

**Ryerson  
University**

**Mental Health  
Committee  
Report 2016**



# Executive Summary

## Background

Post Secondary Institutions have been responding to mental health on campus in various ways. Ryerson responded to mental health concerns on campus by striking the RMHC (2012), with a vision to provide a campus wide, institutional response to mental health, reporting to Mohamed Lachemi (then PVPA) and Julia Hanigsberg (then VPAF). With over 20 members and multiple faculties represented, such as Community Services, Arts, and Engineering and Architectural Science. The committee was led and championed by Dr. Su-Ting Teo, then Director of Student Health and Wellness, and is currently chaired by Myra Lefkowitz, Manager, Workplace Wellbeing Services and Denise O'Neil Green, Assistant Vice-President/Vice-Provost Equity, Diversity and Inclusion.

At its outset, the RMHC was comprised of a larger committee, and three working groups:

1. Policy & Procedures
2. Awareness, Education & Programs
3. Curriculum & Pedagogy

The RMHC has had several key activities and accomplishments. Some notable highlights:

- *Statement of Commitment to Mental Well-being*, formally endorsed by PVPA and VPAF.
- *Mental Well-being Principles for Ryerson Policies*, currently helping shape senate's academic policy review.
- *Ryerson Mental Health website*, created and populated with resources to support both individual and collective mental health for faculty, staff and students.
- *Mental Health Coordinator*, secured funding for a position that, as a large part of its mandate, provides coordination of initiatives and projects resulting from the RMHC.

## Present Scope of Work (Current Status)

- RMHC members are coming together as 'informal clusters' to implement specific key mental health projects and initiatives. Examples include:
  - Mental Health 101 training workshops
  - Creating catalogue of flexible teaching practices used by Ryerson faculty to supplement the senate policy review
  - Increasing instructor capacity to weave well-being into classroom practices.
- In December 2016, this report was completed, capturing the history, present scope of work and recommendations for committee future. One intended use of the report is to act as a vehicle to inform the future iteration of the committee.
  - It is crucial that the RMHC's next iteration be mandated, structured and resourced in a way that continues to create a campus supportive of mental well-being, meeting the needs of faculty, staff and students in the current climate.

## Recommendations

- To restructure the RMHC as a working advisory committee: a hybrid group that has oversight over activities and is also engaged in the work.
- That the vision (see Appendix 2, Ryerson Statement of Commitment to Mental Well-being) be updated by the committee based on current trends and unmet needs within the Ryerson community, aiming always for a systemic approach based on principles of social justice.
  - Broaden vision and become more focused and action oriented in core areas.
- Reporting structure options:
  - Continue to report through VPAF and PVPA.
  - Report to senior institutional level decision making body for strategic decision making and resource allocation.
  - Report through existing structures, i.e. APG and AFMG.

# Ryerson Mental Health Committee Key Facts

It is crucial to continue to create the conditions for a holistic and cohesive approach to mental health and well-being across our entire Ryerson community.

This will help us create:

- Exceptional learning experiences
- Personal and professional development
- An empathetic and collaborative approach to building resiliency

Student Snapshot

*National College Health Assessment 2016 Executive Summary for Ryerson University*

**49%**

felt so depressed that it was difficult to function

**67%**

felt overwhelming anxiety

**15%**

seriously considered suicide

**3%**

attempted suicide

Staff Snapshot

*Sun Life Financial Ryerson University Disability Report Card*

**#1**

Mental Health ranked as the top claim type for both sick leave and long term disability at Ryerson University in 2016, with **22% of approved sick leave and 36% of approved LTD claims** being due to mental health.

**+**

The utilization rate for **Ryerson's Employee Assistance Program** has increased incrementally since its introduction. In 2016, there was a slight increase from the previous year and currently 19% of employees are using this service.

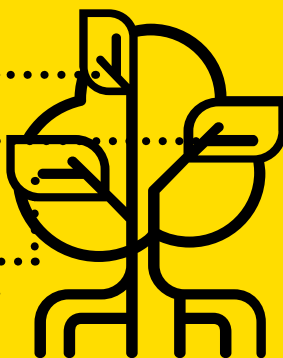
The Vision

Accomplishments

The RMHC was developed with a vision to provide a campus wide, institutional response to mental health concerns.

