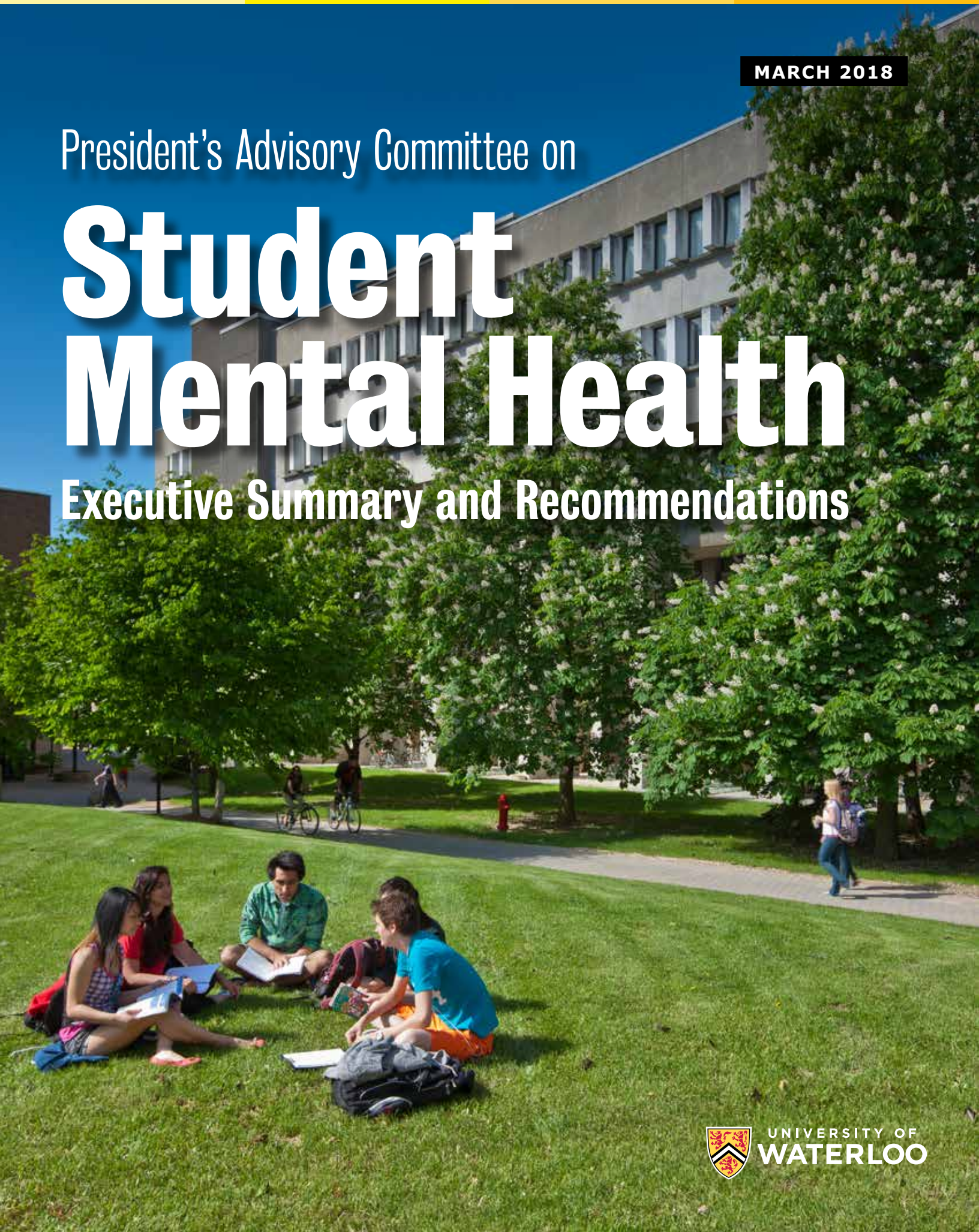
MARCH 2018

President's Advisory Committee on

Student Mental Health

Executive Summary and Recommendations



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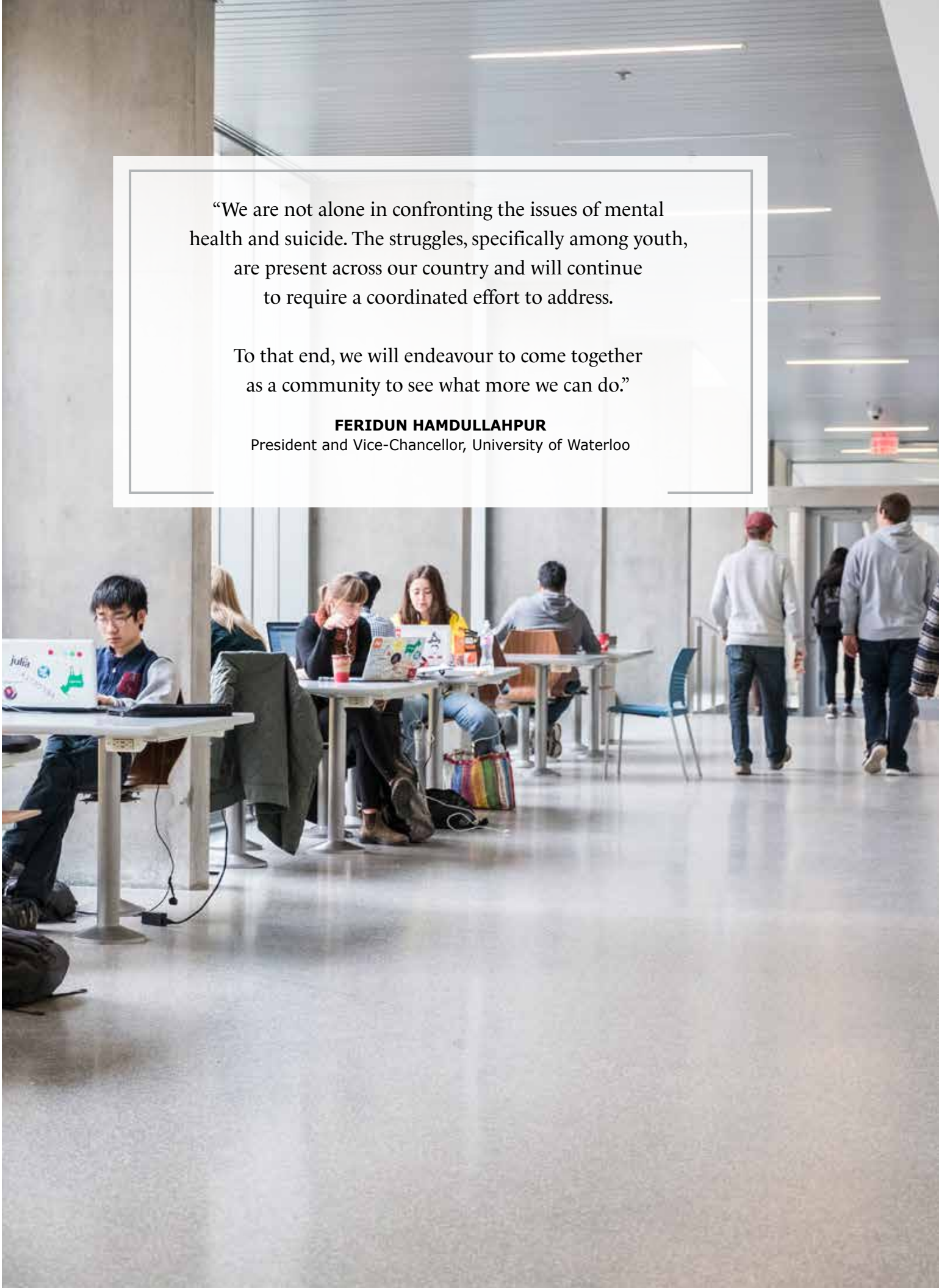

"We are not alone in confronting the issues of mental health and suicide. The struggles, specifically among youth, are present across our country and will continue to require a coordinated effort to address.

