

IMPLEMENTING SMART GOAL-DRIVEN, INTEGRATED HEALTH IMPROVEMENT PROJECTS IN COLLEGE STUDENTS

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Abstract

College students face a unique set of health challenges, including increased stress, poor dietary habits, sedentary lifestyles, and limited access to mental health resources. Given that health and wellness consist of multiple dynamic dimensions, multifaceted interventions aimed at enhancing the physical and mental well-being of students are necessary. Research has indicated that integrated approaches combining physical activity, mental health education, and accessible support services are essential for fostering long-term wellness among college students. Implementing evidence-based programs that promote resilience, academic success, and holistic health can have a profound impact. On the personal level, college students can improve their health by making small, consistent changes across several areas of their lives. Our freshman-level Personal Health & Wellness course (HED 132) gives them an opportunity to choose a specific thing they wish to improve over the course of the semester and apply what they have learned in the classroom to develop a detailed plan of action. The project is described as follows: Set a realistic but challenging goal that you feel you could reach by the end of the semester (make sure it's S.M.A.R.T.); Using at least three professional references (your text doesn't count), construct a 2-3 page rationale for your project (why are you doing this?). Explain the benefits to be gained and the scientific principles related to the improvement of your health status; Write a specific plan of action you will follow to meet your goal with enough detail so that anyone could do it; Record your progress in a journal (weekly entries; at least 10 total); and Write a final evaluation of your project based on your journal entries. Components are collected throughout the semester: behavior/attitude and goal, rationale with 3 sources cited, plan of action, journal entries, and final evaluation. The purpose of this paper is to describe how we help students apply what they have learned to a systematic plan for improving their health and to share student feedback regarding the project. We believe this approach is applicable to any personal health and wellness course.

Keywords: *Personal health, wellness, behavior change.*

1. Introduction

College students continue to experience significant and multifaceted health challenges that affect their physical, emotional, and academic well-being. These include, but are not limited to, high stress levels, poor nutrition, and inactivity, all contributing to compromised well-being and academic performance. Recent systematic evidence and campus pilot work indicate widespread psychological distress, with many students reporting moderate to severe stress and clinically significant symptoms of anxiety or depression, trends that intensified post-pandemic (Taylor et al., 2024; Futch et al., 2025). These challenges are compounded by unhealthy behaviors such as poor sleep hygiene, excessive screen time, and substance use, which negatively impact mental health and academic success.

Recent national surveillance reports underscore the persistent burden of mental health concerns in this population. The 2024–2025 Healthy Minds Study, one of the most comprehensive annual assessments of student well-being, found that 37% of students reported moderate to severe depressive symptoms, while 32% experienced moderate to severe anxiety, and 11% reported suicidal ideation in the past year. These challenges, combined with feelings of isolation—reported by one in four students—highlight the continuing urgency of addressing mental health as a priority within higher education (University of Michigan School of Public Health, 2025).

Additional data from the American College Health Association's Fall 2024 National College Health Assessment (NCHA) reinforce these concerns. Among more than 30,000 students surveyed, 30% reported that anxiety negatively affected their academic performance, over 75% reported inadequate sleep (fewer than eight hours on weeknights), and nearly 60% spent six or more hours per week on social media,

a behavior associated with increased stress and reduced academic focus. These findings demonstrate that lifestyle factors—such as sleep patterns, screen time, and daily stressors—play a critical role in shaping student wellness (American College Health Association, 2025).

Despite these serious concerns, some encouraging trends have emerged. According to the 2025 Healthy Minds Study, rates of depression, anxiety, and suicidal ideation have declined for the third consecutive year, with severe depression decreasing from 23% in 2022 to 18% in 2025, and suicidal thoughts dropping from 15% to 11% during the same period. Researchers suggest that improved institutional support, increased awareness, and reduced pandemic-related disruptions may be contributing factors. However, experts emphasize that even with this progress, mental health concerns remain widespread and continue to require institutional attention and action (University of Michigan School of Public Health, 2025).

