



UNIVERSITY OF  
TORONTO

## REPORT OF THE PROVOSTIAL ADVISORY COMMITTEE ON STUDENT MENTAL HEALTH

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October 2014

The University of Toronto Student Mental Health Strategy and Framework

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## EXECUTIVE SUMMARY

The University of Toronto serves a large and diverse student population and is dedicated to fostering an academic community that allows its students to thrive. The University environment is one that is both stimulating and demanding at every stage, from transition to the learning and social environment, through to graduation.

Student health and well-being has become a prime consideration in post-secondary institutions. While the majority of students flourish during these years, many others experience mental health challenges that may put them at risk. The mental health continuum can range from healthy and flourishing behaviour where students are comfortable, confident and capable of performing, to situations that create anxiety and stress, to clinical disorders that persist and impair ability to function in a safe and productive manner.

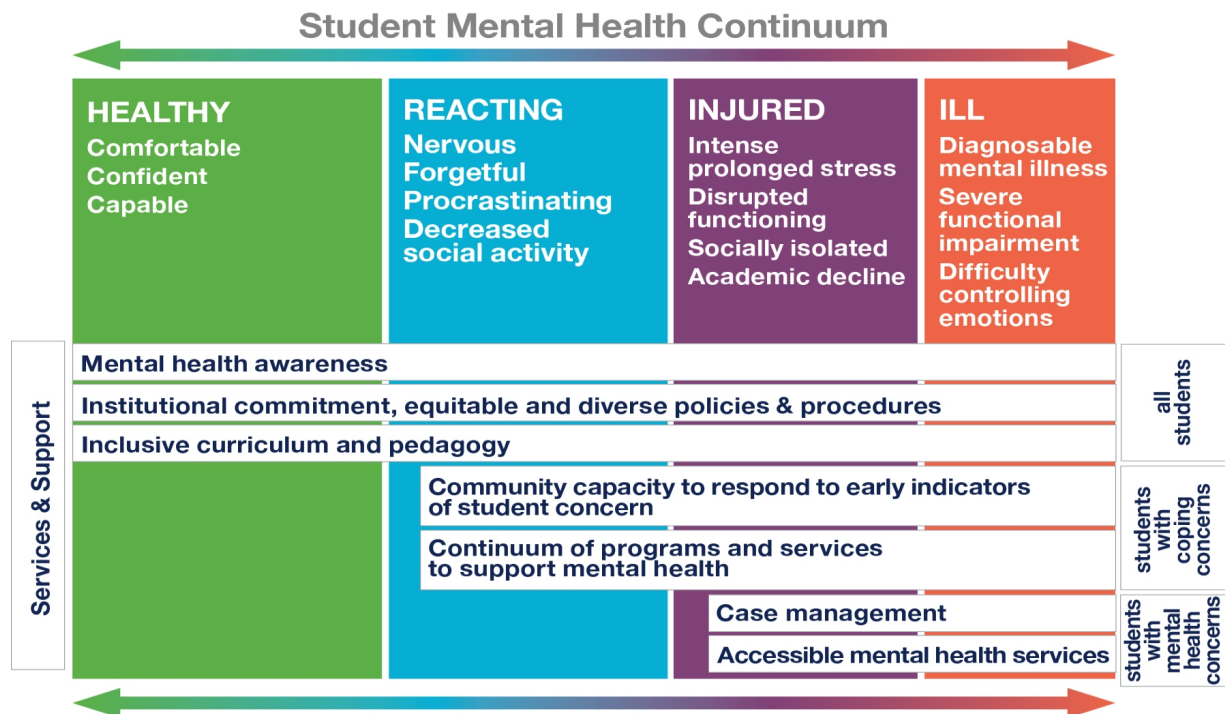


Figure 1: Adapted from Dr. Mike Condra, Mental Health Handbook prepared for the Council of Ontario Universities (COU) and the Framework for Post-Secondary Student Mental Health, CACUSS, 2013, p.8-9.

The University has created a range of opportunities for students to develop agency about their health and wellness, as well as a large variety of services and programs to support their needs when necessary. This Report of the Provostial Advisory Committee on Student Mental Health, recommends the adoption of a systems approach as the overarching institutional strategy. A systems approach focuses not just on health and wellness services and programs, but regards the entire University environment as necessarily involved in creating the conditions that allow its students to flourish. A systems approach is necessary if the University is to meet the diverse needs of its students – those who may be the first in their family to attend post-secondary study, or who may be coming to the University from distant countries and cultures;

underrepresented groups such as Aboriginal students or students with disabilities; graduate students facing isolation or in need of advice on negotiating relationships with supervisors; students who experience societal discrimination as a result of gender, religion, or sexual orientation; and students who face external challenges owing to financial or familial obligations. Where the Report and recommendations refer generally to students, both undergraduate and graduate students are being taken into account as many of the mental health issues with which they are concerned may be similar. The nature of the interactions between the University and its students may, however, be different for undergraduate as opposed to graduate students. Where appropriate, the Report includes specific recommendations for graduate students, a group that comprises nearly 20% of our student population.

A systems approach reflects the reciprocal relationship between wellness and academic achievement and considers an academic environment that sustains health. It promotes the health and well-being of students as a foundation for academic and life success. Further, it acknowledges that everyone – staff, faculty and students – has a role to play in changing the dialogue and conditions around student mental health to recognize that all elements within the University environment have an impact on well-being. (See Figure 2)

The following Report of the Provostial Advisory Committee on Student Mental Health contains 22 recommendations. An implementation plan for their adoption will next be developed. The priorities can generally be grouped in the following ways:

1. Develop a communication strategy that ensures students are informed of all programs and services available and how and when to access them;
2. Expand strength-based programming to develop positive mental health and resilience that engages students early in order to prevent exacerbation of the problem;
3. Develop mental health literacy of students, staff and faculty to create supportive and inclusive conditions for students to flourish and to reduce the stigma associated with mental health issues;
4. Coordinate, benchmark, and assess the effectiveness of programs and initiatives to ensure they are accessible, sustainable and cohesive;
5. Further leverage external community resources to help meet the full spectrum of health needs of our students and enhance coordination, collaboration and communication across services and systems within and beyond the University.

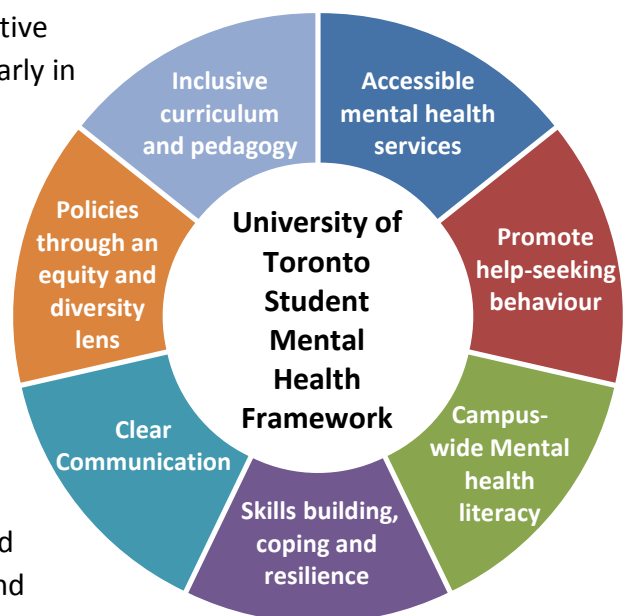


Figure 2: Adapted from the Cornell University Mental Health Framework <http://www.gannett.cornell.edu/campus/welfare/framework.cfm>

### 1.0 INSTITUTIONAL COMMITMENT

- 1.1 Mental health is identified as a priority through the University's value statements and strategic goals, with a focus on creating sustainable mental health initiatives.
- 1.2 The University adopts a systems approach in creating supportive and inclusive conditions for students to flourish, involving all stakeholders including the health-care system, the wider community, and the Government.

### 2.0 AWARENESS, EDUCATION, TRAINING & ANTI-STIGMA

- 2.1 Develop and implement ongoing, sustainable student mental health education programming, which includes a focus on positive mental health and is designed to meet the specific needs of our diverse student populations. This programming is based on best practices and focused on developing psychological resilience, personal skill development (including self-care practices) and de-stigmatizing mental health problems. Design all mental health education and training to be inclusive, sustainable and measurable; include ongoing assessment and evaluation.
- 2.2 As a community, promote help-seeking as a positive strategy for personal, academic and career success by establishing initiatives (e.g., communication strategies) that encourage help-seeking by students, especially for those who may be at higher risk.
- 2.3 Create a "roadmap" to facilitate student navigation of services and programs that begins with enhanced programming at orientation and continues throughout the academic year, delivering education and information to the University community, including staff, faculty and students.
- 2.4 Develop communication tools and systems that students find credible and relevant (e.g., messages embedded in faculty communication to students, such as course syllabi, and easy-to-navigate content on the institutional website).

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### **3.0 INCLUSIVE CURRICULUM & PEDAGOGY**

- 3.1 Create conditions inside and outside the classroom that support students' overall well-being by providing opportunities for students to build community, especially within large classes. Identify existing best practices and highlight them.
- 3.2 Expand academic peer support/mentorship programming; consider ways of making peer mentoring/tutoring programs universal, with an "opt-out" option.
- 3.3 Create programming for graduate students that will foster a greater sense of community within and across departments and faculties, and enhance support for graduate students in their interactions with their supervisors.
- 3.4 Clearly articulate course goals and expectations and promote best practices in assessment and timely feedback. Curriculum and Teaching and Learning Committees in each Division or Faculty should initiate discussions with faculty about the relationship between student stress and course and curriculum design.
- 3.5 Provide access to course materials through a variety of means to reduce barriers to students' full participation. Support and encourage faculty to make course materials available through alternative platforms and syllabi accessible to students.
- 3.6 To help address the issue of stigma within the purview of curriculum and pedagogy, develop a recommended syllabus template to include statements related to both mental health and academic accommodation; include help-seeking and University resources.
- 3.7 Develop programming and training that supports faculty, graduate supervisors, and teaching assistants to create learning environments that encourage students to seek help without fear of judgment or repercussions.

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### **4.0 MENTAL HEALTH SERVICES & PROGRAMS**

- 4.1 Enhance programming for students that has a focus on personal skill development, including individual resilience, coping skills, problem solving, and self-advocacy. Position psycho-educational groups and workshops as a first line of support and best practice for many mental health issues.
- 4.2 Expand peer support programs focused on mental health for students in which peer mentors are linked directly to mental health professionals for training, support and consultation; consider creating community-specific peer support, for example,

graduate student peer support, or peer support for students who identify as lesbian, gay, bisexual, trans and queer (LGBTQ).

- 4.3 Expand embedded services across Faculties, colleges and departments to de-stigmatize help-seeking behaviour and create services that have a deeper connection to the local experience.
- 4.4 Enhance education/information that provides a greater understanding of professional mental health care and services, as well as their necessary limitations within the university context.
- 4.5 Enhance case management models of care for students with complex needs, connecting them to appropriate resources.
- 4.6 Enhance education opportunities for all staff, and in particular for those who provide front line services such as campus community police.
- 4.7 Expand partnerships with community-based health resources to support students with complex mental health needs or students who may need long-term support, and facilitate pathways for students between these community resources and University resources.

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## **5.0 SUPPORTIVE POLICIES AND PROCEDURES**

- 5.1 University policy initiatives should be viewed with an equity and diversity lens that accounts for how individuals with mental health needs are affected by such policies while engaging in University activities.
- 5.2 Develop policy, in accordance with best practice policies and protocols in place at other Canadian universities, to establish pathways to support student needs in cases where the primary issues are related to mental health.

## INTRODUCTION

The rising incidence of post-secondary students with mental health needs or experiencing mental health concerns for the first time has had an impact across university campuses. Recognizing the importance of student mental health, the University of Toronto has expanded and developed initiatives and programs in its academic success services, accessibility offices, health and wellness centres and in its residences. To ensure an ongoing commitment to a healthy learning environment for students and to align the development of sustainable and cohesive initiatives in new and existing programs, the Provost struck an Advisory Committee on Student Mental Health in Fall 2013. (See Appendix A)

This Committee, chaired by Vice-Provost, Students & First-Entry Divisions, Jill Matus, was tasked with developing an institutional Student Mental Health Strategy and Framework to be presented to the Provost with a set of recommendations for implementation.

The Provostial Advisory Committee met for the first time in December 2013 and through the course of 2014. In advance of its first meeting, an environmental scan of student mental health initiatives, supports and strategies at the University was undertaken (See Appendix D), as well as an extensive literature search examining best practices in post-secondary student mental health and the role of learning environments in contributing to student well-being. In addition, a survey was conducted to gauge student awareness of existing programming. (See Appendix E)

The role of the Provostial Committee was to:

- Articulate the principles upon which to base the University's commitment to foster a healthy educational environment, and support students with mental health needs, as well as support University staff and faculty in their interactions with students.
- Review and evaluate the student mental health initiatives that have been developed over the past few years.
- Develop a consistent tri-campus approach by articulating the University's role and responsibilities in supporting students with mental health needs and managing associated risk.
- Recommend policies and protocols that support a comprehensive and integrated approach.
- Mobilize leadership and foster collaboration through an increase in awareness of mental health concerns, and educate and train members of the community to recognize, understand and effectively respond to students with mental health needs.
- Develop a tri-campus communication strategy to roll out the Student Mental Health Strategy and Framework.



- Address ongoing needs and emerging issues by means of an evaluation and improvement process.

Much of the work was conducted through four Working Groups, which regularly reported to the Provostial Advisory Committee. Working Groups were established to focus on Education, Training, Awareness & Anti-stigma; Inclusive Curriculum & Pedagogy; Mental Health Services & Programs; and Mental Health Policies & Procedures. Members of the Advisory Committee participated in the Working Groups, and additional community members were invited to contribute. (See Appendix G). All told, more than 50 community members, including students, staff and faculty, served on the Provostial Advisory Committee and its Working Groups. An additional 250 students participated in focus groups.