To that end, we will endeavour to come together as a community to see what more we can do."

FERIDUN HAMDULLAHPUR
President and Vice-Chancellor, University of Waterloo

Executive Summary

The mental health of students at post-secondary institutions has become a prominent topic of discussion inside the University of Waterloo and in the general community. Observers are alarmed to discover the high rates of psychological distress among students reported in surveys such as the National College Health Assessment (NCHA-II).

A comprehensive review involving many campus constituents was conducted in 2011-12. The review led to some significant revisions in the organization of mental health services at the University of Waterloo. Counselling Services and Health Services now plan and deliver mental health services in a more integrated manner under the umbrella of Campus Wellness.

The review resulted in greater attention to health promotion and prevention. There were increases to mental health staff resources, including new positions created for counsellors and psychologists, and funding for enhanced psychiatric services. In addition, improvements were made in how students access mental health services, ensuring that the most urgent concerns are addressed in a timely matter.

The changes emanating from the 2012 review helped this University to ensure that mental health services were keeping up with the steady growth and demand of the student population. Currently, a wide range of responses exists for students who arrive on campus with a history of mental illness, and for those who develop symptoms or concerns while attending the University. These responses include formal services as well as a network of peer-led support services.

The President's Advisory Committee on Student Mental Health (PAC-SMH)

Despite the attention to students' mental health and the development of a robust service system, a series of events in winter 2017 alarmed the campus community. In response to community expression of concern about two student deaths by suicide, the University President signalled the need for an in-depth conversation regarding student mental health.

The PAC-SMH was formed with a terms of reference that called for the collection of information considering "…the UW student body and the larger societal context." The committee was further tasked with advising "…on the status of the progress of mental health initiatives across the campus."

The PAC-SMH met regularly through summer and fall of 2017, gathering information from a variety of sources, both on-campus and in the community.

Analysis was generated by five supporting panels, each covering a dimension of mental health, including academic, community partners, mental health experts, student experience, and student services panels. Reports were provided by each.

The PAC-SMH Report and Key Theme Areas

The final report, which includes a synthesis of independent submissions to the committee and the panel reports, is organized along the lines of a model of the post-secondary mental health response offered by the Canadian Association of College and University Student Services (CACUSS).

The CACUSS model recognizes different levels of required response ranging from the creation or adjustment of university policies, availability of less intrusive options for individuals who are starting to experience psychological distress, and development of an appropriate mental health service system for individuals with clear mental health concerns.

Campus Policies and Practices

The PAC-SMH report recognizes that there is an opportunity to look at all of University of Waterloo's policies and policy development through the lens of student wellness. Some highlighted areas include the impact of the current process of obtaining academic accommodations, noting inconsistencies across faculties and services. The report also identifies that some academic policies may lead to undue and unnecessary stress. A series of recommendations suggests a path forward.

Key Themes

Social Support

The report on social support at the University of Waterloo highlights the **role of positive interpersonal relationship** in preventing psychological distress. This analysis, on one hand, recognizes the importance of friends and family, but also notes the emerging **importance of on-campus relationships with peers, staff, and faculty**.

There are some groups on campus that experience more isolation than others due to their identification as international, racialized, or LGBTQ students. The report speaks to opportunities to **build on various mentoring initiatives** to ensure that as many students as possible will benefit from being part of a social support network.

The report further addresses instances of negative interactions that occur in the academic environment, providing some recommendations for instructional approaches that mitigate these experiences.

Mental Health Awareness

Increasing the awareness about mental health and mental illness was highlighted as a theme during the PAC-SMH process. The report notes some of the current approaches for mental health promotion, including efforts to educate students about services.

Although these efforts have increased, corresponding with the increase of awareness of mental health in Canadian society, there are potential areas of improvement.