### Areas of work

- Policies and Procedures
- Awareness, Education & Training
- Curriculum and Pedagogy



Areas of Impact

- **Exceptional Learning Experiences** (e.g., Partnering with LTO to reach instructors)
- **Policy Work** (e.g., creating catalogue of flexible and inclusive teaching practices)
- **Capacity Building** (e.g., skill building training to respond to individuals in distress)

- **2013**
  - Ryerson Statement of Commitment to Mental Well-being
  - Ryerson Mental Health Committee Report
  - Mental Well-being Principles for Ryerson Policies<sup>9</sup>
  - Ryerson Mental Health Town Hall
- **2014**
  - Ryerson Mental Health website
  - Mental Health 101
- **2015**
  - Transformational Café
  - Mental Health Coordinator hired
- **2016**
  - Mental Health Projects Assistant hired
  - CACUSS Presentation
  - Faculty Conference presentation

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# Introduction

Enhancing mental health and well-being can foster individual and collective resilience, as well as an ability to respond to the stresses and hardships of life. These challenges, from social injustice and financial strain, to heavy workload for employees and students' exam scheduling, play a significant role in affecting well-being. When well-being is negatively impacted, there are repercussions in all realms of life, including the workplace and academic contexts.

The necessity of infusing the principles of positive mental health and well-being into everything we do is being recognized across our campus, and on campuses all over North America<sup>1</sup>. In order to continue to foster exceptional learning experiences, enable personal and professional development, and contribute to an empathetic and collaborative approach to building resiliency, it is crucial to continue to create the conditions for a holistic and cohesive approach to mental health and well-being across our entire Ryerson community.

The challenges faced by emerging adults attending post-secondary education can be particularly impactful<sup>2</sup>, such as the complex transition to a less structured environment and shifting identities from child/youth to adult. For some in this population, these challenges can trigger more serious, underlying mental health issues. Specifically, three quarters of lifetime mental disorders have first onset by the typical college age range of 18-24. In addition to this, the 2016 National College Health Assessment (NCHA) survey of over 25 000 Ontario Post-Secondary students showed the following harrowing results<sup>3</sup>:

- **46%** of students had felt so depressed it was difficult to function
- **65%** had experienced overwhelming anxiety
- **13%** had seriously considered suicide
- **11%** had attempted suicide.

The numbers are stark for Ryerson students as well. The following statistics were taken from the NCHA 2016 Executive Summary for Ryerson University<sup>3</sup>:

- **49%** felt so depressed that it was difficult to function
- **67%** felt overwhelming anxiety
- **15%** seriously considered suicide
- **3%** attempted suicide

Also, stress, anxiety and depression were listed by Ryerson students as the top five factors negatively affecting academic performance<sup>3</sup>. Here, 'academic performance' was defined as receiving a lower grade than expected on an exam, important project, final course mark, or receiving an INC, dropping a course, having a significant disruption in thesis, dissertation, research or practicum work.

For employees, those in their early and prime working years are among the hardest hit by mental health problems<sup>4</sup>. This can lead to stress-related illnesses at work, absenteeism, turnover, and workplace conflict<sup>5</sup>. Mental health problems and illnesses account for approximately 30% of short and long term disability claims in Canada<sup>4</sup>. The picture at Ryerson is no different. Mental Health ranked as the top claim type for both sick leave and long term disability at Ryerson University in 2016, with 22% of approved sick leave and 36% of approved LTD claims being due to mental health<sup>6</sup>. Mental Health claim occurrence is on the rise, and the prevalence rate for Ryerson is above the Education Sector average<sup>6</sup>. The utilization rate for Ryerson's Employee Assistance Program has increased incrementally since its introduction. In 2016, there was a slight increase from the previous year and currently 19% of employees are using this service. Further, according to a survey of Ryerson employees in preparation for a university wide newsletter, 'Employee Wellness' was among the top three topics that Ryerson employees would like to learn more about.

## Post-Secondary Mental Health: Historical Context

In 2010, many Canadian Universities took part for the first time in the NCHA survey, run by the American College Health Association (ACHA). This assessment is designed to help post secondary institutions gain an understanding of current health trends within their campus community<sup>3</sup>. The results strongly indicated a greater need to focus on mental health. In 2012, the Mental Health Innovation Fund was launched by the Ontario Government to "support new and innovative approaches to help postsecondary students, and those transitioning to college or university, access the mental health services they need"<sup>7</sup>. This fund ignited the creation of new and innovative responses to mental health across Ontario university and college campuses.

# The Ryerson Mental Health Committee

In 2012, spurred into action by the climbing rates of mental health and well-being concerns on post secondary campuses evidenced by the NCHA results and enabled by the new Mental Health Innovation Fund, the divisions of Student Affairs and Human Resources at Ryerson came together to strike the Ryerson Mental Health Committee (RMHC). Preliminary discussions took place regarding the best fit of a mental health and well-being focused committee structure at Ryerson, particularly the intersection between accessibility and mental health and well-being. Creating a comprehensive and focused strategy for mental health and well-being was determined to be paramount at the time, therefore the RMHC was struck as a distinct committee, with the intent to complement the work of Access Ryerson.