The Working Groups were asked to review and identify best practices in their respective areas, both in the wider community and at peer institutions, and review and identify best or promising practices currently in place at the University of Toronto. The Working Group chairs were then tasked with developing recommendations to be considered by the Provostial Advisory Committee. Input from graduate and undergraduate students was critical to provide student perspectives on issues of access, needs, service gaps and recommendations. Throughout Spring 2014, more than 250 students across the three campuses, reflective of our diverse student population, participated in the focus groups, many of which were set up through student societies and organizations. The participation of these groups and the feedback from students have been invaluable in developing the Working Groups' recommendations.

During consultation, students, staff and faculty consistently identified a variety of existing programs and initiatives that positively impact student well-being and support students in their transition to University and beyond. Our programs and services assist students as they cope with the academic and social challenges of university life, accommodate special needs, build community and support students in defining and achieving their academic goals. This Report acknowledges existing strengths and offers recommendations for enhancements. The recommendations address a broad range of factors related to student well-being.

The University is dedicated to fostering an academic community that supports the learning and scholarship of its members. It is committed to enriching the experience of students by assisting them in the realization of their educational goals: life-long learning and career development, physical and emotional growth and well-being, special needs, and cultural and recreational activities (Statement of Institutional Purpose, 1992). The Committee nonetheless recognizes the limitations of what can be expected of an educational institution in the provision of health and mental health services. Within this context, the Report's recommendations emphasize the need for the University to continue to leverage its partnerships with health-care institutions

and external community resources to help meet the full spectrum of health needs of its students.

In drafting the recommendations in this Report, the Provostial Advisory Committee has drawn upon the knowledge and expertise of many of the University's divisional leaders, faculty, staff and students from across the three campuses. The Committee recognizes that the success of the strategy and attendant recommendations relies on the active engagement of staff, faculty and students from across the University.

## GLOBAL AND NATIONAL CONTEXTS

Increasing attention has been directed in recent years to the mental health of societies locally, nationally and from a global perspective. Much of this focus is concentrated on the prevalence of mental illness, and the corresponding cost to society. More recently, attention has been paid to the concept of positive mental health and its contributing factors, for example, the Foresight's Mental Capital and Wellbeing Project and New Economic Foundation's project, *Five Ways to Wellbeing* (The New Economics Foundation, 2008).

In 2012, the Mental Health Commission of Canada published its first national mental health strategy, *Changing Directions, Changing Lives: The Mental Health Strategy for Canada*. The strategy outlines six strategic directions, three of which align with the focus of the strategy outlined in this Report: promote mental health across the lifespan in homes, schools, and workplaces, and prevent mental illness and suicide wherever possible; provide access to the right combination of services, treatments and supports, when and where people need them; and mobilize leadership, improve knowledge, and foster collaboration at all levels (Mental Health Commission of Canada, 2012). The Public Health Agency of Canada found that the majority of mental illnesses have their onset before the age of 25, and that one in five Canadians will be affected by mental illness in their lifetime. It states as well that many mental illnesses will first manifest during the emerging adult years, from 17 to 25 (Government of Canada, 2006).

The importance of student mental health – including the potential for poor mental health to significantly impact student engagement, success and retention – has been receiving increasing attention in Canada and abroad. This has prompted universities to reflect upon and consider their role and responsibilities with respect to student mental health and well-being. Major initiatives have been launched and research undertaken by key post-secondary groups, such as the Association of Universities and College of Canada (AUCC), Association of Canadian Community Colleges (ACCC), National Association of Student Personnel Administrators (NASPA), and Canadian Association of College and University Student Services (CACUSS). At the same time, numerous studies have demonstrated important linkages between student mental

wellness and academic performance (Ansari & Stock, 2010; Akgun & Ciarrochi, 2003; Eisenberg, Golberstein & Hunt, 2009).

In 2013, the American College Health Association-National College Health Assessment (ACHA-NCHA 2013) provided evidence about student mental health at the post-secondary level and its impact on learning and engagement. For the first time, national and provincial reference group data are available. More than 34,000 students from post-secondary institutions across Canada participated; more than 16,000 from Ontario. The most common health issues that students report as having a negative impact on their academic performance are (in the following order): stress, anxiety, sleep difficulties, internet/computer games, and cold/flu/sore throat.

## THE UNIVERSITY CONTEXT

The University of Toronto has offered professional health and mental health services for its students for decades. More recently, there have been positive shifts in societal views and legislation around mental health and mental illness and access to education. Within the post-secondary environment, much attention has been paid to the increase in both the complexity of student mental health issues and the demand for mental health services. Counselling services across Canadian universities report seeing an increase in the complexity of student mental health problems. As an example, at the University, the number of students registering with Accessibility Services for reasons related to mental health has doubled in the past five years.

Across the University, staff, faculty and student peers have long been a source of support, mentorship and guidance for students. However, the severity of problems with which students are presenting has had an impact. The increase in mental health issues among university students and the corresponding increase in demand for services have been linked to a host of factors, including biological, developmental, social, cultural and environmental. Universities are being challenged to respond to these trends within the student population (Storrie, Ahern & Tuckett, 2010).

University, by its very nature, can be a stressful environment. In the 2013 American College Health Association-National College Health Assessment (ACHA-NCHA) survey, students responded in the following way:

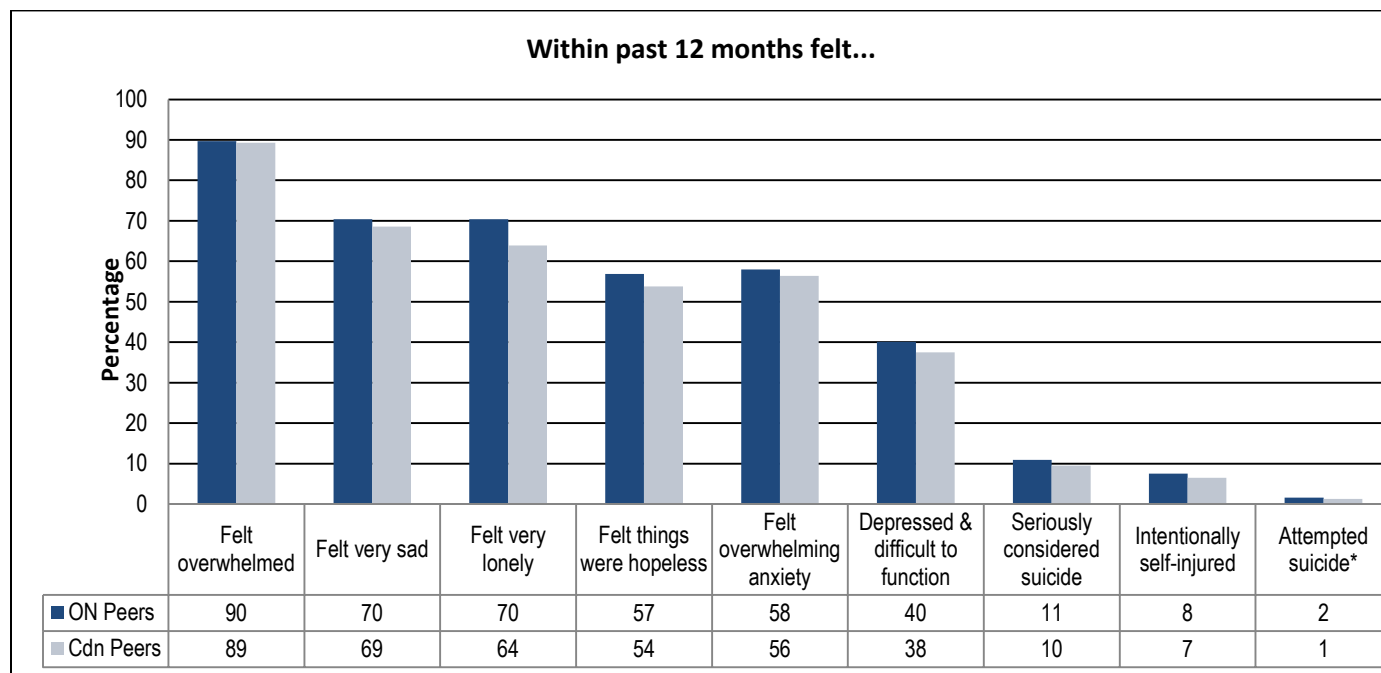


Figure 3: 2013 American College Health Association-National College Health Assessment (ACHA-NCHA) survey

In the past few years, considerable resources have been aligned at the University to create more diverse programming, such as peer and mentor education programs, online counselling, and localized counselling support. In the focus groups, students noted that they do not always know where to turn when they need to talk to someone about their emotional or psychological concerns. Strong communication strategies are essential to ensure that students, staff and faculty are aware of the variety of opportunities and resources available both on and off campus.

According to the University’s benchmarking survey of October 2013 completed in advance of the first meeting of the Provostial Advisory Committee, 97 per cent of respondents were not aware of the *Bounce Back* program (St. George), a program for students on academic probation; 57 per cent had never heard of the *Counselling in Residence Program* (UTSC, UTM); 82 per cent were unaware of the *Counseline* program (St. George), a counselling program offered to undergraduate Arts & Science students; and 70 per cent had never heard of the *Grief Circles* (St. George), grief support groups. On a more positive note, 89 per cent of students surveyed were aware of *AccessAbility Services* (UTSC), and 67 per cent aware of *Counselling and Psychological Services* (St. George).

## DEFINING MENTAL HEALTH

There are numerous definitions of mental health, many of which conceptualize it as something that can be measured along a single continuum of wellness to illness. The World Health Organization defines mental health as, “a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community” (World Health Organization, 2014). Corey Keyes, a sociologist and psychologist at Emory University, describes mental health as measured along a *dual continuum*, having many stages between flourishing and languishing (Keyes, 2007). According to Keyes, languishing implies the presence of some level of mental health impairment that interferes with social and/or occupational functioning, but does not necessarily imply the presence of a mental illness. Languishing can be as limiting to an individual as a diagnosable mental illness. Conversely, individuals with a diagnosed mental illness can flourish, experiencing positive mental wellness.

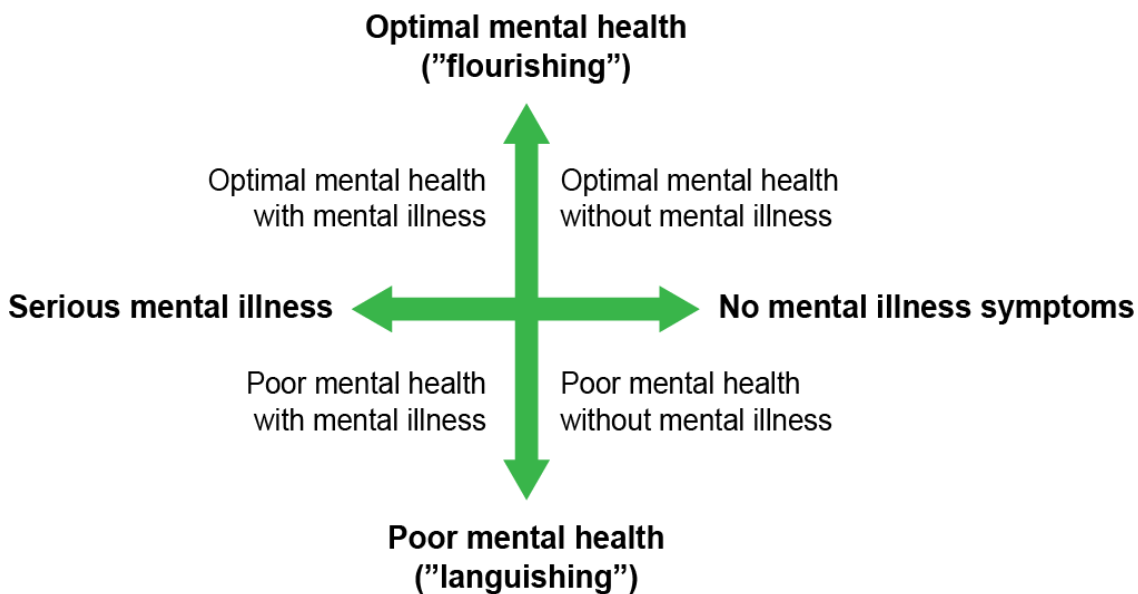


Figure 4: Dual Continuum Model of Mental Health and Mental Illness; MacKean, 2011.

This Report recommends that the University adopt the definition of mental health offered by the Public Health Agency of Canada, which is reflective of Keyes' concept. That is: “*Mental health is the capacity of each and all of us to feel, think, and act in ways that enhance our ability to enjoy life and deal with the challenges we face. It is a positive sense of emotional and spiritual well-being that respects the importance of culture, equity, social justice, interconnections and personal dignity*” (Government of Canada, 2006).

## A SYSTEMS APPROACH TO MENTAL HEALTH

Models of prevention and intervention such as the Campus Population Health Promotion Model (Patterson & Kline, 2008), NASPA Health Education and Leadership Program’s ecological approach (NASPA, 2004), and the Health Promoting Universities reports (World Health Organization, 1998) are based on key assumptions, among which are the interrelatedness of health, learning and campus structure or culture; the interdependence of social, emotional, physical, spiritual health and learning; and the importance of collective responsibility and campus-wide involvement in creating a University environment that is conducive to student mental health and academic success (CACUSS, 2013).

This Report recommends the adoption of a systems approach to student mental health, a recommendation informed by increasing recognition of the complexity of mental wellness and illness, and the availability of evidence and data reflecting the reciprocal relationship between wellness and academic achievement. Such an approach is comprehensive and holistic and addresses the impact of context or setting on student mental health (Byrd & McKinney, 2012; MacKean, 2011; Warwick, et al., 2006).