In particular, there may be **opportunities to provide important information** about mental health and services **as part of the normal interactions between students, faculty, and staff**.

Faculty and staff may need **additional training and support** to be equipped to provide the most helpful information to students. Some of this training already exists on campus, but in a limited capacity. The corresponding recommendation regarding this gap is for growth in the capacity for training and improved coordination of training efforts.

Early Intervention and Skills Building

The CACUSS model identifies that there are times when students experience psychological distress and a mental illness has not yet developed. During these periods of discomfort, **students can benefit from early intervention strategies**, many of which can be introduced in educational workshops or with digital applications.

The report addresses the **need for a strong emphasis on developing resilience as a skill area for our students**.

Service Levels and Duty of Care

The current mental health service delivery system is reviewed with some detail in the PAC-SMH report. A fundamental question that this report asks is, "How far can or should the post-secondary institution go in providing treatment for mental illness?" This question is considered in the context of the capacity of the local service system in the community.

The report notes that the local system may not have capacity to provide the range of services required by university students and, as such, **on-campus services need to be prepared for the spectrum of mental health concerns represented by the student population**.

At the same time, the report identifies opportunities for **improved partnerships with community agencies**, with an emphasis on ensuring that accurate information is available to students about services and providing improved referral processes.

Service Improvements

With respect to campus services, the report identified some areas of student dissatisfaction. Most significantly, students were concerned about the availability of services when needed.

Despite the growth in mental health resources in the past five years, there were instances in which people were not able to access appointments in a timely way. The mental health/counselling staff-to-student ratio is addressed in this report, with a **recommendation that this ratio be increased to one staff member for each 1,000 students**.

Growth in clinical staff also needs to take into account the expected outcomes of **plans to improve mental health promotion and prevention**. That is, the PAC-SMH hopes to detect a decrease in the need for formal services as more upstream approaches are introduced.

In addition to questions of capacity, the recommendations regarding services also touch on the readiness of mental health staff to **address diverse needs of the student population including transgender, indigenous, and racialized students**.

Recommendations are also provided regarding emerging models of clinical care including the stepped-care approach and therapist-assisted online therapy.

Campus-Wide Recommendations

The final set of summary recommendations are provided to direct attention to some of the broader implications of the PAC-SMH report.

First, it will be important to create a **mechanism of accountability for implementation** of the report's recommendations. The concept of an ongoing student mental health and wellness committee is proposed. Related to this, a recommendation is made for the University to **adopt the Okanagan Charter** as a framework for the implementation of the recommendations.

The report invites consideration of a **collaborative research program** as a way for our campus to develop knowledge about the topics addressed in this report, and provide leadership among Canadian post-secondary institutions.

The report concludes with a recommendation that University of Waterloo **join provincial advocacy efforts** regarding the growing concern about student mental health.

University of Waterloo has an opportunity to attend to an important campus and societal issue: mental health. The PAC-SMH report offers a cross-sectional analysis of aspects of the University that influence the mental health and wellness of students as well as a summary of the current response.

The report represents a foundation for building a campus community where our students can flourish in all areas of their lives.

Campus Policies and Practices

General Policies and Practices

RECOMMENDATION #1:

› The University should facilitate a wellness and mental health analysis when new academic programming is proposed.

› The University should develop a mental health framework for use when writing new, or reviewing existing, policies and procedures.

Accommodation Policies and Recourse Procedures

RECOMMENDATION #2:

› Equip AccessAbility Services with the capacity to review mental health-related accommodation requests on campus, while maintaining the confidentiality of the student.

RECOMMENDATION #3:

› Develop a centralized physical and online system for submitting Verification of Illness Forms that notifies all students' instructors while maintaining confidentiality of students' medical conditions and history.

RECOMMENDATION #4:

› The University should develop proper recourse mechanisms for students who allege staff or faculty have violated an approved accommodation request related to mental health.