Forty volunteers, including students, staff and faculty, came together to form the membership of the committee. The committee, championed by Dr. Su-Ting Teo, reported to the Provost and Vice President-Academic and the Vice President, Administration and Finance. The RMHC was developed with a vision to provide a campus wide, institutional response to mental health concerns. This was as opposed to reliance on a singular department to formulate and enact a response to mental health concerns in the Ryerson community. At the outset, the RMHC had three subcommittees dedicated to advancing mental well-being in key areas of focus within the Ryerson community.

These subcommittees and their respective areas of work were the following:

## **Policies and Procedures**

- Weaving in principles of mental health and well-being into new and existing Ryerson policies.

## **Awareness, Education and Training**

- Assessing existing mental well-being offerings at Ryerson, how the community learned about these offerings, and examining gaps in service and programming.

## **Curriculum and Pedagogy**

- Examining how curriculum and pedagogy can be more supportive of mental health.

Since its inception, the RMHC structure has evolved to meet the ever-changing and diverse needs of the students, staff and faculty who encompass the Ryerson Community. Through environmental scans, resource inventories and information exchange, the committee developed a comprehensive understanding of the current issues, resources and gaps. In addition, the committee kept abreast of and participated in discussions and collaborations with colleagues across the post-secondary education sector in Canada. This work helped to form and shape what became a Ryerson centered understanding of and response to mental well-being.



# Key Activities & Accomplishments 2013 to 2016

The following key activities and accomplishments illustrate the RMHC's dedication to addressing mental health in a systemic manner, which is simultaneously reflective of the diversity of the Ryerson community. These accomplishments were made possible through the engagement, expertise and influence of the various RMHC members, subcommittee members and supporters. These key activities and accomplishments are outlined chronologically in further detail below (please see Appendix 1 for an alternative listing of these key activities and accomplishments by theme/category):

## 2013

Ryerson Statement of Commitment to Mental Well-being

- Endorsed by the Provost and Vice President Academic, as well as the Vice President Finance and Administration (see Appendix 2).

Ryerson Mental Health Committee Report

- Contained recommendations for a short term, as well as long term focus on creating a framework and foundation for organizational change regarding mental well-being (see Terms of Reference, Appendix 3).

Mental Well-being Principles for Ryerson Policies<sup>8</sup>

- Created by the RMHC Policy & Procedures subcommittee, and is intended to guide the review and creation of policies at Ryerson to occur from a lens of mental well-being. This document influenced how mental well-being was operationalized within 'Our Time to Lead', Ryerson's 2014-2019 Academic Plan<sup>9</sup>.

Ryerson Mental Health Town Hall

- Hosted by Valerie Pringle, this was an open discussion with the Ryerson community on the recent RMHC report and recommendations for campus wide mental health.

## 2014

Ryerson Mental Health website

- Populated with various resources to help faculty, staff and students support mental well-being, both individually and collectively ([ryerson.ca/mentalhealth](http://ryerson.ca/mentalhealth)).

Mental Health 101

- A training program designed to support individuals in the community with how to respond to a student or colleague in distress.

## 2015

Transformational Café

- This event was co-hosted by the Community Transformation Cafe of the Faculty of Community Services, the Eaton Chair of Social Innovation, RMHC (represented by Student Health and Wellness co-chair), and Access Ryerson. Students were invited to answer the question 'What would make Ryerson the best university in the world for student well-being?' (see Appendix 4).

Mental Health Coordinator

- Funding was secured to create a position that would provide coordination of initiatives and projects resulting from RMHC work and discussions, and provide overall administrative guidance.

## 2016

Mental Health Projects Assistant

- Funding was secured to create a Career Boost student position, who supported the creation of a catalogue of flexible teaching practices, an initiative of the Policy and Procedures subcommittee. This will be explained in further detail in the following section.

CACUSS Presentation

- Presented at the Canadian Association for College and University Student Services (CACUSS) Conference (June 2016) on the current Academic Policy Review happening within senate, and the role the RMHC is playing.