A systems approach considers the University community as a single entity, creating supportive and inclusive conditions for students to flourish. This approach promotes strategy development and decision-making that are student-centred, grounded in values of informed choice. This ensures the involvement of all stakeholders in a collective, shared responsibility creating campus conditions that support transformative learning and student mental well-being.

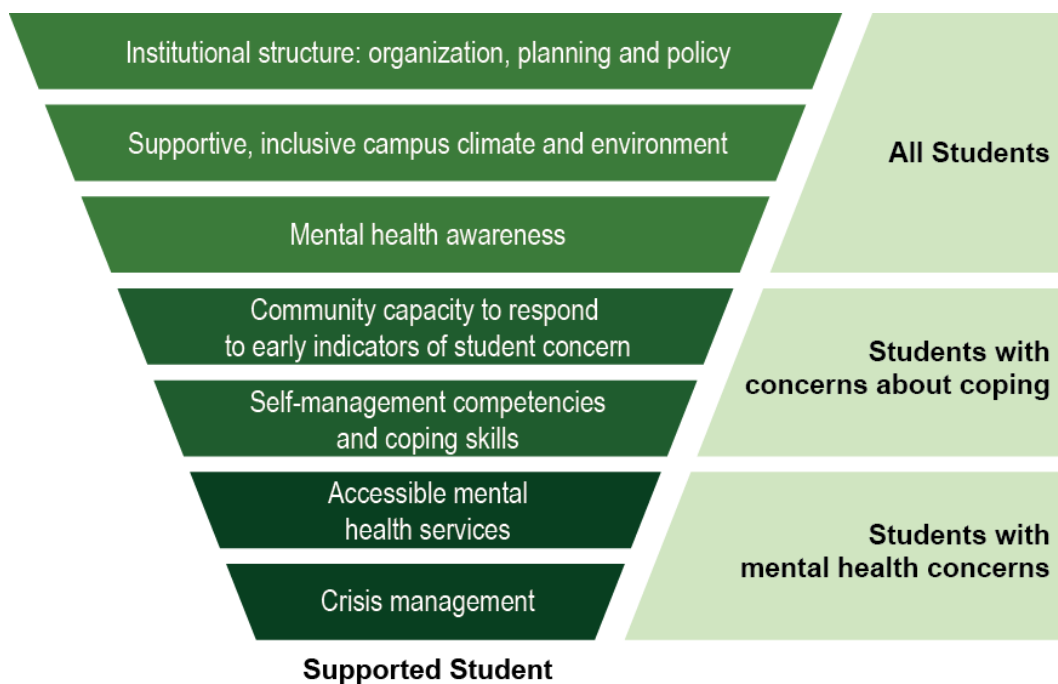


Figure 5: Framework for Post-Secondary Student Mental Health, CACUSS, 2013, p.8-9

## 1.0 INSTITUTIONAL COMMITMENT

A strategic framework provides a guide to implementing a systems approach. It requires ownership and leadership at all levels of the university, including the integration of mental health into all aspects of the institution, whether through policy and practices (Warwick, 2006; NASPA, 2004) or by providing a wide range of supports and programs beyond mental health counselling services (MacKean, 2011; American College Health Association, 2010). This includes considering underlying stressors associated with poor student mental health, enhancing programming that increases the capacity of students to cope with those stressors, and identifying cross-departmental approaches to build more cohesive supports for students.

Given the breadth of factors that impact mental wellness, concerns about student mental health cannot be effectively addressed through a focus on the delivery of mental health services and programs alone. This Report recommends a much broader systemic approach that requires participation at individual, departmental and institutional levels, as well as the need to look beyond the University to health-care community partners to help provide students with appropriate mental health support.

*The concept of the health-promoting university means much more than conducting health education and health promotion for students and staff. It means integrating health into the culture, processes and policies of the university. It means understanding and dealing with health in a different way and developing an action framework that blends such factors as empowerment, dialogue, choice and participation with goals for equity, sustainability and health-conducive living, working and learning environments. (Tsouros, 1998, p. 11)*

The recommendations in this Report recognize the need to continue and expand programs that are preventative in nature. Such programming develops resilience in students, equipping them with the tools to effectively manage the challenges of university life. It is essential that students have continued opportunities to engage actively in curricular and co-curricular programs and activities that support their emotional, physical, cultural, spiritual and economic well-being.

In the review of current systems and initiatives for student mental health and wellness, a significant number of services, programs and initiatives were identified that provide critical and effective support for student mental health, and align with the objectives of the Report's recommendations. Adjustments to course design and curriculum, pedagogical practices, community-building efforts, education and training programs, and the rethinking of services and programs have all contributed to enhancing the links between learning and well-being and shifting our University culture where necessary. While these programs and services have responded to local needs, this Report recommends that we coordinate, benchmark, and assess their effectiveness at the University level.

Taking into account the responses from the Working Group and focus group participants, the Committee recommends the ongoing involvement of a Provostial Advisory Committee to oversee and guide the implementation of recommendations, the development of measures of success, and the eventual evaluation and reporting on outcomes. It will be important to measure the impact of this Report and its recommendations.

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## RECOMMENDATIONS

- 1.1 Mental health is identified as a priority through the University's value statements and strategic goals, with a focus on creating sustainable mental health initiatives.
- 1.2 The University adopts a systems approach in creating supportive and inclusive conditions for students to flourish, involving all stakeholders including the health-care system, the wider community, and the Government.

## 2.0 EDUCATION, TRAINING, AWARENESS & ANTI-STIGMA

Education and training are essential elements of a comprehensive student mental health framework that supports University members so that they can effectively and compassionately respond to students in distress. Best practices in mental health education and training foster a community that is aware, knowledgeable and skilled, building the community's capacity to respond in a consistent manner. Effective mental health education and training supports anti-stigma efforts. A supportive campus environment requires all community members to recognize their responsibility to others as well as themselves. Raising mental health awareness and literacy helps encourage community members' commitment to take action to promote student mental health at the campus level as well as to care for themselves and others. (CACUSS, 2013)

*"Health literacy is defined as the knowledge and skill needed to acquire, comprehend, and apply health information (Kelly, Jorm, & Wright, 2007). Low health literacy is linked to less frequent use of screening and preventive strategies, an increase in the use of hospital and emergency services, and poorer health outcomes (Berkman, Sheridan, Donahue, Halpern, & Crotty, 2011). Those who understand mental health problems and possess the requisite knowledge and skills evidence fewer stigmatizing attitudes (Romer & Bock, 2008) and are more likely to seek help (Kelly et al., 2007; Sareen et al., 2007; Schilling et al., 2008; Shandley, Austin, Klein, & Kyrios, 2010; Vanheusden et al., 2009). Improving mental health literacy during the early adult years remains an important component of a broader health information strategy (Gulliver et al., 2010; Kelly et al., 2007)."* (Cunningham, et al., 2014, p. 414-415).



Feedback from the student mental health focus groups identified a number of issues, such as stigma and a lack of knowledge about mental health and illness, which affect students' willingness to seek support at the earliest possible time. There is a need for greater emphasis on developing positive mental health programming that contributes to building a resilient student community. Students affirmed that mental health services and programs are highly valued, highlighting the importance of receiving the most appropriate help through the most appropriate services at the most appropriate time.

Recommendations to enhance the mental health literacy of students, staff and faculty fall into four key areas:

1. education and information about mental health resources available on campus, how to access those resources and what to expect from them;
2. education and information that help students understand the continuum of mental health and how to recognize when they should seek help for a mental health issue;
3. education and training for staff and faculty on academic accommodation and other supports for students who may be struggling with a mental health issue; and
4. education and information that reduce the stigma associated with mental health issues.

Mental health awareness initiatives should strive to improve students' mental well-being by increasing knowledge and understanding of the determinants, nature, impact, prevention and management of mental health issues. Increased knowledge and understanding builds resilience and capacity to maintain well-being. For example, resilience factors such as awareness of signs of stress, knowledge of coping strategies and belief in the ability to cope have been found to be associated with decreased symptoms of depression among university students (Sawatzky, et al., 2012). Increased mental health awareness also plays an important role in the de-stigmatization of mental health issues (CACUSS, 2013).

Importantly, experts in this area argue that psychological resilience is something that can be developed in individuals, and that the post-secondary setting provides a unique opportunity and context in which to do so. "The raw material of resilience is intellect, physical robustness and emotional stability. How these interact with the surrounding network, culture and practical situations determines the level of resilience based on external support (family, partners, friends, teachers etc.), internal support (abilities and skills and learning to develop them) and existential support (meaning, values and faith)" (Caruana, 2010, p. 3).

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## RECOMMENDATIONS

- 2.1 Develop and implement ongoing, sustainable student mental health education programming, which includes a focus on positive mental health and is designed to meet the specific needs of our diverse student populations. This programming is based on best practices and focused on developing psychological resilience, personal skill development (including self-care practices) and de-stigmatizing mental health problems. Design all mental health education and training to be inclusive, sustainable and measurable; include ongoing assessment and evaluation.
- 2.2 As a community, promote help-seeking as a positive strategy for personal, academic and career success by establishing initiatives (e.g., communication strategies) that encourage help-seeking by students, especially for those who may be at higher risk.
- 2.3 Create a “roadmap” to facilitate student navigation of services and programs that begins with enhanced programming at orientation and continues throughout the academic year, delivering education and information to the University community, including staff, faculty and students.
- 2.4 Develop communication tools and systems that students find credible and relevant (e.g., messages embedded in faculty communication to students, such as course syllabi, and easy-to-navigate content on the institutional website).

### 3.0 INCLUSIVE CURRICULUM & PEDAGOGY

A supportive campus climate and environment encourages student engagement and has been found to have a positive impact on both academic performance and mental health. By creating conditions for meaningful participation in the University community, including the fluid and authentic exchange of ideas, such an environment helps students feel connected and facilitates holistic, integrated learning and development (CACUSS, 2013).

It is widely accepted that overall well-being is an essential element for effective learning and that “education, health and social outcomes are very closely interdependent” (Ansari & Stock, 2010, p. 2). Evidence indicates that excessive academic stress is negatively associated with academic performance and adversely impacts students’ mental and physical health. Experts suggest that this stress can be effectively moderated by “learned resourcefulness” or resilience. Learned resourcefulness is defined as “a set of skills for regulating internal events such as emotions that might otherwise interfere with the smooth execution of target behaviour” (Akgun & Ciarrochi, 2003, p. 288).

A systems approach to wellness requires moving beyond the usual methods of promoting health – a focus on individual behaviours, skills and lifestyle choices – and towards examining ways in which the environment impacts overall well-being (Schrecker, 2013, p. 49). For university students, the environment, including the classroom and broader learning environment, and relationships with faculty and graduate supervisors, has significant potential either to enhance or inhibit mental well-being. By fostering community, social networks and a sense of belonging within learning environments, university staff and faculty may contribute to building protective factors against the development of mental health issues such as depression and anxiety (Hefner & Eisenberg, 2009, p. 497).

The university years are not only a time of academic education for students but also of significant personal and social growth. The University of Toronto celebrates the diversity of its student body and aspires to address the needs of that diverse community: graduate and undergraduate students, international students, new Canadians, students from under-represented groups, and many others. Their development has profound effects during their time in higher education and throughout the rest of their lives – in the choices they make, in their values and priorities, in their career choices, and how they engage in their communities. “A health-promoting university must support healthy personal and social development – enabling students to discover and explore their potential, facilitating them in making healthy choices and encouraging them to explore and experiment safely” (World Health Organization, 1998 p. 35). In keeping with these concepts, the University has made great strides in creating flexible learning environments and in progressive curriculum development.

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## RECOMMENDATIONS

- 3.1 Create conditions inside and outside the classroom that support students’ overall well-being by providing opportunities for students to build community, especially within large classes. Identify existing best practices and highlight them.
- 3.2 Expand academic peer support/mentorship programming; consider ways of making peer mentoring/tutoring programs universal, with an “opt-out” option.
- 3.3 Create programming for graduate students that will foster a greater sense of community within and across departments and faculties, and enhance support for graduate students in their interactions with their supervisors.
- 3.4 Clearly articulate course goals and expectations and promote best practices in assessment and timely feedback. Curriculum Committees and Teaching and Learning Committees in each Division or Faculty should initiate discussions with faculty about the relationship between student stress and course and curriculum design.

- 3.5 Provide access to course materials through a variety of means to reduce barriers to students' full participation. Support and encourage faculty to make course materials available through alternative platforms and syllabi accessible to students.
- 3.6 To help address the issue of stigma within the purview of curriculum and pedagogy, develop a recommended syllabus template to include statements related to both mental health and academic accommodation; include help-seeking and University resources.
- 3.7 Develop programming and training that supports faculty, graduate supervisors, and teaching assistants to create learning environments that encourage students to seek help without fear of judgment or repercussions.

#### 4.0 MENTAL HEALTH SERVICES & PROGRAMS

As previously noted, the University has provided health and mental health services for its students for many decades. In addition to mental health care, increasingly, meeting the mental health needs of post-secondary students has included a focus on personal skill development and self-management. This focus is aligned with the University's priorities, including academic excellence and student engagement. Post-secondary health, mental health and health promotion professionals are well placed to assist students at such a critical period of their development and to build individual resilience and resourcefulness that will contribute to their academic and personal success (Akgun & Ciarrochi, 2003).

Responding to students' need for mental health support is a critical function of counselling services. Early identification of a mental health issue is critical, as it usually predicts better treatment outcomes, and prevents exacerbation of the problem, reducing the demand on limited resources (Government of Ontario, 2011). Through the focus groups, students identified their own lack of awareness of mental health and when it is advisable to seek help as a barrier to accessing mental health services or supports. A focus on psycho-education, personal skill development, self-management, and emotional regulation is preventative and fosters individual resilience; it also promotes more timely help-seeking behaviour (Caruana, 2010).

