What we have learned so far

• High demand for student mental health services at UW
  • Counselling Services reported a significant increase in new clients in September 2017 compared to September 2016

• UW offers multiple mental health services in different formats
  • e.g., AccessAbility Services, Centre for Mental Health Research, Counselling Services, Equity Office, FEDS, Health Promotion, Health Services, Peer Support

• Influence of students’ schedules on mental health service delivery models
  • Points in the term
  • Co-op program

• Importance of staff wellbeing when we plan mental health service delivery models
What we have learned so far

- Conditions needed to promote mental health on campus
  - Awareness and availability of supports
  - Ongoing collaboration and integration of services
  - Culture of well-being and support personal development
- Identification of stress points and transition points
- Timing of service provision and type of communication
- Managing clients’ expectations
- Identification of students at risk
Methods of information gathering used

- Panel member discussions
  - Integration of student experiences – e.g., expectations of services
  - Integration of staff experiences from AccessAbility Services, Counselling Services, Health Services, Student Success Office, Student Advisors, and Professors
- Initial review of research and policy frameworks
- Preliminary review of other post-secondary institutions’ mental health services
Discovery that has surprised us

- Breadth of services and supports that are offered
  - Need for models of integration and navigation
  - Implication to improve strategies for communicating about when and how to access
Key pieces of information we still need

- Additional information/data regarding students who access Counselling Services and Health Services for mental health services, e.g., presenting issues, expectations for service, outcomes of service

- Waitlist management strategies and innovations

- Potential mental health service delivery models that will integrate best practice research
  - Role of case managers
  - Role of inter-disciplinary teams
  - Parameters of service in relation to demand

- Role of UW Health Promotion
Next steps for our panel as we work towards our final report

- Further integration of UW students’ and staff’s perspectives on mental health services
- Further integration of research and information about other post-secondary institutions’ mental health services and about mental health promotion
- Recommendations for mental health services at UW including potential changes
- Review of external Mental Health Standards for service provision, e.g., Accreditation Canada
Sample Mandate Questions:

• What are the conditions needed to promote mental health on campus?

• What should we be doing or emphasizing proactively to enhance mental wellness?

• Are the clinical approaches we are using the most appropriate?

• How far can/should an organization like the University go in providing treatment for mental illness?

• What are other institutions doing to deal with demands on front-line services? To address the need for wellness space and programming?

• Why are students not reaching out to access mental health supports?
PAC-SMH
Academic Panel Report

10/24/2017

Presented by: H. Engelhardt, co-chair
University is stressful. Life is stressful.
What we have learned so far

- Mental health of young people (18-24 years) is a big concern across the country. In the university context, there have been many studies, surveys and reports on this issue, here at UW and at all Canadian universities.

- Current procedures for identifying, documenting and accommodating physical illness often do not fit the circumstances of mental illness.

- There are many programs and supports already in place but awareness (among students, staff, faculty) is low.

- Not all problems can be solved with $$.
Questions being tackled by our panel

1. Can academic rigor be maintained without pushing students into overload?
   - What is a reasonable academic load in a given program?
   - How many exams should a student be expected to write in a 24h or 48h period?
   - How many co-op terms are required for a credible co-op experience? How can co-op students be better supported in the pre co-op term?
   - What can be done to mitigate student stress in highly competitive programs?
Questions being tackled by our panel

2. How can course design be modified to support student wellness (and success)?
   ▪ types and numbers of assessments?
   ▪ early, low-stakes assessments for early feedback?
   ▪ flexible evaluation schemes? flexible deadlines?
   ▪ incorporate principles of Universal Instructional Design into all courses?
   ▪ incorporate ‘Learn-to-Learn’ strategies into strategically chosen first year courses?
Questions being tackled by our panel

3. What can be done outside of curriculum and program design to better support students?

- How can the ‘VIF’ system be modified? Should there be completely separate paths for physical vs mental/psychological issues or parallel systems that lead to a common document?

- Can the role of AccessAbility Services be more integrated with Health Services and Counselling Services?

- Should all instructors be required to take training in mental health?

- Can we develop a clear path for students to follow if they believe they have been mistreated in the context of a course or instructor?
Methods of information gathering used

- reviewing current literature on academic workload and student stress/success/attrition
- reviewing accommodations/illness reporting procedures at peer institutions
- meeting with and/or surveying key stakeholders on campus
  - Registrar’s Office – exam scheduling
  - Engineering – ranking system, co-op sequencing, accreditation requirements
  - CTE – instructor support/training, course design
  - Campus Wellness – instructor mental health training
- previous reports on student mental health at Ontario and Canadian universities (including UW Student Mental Health Project, 2012)
Discoveries that surprised some of us

- anecdotal reports of students being treated very poorly by instructors; anecdotal reports of poor course design
- inconsistency across campus regarding student accommodations and grievances
- final exam scheduling is still done manually at Waterloo (!)
- positive practices regarded as ‘normal’ in some units that are unheard of in other units
  - coordination of first year instructors
  - coordinating timing of midterms across courses within a program
  - central collection of VIF information
  - mental health training for faculty and staff
What we see as our biggest challenges

- Some of our programs are highly demanding and have a ‘culture’ of competitiveness.
  - These programs may be very difficult to change.