# Present Scope of Work

In January 2016, led by the co-chairs Myra Lefkowitz and Denise O'Neil Green, and supported by Mental Health Coordinator Natalie Roach, the RMHC began focusing on key initiatives and projects. As a result the committee began a new phase in its' structure and focus through the development of informal 'interest based clusters' of members. Specifically, various RMHC members are 'clustering' around the implementation of specific mental well-being projects and initiatives designed to address current key gaps that exist on campus. These initiatives and projects fall into the following three broad areas: policy work, exceptional learning experiences and capacity building; these are detailed below.

## Exceptional Learning Experiences

- Created and presented 'Enhancing Inclusivity: Exploring Mental Well-being and Flexibility in the Classroom', at the 2016 Ryerson Faculty Conference, directly in line with the RMHC's objective to create the conditions for curriculum and pedagogy to be more supportive of mental health and well-being.
- This session had the 6th highest attendance of all 49 conference sessions, and received anecdotal positive feedback from key stakeholders attending the session, such as President and Vice-Chancellor Mohamed Lachemi and Dr. Marcia Moshe, Vice-President Academic.
- Based on attendance and feedback, it was requested that this presentation be modified into an LTO workshop for TAs and GAs, and was delivered in November 2016. Further, it is part of the LTO 2017 workshop schedule for faculty/instructors.

## Policy Work

- Inclusion of the RMHC document *Mental Well-being Principles for Ryerson Policies* in the resource documents being used by the Senate's Academic Policy Review Committee (APRC), which began in Fall 2015.
- Significant RMHC committee member presence within the APRC's group of Resource Members, who advise the APRC on all decisions regarding revising the Academic Policies.
- Working to create a catalogue of flexible practices in course delivery and evaluation to support the values articulated in *Mental Well-being Principles for Ryerson Policies*.

## Capacity Building

- In response to community wide requests, a central workshop designed to support students and colleagues in distress is being piloted in the 2016/2017 academic year. Designed for staff and faculty and using the Mental Health 101 curriculum, this session will be offered four times in the 2016/2017 academic year and will also be offered as requested to groups who demonstrate a unique need and/or who are able to assemble over 30 participants.
  - The first session in October 2016 was at capacity and received highly positive feedback, with the following being reported post-session:
    - Overall, 92% of participants felt the session increased their skill level at responding to individuals in distress.
    - 76% increase in participants knowing how to appropriately refer someone having mental health distress.
- A mapping document, modeled after the framework for Post-Secondary Student Mental Health created by CACUSS and Canadian Mental Health Association<sup>10</sup>, has been established to capture all of the various programs, events, initiatives and activities at Ryerson that are aimed at enhancing mental well-being at Ryerson. This will assist the RMHC in determining what the community's strengths are with regard to supporting mental well-being, and where there continue to be gaps.

# Recommendations

There is an emerging consensus that a holistic, integrated and comprehensive approach to mental health and well-being is most likely to enable an institution to attain its strategic mental health and well-being objectives<sup>1</sup>. Among its several accomplishments, the RMHC authored the *Ryerson Statement of Commitment to Mental Well-being*, secured funding for a Mental Health Coordinator, spearheaded infusing mental health and well-being principles into the classroom and developed a training program designed to support community members in responding to individuals in distress.

It will be crucial for the next iteration of Ryerson Mental Health Committee to be mandated, structured and resourced in such a way to continue to create an environment that is supportive of mental well-being. The following recommendations provide some preliminary options to guide this next phase. Note that these recommendations are preliminary in nature, and the ‘Some Options’ section is meant to be taken as suggestions that can be blended together in any number of ways.

Domain	Description	Some Options
<b>Vision</b>	Long term strategic objective/what the RMHC will accomplish in the future	<ul style="list-style-type: none"> <li>• Status Quo (see Appendix 2).</li> <li>• Committee updates the vision based on current trends, unmet needs, etc. with the Ryerson community.</li> </ul>
<b>Purpose</b>	The intention/objective of the RMHC	<ul style="list-style-type: none"> <li>• Status quo (see ‘Mission’ in Appendix 2).</li> <li>• A cohesive and coherent approach to mental health and well-being across the entire Ryerson community.</li> <li>• Create a diverse and campus wide response to mental health and well-being, so that resulting initiatives have buy-in across the community.</li> </ul>
<b>Function</b>	What is the work? How does the work get done?	<ul style="list-style-type: none"> <li>• Network/Forum</li> <li>• Advisory Committee</li> <li>• Working Group</li> </ul>
<b>Mental Health and Well-being Policy Development</b>	The allocation of authority to develop, carry out and execute mental health and well-being policy development	<ul style="list-style-type: none"> <li>• Top down (senior management develops and delivers policy to RMHC).</li> <li>• Bottom up (RMHC develops and delivers policy to senior management for approval).</li> <li>• Blended (‘Top Down’ or ‘Bottom Up’ approach will be taken, depending on nature of policy).</li> </ul>
<b>Mental Health and Well-being Program Development and Delivery</b>	The allocation of authority to develop, carry out and execute mental health and well-being program development and delivery	<ul style="list-style-type: none"> <li>• Top down (senior management mandates programming to RMHC, who then develops and delivers).</li> <li>• Bottom up (RMHC recommends programming for SM approval, develops and delivers or outsources).</li> </ul>