Students who participated in the focus groups were asked how they cope when they are not feeling emotionally or psychologically well, and how they learned these coping strategies. The most common answers to the first part of the question included activities such as talking with others (primarily friends and family), writing in a journal, distraction (such as movies, watching television), faith and/or prayer and exercise. As to how they developed these strategies, some students reported that they are "still learning" or have learned "the hard way" or "through trial

and error". Many students described using coping strategies they had learned through counselling with a mental health professional as very helpful long after the counselling relationship had ended.

In the focus groups, students often identified staff--academic advisors and students in leadership roles, such as residence dons and peers--as important and credible sources of support. Students identified as a desired resource the provision of local counselling services within their Faculties, colleges, and departments. Providing diverse, flexible and local services, such as embedded counselling services, facilitates timely help-seeking behaviour. In describing their *Let's Talk* program at Cornell University, the authors suggest that students benefit from counselling services being placed in settings outside of centralized counselling offices. For some international students, the availability of more flexible and diverse formats for counselling services is important (Boone, et al., 2011).

In addition, many students access support or treatment from a number of services on and off campus. Student feedback indicated a strong desire and need for systems that would enable students to move seamlessly among services, thereby avoiding delays in accessing essential support at critical times. Students with complex mental health needs may engage with multiple University services; they may be transitioning in and out of hospital, or may need long-term support that must be delivered through community mental health services. Enhancing coordination, collaboration and communication across services and systems on and off campus is critically important to meeting the needs of students.

According to the 2013 CACUSS document, mental health services best support the student population when they offer services and programs that are timely, coordinated, and accessible:

- Grounded in strengths-based principles and conceptualizing mental health across a continuum.
- Integrated and coordinated across counselling, medical, and psychiatric services, and having streamlined referral processes with other University resources and offices to ensure that students are linked to the appropriate level of care.
- Committed to evidence-informed practice across all aspects of mental health service delivery.
- Linked to key resources in the wider community for students requiring specialized care, including local hospitals to ensure coordinated transfer of care at admission and discharge.
- Able to provide timely consultation to administration, faculty, and staff regarding specific student concerns as well as unique needs arising from an academic program.
- Responsive to the changing and diverse needs and perspectives of students.

- Compliant with established professional standards and qualifications for mental health care providers.

The Working Groups found, substantiated through student feedback and best practice, that priorities for mental health services and programs at the post-secondary level include providing a broad range of opportunities to engage with mental health programming that reflects the continuum of mental health. These services and programs need to focus both on developing positive mental health and resilience and on offering flexible and diverse programming that engages students early in order to prevent exacerbation of the problem. Within this continuum of services, another priority is to ensure strong linkages with community resources for students with more complex or long-term needs.

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## RECOMMENDATIONS

- 4.1 Enhance programming for students that has a focus on personal skill development, including individual resilience, coping skills, problem solving, and self-advocacy. Position psycho-educational groups and workshops as a first line of support and best practice for many mental health issues.
- 4.2 Expand peer support programs focused on mental health for students in which peer mentors are linked directly to mental health professionals for training, support and consultation; consider creating community-specific peer support, for example, graduate student peer support, or peer support for students who identify as lesbian, gay, bisexual, trans and queer (LGBTQ).
- 4.3 Expand embedded services across Faculties, colleges and departments to de-stigmatize help-seeking behaviour and create services that have a deeper connection to the local experience.
- 4.4 Enhance education/information that provides a greater understanding of professional mental health care and services, as well as their necessary limitations within the university context.
- 4.5 Enhance case management models of care for students with complex needs, connecting them to appropriate resources.
- 4.6 Enhance education opportunities for all staff, and in particular for those who provide front line services such as campus community police.
- 4.7 Expand partnerships with community-based health resources to support students with complex mental health needs or students who may need long-term support, and

facilitate pathways for students between these community resources and University resources.

## 5.0 POLICIES & PROCEDURES

A systemic approach to campus mental health takes the whole campus environment as contributing to student mental well-being, which includes its policies and procedures. Institutional policies shape campus environments by reinforcing or promoting certain beliefs, values and behaviours while discouraging others (CACUSS, 2013).

Institutional policies can enable or inhibit learning, engaging, and flourishing within the post-secondary setting in ways that have a significant impact on student well-being. This is an area that may be overlooked in favour of placing greater emphasis on individual responsibility for maintaining or enhancing well-being. Within the area of policy, a continuum of individual and systemic factors also exists. Policies range from those that support individual access, needs and well-being to those that are universal by design and aim to provide processes, rules and structures that support all students to flourish personally and academically. A recent review of policy approaches to post-secondary mental health suggests there are two broad categories of policies that have implications for student mental well-being:

1. Policies that specifically support individual students experiencing mental health concerns:
    - a. Accessibility and accommodation policy
    - b. Medical leave and re-entry policy
    - c. Access to information and protection of privacy policy
    - d. Procedure for supporting a student in distress or crisis
    - e. Response to “at-risk” behavior
  
  2. Policies that broadly enable or promote positive systemic mental health:
    - a. creating fair and flexible processes for grading and conflict resolution
    - b. providing clear directions for navigating institutional processes and systems, or limiting barriers within these systems
    - c. promoting inclusive curriculum and pedagogy (academic policies)
    - d. institutionalizing an anti-discriminatory and anti-stigma perspective
- (Olding & Yip 2014)

The University currently has policies and statements which support student mental health and safe and healthy learning environments: Policy on Academic Appeals within Divisions (December 12, 2005); Code of Student Conduct (February 14, 2002); Statement of Commitment Regarding Persons with Disabilities (November 1, 2004); General Principles Regarding Discipline in University Residences (April 18, 1985); Policy with Respect to Workplace Violence (May 13, 2010); Statement on Equity, Diversity and Excellence (December 14, 2006); Statement on Human Rights (July 12, 2012); and the Statement of Institutional Purpose (October 15, 1992).

In cases where serious mental health needs or undiagnosed first episode needs arise at the University, the student's behaviour is often one of the first noticeable indicators that assistance is required. The individual, due to the severity of the illness, may lack insight into appropriate behaviours in a university setting or the ability to perform the essential duties of a student, such as academic work. Policy assists in guiding options for resolution.

A review was conducted of policy best practices and protocols at institutions across Canada when mental health needs are a primary issue of concern and where symptomatic behaviours are creating disruptive or unsafe environments, or where a person is unwilling or unable to engage in treatment or recommended options for resolution. Policies and protocols at a number of Canadian universities were reviewed. These included Brock University, Carleton University, Concordia University, Guelph University, McMaster University, Trent University, the University of Calgary and the University of Windsor. The review revealed a number of best practices that should be considered by the University of Toronto in the development of policies that specifically support individual students experiencing mental health concerns.

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## RECOMMENDATIONS

- 5.1 University policy initiatives should be viewed with an equity and diversity lens that accounts for how individuals with mental health needs are affected by such policies while engaging in University activities.
- 5.2 Develop policy, in accordance with best practice policies and protocols in place at other Canadian universities, to establish pathways to support student needs in cases where the primary issues are related to mental health.



## SUMMARY AND NEXT STEPS

In supporting student success and well-being, the University of Toronto has provided students with excellent mental health services and programs. Our students have, for many decades, benefited from access to a multidisciplinary group of health, mental health and health promotion professionals on campus, as well as student life professionals. Still, students express concern about access to high-demand services, a lack of knowledge or awareness of the variety of services available, stigma associated with mental health and help-seeking, and a lack of understanding about when to seek help for a mental health issue.

Recognizing that the changing landscape of post-secondary student mental health has necessitated a change in the way the University has provided mental health services and programs, health and wellness services at the three campuses has restructured many aspects of service delivery. Greater emphasis is being placed on streamlining access - working toward an “every door is the right door” approach, enhancing coordination and integration of service delivery, and diversifying services and programs (e.g., developing counselling and support programs locally, such as in residences, cyber counselling, support groups, peer support, and partnerships with local community mental health resources). Ensuring that students are receiving the most appropriate support through the most appropriate service has been the priority. It is clear, however, that the mental health needs of post-secondary students cannot be effectively or efficiently met through the delivery of reactive mental health services. There is a growing body of evidence that demonstrates the importance of programming that addresses positive mental health and resilience and the significant impact environments can have on mental health and well-being. That evidence has informed this Report and its recommendations.

If environments impact well-being, then it is also important to expand the responsibility of maintaining well-being beyond the individual. The University’s programs and services have a role in helping students recognize the importance of adopting healthy lifestyles, such as a healthy diet, sleeping more, regular exercise, effective time management, positive thinking, joining communities, resiliency, and learning to cope with adversity. Systems and structures that present significant challenges or barriers to students’ mental well-being need to be addressed. These may include financial worries; academic pressures (internal or external); isolation within departments, off-campus laboratories, and Faculties for graduate students; access to faculty; supervisory relationships; and challenging communication and information tools and systems. The University has responded to many of these challenges or barriers by providing, for example, more opportunities for small class experiences during undergraduate study, enhanced financial assistance, the creation of first-year learning communities, and

expanded opportunities for faculty and staff to learn more about identifying behaviours of students in distress and referring them to the appropriate resources.

Expertise from across the institution's many Faculties, colleges, and departments, along with feedback from hundreds of students, has informed the recommendations developed by the Provostial Advisory Committee. Challenges as well as promising practices, strengths as well as barriers, and opportunities to do better have been thoroughly discussed and summarized.

This Report will be presented to the Provost for consideration and feedback and then communicated to the University community through a variety of means. It will be posted on University websites, and comments and responses solicited from the University community. A communication plan will be developed to provide briefings to University stakeholders and feedback loops. Members of the Committee and the Chairs of each of the Working Groups will be tasked with meeting with local units and University-wide constituent groups to guide the implementation of the recommendations contained in this Report. Assessment and evaluation methods will be considered so that we can measure and report on progress. The Provostial Advisory Committee will continue to meet as needed to receive reports on and assess progress across the institution.

These steps align with the systems approach, which regards every member of our community – staff, faculty and students – as an agent in changing the dialogue around student mental health and recognizing that all elements of the University environment have an impact on well-being. Going forward, this Report should be seen as a guide to assist the University in assessing the extent to which its environments, systems and structures support student mental well-being. The recommendations in this Report will contribute to the continued development of a healthy University, one that provides all students with opportunities to pursue their academic and personal goals. The recommendations also look to students to actively engage in fostering a healthy and resilient community and in helping to nurture an empathic and inclusive community.

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Policy on Academic Appeals within Divisions, December 12, 2005

<http://www.governingcouncil.utoronto.ca/Assets/Governing+Council+Digital+Assets/Policies/PDF/ppdec122005.pdf>

Policy with Respect to Workplace Violence, May 13, 2010

<http://www.governingcouncil.utoronto.ca/Assets/Governing+Council+Digital+Assets/Policies/PDF/violence.pdf>

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Statement on Equity, Diversity and Excellence, December 14, 2006

<http://www.governingcouncil.utoronto.ca/Assets/Governing+Council+Digital+Assets/Policies/PDF/ppdec142006.pdf>

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## APPENDICES

Appendix A: Provostial Advisory Committee on Student Mental Health Membership

Appendix B: Provostial Advisory Committee Working Group Membership

Appendix C: Provostial Advisory Committee Working Groups Terms of Reference

Appendix D: Environmental Scan Student Mental Health Programming (Fall 2013)

Appendix E: Benchmarking Survey 2013

Appendix F: 2014 Student Mental Health Focus Group Questions

Appendix G: Student Mental Health Focus Group Participation

## APPENDIX A: PROVOSTIAL ADVISORY COMMITTEE ON STUDENT MENTAL HEALTH MEMBERSHIP

Jill Matus, Vice Provost, Students, & First-Entry Divisions (Chair)

Alexis Archbold, Assistant Dean of Students, Faculty of Law

Andrea Carter, Director, High Risk Matters & AODA, Office of the Vice Provost, Students & First-Entry Divisions

Luc De Nil, Vice Dean, Students, School of Graduate Studies

Lucy Fromowitz, Assistant Vice-President, Student Life

Rick Halpern, Dean & Vice-Principal (Academic), University of Toronto Scarborough

Kelly Hannah-Moffat, Vice-Dean, Undergraduate, University of Toronto Mississauga

Kaleem Hawa, Undergraduate Student, Global Health and International Relations

Ira Jacobs, Dean, Faculty of Kinesiology and Physical Education

Bonnie Kirsh, Associate Professor, Department of Occupational Science & Therapy

Andrea Levinson, Psychiatrist-in-Chief, Health and Wellness, Student Life

Tanya Lewis, Director, Academic Success & Accessibility Services, Student Life

Roula Markoulakis, PhD Candidate, Department of Rehabilitation Science

Susan McCahan, Vice-Dean, Undergraduate, Faculty of Applied Science & Engineering

Faye Mishna, Dean, Factor-Inwentash Faculty of Social Work

Mark Overton, Dean of Student Affairs, University of Toronto Mississauga

Desmond Pouyat, Dean of Student Affairs, University of Toronto Scarborough

Janine Robb, Executive Director, Health & Wellness, Student Life

Yves Roberge, Principal, New College

Judy Vorderbrugge, Community Health Coordinator, Health Promotion Programs

Sandy Welsh, Vice-Dean, Graduate Education & Program Reviews, Faculty of Arts and Science

Francine Wynn, Undergraduate Chair, Lawrence S. Bloomberg Faculty of Nursing

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**EDUCATION, TRAINING, AWARENESS AND ANTI-STIGMA:**

Lucy Fromowitz, Desmond Pouyat, Janine Robb, Mark Overton (Co-Chairs)

- Alexis Archbold, Assistant Dean of Students, Faculty of Law
- Krystal Arndt, Coordinator, Student Crisis Response, Student Life
- Nythalah Baker, Equity and Diversity Officer, UTM
- Laura Bradbury, Manager, Community Safety, Community Safety Office
- Kelley Castle, Dean of Students, Victoria University
- Anita Comella, Assistant Dean, Co-Curricular Physical Activity and Sport, Faculty of Kinesiology and Physical Education
- Kaleem Hawa, Undergraduate Student, Global Health and International Relations
- Elizabeth (Elsa) Kiosses, Health Promotion Nurse, Health & Wellness Centre
- Bonnie Kirsh, Associate Professor, Department of Occupational Science and Occupational Therapy
- Lari Langford, Librarian, Library – Access and Information
- Don MacMillan, Director, Student Services, School of Graduate Studies

