

University of Washington, Seattle Services & Activities Fee Fiscal Year 2026 Budget Request



LiveWell

Unit Leads

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Budget Request Highlights

In this section, please list all line items for any changes in request amount greater than \$1000, along with a short description of each line item and the amount requested. For all other changes under \$1000, please list the total summed figures in a final "miscellaneous expenses" item at the bottom. Please ensure that all the SAF funded line items below and previous SAF allocation total add up to the requested amount. Our goal with this section is to provide an overview of the current financial state, along with any changes in SAF funding that are being requested this year.

Each unit's FY26 request may only represent a maximum increase of 6% or \$35,000 over the unit's allocation for FY25 (whichever is higher in context of the unit's FY25 allocation).

While we would love to fund everyone's full request, SAF is financially constrained by the Washington State Legislature. RCW 28B.15.069 limits the amount that the Services and Activities Fee (SAF) is allowed to increase each year. For FY26, the SAF amount can be increased by a maximum of 3.55%.

Our unit's request in FY22 was \$176,482 and our award was \$176,482.

Our unit's request in FY23 was \$183,385 and our award was \$183,385.

Our request in FY24 was \$194,793 and our award was \$187,921.

Our unit's request in FY25 was \$234,955 and our award was \$213,552.

Our request for FY26 is \$248,552, which represents a 16% increase (\$35,000) from FY25.

In this section please break each increase into its own sections (i.e. standard wage & benefits, increase in current employee hours/FTE, funding new positions, etc.).

Since 2019, the Peer Health Education program has grown to have a wider role in campus health promotion and risk-reduction education. Recent increases include growth in classroom presentations, Greek Chapter Requirement education, and facilitating first year,

transfer, and international student orientation sessions for the Health & Wellness section of Orientation. Our health promotion programming provides [evidence based educational workshops](#) on over 13 health topics to the UW Community. These presentations include education on: substance use, mental health, sex and relationships, media literacy, sleep, bystander intervention, and more.

Additionally, the Peer Health Educators organize programs and events related to collegiate health topics throughout the year and implement social norms campaigns designed to convey positive messages that educate students about healthy behaviors and attitudes, as well as to correct misconceptions regarding social norms, all aimed at promoting healthier choices.

Peer Wellness Coaching was added in 2021 as an educational, early intervention service for all students who want 1-1 peer support on health related topics. Peer Wellness Coaching is a higher level of peer education that requires additional staff time and training.

Wage & Benefits Increases:

\$12,813

The university is projecting a 3% merit increase for professional staff, and we are estimating a 4% increase to minimum wage in January 2026. Benefit load rates are projected to remain the same, at 30.3% for professional staff and 23% for student staff.

Peer Health Education Supervisor Position:

\$22,187

To meet the growing demands of our expanded Peer Wellness Coaching services, which require additional training and supervision, we have introduced the role of Peer Health Educator Supervisor. This position is currently filled by a graduate student (who graduated from our PHE Program) and is tasked with overseeing the daily operations of the Peer Health Educators. Responsibilities include providing leadership and mentorship to current Peer Health Education programs and educational services, as well as managing the workshop scheduling system and peer groups.

Moreover, this role establishes a potential leadership development pathway for graduating Peer Health Educators who intend to pursue further studies in graduate or professional tracks, enabling them to acquire valuable managerial experience while mentoring the next generation of Peer Health Educators. This structure also allows the Assistant Director of LiveWell to focus on the growth and enhancement of the Peer Wellness Coaching program,

which necessitates a significant commitment for training and ongoing supervision above and beyond the current PHE training program.

Current funding for this position is derived from one time LiveWell salary recapture funds, which have enabled us to assess its impact effectively. We are requesting partial funding to support a segment of this position for the 2025-2026 cycle.