Academic Policies and Practices

RECOMMENDATION #5:

› Strike a working group that recommends implementable best practices around exams and evaluations with a wellness viewpoint in mind. This includes but is not limited to an examination of:

- Final exam schedules and availability of the exam schedule during the course enrollment period.
- Weighting and overall number and type of evaluation/ assessment in courses.
- A more efficient system for deferred exams.
- Confidentiality around communication of grades to students to ensure practices aren't promoting an unhealthy competitive environment (e.g. rankings).

RECOMMENDATION #6:

› Academic programs should review for unnecessary stress those sequences in which students acquire their first co-op position in the second term. The PAC-SMH recommends that a committee be struck to investigate how to reduce the stress levels associated with this sequence.

RECOMMENDATION #7:

› Consider universal instructional design as a valuable perspective that can be used to improve course delivery. Consider a collaborative effort between Centre for Teaching Excellence and faculties to include universal instructional design in existing and new courses.

› Develop an online resource to record good practices for embedding universal instructional design and mental wellness into teaching.

Openness and Transparency

RECOMMENDATION #8:

› Openly communicate the process the University undertakes when communicating about student deaths on campus.

RECOMMENDATION #9:

› Develop a protocol to include community partners when communicating adverse events that involve a member of the community, while ensuring that support services are available to those impacted by the event.

Inclusive And Supportive Campus Culture

Shared Responsibility Amongst all Community Members for Wellness

RECOMMENDATION #10:

› All academic programs and student service departments should include peer mentorship activities in the delivery of their mission for the purpose of:

- Improving the frequency of connection and collaboration between students, faculty and staff.
- Developing a greater sense of belonging and community at Waterloo for all students.
- Increasing cross-campus support and advocacy for student wellness.

Diversity, Equity, and Inclusivity Considerations Regarding Student Wellness

RECOMMENDATION #11:

› A committee should be struck to develop and implement a cultural competency strategy for the University regarding health promotion and student wellness. The committee would review campus policies, procedures and practices in consideration of race, ethnicity, faith, gender, sexual orientation, gender identity, and socioeconomic status.

Faculty and Staff Roles

RECOMMENDATION #12:

› Expand the range of options for students who are having challenges in interactions with their supervisors or instructors. For example, consider the model of an ombudsperson employed at some institutions with functions such as support, advocacy, and tracking data/patterns.

Intentional Design and Planning of Student Space

RECOMMENDATION #13:

› Identify and implement University facilities and infrastructure standards and best practices into the design, planning, and rejuvenation activities for all campus physical spaces to promote and enhance student wellness and supportive learning environments.

Mental Health Awareness and Communication

Reducing Stigma

RECOMMENDATION #14:

› Open a continuous dialogue with students, staff, faculty, and the wider community about mental health and well-being, including online forums for discussion of:

- Prevention of mental health issues and promotion of mental health-care strategies.
- Suicide prevention.
- Impact of trauma and sexual violence.
- Effects of racial injustice.
- Effects of transphobia.
- Harm reduction approaches to substance use.

Curriculum Availability

RECOMMENDATION #15:

› Encourage faculty to integrate curriculum focused on mental health, resilience, and support resources and to develop courses in ways that promote mental wellness.

Mental Health Training

RECOMMENDATION #16:

› Support the professional development of faculty, including the following:

- Explore ways to share existing best practices between instructors on an ongoing basis, particularly in an online format.
- Encourage faculty involvement in teaching-related professional development by recognizing these efforts in their merit reviews. Go beyond numbers generated by the student survey. Acknowledge and value up-to-date course assessments, participation in CTE workshops, and pedagogical conferences.

RECOMMENDATION #17:

› Ensure that faculty have appropriate and timely information to support students through the following means:

- Make mental health training part of the on-boarding process for new faculty.
- Strongly encourage mental health training for existing faculty.
- Provide clear guidelines to instructors regarding who they can contact when they have concerns about a student's welfare, even if he or she does not yet require interventions.