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**INCLUSIVE CURRICULUM DESIGN & PEDAGOGY:**

Faye Mishna and Tanya Lewis (Co-Chairs)

- Megan Burnett, Associate Director, TATP, CTSI
- Tina Doyle, Director, AccessAbility Services, UTSC
- Susan McCahan, Vice Dean, Faculty of Applied Science and Engineering
- Keren Rice, Chair, Department of Linguistics, Faculty of Arts and Science
- Cheryl Shook, Registrar, Woodsworth College
- Sandy Welsh, Vice-Dean, Graduate Education & Program Reviews, Faculty of Arts and Science



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## **POLICIES & PROCEDURES:**

Andrea Carter (Chair)

- Jane Alderdice, Director, Quality Assessment & Governance, School of Graduate Studies
- Alison Burnett, Director, Health & Counselling Centre, UTM
- Susan Calanza, Assistant Faculty Registrar, Petitions, Faculty of Arts & Science
- Sam D'Angelo, Acting Director, Campus Police Services, St. George
- Kelly Hannah-Moffat, Vice Dean Undergraduate, UTM
- Jason MacIntyre, Dean of Residence, Graduate House, St. George
- Barbara McCann, Registrar, Applied Science & Engineering, St George
- Roula Markoulakis, PhD Candidate, Graduate Department of Rehabilitation Science
- Dale Mullings, Assistant Dean, Students & International Initiatives, UTM
- Gary Pitcher, Director, Campus Safety, Issue and Emergency Management, UTSC
- Helen Slade, Coordinator, Student Academic Progress

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## **MENTAL HEALTH SERVICES AND PROGRAMS:**

Janine Robb and Andrea Levinson (Co-Chairs)

- Michelle Brownrigg, Director, Physical Activity and Equity, Faculty of Kinesiology and Physical Education
- Francesca Dobbin, Director, Family Programs and Services
- David Kim, Acting Dean of Students, Woodsworth College
- Leslie Nickell, Associate Dean, Office of Health Professions Student Affairs, Faculty of Medicine
- Elizabeth Martin, Director, AccessAbility Resource Centre, UTM
- Michelle Verbrugghe, Director, Student Housing and Residence, UTSC

## APPENDIX C: Provostial Advisory Committee Working Groups - Terms of Reference

- 1) Awareness, Education, Training & Anti-stigma
- 2) Inclusive Curriculum Design and Pedagogy
- 3) Policies and Procedures
- 4) Mental Health Services and Programs

Following is the vision, mission, problem statement, guiding principles/values and decision process that were applied consistently across the terms of reference for the four working groups. Each working group within this framework identified individual objectives.

### **Vision:**

Comprehensive, coordinated and evidence-informed practices and programming supporting optimal student mental health.

### **Mission:**

To contribute to the development of a mental health strategy that will guide and inform the development and implementation of services, programs and activities designed to impact student mental health at the University of Toronto.

### **Problem Statement:**

Student mental health and well-being are integral to student engagement and academic success. Mental health challenges, most notably, stress, anxiety and depression, impact students' ability to reach their full academic and personal potential.

### **Guiding Principles/Values:**

1. Mental health is essential to students' academic success, as well as their ability to participate fully in all aspects of the student experience.
2. Staff, faculty and student leaders are key partners in early identification and intervention for students in distress and must be provided with the best available knowledge and tools to respond appropriately and refer.
3. Programs and services should reflect best available evidence and the integration of the whole student experience, including the physical, socio-economic, emotional, spiritual, political and cultural aspects of life and learning.
4. Where possible, students' active engagement and participation will be sought in the development of knowledge, policies, protocols, services and programs.
5. Where possible, the mental health expertise of our multidisciplinary teams will be sought in the development of knowledge, policies, protocols, services and programs.

### **Decision-Making Process:**

- ensure that decisions include those related to the project's overall goals
- encourage the full participation of all team members
- be transparent, open and clear
- provide opportunities for exchanges of knowledge and information that draw on the various skills and areas of knowledge of different team members
- strive first for consensus and then will use simple majority votes

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### **AWARENESS, EDUCATION, TRAINING & ANTI-STIGMA WORKING GROUP**

Faculty, staff and student leaders are key partners in early identification of students in distress. They have been strengthening their awareness and knowledge of mental health needs through training opportunities in order to respond in the most appropriate manner to support the students' identified needs. We must strive to provide education and training that is consistent, coordinated and based on the best available evidence.

#### **Objectives**

1. Review and evaluate current mental health education and training programs at U of T (staff, faculty and/or student leaders), identifying best practices.
2. Review and evaluate mental health education and training programs currently in place at comparable post-secondary institutions, identifying best practices.
3. Identify potential on-campus partners with whom training could be collaborative and ensure consistency.
4. Make recommendations for ongoing evaluation of education/training efforts.

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### **INCLUSIVE CURRICULUM DESIGN & PEDAGOGY WORKING GROUP**

Targeting individual skill development is only one component of a comprehensive approach to student mental health. Pedagogical systems and structures should be designed in such a way that they support students to flourish (refer to Corey L. M. Keyes work Flourishing and Languishing: <http://www.jstor.org/stable/3090197?seq=4>).

#### **Objectives:**

1. Identify key issues related to students' experience of academic learning that contributes to difficulties with their mental health.
2. Identify supports for faculty related to students' mental health issues.
3. Identify best practices in curriculum development and teaching to support student learning and wellness.

4. Communicate priorities that will support faculty and students in maintaining student wellness.

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## **POLICIES & PROCEDURES WORKING GROUP**

Policies and procedures should help to ensure consistent, fair and equitable approaches to student mental health needs across the institution.

### **Objectives**

1. Explore opportunities to revise and/or recommend the development of policies that will support consistent, evidence-informed, inclusive and empathic approaches to student mental health across the institution.
2. Review, revise and/or develop institutional Health and Wellness policies and procedures that reinforce values and behaviours that will support student mental health and learning. Conduct a review and assessment of best practices and protocols at Canadian institutions in supporting students with mental health needs.
3. Review related institutional policies (i.e., Code of Conduct) and identify opportunities where revision or policy development could significantly impact student mental well-being.

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## **MENTAL HEALTH SERVICES & PROGRAMS WORKING GROUP**

Health and counselling services within post-secondary institutions are challenged to meet the mental health needs of students in a timely manner across the continuum of care.

### **Objectives**

1. Review current U of T services and programs to identify existing best practices, as well as opportunities to shift practices towards a strengths-based approach to care.
2. Through a review of comparable post-secondary mental health services and programs, identify evidence-informed strategies designed to meet student mental health needs in a timely and coordinated way across the continuum of care.
3. Highlight opportunities to collaborate with campus partners in support of efforts aimed at early intervention, assessment and referral to the most appropriate service/program.
4. Identify key community stakeholders.
5. Recommend strategies for ongoing evaluation and continuous system improvement.



## UNIVERSITY OF TORONTO

### Student Mental Health Programming

September 2013

A recent article in *University Affairs* begins by describing the great rise in mental health needs as a “tsunami” on Canadian University campuses which is prompting a “reordering [of] priorities in every community and educational institution.”<sup>1</sup> For many years now, the University of Toronto has offered support services for students with mental health needs as well as proactive programming aimed at promoting a healthy lifestyle and stress alleviation. A survey of the work undertaken reveals that across the three campuses, the focus in student mental health programming has been on **achieving and maintaining wellness; increasing awareness and anti-stigma education; training for staff and students; and providing professional services.**

The University endeavours to take a holistic approach to education and stress prevention. This comprehensive assistance begins as professionals and students from each campus work with local school boards to create a friendly, helpful, and informative transition for students from their secondary school environment into their new university settings. Each campus engages first year students in “Move U” which supports “active healthy living opportunities” that will sustain them as they transition into university life. Programs like “Move U” are inclusive of both commuting students and those who choose to live in the University’s residences. Each campus – St. George, University of Toronto Mississauga (UTM) and University of Toronto Scarborough (UTSC) – also provide individual activities. These include peer mentoring, professional counselling (including individual cyber-counselling), Monday mediations, yoga, and messaging to assist students. There is also a plethora of group activities including workshops, seminars, mental health awareness months, or UTM’s “Healthy Campus Crew” which trains student ambassadors to facilitate wellness events on campus. All of these initiatives are anchored by

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<sup>1</sup> McCloskey, L. and Meissner, J. “A proven approach to student success.” *University Affairs Magazine* October 2013: 20-25. Print.

professional services and facilities on each campus: the Counselling and Psychological Services (CAPS) and Accessibility Services at the St. George Campus; the Health and Counselling Centre and AccessAbility Services at UTM; and the Health and Wellness Centre at UTSC. With such extensive year-round promotion of wellness, the University encourages and engages students to seek a healthy balance as they pursue their academic programs, thereby reducing the stress that comes when mid-term and final examinations arise. A wide range of projects are supported centrally to ensure equity across the University, but many programs and services are initiated and delivered locally to best meet the specific needs of each campus community. Local programming provides for a degree of flexibility as communities and their needs change over time.

Regardless of campus or division of registration, students who require medical assistance for a mental health issue have access to a campus-based health service; similarly, students requiring an accommodation have access to a local accessibility centre but also to a tri-campus accessibility service network (which means that if a student at one campus takes a course at another, there is a process in place that allows the student to receive appropriate accommodation on both campuses); and still other students participate in Health and Wellness programs that are committed to assisting students develop much needed coping skills, build resilience, and expand their understanding of mental health issues through improved educational programs.

This report\* is intended to capture the array of services, programs and initiatives that are available across the University of Toronto's three campuses: St. George, UTSC and UTM. What has not been developed yet is an overarching Strategy and Framework around our manifold offerings. A Strategy and Framework is necessary to a) establish the principles around which students are supported and faculty and staff are supported in their interactions with students; b) identify gaps in service and evaluate how they should be filled given overall strategy and institutional priorities; c) consider research on effective programming and training nationally and internationally; d) ensure tri-campus co-ordination and alignment of programming; e) communicate and encourage best practices across the University; f) assess and analyze the outcomes of existing programming; and g) recommend changes in existing policy and procedure.

This "environmental scan" of programming has been compiled for the consideration of the Provostial Advisory Committee on Student Mental Health, whose work, beginning in 2013-14 is to develop a comprehensive tri-campus Strategy and Framework around student mental health.

\*The report is not intended to capture the exhaustive inventory of all programs available at the University.

## Mental Health Initiatives across the University

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### Wellness Programs

**Wellness Programs** are central to the University's approach. By ensuring that students have the means and opportunity to maintain or prepare for good mental health, wellness programs help to build resilience and understanding. Examples of tri-campus wellness programs include *Exam Jam*, *Green Dot Training*, and participation in *Building on Your Strengths (Mental Health Awareness) month* each October.

### Awareness & Training Programs

Awareness and Training programs build capacity for students as well as faculty and staff at the University. Each campus offers a variety of programming that reflects local needs but also emphasizes tri-campus commonalities.

These training programs dovetail with campus-specific programming:

St. George: **Health and Wellness Rounds** (helps prepare staff to identify and address emerging issues and provides specific training on more severe issues)

UTSC: **Student Leaders Helping to Support Mental Wellness** (training offered for student leaders on identifying and referring students faced with mental health challenges or crises) UTM: **Mental Health & the Helping Role** (professional Personal Counsellor and Health Educator trains 150 Student Helpers in Residence and Student Life Departments to be peer mentors and to provide basic training and understanding of mental illness to other students).

### Professional Services & Support

The University offers a variety of professional services for students experiencing acute crises or requiring on-going support. Professional staff develop many of the training and education programs noted and also provide direct support and services to students.

Various education, support and training programs and initiatives are provided through the academic support centres, accessibility service offices, counselling services, health services, multi-faith groups, registrar offices, athletics and wellness centres and residences across the University. The diversity of support offered through these offices and programs is necessary as these are frequently the front-line service for many students.

## Programming

What follows is an inventory of mental health initiatives undertaken on the three University of Toronto campuses. The presentation of data in table format is followed by a description of the programming. The information provided in the first section identifies those activities that are common to all three campuses. The following three sub-sections highlight campus-specific work that is undertaken.