Collectively, these data illustrate the complex and interconnected health issues faced by today's college students. Stress, mental issues, sleep deprivation, digital overuse, and academic pressures interact to create significant barriers to well-being. These realities underscore the importance of integrated health education, proactive wellness initiatives, and evidence-based behavior-change frameworks for helping students acquire the knowledge, self-regulation skills, and support structures needed to improve their health.

Research has shown integrated interventions that combine physical activity, mental health literacy, and structured goal-setting align with health improvement priorities. These strategies have demonstrated effectiveness in improving resilience and holistic wellness among college populations (Donnelly et al., 2024; Bahrami et al., 2022).

A systematic review of college-based physical activity interventions found that over half produced significant improvements in anxiety, depression, and stress—particularly with moderate-to-vigorous activities such as Pilates and dance (Donnelly et al., 2024). Integrating wellness education into academic courses improves students' self-awareness and self-efficacy. Pairing these curricula with SMART-goal frameworks and digital tracking tools further strengthens adherence and self-regulation (Martins van Jaarsveld et al., 2024). Emerging evidence also highlights the role of technology-assisted strategies, such as mobile apps and wearable devices, in enhancing engagement and accountability, making these interventions increasingly relevant in higher education contexts (Tanasyah et al., 2025; Strout et al., 2023).

2. SMART Goals

SMART-goal projects foster autonomy and competence—key components of self-determination theory. As such, they can lead to sustained behavior change and improved psychological well-being (Martins van Jaarsveld et al., 2024; Bahrami et al., 2022). SMART goals provide a clear process for translating intentions into measurable actions. A 2010–2024 systematic review of 60 higher-education studies found that goal-setting—frequently operationalized with SMART criteria—supports self-regulated learning and academic outcomes, especially when coupled with digital monitoring tools (Martins van Jaarsveld et al., 2024). An experimental study with university students showed that receiving SMART-goal instructions led to higher goal attainment and greater psychological need satisfaction (autonomy, competence, relatedness) relative to controls, aligning with self-determination theory pathways (Bahrami et al., 2022).

In a mixed-methods analysis of 1,704 university students using a digital platform, the goal-setting component was the most frequently used; most goals targeted physical activity, diet, and mental health. While goal-setting alone did not consistently predict outcomes, the study underscored the importance of goal quality and engagement—key considerations when teaching SMART goal-writing (Åsberg et al., 2025). A multi-university study integrating SMART goals with reflective planning and growth-mindset activities found higher perceived success, motivation, and engagement among students; learners reported that SMART goals improved clarity, accountability, and confidence in tracking progress (Poe et al., 2021). SMART goals align well with the Transtheoretical Model: students in the preparation and action stages benefit from translating intentions into specific, measurable steps (Stanford Student Affairs, 2023).

3. Project Design and Methods

At the beginning of the semester, students in the Personal Health & Wellness course (HED 132) complete the "Healthstyle: A Self-Test" self-assessment instrument which includes seven dimensions of health: physical, social, emotional, environmental, spiritual, intellectual, and occupational. They rate themselves on each dimension using a 4-point Likert scale: 1 = rarely if ever, 2 = sometimes, 3 = most of the time, or 4 = always (Kotecki & Thomas, 2007). They then write a 1-page reflective report describing the areas in which they are doing well and those in which they could improve, including examples of specific things they could do to improve their health status. Their responses provide some ideas for their

Health Improvement Project for which they choose a specific thing they wish to improve over the course of the semester. The project has 5 components: 1) the specific attitude or behavior they wish to focus on goal, 2) rationale, 3) plan of action, 4) weekly journals, and 5) final evaluation.

