**HEALTHY CAMPUS CASE STUDY**

<table>
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<tr>
<th><strong>Name of Institution</strong></th>
<th>Munster Technological University (Cork Campuses)</th>
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| **Who led the initiative?** | This case* study will describe the design, implementation, and impact of a baseline programme of research aligned with a ‘Healthy Campus’ initiative at MTU (*case setting refers to the Cork Campuses of MTU, which collectively constitute the former Cork Institute of Technology).  
This research was led by an Academic Team (one PhD candidate and two Academic Supervisors) within the Dept. of Sport, Leisure & Childhood Studies at Munster Technological University (Bishopstown Campus). The proposed case study presentation will comprise pertinent excerpts from this research, in addition to a discussion of the key recommendations for practice and policy arising from same. |
| **Date and timeframe of the initiative** | 2016 to 2022  
Note that this baseline research has served as the foundation for a series of externally funded projects and collaborations (as outlined further below). |
| **What was the reach of the initiative?** | The baseline phase of research engaged with the following participants:  
- Quantitative Phase: comprehensive student (n=2,267) and staff (n=279) datasets.  
- Qualitative Phase: in-depth qualitative sessions (i.e., either semi-structured interviews, dyadic interviews, or focus groups) with 34 cross-campus stakeholders (including Senior Management, Professional Management & Support Staff [PMSS], Post-graduate Students, Undergraduate Students, Alumni). |
| **Initiative Title** | ‘A Healthy MTU’  
A Mixed Methods Baseline Needs Analysis to Empirically Inform a Campus Health Promotion Initiative within an Irish Higher Education Setting |
| **Aims/ Objectives** | The overarching aims were to (i) investigate student and staff health metrics, and (ii) identify the cultural and environmental determinants of health and wellbeing within the case* HEI setting (*Cork campuses of Munster Technological University). |
In its entirety, the programme of research was comprised of five sequential studies, each of which was conceptualized to achieve distinct research objectives as follows:

1. **Study One** (Bickerdike et al., 2019)
   - Investigate students’ health and lifestyle parameters
   - Identify significant predictors of students’ positive mental health

2. **Study Two** (Bickerdike et al., 2022)
   - Explore the health and lifestyle parameters of staff
   - Determine whether significant differences in key organizational (self-reported absenteeism, length of service, weekly working hours) and public-health metrics of interest (BMI, perceived stress) exist between staff who exhibit the ‘healthiest’ clustered lifestyle patterns, relative to staff exhibiting less optimal lifestyles

3. **Study Three**
   - Comparatively analyze the cumulative health risk, and self-perceived metrics, reported by students and staff of the case HEI

4. **Study Four**
   - Qualitatively examine the lived experiences of students and staff to identify extant barriers to, and/or facilitators of, health and wellbeing under the remit of the case HEI
   - Triangulate these qualitative data with previous quantitative findings from the research to derive a comprehensive ecological model of both overt and latent determinants of health and wellbeing, tailored to the case HEI setting

5. **Study Five**
   - Elicit and explore student and staff perceptions regarding optimal operational structures, resourcing model(s) and the feasible scope of a campus HP initiative within the case HEI
   - Similarly, to previous work (Dooris et al., 2010; Dooris et al., 2020), identify any latent ‘drivers’ and/or internal synergies that could serve to progress the implementation of a Healthy University-aligned campus health promotion initiative, within the operational ecosystem of the case HEI

The rationale for the action, including any identified health needs

The rationale for this research was to ensure the prudent and cost-effective allocation of resources to strategically develop a campus health promotion initiative in Ireland. In light of ongoing funding constraints within the higher education sector, the research team were cognisant of the requirement for empirical evidence to substantiate Senior Management endorsement of a long-term, transformative health promotion approach to embed health across all facets of the case HEI (Okanagan Charter, 2015). The scale and
breadth of this triphasic, mixed-methods research (five sequential empirical studies from which two pertinent practice models were derived) aimed to constitute a novel contribution to literature and practice.