### Chart 1: Tri-Campus Initiatives - 2011-12

#### Impact On Student Health and Wellness

Service/Event	Wellness	Stress Reduction	Resilience	Education
Exam Jam	√	√	√	
Massage/Massage Monday/Massage Therapy Opportunities	√	√		
October Mental Health Awareness	√	√	√	
Mindfulness Meditation	√	√		√
MoveU (Faculty of Kinesiology and Physical Education)	√	√		√
safeTALK Suicide Alertness for Everyone	√	√		√
Green Dot	√			√
CIE Workshops	√	√	√	
Academic Success		√		√
Accessibility Services			√	√
Athletics and Recreation Opportunities	√	√	√	√
Crisis Coordinators				√
Aboriginal and Indigenous Programming	√			√
Health Services	√	√	√	√
Multi-Faith Centre	√	√		√
Faculty/College Services		√		√
Registrars				√
Health Campus Framework and Mental Health Strategy	√		√	√



## Chart 2: St. George Campus - December 2011-2012

### Impact On Student Health and Wellness

Service/Event	Wellness	Stress Reduction	Resilience	Education
Exam Jam	√	√	√	
Better Health for a Better GPA	√	√		
Healthy Relationships Workshops	√	√	√	
Healthy Ucrew	√			√
Just-in-Time Information	√			√
Jack Project Member	√	√		√
Kickstart	√			
Massage Mondays	√	√	√	
October Mental Health Awareness	√	√	√	√
Mindfulness Meditation	√	√	√	
Mindful Mondays	√	√	√	
Mindful Eating Workshop	√	√	√	
MoveU	√	√		
Peer Support Network	√			
Personal Effectiveness Workshops (GPS)	√	√	√	
Stressbusters Stress and Anxiety Drop-In	√	√	√	
StudentHealth 101	√			√
Health & Wellness Webinar	√	√	√	
Happiness Webinar	√			
Coping Skills Workshops Webinars	√	√	√	
Conference: Minding our Minds				√
Identifying, Assisting & Referring the Student in Distress				√
Faculty of Law Peer Mentorship Program				√
Residence Life Training				√
From Crisis to Calm Workshop				√
Health & Wellness Rounds				√
SafeTALK Suicide Alertness for Everyone				√
Counselling & Psychological Services	√	√	√	
Coping Skills Workshops	√	√	√	
Bounce Back Group	√	√	√	
Counseline	√	√	√	
CAPS Counselling/Psychotherapy Services	√	√	√	
Disordered Eating Support Group	√	√	√	
CBT for Insomnia Group	√	√	√	
ADHD Assessments	√	√		
Stress Management Online Tool	√	√	√	
CIE Workshops	√	√	√	
Grief Support Circles	√	√	√	
Academic Progress Coordinators				√
Academic Success		√		√
Accessibility Services			√	√
Athletics and Recreation (Faculty of Kinesiology and Physical Education)	√	√	√	√
Crisis Coordinators				√
First Nations House	√			√
Health Services	√	√	√	√
Multi-Faith Centre	√	√		√
Deans of Students				√
Registrars				√
Health Campus Framework and Mental Health Strategy	√		√	√

### Chart 3: Scarborough Campus (UTSC) – May 2011-2012

#### Impact On Student Health and Wellness

Service/Event	Wellness	Stress Reduction	Resilience	Education
Benefits Fair	√	√	√	
Evening with Steven Page	√			
Exam Jam	√	√	√	
Green Dot	√			√
Green Dot Video	√			√
Massage	√	√		√
Mental Health Network Launch	√			
Mental Health Awareness Month	√	√	√	
Mental Health Understood Fair	√			√
MoveU	√	√	√	
Stress Busters	√	√	√	
Mindful Eating Workshop	√	√	√	
MoveU	√			
XAO (Expression Against Oppression)	√			
Mental Health Issues on Campus	√	√	√	
New faculty orientation	√	√	√	
Student Leaders – Helping to Support Mental Wellness	√			√
Residence Life Training	√	√	√	
Strength Based Resilience: Integrating Risk and Resources	√			
Monthly educational rounds	√	√	√	
Treatment Modalities of DBT and PPT				√
Barbra Schlifer Commemorative Clinic: Services for Women				√
Mental Health Disorders – 3 session series for Clinicians				√
Sexual Diversity				√
Conference of the Canadian Positive Psychology Association:				√
Conference: Mind our Minds				√
Mental health training to new professors and teaching assistants through CTL	√	√	√	
SafeTALK Suicide Alertness For Everyone	√	√	√	
Academic Advising& Career Centre	√	√	√	√
Reducing your Academic Stress	√	√	√	
Silencing your inner Critic	√	√	√	
1-on-1 with an Academic & Learning Strategist	√	√	√	
AccessAbility Services	√	√	√	√
Health & Wellness Centre	√	√		
Sleep	√	√	√	
Overcoming Perfectionism and Boosting Productivity	√	√	√	
Stress and Anxiety Mastering your Mood	√	√	√	
Group Stress Management				√
Procrastination				√
Mindfulness,				√
Student Welfare Group				√
Multi-Faith Centre	√	√		√
Residence				√
Registrar Services				√
Healthy Campus Framework and a Mental Health Strategy	√		√	√

## Chart 4: Mississauga Campus (UTM) - May 2011-2012

### Impact On Student Health and Wellness

Service/Event	Wellness	Stress Reduction	Resilience	Education
5 Ways to Wellbeing Campaign (5W2W)	√	√	√	
Mindfulness meditation sessions	√			
RAWC and community recreation activities	√	√	√	
Stress Busters	√			√
Paws and De-stress at the HMALC Library	√			√
utmPLUS weekly transition seminars	√	√		√
rezONE Wellness seminars	√			
Mental Health Awareness Month	√	√	√	√
genONE wellness seminars	√			√
Peer Health Education Teams:	√	√	√	
Nutrition				
Active Living				
Mental Health				
Sexual Health and Relationships				
Leave the Pack Behind (Tobacco Cessation)				
Drugs and Alcohol				
Healthy Campus Crew	√	√	√	
The Healthy Habits Challenge seminar	√	√	√	
MoveU	√			
Student Health 101	√			
New faculty orientation	√	√	√	
safeTALK Suicide Alertness for Everyone	√			√
Peel Board of Education parent & family presentations	√	√	√	
Dufferin-Peel Board of Education parent & family presentation	√			
Identifying and Referring Students in Crisis Instructor & TA workshop	√	√	√	
Peer Mentoring Programs				√
Student and Family Orientations				√
Online learning strategy program				√
AccessAbility Resource Centre			√	√
UTM Health & Counselling Centre	√	√	√	√
Conference: Mind our Minds				√
Mental health training to new professors and teaching assistants through CTL	√	√	√	
Weekly Don Facilitated Discussion Group	√	√	√	
Learn to Run Program	√	√	√	
Registrar's Office				
Student Housing and Residence Life Training				
Student Behavioural Concerns Team	√			
Student Union De-stressors		√		√
campUS Women's Safety Project	√	√	√	√

## Descriptions of Campus Specific Initiatives

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### St George Campus

#### 1. Focus on Wellness

- **Exam Jam:** Workshops offered previous to exam period include mind-body movement and mindfulness meditations. “Healthy mind + healthy body=exam success!”
- **Green Dot:** Creates a culture intolerant of violence and promotes the individual choice to make the University safer
- Health Promotions: Better Health for a Better GPA campaign
- **Healthy Relationships Workshops:** Speak Your Mind; Ask First campaign
- **Healthy U Crew:** During first term, this student-led team focuses on stress management. The Worry Tree (an interactive display) encourages students to share what’s causing them stress/distress, while others can post helpful solutions.
- **Just-in-Time Information:** Twitter, Facebook and public screens across campus
- **Jack Project** member: This project is designed to support youth as they transition from late high school to university, helping them to achieve and sustain optimal mental health. There is a Youth Summit planned for 2013.
- **Kickstart:** A healthy active living movement session directed to new students that explores strategies to support overall wellbeing
- **Massage Mondays:** Free mini Shiatsu massage at Hart House (HH)
- Mental Health Awareness (October)
  - New mental health campaign called “of another MIND”
  - This campaign is indicative of U of T’s commitment to address the stigma associated with mental illness. Health & Wellness, in collaboration with other departments at U of T, are hosting a number of events throughout the month of October to bring awareness to mental illness and mental health more broadly.
  - October 10th: **From Me 2 U** on Twitter where new students tweet questions and upper year students tweet advice (Follow the conversation at @Me2UofT)
  - October 22nd: **The Happy Movie:** explores the secrets of this emotion and engages students in relative discussion
  - October 24th: **5-Buck Lunch & Mental Health Fair:** Encourages familiarity with resources at U of T and in the community, to support mental wellness, focus on food and its effect on mood
  - **Wellness Workshops** throughout the month of October.
- **Mindfulness:** Mindful Mondays; Mindfulness Meditation (Multifaith Centre, HH); Mindful Eating Workshop; Mindfulness Meditation online
- **MoveU:** Partnership with HH, the Faculty of Kinesiology & Physical Education (KPE) and ParticipACTION around **healthy lifestyles**; Engages first-year students to promote and support

active healthy living opportunities that will help them transition and support their growth and development during their post-secondary experience; Very active social media campaign

- Peer Support Network: “Peers are Here”
- **Personal Effectiveness Skills-Building:** Component of the School of Graduate Studies’ Graduate Professional Skills (GPS) program by offering two workshops; “Stress Management” and “When Everything Seems to Be Going Wrong”
- **Stressbusters:** Stress and anxiety drop-in clinic at University College
- StudentHealth 101: eNewsletter
- **Webinars:** Health & Wellness Tips; Coping Skills; Happiness
- Conferences, such as Victoria University’s, “**Minding our Minds**” - held in November 2012, it explored “The Crisis of Mental Illness on Campus – Why Diagnoses are on the Rise” and “University Programmes and Best Practice in Preventative and Responsive Models”

## 2. Training

- Health & Wellness (H&W) and Student Crisis Response Programs workshops:
  - “**Identifying, Assisting and Referring the Student in Distress**” with the Centre for Teaching Support and Innovation (CTSI) for teaching assistant orientation; Residence Life staff training to approximately 250 Residence Dons, and First-Year Learning Community Peer Mentor Training (61 FLC mentors)
  - Faculty of Law Peer Mentorship Program (five senior mentors)
  - Workshops presented through ODLC:
    - “**Identifying and Referring Students in Difficulty**” for staff and faculty - these sessions provide tips on how to recognize early signs of difficulty, and introduce a comprehensive array of campus and community resources. Participants have an opportunity to practice simple strategies for ensuring students are connected to the resources that can assist them.
    - “**Understanding Student Mental Health**”
    - “**Self-Care for Student Life Professionals**”
- **Residence Life Training** Workshop, “From Crisis to Calm”, “Eating Disorders in Residence”
- Development and delivery of mental health workshop for the **Faculty of Information**
- CACUSS 2011 COUCH Program/Service of the Year Award for work in **developing mental health education resources**
- Engagement with the **Toronto District Catholic School Board** regarding transition support/programming (mental health focus) for Grade 12 students
- In partnership with the Academic Success Centre, presentation on “Transitioning from SE to PSE: Helping to Bridge the Gap” at the **Ontario Healthy Schools Coalition (OHSC)** conference on “Mental Wellness: Building Capacity within the School Community”
- H&W joint educational rounds, including “**Treatment of Bipolar Disorder**” (Dr. L. Trevor Young, Department of Psychiatry, University of Toronto), “**Sick- Not Weak**” (Michael Landsberg, sports TV personality), and “**Suicide Risk Assessment in Primary Care**” (Sandra Yuen, CAPS)

- Mental health training to **new professors and teaching assistants** through CTSI
- **Health & Wellness Rounds:** Interprofessional education and training meetings
- SafeTALK Suicide Alertness For Everyone training

As part of our commitment to creating a suicide-safer community on campus, the Office of Student Life offers safeTALK workshops to students, staff and faculty throughout the year. SafeTALK is a 3-hour training designed to ensure that people with thoughts of suicide are connected to helpers who are prepared to provide first aid interventions. Designed by Living Works the safeTALK workshop is part of a university-wide suicide prevention strategy.

### 3. Support Services

#### **Academic Progress Coordinators**

The Coordinators work to build and strengthen networks within the University to support students whose continual or recurring needs compromise their ability to fulfill the essential duties of being a student, to engage in university life and to meet expectations for success in the University. They support students with on-going mental health and/or other disability issues, financial vulnerability, limited social supports, and/or limited coping abilities and academic skills.

#### **Academic Success**

Offers a variety of academic supports including counselling and workshops such as stress management; overcoming exam anxiety; “What to do When Everything Goes Wrong”; “Write Fright”; supports facilitated study groups and peer mentors.

#### **Accessibility Services (AS)**

Provides support services, academic accommodation, test and exam facilities for 2,188 students (2011/12) of whom 39% have diagnosed psychiatric disabilities and 11% ADHD.

#### **Athletics & Recreation (Faculty of Kinesiology and Physical Education)**

KPE focuses on wellness through active physical healthy lifestyle choices that will improve students’ lives outside the classroom. They provide the forum for participation in a wide variety of physical activities spanning the complete range of skill levels, from varsity athletics to intramural sports to drop-in programs in the fitness areas.

#### **Counselling & Psychological Services - CAPS**

- Established a set of **self-care workshops involving stress management strategies, mind-body techniques and cognitive behavioural therapeutic techniques** for students with low level psychological distress; 359 students attended at least one workshop
  - **Coping Skills Workshop Series:** Designed to help students develop cognitive, behavioural, emotional and self-care skills
    - **Balanced Thinking:** Identifying unhelpful thinking styles and practicing ways to think in a more “balanced” way
    - **Behavioural Change:** How to approach tasks in manageable steps, examines avoidance and its relationship to procrastination, perfectionism, anxiety and low mood

- Emotional Regulation: Examines healthy/unhealthy experiences and expressions of different emotions. Examines coping skills
  - Balanced Living: Looks at relaxation and mindfulness methods and where to find those activities on campus and in your community
- **Bounce Back** (for students on academic probation)  
This program bridges learning and psychological skills to enhance students' academic functioning and psychological **resiliency** and advance towards academic success. This is a partnership between CAPS, Academic Success, AS and the Faculty of Arts & Science. These **resiliency** groups are for first-year and second-year undergraduate students experiencing academic difficulties.
- **“CounselLine”**: **Cyber Counselling** service, a partnership with the Factor-Inwentash Faculty of Social Work and the Faculty of Arts & Science. This service is available to all Faculty of Arts & Science undergraduate students and provides online, in person counselling services delivered by trainees and supervised by a CAPS staff.
- **Individual Counselling and Psychotherapy (CAPS).**
  - 11,924 students were seen at HS, comprising **32,399 visits**
  - 3,814 students were seen at CAPS, receiving **16,323 visits**
  - 1,774 students were common to both CAPS and Health Services (HS)
  - 2,570 International students were seen at H&W (2,423 at HS and 415 at CAPS) representing approximately 10% of students seen in both clinics
  - Embedded counsellors saw 70 students at four professional faculties for a total of 190 visits
  - **Embedded counsellors** expanded outreach at the professional faculties (Law, Engineering, Physiotherapy and Speech Language Pathology, Dentistry and Pharmacy) as well as skill building workshops at the Colleges
- **Disordered Eating Support Group (CAPS and AS)**  
Provides an opportunity for students to meet others and share coping strategies rather than a treatment or intervention group
- **Insomnia Cognitive Behavioural Therapy** series of group meetings for students; continued to build **partnership with AS** to ensure that students are getting the care that they need, in the right place at the right time, and have adequate supports for academic success
- Co-Assessments between AS and CAPS for **ADHD assessments**
- Collaboration/partnership with Academic Success in development of **online tool for stress management**
- Development, in partnership with CIE, of new comprehensive workshop aimed at **supporting international student** health and wellness
- Launch of **Grief Support Circles** for students in collaboration with the Family Care Office, Multi-Faith Centre, and the Ecumenical Chaplaincy at the University

### **Crisis Coordinators**

The Coordinators serve as a resource in strengthening the capacity of all University staff to respond quickly and effectively to students in distress or in crisis, and provide advice and support to staff and faculty on matters related to student crisis.