1. **How are expenditures distributed across the programs and/or services your unit offers? Please provide a general overview of how much spending is allocated to each category of expense, such as staffing, materials, etc., as is applicable.**

Within our SAF budget, 90% of funding is spent on salaries and hourly wages. This includes the FTE Suicide Intervention Program Staff position and the student hourly positions for Peer Health Educators and Peer Wellness Coaches. 10% is spent on operating expenses for Peer Health Education.

2. **Please give a summary elaborating on how SAF Funding has been used to support students** *(Please refer to dollar amounts in this discussion when possible).*

1. In what ways has SAF funding been essential to supporting your unit's on-going services and role in the university? Please provide at least one specific example of a program/service.

SAF funding serves as a crucial resource for health promotion education on campus. Peer Health Educators conduct educational workshops equipping our campus community with evidence informed content delivered by well-trained peers who receive this professional training and guidance from subject matter experts. This funding offers numerous advantages to students at UW; it not only supports high-quality education on essential health topics but also creates opportunities for leadership development, practicum work, and workplace experience for students.

Peer Health Educators (PHEs) are involved in First Year, Transfer, and International Orientations, provide workshops across campus, and facilitate events and programs on a range of health and wellness topics. Through the Peer Health Education program, students engage in collegiate-level education within an interactive environment, fostering hands-on development that extends well beyond their academic experience.

Specific examples: Peer Health Educators deliver essential educational content related to key [college health initiatives](#). The educational content delivered during Orientation is directly aligned with best practices identified by the [American College Health Association](#). Additionally, PHEs offer substance use, media literacy, mental health, sexual assault prevention, and hazing education.

Newer initiatives and programs include:

- [Naloxone educational workshops](#) and social media campaigns to help raise awareness and reduce opioid overdose and deaths.
- Hazing education in collaboration with the Community Standards and Student Conduct office related to [Sam's Law](#).
- Educational Peer Groups created out of the [Body Project](#) which has been shown by extensive research to help prevent eating disorders for up to three years post engagement.
- Summer 2025: The Peer Health Educators will begin facilitating a mandatory part 3 of A&O working in conjunction with [Provost's Dialogue Initiative](#) focusing on civic engagement, communication skills, and interpersonal effectiveness highlighted in the Huskies Have Difficult Conversations and Media Literacy campaign.

SAF funding also supports the [Suicide Intervention Program](#) (SIP) that connects high-risk students to counseling and other services with the goal of safety, stability, and support. This program is essential in getting students connected to resources on campus and in the community. The Suicide Intervention Program actively reaches out to students who come to the attention of the University through various referral channels like: Safe Campus, faculty, and peers. The SIP program provides assessment and connection to campus services at no cost to the student. Students who are enrolled in the SIP program are quickly connected to the Counseling Center and are prioritized for counseling sessions.

2. How have your unit's services and programming changed over time, and how have you adapted the use of SAF funding?

As the Peer Health Education program has expanded to include a wider range of health promotion and education topics, it has necessitated more comprehensive training and supervision from Professional staff. Peer Health Educators, who are student employees, receive extensive training and oversight from the Assistant Director and the Peer Health

Education Manager to effectively facilitate a variety of educational, evidence-based workshops covering subjects such as mental health, sleep, media literacy, alcohol and other drugs, bystander intervention, and sexual violence education.

In 2021, we introduced the [Peer Wellness Coaching Program](#), an innovative initiative that provides personalized one-on-one sessions for students seeking to enhance their overall well-being and problem-solving skills. This program has shown consistent growth year over year. Having a diverse team of student employees as Peer Health Educators allows us to better meet the demand for services and programs while ensuring representation of a wide range of identities and student experiences in alignment with our commitment to diversity, equity, and inclusion.

3. Are there programs/services that SAF has funded in the past that your unit no longer provides?

Historically we have offered paid training for students who become Peer Health Educators. We have included this 40 hour training as a part of their employment. We have also paid for the 40 hour training required for our students to become Peer Wellness Coaches. As of last year when SAF requested units to make budget cuts, we retired the model of paying Peer Health Educators for this 40 hour training.