- It is difficult to mandate changes in course design.
  - Instructors amenable to improving their courses are likely already making use of existing supports and already using good pedagogy.

- Similarly, it is difficult to force students to seek out supports, whether psychological or academic.
  - Students most in need are typically the least likely to take advantage of workshops already available (resiliency, time management, study skills, mindfulness, ...).
Sample Mandate Questions:
• How do we understand the relationship between academic stress and mental health?

• What is a reasonable level of demand in terms of academic load, scheduling, and other planning required by students (i.e., co-op)?

• What is the utility of comparing students against students? How do we balance a culture of wellness and a culture of competition?

• How do we support instructors and their efforts to embed wellness into their pedagogy and the curriculum?

• Are there exemplars of programs, instructors that represent a good balance between academic rigour and mental wellness? Can we learn from these?

• How do we eliminate barriers to academic accommodations for students who need mental health supports and/or are experiencing symptoms of mental illness, but have not been diagnosed?
Community Partners Panel Report

10/24/2017

Presented by: Tom Ruttan,
Director Counselling Services
What we have learned so far

- We are one Community
  - Unique panel = parents to agencies

- Focus on creating a supportive network for students amongst all community resources (off- and on-campus)

- How can all the community mental health resources (both off- and on-campus) work in a coordinated fashion to develop sustained stronger and greater collaborative working relationships for the benefit of students?

- How can our recommendations benefit both our students and our community partners?
Methods of information gathering used

- Description of community mental health resources available both off- and on-campus

- Examination of other communities where post-secondary institutions are located

- Examination of gaps in both resources as well as communication between all of the community resources
Primary themes

- Education & Awareness of Resources
  - All students know where & how resources can accessed

- Procedures Impacting Access to Services
  - What procedures ease access ...what procedures interfere?

- Services, Gaps & Opportunities
  - What services are offered and where?
  - What is missing?
  - What are key areas that need to be developed/enhanced?
Key pieces of information we still need

- Continue to determine what information needs to be shared throughout all community mental health resources (off- and on-campus)
  - e.g., Connectivity resource in community
- Clarification of service gaps
- Funding information for student mental health off-campus
  - Clarification for each student
  - Clarification for each community partner
Next steps for our panel as we work towards our final report

- Determination of capacity to meet need for student mental health amongst all community resources
  - All mental health resources are stressed
  - How can we help one another for the benefit of our students’ mental health?

- Strong need for Panel to continue to work on collaborative goals past the end of the PAC - SMH
Sample Mandate Questions:

• How do we currently characterize the relationship of University Counselling Services with community agencies? How do we communicate this network of services?

• What services and supports can the University reasonably expect from community agencies and vice versa?

• How can the University assist the community in advocating for an appropriate level of resources for specialty services (i.e. first episode psychosis, eating disorders, substance abuse)?

• How can off-campus housing providers/landlords address the needs of student tenants that contribute positively to their mental health?
Methods of information gathering used

Student Experience Survey
- https://www.surveymonkey.com/r/PACSMH
- Gather information on student perspectives of the culture and available resources on UWaterloo campus

Panel Interviews
- Sample Population: Student Experience Panel
- Rational: we have students representing many groups of students (international, graduate, LGBTQ+)

Literature Review
- What barriers do students face when reaching out to address their mental health concerns?
- Are there any student demographics that are disproportionately and uniquely affected by mental illness?
- How is the University addressing and servicing their needs?
- How does that compare to other institutions?
- How many students are coming into university with pre-existing conditions?
- What are some best practices in the post-secondary sector in disseminating information regarding mental health?
What we have learned so far

- Challenges in developing an effective survey
  - Creating useful questions
  - Gathering information on student perspectives on culture, resources

How were you informed of these mental health support services? (Select all that apply).

- [ ] On-campus event (e.g. orientation, health fair, mental health screening)
- [ ] University website
- [ ] Faculty or Staff
- [ ] Peer/friend
- [ ] Residence Life Don/Staff
- [ ] Other (please specify)
What we have learned so far

- Conducting interviews became more challenging than anticipated
  - Ethical concerns when discussing mental health with participants
  - Choosing an appropriate sample population
What we have learned so far

- When doing literature review, comparison with other institutions is complicated
  
  - UWaterloo is unique in terms of co-op program, high international student rate
Discoveries that has surprised us

- In early findings we’ve found service gaps for student demographics that are disproportionately affected by mental illness:
  - International Students
  - LGBTQ+ folks
  - Female identified individuals who have experienced sexual violence
Next steps for our panel as we work towards our final report

1. Student Experience Survey Results
   - Survey is LIVE
   - Will be open for 1 week

2. Panel Interviews
   - Will be conducting in the next 2-3 weeks

3. Compiling our data

4. Next panel meeting: November 14th

5. Draft Report
   - November 23rd

6. Final Report
   - December 15th
THANK YOU FOR LISTENING TO THE STUDENT EXPERIENCE PANEL!!
Sample Mandate Questions:

• What do students wish to say about:
  • The culture of the University?
  • Their expectations and reasons for expectations of services?
  • What does it take to stay motivated?