In addition, in order to ensure translation to practice, quantitative and qualitative data were triangulated, to derive a setting-specific model of the determinants of health and wellbeing within the case HEI. This translational output will serve as an empirical guide for higher education stakeholders, whilst also providing a structural template to guide the ecological mapping, implementation, and/or evaluation of related activities as part of macro-level Healthy Campus strategies.

| Identify all frameworks, policies, or strategies this initiative aligns to (Internal, local or national) | • Okanagan Charter for Health Promoting Universities and Colleges  
• Irish Healthy Campus Charter and Framework  

Aligned national, sectoral, and/or intra-institutional policies and agendas, including:  
• Ottawa Charter for Health Promotion  
• HEA National Student Mental Health and Suicide Prevention Framework  
• Student Sport Ireland  
• HEA System Performance Framework  
• Healthy Ireland Strategic Action Plan 2021-2025  
• Healthy Ireland at Work (National Framework for Healthy Workplaces in Ireland)  
• National Forum for the Enhancement of Teaching and Learning in Higher Education (e.g., DELTA Awards, enabling success through student transitions, embedding wellbeing within the curriculum)  
• Athena Swan  
• EDI policies at institutional, sectoral and national level  
• HR policies (institutional, sectoral, national) |

| Summary | Research Abstract (Bickerdike, 2023).  
Higher Education Institutions (HEIs) have been called to lead global health promotion actions, yet there remains a dearth of empirically informed ‘Healthy Campus’ (HC) initiatives. This research constituted a baseline mixed methods needs assessment to inform a settings-based health promotion (HP) initiative (‘A Healthy MTU’) within a multi-campus ‘case’ HEI in Ireland (Cork campuses of MTU, formerly CIT). Using a phased, mixed methodology (QUAN-QUAL), five sequential empirical studies were undertaken.  
Quantitative data was gathered using two web-based health and wellbeing questionnaire instruments, tailored and disseminated to each respective cohort (N=11,261 students, N=1,705 staff). Qualitative analyses encompassed |
a novel comparative discussion of student and staff health challenges, in addition to thematic analysis of data gathered from a purposive sample of cross-HEI stakeholders (16 semi-structured interviews, 6 focus groups).

In total, 2,267 (20.1% response rate) and 279 (16.4% response rate) responses were received to the student and staff questionnaire instruments, respectively. Concerning quantitative metrics were reported by both cohorts, including low energy/vitality (83.7% of students and 83.0% of staff), insufficient sleep (79.3% students, 82.2% staff), indicators of sub-optimal nutrition (74.9% students, 62.1% staff <5 daily servings of fruit and vegetables), and excessive sitting time (65.7% of students, 60.8% of staff). Moreover, health and lifestyle metrics appeared associated with explicit organisational priorities, such as students’ mental health (8 variables predicted 37% of the variance in positive mental health scores), and staff absenteeism (significantly greater stress and absenteeism amongst the least healthy clustered group of staff versus a ‘healthy lifestyle’ cluster).

Thematic analyses revealed a multitude of ecological barriers to health within an increasingly pressurised higher education environment. Triangulation of participants’ phenomenological experiences with quantitative data enabled the empirical derivation of two practitioner-focused models that will serve to inform (i) the ecological evaluation of HP interventions and activities within HEI settings, and (ii) the operational delivery of a settings-based campus HP initiative within the complex ecosystem of the case HEI. This research will be of interest to stakeholders within HEIs and large organisational settings, whilst concurrently serving to underpin the design and evaluation of multi-component (individual and environmental) strategies to maximise and measure the impact of ‘A Healthy MTU’.