We intend to maintain an unpaid training model for PHE positions, focusing on paying students for their work of providing workshops and training. The comprehensive knowledge required for success in these roles is substantial. While it is regrettable that we are unable to offer compensation to students for their learning time, this adjustment is necessary due to limited funding and the expansion of services within our program.

4. Are you currently using your unit's allocation for new programs or services that were not originally requested as an item in your SAF budget request?

No

5. What is the nature of your reserves/fund balances? For what purposes do you hold reserves? How were they accrued? (Reserves/Fund balances are termed and considered differently in every unit. If you are unsure of what these terms mean or would like clarification on anything, please reach out and ask.)

We do not have any SAF reserves. Previous SAF committees advised us to spend down our reserves before asking for an increase to cover our growing program. The past 5 years we have been paying for the increased costs and expansion of the Peer Health Education Program using those SAF reserves, as directed, to fund the difference between the SAF allocation and the cost of the program. Our SAF reserves ran out last fiscal year, leading us to do as previously directed, and ask for an increase to fund the program.

Budget Breakdown

In this section, please include a breakdown of your requested revenues/expenses for FY26 and your unit's budget for FY25.

The template, instructions, and an example can be found here: [SAF FY26 Budget Breakdown.xlsx](#)

BUDGET BREAKDOWN			
	<i>FY26 Request</i>	<i>FY25 Expected</i>	<i>FY25 Actuals Notes</i>
REVENUES			
SAF Funding	\$ 248,552.00	\$ 213,552.00	
State/University Funding	\$ 474,787.00	\$ 472,664.00	
Self-Generated Revenue			
Grants/Subsidies	\$ 274,627.00	\$ 143,951.00	Provisos. Cannot carryforward, salary savings is reduced from overall funding amount
Interest Revenue			
Other Revenue	\$ 2,408.00		Funded by prior year one time carry forward of salary savings
Total Revenue	\$ 1,000,374.00	\$ 830,167.00	
Change in Revenues	\$ 170,207.00	20.50%	
	<i>FY26 Request</i>	<i>FY25 Expected</i>	<i>FY25 Actuals Notes</i>
EXPENSES			
Salaries & Wages:			
Classified			
Professional	\$ 631,103.00	\$ 448,904.00	
Graduate Appointments			
Temporary	\$ 94,350.00	\$ 152,076.00	FY25 spend on hourly PHE Program Manager
Other Salaries & Wages			
Total Salaries & Wages	\$ 725,453.00	\$ 600,980.00	
Retirement & Benefits:			
Classified			
Professional	\$ 191,224.00	\$ 136,018.00	
Graduate Appointments			
Temporary	\$ 21,700.00	\$ 34,977.00	
Other Retirement & Benefit			
Total Retirement & Benefit	\$ 212,924.00	\$ 170,995.00	
Operations:			
Personal Service Contract			
Other Contract Services	\$ 32,500.00	\$ 29,560.00	
Grants & Subsidies			
Travel	\$ 10,404.00	\$ 10,200.00	
Supplies	\$ 19,093.00	\$ 18,432.00	
Other Operations			
Total Operations	\$ 61,997.00	\$ 58,192.00	FY25 salary savings from permanent vacancies spent on extra hourly salaries.
Total Expenses	\$ 1,000,374.00	\$ 830,167.00	
Change in Expenses	\$ 170,207.00	20.50%	
Revenue - Expenses	\$ -	\$ -	

Information on Other Revenues:

All our services are provided for free to students. We do not generate revenue from our work.

Additional Questions

1. **How would you adjust your operations if you did not receive your full request? Please elaborate on the potential impact on staffing and services.**

If we did not get our full request this year, we would have to scale back and reduce Peer Wellness Coaching. The use of PWC is growing. Our team needs to grow to continue offering appointments within 48 hours to students who need them. As previously stated, PWC is a staff intensive program requiring additional professional staff time for the supervision/support and training for the Coaches.