• What ideas do students have about communication and adaptation of services to meet their needs?

• What unique experiences of international students do we need to address in our mental health promotion efforts?

• How do we address the unique needs of the university’s diverse population? (i.e. international students and marginalized groups)

• How do we communicate with students about mental health and wellness and the services offered to address them?
Student Services Panel Report

10/24/2017

Presented by: Saad Ahmad
Overview – general approach

- We were given six mandate questions, some focused, some broad in scope
- Panel chose to break into working groups focusing on each question, working independently
- Groups collaborated using Google docs and other tools to share info and solicit input from other working groups
What we have learned so far

- Strong perception that academics and mental wellness are in competition
- Student services describe a strong desire to improve collaboration
- Challenges: fragmented efforts; silo-ed, de-centralized responses; inconsistent messaging;
- Staff and students both say they want more MH training, however lack of clarity re which training would be beneficial to which role
  - Conversation not limited to traditional MH training i.e. train nuances and importance of everyday interactions with students
- Identified need for shared values regarding MH care, at the highest levels, communicated through a coordinated strategy, for all student services and students
Methods of information gathering used

- Solicitation from key stakeholders: service-providers, department heads, staff, peer service groups, faculty undergrad offices, etc.

- Focus groups, email surveys, personal interviews, environmental scans of other universities (research, visits)
Discovery that has surprised us

- Appear to be differences between what Student Services offer, and what students feel is available

- Strengths-based approach implemented at University of Calgary for all students, staff, and faculty – everyone on campus takes a Strengths Profile and knows what their 3 primary strengths are; has transformed campus culture over last 3-4 years

- How many opportunities are available on campus, how much information we actually have – and how challenging it can be to find and share it
Key pieces of information we still need

Emerging questions across working groups ...

- What do these look like:
  - a culture of compassion?
  - “enough” capacity?
  - resilience?
  - appropriate mental health care?

- Data relating to:
  - learnings from specific incidents, trends
Next steps for our panel as we work towards our final report

- Emerging theme: UW perceived as inarticulate on its commitment to care; a culture of compassion
  - Believe there is a commitment to care and compassion, but need to change how we articulate that commitment to staff and students

- Group’s timeline includes a full panel meeting, early Nov

- Goals include:
  - draft of Student Services panel final report circulated to our panel members for input before Nov 24
  - final meeting of panel last week Nov/first week Dec
  - finalizing report
Sample Mandate Questions:

• How well are student services working together to provide a comprehensive mental health response? (Housing, Campus Wellness, SSO, AccessAbility, Athletics, Academic Advising)

• How integrated are peer-to-peer services? (e.g. MATES and CRT)

• What additional supports are needed to ensure an adequate level of mental health awareness across student services?

• How do we encourage investments in wellness/recreational space and programming?

• What additional training can be beneficial?

• How can student services empower students to be more resilient and overcome failure?
President’s Advisory Committee on Student Mental Health

Committee Update – October 24, 2017
Membership of PAC-SMH

- Walter Mittelstaedt – Director, Campus Wellness (Chair)
- Alex Piticco – Director, Student Development and Residence Life, Housing and Residences
- Antonio Brieva – Federation of Students
- Beth Keleher – Graduate Student, Psychology
- Chris Read – Associate Provost, Students
- James Rush – Dean, Applied Health Studies
- Nikki St. Clair – Undergraduate Student, Arts (Political Science)
- Paul Ward – Associate Professor, Electrical and Computer Engineering
- Vanessa Lam – Graduate Students Association
- Project Coordinator – Drew Piticco
What’s the PAC-SMH been up to since Panel Launch Day?

- Supporting Panels Updates
- Guest Attendees to PAC-SMH meetings
- Reporting (monthly)
- Preparation for Final reports
Interviews with on-campus service providers

- Focus on the experience of staff working with students
- Semi-structured interviews with written summaries
  - Challenges, successes, pressure points, impact on staff groups, additional development areas
- Groups covered thus far:
  - Counselling Services
  - Health Services
  - Housing and Residence
  - Accessibility
  - Student Success; Faculty Relations/advising, International Students
- Survey of undergraduate and graduate advisors is ongoing.
Noteworthy discussion points from service providers

- Compassion and understanding of staff working in these areas
- Examples of early intervention (Housing, Student Success)
- High and intense levels of service for some individuals (Counselling, Health, Accessibility)
- Experience of relentless stress for staff supporting students during some periods
- Cyclical nature of pressures (i.e. mid-terms, finals)
- Appreciation of system complexity/difficulties in coordination of services
- At times, high expectations of students
Moving Forward

- Presentation of Interim report – November 1, 2017
- Completion of panel reports – December 15, 2017
  - Templates will be provided after November 6, 2017 PAC-SMH meeting
- Compilation of all sources of information into final report by January 15, 2015.
- Implementation of recommendations following Senate and Board of Governors receipt of report.