The above is an excerpt from the following PhD Thesis:

<table>
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<tr>
<th>Did you collaborate with internal and/or external stakeholders to deliver?</th>
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<tr>
<td><strong>Internal stakeholders:</strong></td>
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<tr>
<td>• Student participants</td>
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<tr>
<td>• Staff participants</td>
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<td>• Note that a myriad of cross-campus stakeholders participated in the qualitative data collection (Senior Management, Faculty, Professional Management and Support Staff [PMSS], Post-Graduate Students, Alumni and Undergraduate Students).</td>
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This research was continuously endorsed and supported by (i) the Registrar’s Office of the case HEI (Cork Campuses of MTU), (ii) ‘AnSEO’ (MTU Cork Office
of Student Engagement), and (iii) Dept. of Sport, Leisure & Childhood Studies.

| **How was the initiative organised?** | The present concept of campus health promotion within the ‘case’ HEI initially emerged in 2014 as a student engagement and retention initiative entitled ‘A Healthy CIT’. In the absence of a dedicated health promotion human resource, the Department of Sport, Leisure & Childhood Studies (SLCS) was requested to contribute expertise to establish, and strategically develop this proposed entity. In 2015, it was decided that this contribution would comprise of a baseline needs assessment to inform ‘A Healthy CIT’, endorsed and supported by the Office of the Registrar of the former CIT. It was agreed that a PhD Candidate (guided by Academic Supervisors) would, where possible, assume a quasi-embedded role to implement campus-based health promotion activities and advocacy as an adjunct to this research process. |
| **What resources did you need?** | The initiative drew upon the research expertise, infrastructure and ecosystem of both the Dept. and indeed the broader university. |
| **Has it been evaluated? How successful has it been?** | Elements of the research have been published and disseminated in multiple fora (peer-reviewed journals, global symposia, conferences, newsletters etc.) In the ongoing absence of a designated campus health promotion human resource, the Academic Team continues to contribute to, and attend events by the HEA National Healthy Campus Network. |
| **Any future plans, including the sustainability of the initiative?** | This baseline research has served as the foundation for notable external funding awards, postgraduate registrations, and research collaborations including:  
- 2 x additional PhD registrations  
- 1 x MSc registration  
- 15 undergraduate dissertation projects (plus 3 currently in completion)  
- €135K SFI research funding  
- €144k Technological Universities’ Transformation Funding  
- Current novel collaboration with Colleagues in UCC to undertake a regional gap analysis to inform the implementation of the Irish Healthy Campus Framework in both UCC and MTU. |
| **Key Learning Points** | As a key learning point, it emerged that greater structural empowerment of health and wellbeing is required within contemporary HEIs in Ireland. It was notable that both students and staff qualitatively described universal |
ideological support for the promotion of health and wellbeing, and wholly appreciated the intricate associations between health, happiness, academic achievement, social belonging, and quality of life. However, fundamental socio-ecological and indeed sectoral barriers appeared to impact upon the campus population’s collective capacity and agency to habitually engage in health promoting behaviors.

### Healthy Campus Framework Categories (please tick all that apply)

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<thead>
<tr>
<th>Healthy Campus Process</th>
<th>Whole Campus Approach</th>
<th>Topic</th>
<th>Population Group</th>
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<tbody>
<tr>
<td>Commit ☐</td>
<td>Leadership, Strategy &amp; Governance ☐</td>
<td>Alcohol ☒</td>
<td>Students ☒</td>
</tr>
<tr>
<td>Coordinate ☐</td>
<td>Campus Environment (Facilities &amp; Services) ☒</td>
<td>Substance Misuse ☒</td>
<td>Staff ☒</td>
</tr>
<tr>
<td>Consult ☒</td>
<td>Campus Culture &amp; Communications ☒</td>
<td>Healthy Eating / Food ☒</td>
<td>Wider community ☐</td>
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<tr>
<td>Create ☐</td>
<td>Personal &amp; Professional Development ☒</td>
<td>Mental Health &amp; Wellbeing ☒</td>
<td>Other ☐</td>
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<tr>
<td>Celebrate &amp; Continue ☐</td>
<td>Sexual Health &amp; Wellbeing ☒</td>
<td>Tobacco Free Campus ☐</td>
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<td></td>
<td>Physical Activity / Active Transport ☒</td>
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<td>Wellbeing on the Curriculum ☒</td>
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Contact Details

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<thead>
<tr>
<th>Contact Name/s</th>
<th>Dr Andrea Bickerdike</th>
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<tr>
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<td>29/03/2023</td>
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References