At project outset, students identify the health dimension they want to work on and formulate a specific, measurable, achievable, realistic, and timely (SMART) goal to address a targeted area of their health (e.g., increase daily steps, improve sleep quality, manage stress, improve nutrition). Students then construct a 2-3 page rationale for their project that explains the benefits to be gained and the scientific principles related to the improvement of their health status. This includes at least three scholarly/peer-reviewed references cited in APA format. They then create a specific, detailed, step-by-step action plan with enough detail to allow replication by others (e.g., 30-minute walks five times per week, 20-minute mindfulness sessions three times weekly, 3-5 servings of fresh vegetables each day). Throughout the 10-week project, students keep a weekly journal to monitor behavior, reflect on progress, and address challenges. At the end of the semester, students synthesize journal information, assess goal attainment, reflect on attitude and behavioral changes, and suggest next steps in their final evaluation.

4. Discussion

Anecdotal evidence was collected in four semesters: Fall 2022 (27 students), Fall 2023 (25 students), Fall 2024 (23 students), and Fall 2025 (18 students). Topics represented a wide variety of health dimensions and approaches: physical health (weight loss, weight gain, decrease body fat percentage, increase exercise/physical activity via walking, running, weight training, sleep quality), nutrition (increasing whole fruits & vegetables, water intake, portion size, meal prep, limiting alcohol use), emotional/mental health (stress/anxiety management, anger management, time management, procrastination, self-esteem) spiritual health (meditation, mindfulness practice, yoga, personal affirmations, values clarification) intellectual health (improving study habits, increasing GPA), social health (increasing participation in social events, improving communication in relationships), and environmental health (recycling, campus cleanups, water conservation, energy conservation).

Overall, students were mostly successful in meeting their goals. Those who did not were able to achieve some success in working toward their goal (“I wasn’t as consistent as I wanted to be but I did start to work and gain a better mindset as to what working out can do for me.”). Feedback on the final evaluations indicated that students saw improvement in self-confidence, self-awareness & self-efficacy (“By the end of the project, I had experienced positive effects on my energy levels and overall well-being.”, “I ended up making new friends, going out more and feeling comfortable in my own skin, and I’m currently the happiest I’ve been in a while.”). Many found that working on one thing led to other improvements (ex.: working on core strength led to reduced pain, stress, and anxiety – all of which contributed to better sleep; or working on nutrition and improving in physical activity & stress management).

Main challenges are centered around consistency, commitment, work-life balance, motivation, and adherence. Many found that the “buddy system” or having a friend to work with contributed to greater success. Some who were resistant at first found it to be fun and worthwhile (“I never would have tried this if I didn’t have to and I’m glad I did”, “I reaped many benefits from this health improvement project, and I am very glad I stepped to the plate and took up this challenging task.”). Others planned to continue their work (“I would say that this Journey has inspired my lifelong commitment to making my mental health one of my top priorities not only to ensure stability, but to keep me healthy.”, “I would say that I have improved but also that I can keep improving”, “I’m proud of the changes I’ve made and the changes to come.”, “Thank you for allowing me to better myself.”). Several alluded to unexpected insights (“Ultimately, the takeaway from these journal entries is that change is not linear; it’s a series of ups and downs.” “This experience showed me that small, consistent actions can lead to meaningful improvements in both mental and physical well-being.”)

5. Conclusion

The HED 132 Health Improvement Project operationalizes best practices in collegiate health promotion by combining behavior-change instruction, mental health literacy, and measurable goal-setting via SMART criteria. The evidence base supports three practical design choices reflected in this project: (1) specificity and structure through SMART goals to enhance clarity, self-regulation, and psychological need satisfaction; (2) integration with curricula to create accountability and transfer of knowledge; and (3) ongoing support & reflection to increase engagement and adherence. Together, these components comprise an effective and attainable health behavior change process.

Implementing a SMART-goal-driven, integrative health improvement project within first-year wellness courses represents an effective experiential learning model. It reinforces evidence-based behavior-change techniques, leverages support systems for adherence, and fosters durable personal wellness habits that align with institutional priorities for student success. This framework is adaptable across diverse health promotion courses and student populations. Next steps include a “deeper dive” into qualitative data analysis and to gather more quantitative data.

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