 2013.

Segal, David. Deputy Head, Burton and Garran Hall. Interviewed on 21st October 2013.

Sladojevic, Aleks. President ANU Students' Association. Interviewed on 21st October 2013.

Snailham, Kate. Burton and Garran Hall Members Association President. Interviewed on $23^{\rm rd}$ October 2013.

Suraidi, Muhammad Taufiq bin. President International Students Department and ANUSA International Students' Officer. Interviewed on 11th November 2013.

Wilkinson, Matthew, UniLodge Assistant General Manager & Undisclosed, UniLodge Acting Residential Life Manager. Interviewed on 8th November 2013.