We hope to offer drop-in Peer Wellness Coaching, which we would not be able to do if our funding was reduced. The increase in demand for services would not be met due to the fact that we wouldn't have the staffing to support the increased needs.

A reduction in funding could also cause the discontinuation or limited offering of peer groups such as [The Body Project](#). The Body Project is a 4 hour group program for students with evidenced-based outcomes to reduce the development of eating disorders for those who complete it.

Our Peer Health Education program would be constrained in what they can offer to the campus community. We would not be able to support student groups and communities with specialized workshops or workshops tailored to their needs.

A. What if you received an amount less than your FY25 allocation?

We would make cuts or scale back in the areas outlined above.

B. What student services/programs are integral to your mission that you would not cut even if you received an amount less than your FY25 allocation?

CORE programs funded by SAF include the Suicide Intervention Program position and Peer Health Educational CORE Workshops. The majority of the PHE program consists of paying student employees for leading workshops. We do not have inessential costs in our program like travel or conferences, etc.

2. If financial resources were not a restriction, what is one program/service your unit would add/expand on to enhance students' experience at the University?

We would grow our Educational Peer Groups (Body Project, Men's Groups, Survivor Groups and Recovery Programs) and our Peer Wellness Coaching services. We would put more programming and resources into addressing loneliness and anxiety on a peer to peer level. Peer groups can teach evidence-based skills to help prevent or reduce negative health issues, while also serving the vital role of creating connection and social relationships. Peer Wellness Coaching is an accessible venue to increasing personal efficacy through skills, knowledge, and the transformative peer connection context. Helping students develop the interpersonal skills for college that will continue to serve them well beyond their time at UW.

3. How does your unit ensure that student fees do not subsidize non-student, academic, research, and other costs that are the primary responsibility of the University and its colleges?

Our Peer Health Education Program only works with UW Seattle registered students and student organizations. We consult the student database to make sure students are registered at UW Seattle.

LiveWell staff do not participate in academic research and if we were given the opportunity we would not utilize staff or student resources allocated by SAF.

4. How are you utilizing the SAF logo? In what ways do you spread awareness of your affiliation with SAF?

The SAF logo is prominently displayed on our website, and our Peer Health Educators incorporate an explanation that the workshop they are about to receive is funded and supported by SAF. We consistently promote awareness of SAF while discussing our initiatives with various campus groups, as we take great pride in being supported by the Services & Activities Fee. Our Peer Health Educators possess a thorough understanding of the connection between SAF and the essential work they undertake in addressing high-risk topics on the UW campus. We also encourage PHEs to actively engage with SAF by attending deliberations and public meetings, as they did in 2024.

5. If you are projecting a net deficit for FY26, please provide additional context for this net deficit (e.g. reallocation of carryover funds from previous fiscal years, extraordinary expenses necessary to meet operational needs, etc.).

The total cost to run our Peer Health Education Program as well funding the staff position for the Suicide Intervention Program in its entirety comes to \$319,529. Technically the PHE program is running a deficit of \$70,977 which we are using LiveWell carry over salary recapture funds (and temporary provisos) to fill for the current budget cycle.

6. When projecting out 1-3 fiscal years, what challenges, if any, do you foresee for your unit? How could SAF be helpful in navigating these challenges?

The challenges we face are primarily related to funding. We have utilized the SAF reserves as instructed, but we are now limited by the constraints of funding request thresholds. Our Peer Health Educators play a crucial role on campus, and their high level of skill and competence has earned them trust in executing important university directives and initiatives. Their contributions have significant public health implications across the campus, including opioid overdose education and Naloxone training, alcohol and cannabis harm reduction education, and bystander intervention related to interpersonal violence and media literacy and dialog initiatives. The increasing demand for mental and emotional health support among our student population, coupled with social and relational challenges, underscores the necessity for programs like Peer Health Education. These programs provide comprehensive support to students through various avenues, including one-on-one wellness coaching, educational workshops, and peer support groups.