RECOMMENDATION #18:

› The Sexual Violence Response Coordinator should provide training related to sexual violence to other healthcare workers on campus.

Information about Resources

RECOMMENDATION #19:

› Develop an integrated marketing and communications plan to inform students about all the available support options, including the following:

- Implement opt-in information sharing and transition programming during orientation for incoming students living with mental illness.
- Create a centrally maintained database of available supports for students. Allow on-campus departments to contribute their own initiatives.

RECOMMENDATION #20:

› Make information and resources about mental health easy to find, including but not limited to the following:

- Implement one platform to access services and supports.
- Develop a comprehensive list of peer supports on campus and provide opportunities for knowledge sharing.
- Enhance existing peer support resources.
- Clearly describe available mental health resources in the Region of Waterloo.

Prevention and Early Intervention

RECOMMENDATION #21:

› Develop a campus-wide training program in resiliency.

› Ensure that a common definition of resiliency is used across all program delivery platforms and training providers.

RECOMMENDATION #22:

› Implement a comprehensive education and training strategy to increase mental health literacy among students, staff, and faculty. Create situational mental health training based on role and/or faculty and make it available to all.

› Ensure training is offered for receptionists and student staff who may deal with students struggling with mental illness and suicidal ideation.

› Invest in a dedicated full-time resource for mental health training.

› Stagger or reiterate orientation presentations throughout the year.

› Encourage capacity building through a train-the-trainer approach.

› Ensure all staff and faculty are aware of the supports for students that already exist both on campus and off campus and what to do in case of an emergency or when they suspect a student is in need of additional support.

› Distribute the *Do You Need Help* poster detailing what people should do in particular situations to all Waterloo campuses, faculties, schools, departments, etc. so they know where to find help in the event of a crisis.

Self-Assessment and Digital Applications as Early Intervention

RECOMMENDATION #23:

› Use research on best practices, and review opportunities for self-assessment/self-management and early intervention through digital applications.

Coordination of Peer-to-Peer Activities

RECOMMENDATION #24:

› Assess the current level of coordination of peer support networks. Create a mechanism for coordination and knowledge sharing.

Mental Health and Harm Reduction

RECOMMENDATION #25:

› University of Waterloo should join the Canadian Centre on Substance Use and Addiction Postsecondary Education Partnership – Alcohol Harms, a partnership that other universities across Canada have joined. It focuses on:

- Reducing harm associated with drugs and alcohol.
- Developing an institutional implementation and measurement plan based off the framework.

Training and Education Programs

RECOMMENDATION #26:

› Develop new training programs in the following areas:

- How parents can support their students.
- Strategies to prevent sexual violence.
- Bystander intervention training in orientation leader training.

Service Access and Delivery

Human Resources

RECOMMENDATION #27:

› Review staffing practices and plans in Counselling Services, with an emphasis on the following:

- An external review to determine whether a recent reorganization, as well as the existing on-call system, has achieved its purpose.
- Investigate the utility of embedding counsellors within each faculty and residence.
- Within cost constraints, implement the recommended ratio of 1 counsellor/psychologist FTE for every 1,000 students (36.67 FTE), taking into account counsellor leave and other absences. Further ensure there are additional resources to meet increased demand during peak periods (e.g. exam time).

Services for Disproportionately Affected Students

RECOMMENDATION #28:

› Invest in training and research for underserved/ disproportionately affected populations.

› Ensure counsellor training is kept up to date and relevant to student needs (with a specific focus on cultural competence).

› Conduct a climate survey on the experience and perception of supports specifically designed to meet the needs of international students.

Extended Health Care Funding

RECOMMENDATION #29:

› Update and promote available funding for mental health services on and off campus.

› In light of the recent government change in funding of prescription drugs, use any surplus from the Student Health Plan toward mental health (including off-campus services).

› Inform students about the funding and services available to receive mental health services off-campus.