### **First Nations House:**

- Provides comprehensive programming, including support services and writing workshops for Aboriginal Students
- Two Elders are accessible to students

### **Health Services:**

- Created a Wellness Counsellor & Coordinator to act as an embedded counsellor and provide educational opportunities for coping and stress management
- In partnership with Accessibility Services, KPE and the MacIntosh Clinic, Health & Wellness has established a Head Injury Working Group to improve management of concussions across campus
- “On-Call Psychiatrist” available for high urgency cases requiring rapid attention (104 seen in past year)
- Students stable on medications moved to HS to open up more availability for students in CAPS

### **Multi-Faith Centre:**

The Multi-Faith Centre hosts and facilitates a variety of spiritual and faith-based student groups, conversations, and programming and encourages interfaith dialogue and spiritual development as part of the learning experience for all students. Twenty-seven Chaplains assist with spiritual guidance.

### **Deans of Students:**

Every College and Residence has a team of trained staff who support commuter and residential students. They work towards **creating a healthy and vibrant community** of engaged and supported students. They work closely with the central services.

### **Registrars:**

Every Faculty has a team of trained staff who support the **academic needs of students**. They are concerned with academic advising, academic and financial stress and strategies that support student success and also work closely with central services.



## University of Toronto Scarborough (UTSC)

The following represents an overview of mental health approaches, supports and strategies in place at the Scarborough campus May 2011-May 2012.

### 1. Focus on Wellness

- **Mental Health Awareness Month:** Coordinated awareness campaign to raise awareness on mental health issues, stigma and resources during the month of October with various events
- **Benefits Fair:** Aligned with Human Resources to hold benefits fair that focussed on self-care in the month of October with Mental Health Awareness Month
- **Evening with Steven Page:** Main event for Mental Health Awareness Month; By means of contact based education, shares his life experiences through talk and song about his struggles with bipolar disorder
- **Exam Jam:** Two day event at UTSC Residence to promote de-stressing/self-care activities and mindfulness
- **Green Dot Promotion:** Posters and buttons distributed during campus orientation and residence talks and discussions with students on community safety, resources and supports
- **Green Dot Video:** Produced with the St. George campus to promote awareness of bystander intervention to prevent violence and the effects on mental health
- **Massage:** Free weekly massage offered by collaboration with UTSC Athletics and Recreation and Centennial College
- **Mental Health Network Launch:** The Mental Health Network at UTSC is an initiative to bring partners from the community, faculty, staff and students together to share, discuss and learn about issues in mental health. The launch featured guest lecturer, Professor Franco Vaccarino, Principal, University of Toronto Scarborough, and Vice-President, University of Toronto speaking on **“Substance Use Disorder: Neuroscience Discovery, Research & Implications”**
- **Mental Health Understood Fair:** Interactive displays by community partners, departments and student groups with a focus on mental health stigma and on/off campus resources and supports
- **Mindful Mondays - Yoga Breaks:** Yoga classes open to all staff and faculty coordinated by UTSC staff person
- **MoveU:** Tri-campus partnership with Hart House, the Faculty of Kinesiology & Physical Health and ParticipACTION around healthy lifestyles being implemented at UTSC through Athletics & Recreation and their peer program known as P.A.C.E. (Physical Activity Coaches and Educators; Engages first-year students to promote and support active healthy living opportunities that will help them transition and support their growth and development during their post-secondary experience
- **Stress Busters:** Athletics & Recreation with P.A.C.E. hosted physical activities for campus community during final exams
- **Work life Balance for Students at Residence:** Programming done by Residence Life’s Academic Programmers and Promoters through workshops

- **XAO (Expression Against Oppression):** Scarborough Campus Student Union (SCSU) collaborated with staff and faculty to focus on mental health issues for weeklong event in October during Mental Health Awareness Month

## 2. Training

- **Mental Health Issues on Campus:** In collaboration with Health & Wellness Centre, AccessAbility Services, Centre for Teaching and Learning and Human Resources workshops were offered to staff and faculty throughout the year to address identification, consulting and referring students dealing with mental health challenges and in crises to receive the proper support.
- **New Faculty Orientation:** Addressed working with students in difficulty and identified resources on campus for staff and students coping with mental health concerns
- **Student Leaders – Helping to Support Mental Wellness:** Presentation on identifying, supporting and referring students faced with mental health challenges or crises. Provided to all student leaders on campus enrolled in Student Leader Training coordinated by the Peer Program Workgroup
- **Green Dot Training:** Delivered five training sessions to students on campus with focus on violence prevention, effects on mental health and community support
- **Residence Life Training** includes a presentation on recognizing the signs of when a person/student may be experiencing mental health issues, and how to make appropriate referrals - training also includes safeTALK.
- **CACUSS 2011 COUCH Program/Service of the Year Award** for work in developing mental health education resources
- Engagement with **Toronto District Board of Education** re: Strength Based Resilience: Integrating Risk and Resources towards holistic Wellbeing
- Monthly educational rounds, including “**Treatment Modalities of DBT and PPT**” (Dr. T. Rashid, Health & Wellness Centre UTSC, and Dr. A. Uliaszek, Department of Psychology, University of Toronto), “**Barbra Schlifer Commemorative Clinic: Services for Women**” (Farrah Khan, counsellor/advocate.), “**Mental Health Disorders – 3 session series for Clinicians**” ( Dr. Anne Marie Mikhail, Health & Wellness Centre UTSC) and “**Sexual Diversity**” (Sandra Carnegie-Douglas, Anti-Racism and Cultural Diversity Officer, University of Toronto)
- First annual conference of the **Canadian Positive Psychology Association:** Sponsor and presenter
- Participant in “**Mind Our Minds**” at Victoria University in the University of Toronto
- Mental health training to **new professors and teaching assistants** through CTL
- **SafeTALK Suicide Alertness For Everyone training**  
As part of our commitment to creating a suicide-safer community on campus, the Office of Student Life offers safeTALK workshops to students, staff and faculty throughout the year. SafeTALK is a 3-hour training session designed to ensure that people with thoughts of suicide are connected to helpers who are prepared to provide first aid interventions. Designed by Living Works, the safeTALK workshop is part of a University-wide suicide prevention strategy.

### 3. Support Services

#### **Academic Success related to Academic Advising & Career Centre**

UTSC offers a variety of academic and career success supports including time management, test-taking and study skills workshops, a Study Skills “Boot Camp” focusing on essential skills for academic success, and seminars such as “Reducing your Academic Stress” and “Silencing Your Inner Critic.” Learning styles and skills assessments, study skills, peer counselling, and online and print resources help students identify their academic difficulty. Students can meet 1-on-1 with an Academic & Learning Strategist for the purpose of identifying goals, developing realistic academic plans and navigating the university environment. Students can also attend a range of workshops and meet with Career Counsellors to engage in career exploration, self-assessment and skills development. This ongoing support works to address student’s career questions and concerns around the relationship between their degree, career prospects, further education and employment.

#### **AccessAbility Services**

AccessAbility Services provides support services, and academic accommodation for 345 students (2011/2012) of whom 34.44% have a diagnosed psychiatric disability.

- Service delivery focuses on reduction of symptoms through appropriate accommodations and support
- Support services include facilitating communication with faculty, academic accommodations such as extended testing time, noise reduction strategies in exams (e.g., noise cancelling headphones, quiet test space, etc.), note taking, access to course material in advance of the class, referral services and advising on academic matters impacted by disability (e.g. course load)
- AccessAbility also promotes the awareness of mental health services. In October 2012 AccessAbility was involved with:
  - **Mental Health Awareness Month:** In partnership with the Health & Wellness Centre, coordinating a campaign to raise awareness on mental health issues, stigma and resources during the month of October with various events which included:
    - **Mental Health Understood Fair:** Interactive displays by community partners, departments and student groups with a focus on mental health, stigma and on/off campus resources and supports
    - Encourages a universal design approach to teaching, in partnership with the Centre for Teaching and Learning to engage, as much as possible, a variety of learners in the classroom
- Offers workshops on time management and the use of technology to assist with memory deficits often seen with students with mental health disabilities

## **Health & Wellness Centre**

At UTSC this is an integrated unit for health care service delivery including medical care, nursing and counselling.

- **Workshops** include: Sleep, Overcoming Perfectionism and Boosting Productivity, Stress and Anxiety Group, Stress Management, Procrastination, Mindfulness, Mastering your Mood
- **Group Therapy** includes: Personal Growth Interpersonal Therapy, Skills and Strengths Group (PPT), Skills and Strengths Group (DBT)
- Individual Counselling and Psychotherapy
  - 19,968 visits (2011-12) to H&WC of which 17% were counselling
  - Of the visits above, 425 students were new and have come through the counselling “intake process in the past year”
- **Embedded personal counsellor** to extend outreach to UTSC Student’s Housing & Residence Life
- Continued to work and partner with *AccessAbility* Services to support and encourage students to get the care that they need, in the right place at the right time, and have adequate supports for academic success
- Wellness Peer Program in (2011-12) had a total of 7,090 encounters with students. The Mental Wellness Peers having 38% of the total encounters

## **Student Welfare Group**

This group (members include Directors from Academic Advising & Career Centre, *AccessAbility* Services, Health & Wellness Centre, Office of the Registrar, Housing & Resident Life, and Campus Safety and Security) serves as a support to respond effectively to students who are in difficulty and usually have accompanying behaviours and crisis that make the student known to more than one service.

## **Multi-Faith Centre**

Programming included a “Faith and Sexuality” presentation by Michele Rizoli, with whom further collaboration is planned.

## **Residence**

The Residence Life Program at UTSC includes awareness training for student leaders and awareness programming for residents. In addition to creating awareness about mental health issues, programs also focus on encouraging help-seeking in students, positive self-care and learning health coping strategies.

## **Registrar Services**

Referrals are made from this area to other services e.g. Academic Advising & Career Centre, Health & Wellness Centre and *AccessAbility* Services, and other areas

## University of Toronto Mississauga (UTM)

The University of Toronto Mississauga has engaged in many activities over the past year with regards to promoting the Mental Health of Students. Below is an overview (not exhaustive) of the variety of activities (both proactive and reactive) that have occurred. The focus has been on health promoting activities, awareness and training, and support services for students.

### 1. Health Promotion Activities

#### 5 Ways to Wellbeing Campaign [uoft.me/5w2w](http://uoft.me/5w2w)

The UTM “5 Ways to Wellbeing” (5W2W) campaign fosters resiliency and positive mental health among students by encouraging and providing opportunities for students to intentionally engage in simple activities that enhance self-efficacy. The 5W2W campaign is communicated to the UTM community through a variety of passive communication campaigns and active health education activities:

- Training for student leaders in mentorship roles (appx. 130 students)
- Training for outreach and health education volunteers (appx. 200 students)
- Integration into weekly seminars in upper year transition program (utmPLUS)
- Wellness seminar in first year transition programs (rezONE & genONE)
- Peer Health Education workshops
- Displays and walk-about by Peer Health Educators
- Webinar (for OACUHO)
- Website ([my.uoft.ca/5w2w](http://my.uoft.ca/5w2w))
- Twitter campaign (#5W2W, #Take Notice, #BeActive, #GiveBack, #Connect, #Learn)
- Posters and bookmarks

Evidence Document: [http://www.neweconomics.org/sites/neweconomics.org/files/Five\\_Ways\\_to\\_Well-being\\_Evidence\\_1.pdf](http://www.neweconomics.org/sites/neweconomics.org/files/Five_Ways_to_Well-being_Evidence_1.pdf)

#### Peer Based Health Programs

The UTM Health & Counselling Centre supports two peer-based student programs that promote student health and wellbeing: Peer Health Education & the Healthy Campus Crew.

#### **Peer Health Education:**

The Peer Health Education (PHE) team promotes the overall health and wellbeing of the UTM community by increasing knowledge on a variety of issues relevant to the student population. Peer Health Educators research, develop and deliver health education and health promotion initiatives that engage students in learning about wellbeing and ways in which they can increase control over, and improve their own health. The PHE team consists of 35 volunteers (5 hrs. per week) and 10 leaders (10 hrs. per week) that focus their outreach in the following student health topics:

- Mental Health
- Active Living
- Sexual Health & Relationships
- Drugs & Alcohol
- Nutrition & Healthy Eating
- Tobacco Cessation and Education

### **Healthy Campus Crew:**

The Healthy Campus Crew consists of 200 student ambassadors for the UTM Health & Counselling Centre that volunteer at wellness events on campus (e.g., flu clinics, health and wellness fairs, Health & Counselling Centre promotion). Members of the Healthy Campus Crew receive an orientation to campus health services, UTM student health behaviours (informed by the National College Health Assessment) and the 5 Ways to Wellbeing.

### **Mental Health & Transition Programs**

Working with campus partners in Student Affairs & Services, mental health education has been integrated into existing transition programs.

#### **1<sup>st</sup> Year Transition Programs: genONE & rezONE**

A wellness seminar co-facilitated by the Peer Health Educators and Peer Academic Leaders was included among the weekly seminars that take place during the first term of the genONE and rezONE transition programs.