› Review the feasibility of funding a 24/7 service providing counselling by telephone, video-counselling, or internet-based counselling.

› Review the need for expanding services on campus relating to substance abuse.

RECOMMENDATION #30:

› Mental health supports and resources for student's off-campus (e.g. international placements, co-op placements) should be developed and the level of support available should be clearly communicated.

Community Partnerships

RECOMMENDATION #31:

› Engage with off-campus mental health services and community partners (e.g. Connectivity KW4 and Here 24/7) to better support students, particularly during peak times.

› Develop a protocol to connect students from an on-campus wellness service to an off-campus service (e.g. have a Campus Wellness staff member connect via phone directly with an off-campus service provider with the student present to arrange ongoing/additional supports).

› Organize outreach sessions with local community partners (e.g. high school teachers) to explore innovative ways to serve student mental health needs.

Services for Individuals with Complex Needs

RECOMMENDATION #32:

› Tailor the level of mental and physical health care provision to the needs of the individual.

› Continue to develop a complex care team to respond to students with more complex mental health issues.

› Continue to develop and implement a stepped-care approach within Health Services and Counselling Services.

Summary/Broad Recommendations

Implementation Committee

RECOMMENDATION #33:

› A committee should be established to oversee implementation of the recommendations of this report, as well as to provide consistent feedback and advice regarding the strengths and limitations of the University response to the mental health and wellness of students. In the Implementation Committee's early deliberations, the PAC-SMH recommends that the committee determine priorities and classify proposed actions based on what is needed from the University (e.g. statement of commitment, financial commitment, human resources, standing committee, or working group) to move forward.

› Make the full collection of recommendations, strategies, and ideas brought forward through the PAC-SMH process to the implementation committee for ongoing consideration.

Adoption of the Okanagan Charter

RECOMMENDATION #34:

› Undertake a full adoption and promotion of the Charter. A significant transition for the University will be the movement from a perspective in which mental health and wellness is the responsibility of a few professionals to an environment in which a healthy campus becomes the business of all stakeholders. The Okanagan Charter affords an opportunity to support this transition.

Research on Student Mental Health and Wellness

RECOMMENDATION #35:

› Further exploration of the development of a research institute or speciality area in student mental health and wellness. It was evident that there is a strong base of expertise relevant to the topic of student mental health in our institution, including researchers in Applied Health Sciences and the Centre for Mental Health Research (Psychology). There are some examples of institutions that have marshalled this expertise to create a research institute dedicated to addressing questions that are, so far, difficult to answer. These might relate to our population of students, to the range of service options, or the most effective promotion, prevention and intervention options.

Provincial Advocacy

RECOMMENDATION #36:

› The PAC-SMH recommends University of Waterloo endorse and actively advocate to the provincial government, using its government affairs/relations apparatus, to implement the 26 recommendations in the *In It Together* report. The report and its recommendations outline sector-wide consensus of the role the provincial government has to play in order to address mental health concerns in post-secondary campuses.

PAC-SMH Information

Committee Members

Walter Mittelstaedt – Director, Campus Wellness (Chair)

Beth Keleher – Graduate Student, Psychology

Alex Piticco – Assistant Director, Student Development and Residence Life, Housing and Residences

Chris Read – Associate Provost, Students

James Rush – Dean, Applied Health Sciences

Nikki St. Clair – Undergraduate Student, Political Science

Paul Ward – Associate Professor, Electrical and Computer Engineering

Antonio Brieva – Federation of Students Representative

Vanessa Lam – Graduate Students Association Representative

Timeline

March 2017 – PAC-SMH created by University President Feridun Hamdullapur

April 2017 – PAC-SMH Terms of Reference approved

June 2017 – PAC-SMH members chosen

July 2017 – Supporting Panel members chosen

July 2017 – Supporting Panel Launch day

October 2017 – Supporting Panel Symposium

December 2017 – Final Panel reports submitted

February 2018 – Final PAC-SMH report submitted

March 2018 – University Open Forum

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