- 30 rezONE Wellness seminars: 321 participants
- 10 genONE Wellness seminars: 89 participants

Learning outcome achievements for genONE first year students who engaged with “The Wellness Factor” seminar (self-reported):

- 82% were able to identify the early signs and symptoms of mental illness and where to go for help
- 82% were able to describe mental illness and its impact on individuals, families and communities
- 86% were able to develop steps they can take to improve mental health and wellbeing

#### **AccessAbility Resource Centre: Summer Transition Program 2012**

Incoming first year students took part in an interactive seminar on the “5 Ways to Mental Health Wellbeing” facilitated by the Health Promotion Coordinator of the UTM Health and Counselling Centre. The purpose of the session was to aid students in understanding the stressors and potential mental health challenges they may encounter during young adulthood as well as promoting health and wellbeing. This session provided students with strategies for stress management, resilience, tips for positive mental health and self-esteem strategies.

#### **Upper Year Transition Program: utmPLUS:**

Introductory activities within the utmPLUS weekly seminars provide an opportunity for participants to engage in one of the 5 Ways to Wellbeing activities while engaging in an “ice-breaker”. In addition to the 5 Ways to Wellbeing, wellness seminars were co-facilitated by Peer Health Educators and Peer Academic Leaders. Learning outcome achievements for upper year students who engaged with “The Healthy Habits Challenge” seminar (self-reported):

- 80% were able to recognize the relationship between health & wellness and accomplishing goals
- 89% were able to employ self-reflection to gain insight into individual health behaviours
- 88% were able to commit to adopting a personally important health behaviour

Of the 69 students who participated in the seminar, 49 or 71% reported successfully adopting a new personally important healthier behaviour for one week following the seminar.

### Other Health Promotion Activities

**Move U:** Engages first year students to promote and support active healthy living opportunities that will help them transition and support their growth and development during their post secondary experience (tri-campus initiative)

**Student Health 101:** monthly online newsletter

**Mindfulness Meditation:** in collaboration with Department of Physical Education & Recreation, 2x weekly sessions available for students

**Residence Life Programming:** Don facilitated programming with a health and wellness focus

## 2. Awareness and Training

**2011-2012:** Focus on student leaders in peer mentorship roles

- Completed Trainings: 7 Training Sessions (106 participants; predominantly student leaders)

**2012-2013:**

- Continue to provide training to student leaders in peer mentorship roles
- Offering training for staff including front line staff in Office of the Registrar
- Partner with academic departments, e.g., Concurrent Teacher Education Program
  - 10 Completed Trainings (216 participants)
    - 6 student leader sessions: 143 trained
    - 3 open sessions (students, staff, and alumni): 45 trained
    - 1 staff session: 28 trained
  - 4 Upcoming trainings (1 staff, 1 CTEP, 2 open)

**AccessAbility Resource Services:**

- Development and delivery of **workshops** for academic departments on supporting students with mental health conditions and Asperger's Syndrome/Autism Spectrum Disorders
- **Presentations** to students, parents, teachers and guidance counsellors at the Peel Board of Education, Dufferin-Peel Board of Education and organizations including Special Education Advisory Committees (SEAC) on transitioning to PSE with a focus on balancing academic, social, family and work demands

**Mental Health & the Helping Role:** Session facilitated by a Personal Counsellor and the Health Education coordinator. 150 student helpers in various roles throughout Student Affairs and Services (including residence life staff and peer mentors) are provided a basic training in understanding mental illness and their role as a peer helper.

**Identifying and Referring Students in Crisis:** Presentations were provided to teaching assistants and instructors (at RGASC) about how to identify a student who may be experiencing difficulty, how they can assist and resources available to them on campus.

**safeTALK** As part of our commitment to creating a suicide-safer community on campus, the Office of Student Life offers safeTALK workshops to students, staff and faculty throughout the year. SafeTALK is a 3-hour training designed to ensure that people with thoughts of suicide are connected to helpers who are prepared to provide first aid interventions. Designed by Living Works the safeTALK workshop is part of a university-wide suicide prevention strategy.

### 3. Support Services

#### AccessAbility Resource Centre:

- **Peer Mentoring Program** - First year students are matched with upper year mentors to assist with their transition to UTM which also assists the students in creating a social link to the campus. Together they attend campus social events, familiarize themselves with the campus resources (e.g. International Centre for students) and work together on navigating the administrative processes at the UTM campus (e.g. when to meet with an Academic Advisor in the Office of the Registrar).
- A **Student and Family Orientation** is held for incoming first-year students provided by AccessAbility Advisors to first-year students and their parents to assist with understanding and navigating the university system and its resources.
- An **online learning strategy program** is available 24 hours a day, 7 days a week to assist students with working through strategies for writing essays, time management, studying for tests and note-taking when it fits into their schedule. Students are also encouraged to email their questions to the Centre's Learning Strategist for additional support. This assists with alleviating stress when students are unable to book appointments with learning strategists due to waiting lists.
- **Regular Advising Sessions** - Regular advising sessions and drop-in hours are available for students with mental health conditions to meet regularly with their AccessAbility Advisor to discuss both their accomplishments and challenges. Advisors discuss maintaining a balance between academics, work and social activities with students and provide strategies for stress management, resilience, tips for positive mental health and self-esteem strategies. Students are also provided with resources and referrals to wellness activities including:
  - Mindfulness meditation sessions
  - Recreational Athletics and Wellness Centre (RAWC) and community recreation activities
  - Stress Busters at the UTM Health and Counselling Centre
  - Paws and De-stress at the HMALC Library - a visit from a therapy dog to assist students with taking a break from studying and stress
- **Consultation with faculty and academic departments** on classroom management is held regarding specific student behaviours and recommendations for providing appropriate accommodations and services for students with disabilities.
- **Consultation with the Office of the Registrar and administrative departments** are also held on pending petitions and appeals and providing appropriate academic accommodations.



### **Registered Students with Mental Health Conditions**

In the 2011-12 academic year, the Centre provided academic accommodations and services to 392 of which 129 students had a mental health condition as their primary disability (an increase of 30 students from the previous year). There were also a number of students registered with the Centre who had a mental health condition as their second and/or third disability (e.g. Primary – Low Vision, Secondary – Anxiety Disorder, Third – Depression).

## **4. Health & Counselling Centre**

### **Counsellor Facilitated Groups:**

- Weekly Don group facilitated by a personal counselor to provide support and an opportunity for Dons to discuss the various challenges they face in their role (in collaboration with Student Housing & Residence Life)
- Weekly Stressbusters work facilitated by a personal counselor to develop skills in managing one's stress more effectively (open to all students)
- Weekly Learn to Run Program in collaboration with Department of Physical Education, Athletics & Recreation. This 9 week learn-to-run program offers participants a great strategy for promoting wellbeing while connecting with a supportive group of trained staff, volunteers from the UTM community, and fellow students.

### **Individual Counselling:**

- In 2011/12 over 1100 counselling visits with 2.6 counselling FTE
- Daily crisis appointments available
- 24-48 hour wait for a telephone intake appointment
- Currently a 4-5 week wait for a full regular appointment
- Top 10 Reasons for Counselling
  1. Stress
  2. Family Relationship Issues
  3. Anxiety
  4. Partner Relationship Issues
  5. Depression
  6. Abuse (Emotional, Physical and Sexual combined)
  7. Self Esteem
  8. Grief
  9. Loneliness
  10. Suicidal Ideation
- Currently exploring reinstating the Healthy Relationships group, which has been held in the past with limited participation

### **Mental Health Related Medical Appointments:**

- Family physicians (including GP psychotherapist) and Psychiatrist
- In 2011/12, 20% of all medical appointments were for mental health related issues
- Participation in the UTM High Risk Committee and centrally when required

APPENDIX E: BENCHMARKING SURVEY 2013

<b>Status:</b>		
F/T	P/T	
<b>Level of Study:</b>		
Undergraduate	Graduate	
<b>How do you identify?</b>		
Male	Female	Trans
Other	Prefer not to say	
<b>Age:</b>		
<18	18-22	23-30
30+		
<b>Are you an international student?</b>		
Yes	No	
<b>Campus:</b>		
St. George	UTM	UTSC
<b>If St. George... Have you heard of any of the following programs or services?</b>		
CAPS	Counseline	On call counselling
Embedded Counsellors	Health & Wellness workshops	Bounce Back
Good 2 Talk	Food & Mood	Grief Circles
Accessibility Services		
<b>Have you used any of the following programs or services?</b>		
CAPS	Counseline	On call counselling
Embedded Counsellors	Health & Wellness workshops	Bounce Back
Good 2 Talk	Food & Mood	Grief Circles
Accessibility Services		

<b>If UTM... Have you heard of any of the following programs or services?</b>		
5 Ways to Wellbeing (#5W2W)	Good2Talk – Ontario Post-Secondary Student Helpline	Psychiatrist at the Health & Counselling Centre
AccessAbility Resource Centre Disability Advising	Group Counselling offered by the Health & Counselling Centre	safeTalk – suicide alertness training
AccessAbility Resource Centre Peer Mentorship Program	MoveU	Stress Busters
Counselling with a Doctor at the Health & Counselling Centre	Peer Health Educators (Mental Health Team)	UTMental (YouTube project)
Exam Jam	Personal Counsellors at the Health & Counselling Centre	Wellness Seminars as part of a community program (eg rezone, genONE, iLife, utmPLUS, utmLEAD)
<b>Have you used any of the following programs or services</b>		
5 Ways to Wellbeing (#5W2W)	Good2Talk – Ontario Post-Secondary Student Helpline	Psychiatrist at the Health & Counselling Centre
AccessAbility Resource Centre Disability Advising	Group Counselling offered by the Health & Counselling Centre	safeTalk – suicide alertness training
AccessAbility Resource Centre Peer Mentorship Program	MoveU	Stress Busters
Counselling with a Doctor at the Health & Counselling Centre	Peer Health Educators (Mental Health Team)	UTMental (YouTube project)
Exam Jam	Personal Counsellors at the Health & Counselling Centre	Wellness Seminars as part of a community program (eg rezone, genONE, iLife, utmPLUS, utmLEAD)

<b>If UTSC... Have you heard of any of the following programs or services?</b>		
Personal Counselling and Groups	Counselling in Residence Program	Mental Health Network
Health & Wellness Centre workshops	Mental Health Awareness Month	Flourish
Good 2 Talk	Wellness Peer Programs	Green Dot
Accessibility Services	MoveU	
<b>Have you used any of the following programs or services</b>		
Personal Counselling and Groups	Counselling in Residence Program	Mental Health Network
Health & Wellness Centre workshops	Mental Health Awareness Month	Flourish
Good 2 Talk	Wellness Peer Programs	Green Dot
Accessibility Services	MoveU	
<b>Are there any areas related to Mental Health that you feel more programming should be focussed on:</b>		
Stigma related to mental health	Equitable access to services	Self-help support
Awareness of mental health issues on campus		
<b>What modes would you more likely regularly access information related to mental health:</b>		
Online newsletter	Facebook	Smart phone app
In person workshops	Fairs/events	One-on-one
Student peer event		
<b>Would you know where to go if you were experiencing:</b>		
Exam Anxiety	Not Sleeping	Cold & Flu
Feeling Depressed	Violence/Harassment	Academic Difficulties

## APPENDIX F: 2014 STUDENT MENTAL HEALTH FOCUS GROUP QUESTIONS

1. How do you know when you feel emotionally or psychologically well? Unwell?
2. When you're not feeling well, how do you cope? How did you learn to cope with difficulty?
3. How do you see the university supporting students to be academically and personally successful? Which of these supports do you think are most important?
4. What do you perceive to be some of the more common barriers students face when trying to access mental health services and programs?
5. What knowledge or information do you feel students need in order to help a friend or fellow student who appears to be struggling with a mental health issue?
6. What do you think a university should do if a student, for reasons pertaining to mental or physical health, engages in behavior that presents a direct threat of harm to the well-being or safety of themselves or others?
7. Think about the transition to university and some of the challenges you believe students face. What kinds of supports does the university offer to support the transition? What kind of supports should be in place, but aren't?
8. What are the courses in various programs that are known to be especially difficult? What is it that makes these courses particularly difficult? What do you think would help students to be successful in these courses?
9. If you could design a mentally healthy learning environment for the university, what would it look like?
10. If you were to experience mental distress, what are the priorities or things you would be concerned about as a student?

APPENDIX G: STUDENT MENTAL HEALTH FOCUS GROUP PARTICIPATION

Date	Group	#Registered	#Participated
March 12	Health & Wellness Student Advisory Committee	5	4
March 14	UTSU	8	5
March 24	New College	13	7
March 25	Engineering	11	11
March 26	Engineering	10	7
March 27	SGS	14	10
March 25	SGS	15	11
March 26	Accessibility Services	22	7
March 26	UTSC	13	9
March 26	UTSC	14	8
March 27	UTSC	7	3
March 27	UTSC	16	8
March 28	UTM	12	8
March 28	UTM	11	8
March 28	UTM (graduate students)	3	3
March 28	UTM	12	11
March 31	Music	9	3
April 1	SGS	16	10
April 2	Centre for International Experience	8	7
April 4	Health Out Loud (student group)	16	10
April 7	University College	13	9
April 8	Nursing	11	9
April 11	Woodsworth & Innis	8	5
April 22	Nursing (graduate)	7	5
April 23	SGS (male only)	19	14
April 24	Sexual Gender and Diversity Office	6	5
April 30	Grad Minds (student group)	11	8
May 1	GALDSU (Faculty of Architecture student group)	14	11
May 5	Grad Minds (student group)	11	11
May 20	St. Michael's College	11	5
May 26	KPE Varsity (all male)	11	11
June 3	KPE Varsity	12	12

Focus groups: Total: 32, 60 – 90 minutes, audio recorded, tri-campus

Total students participating: **257**