<b>Reporting Structure</b>	The 'who, how and what' of decision for the RMHC	<ul style="list-style-type: none"> <li>• Status quo - chairperson(s) report into their respective supervisors.</li> <li>• Continue to report through Vice President, Administration and Finance and Provost and Vice President Academic.</li> <li>• Report to senior institutional level decision making body for strategic decision making and resource allocation.</li> <li>• Report through existing structures, i.e. APG and AFMG.</li> </ul>
<b>Committee Structure</b>	The committee's functioning method	<ul style="list-style-type: none"> <li>• Restructure the RMHC as a working advisory committee: a hybrid group that has oversight over activities and is also engaged in the work.</li> </ul>
<b>Committee Leadership</b>	Committee chairperson(s), and other possible leadership roles	<ul style="list-style-type: none"> <li>• Co-chairs of aligned mental health and well-being portfolios (e.g., SHaW and Workplace Wellbeing Services).</li> <li>• One individual at institutional level (i.e., who sits across departments) chairs RMHC.</li> </ul>
<b>Committee Membership</b>	Members of the Ryerson Community, who will contributing to the vision, purpose and function of the RMHC	<ul style="list-style-type: none"> <li>• Role based</li> <li>• Interest based</li> <li>• Influence based</li> <li>• Volunteer based</li> <li>• Invitation based</li> </ul>
<b>Committee Timeframe</b>	The duration of the RMHC's work	<ul style="list-style-type: none"> <li>• Standing committee (i.e., ongoing).</li> <li>• Short term, project based.</li> </ul>

## Further Considerations

The suggestions that follow arose in conversation among the current co-chairs, and are included for your consideration as you review the Recommendations:

- Committee chair(s) could develop a core group of champions that can champion issue in different spaces?
- What type, how much, what level, etc of faculty involvement is envisioned for this committee?
- Core question: If the goal is to create systemic change, it must involve other people. How will we do this so it doesn't rest on one individual?
- Should committee chairs have their own vehicle for student input? If so, what would it look like?

# References

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# Appendix 1

## Key Activities & Accomplishments 2013 to 2016

The following key activities and accomplishments illustrate the RMHC's dedication to addressing mental health in a systemic manner, which is simultaneously reflective of the diversity of the Ryerson community. These accomplishments were made possible through the engagement, expertise and influence of the various RMHC members, subcommittee members and supporters. These key activities and accomplishments fall into four broad categories: documents, community resources, community events, and new roles; these are outlined further below:

### Strategic Documents

#### Ryerson Statement of Commitment to Mental Well-being (2013)

- Endorsed by the Provost and Vice President Academic, as well as the Vice President Finance and Administration (see Appendix 1).

#### Ryerson Mental Health Committee Report (2013)

- Contained recommendations for a short term, as well as long term focus on creating a framework and foundation for organizational change regarding mental well-being (see Terms of Reference, Appendix 2).

#### Mental Well-being Principles for Ryerson Policies<sup>7</sup> (2013)

- Created by the RMHC Policy & Procedures subcommittee, and is intended to guide the review and creation of policies at Ryerson to occur from a lens of mental well-being. This document influenced how mental well-being was operationalized within 'Our Time to Lead', Ryerson's 2014-2019 Academic Plan<sup>8</sup>.

### Community Resources

#### Ryerson Mental Health website (2014)

- Populated with various resources to help faculty, staff and students support mental well-being, both individually and collectively ([ryerson.ca/mentalhealth](http://ryerson.ca/mentalhealth)).

#### Mental Health 101 (2014)

- A training program designed to support individuals in the community with how to respond to a student or colleague in distress.

### Community Events

#### Ryerson Mental Health Town Hall (2013)

- Hosted by Valerie Pringle, this was an open discussion with the Ryerson community on the recent RMHC report and recommendations for campus wide mental health.

#### Transformational Café (2015)

- This event was co-hosted by the Community Transformation Cafe of the Faculty of Community Services, the Eaton Chair of Social Innovation, RMHC (represented by Student Health and Wellness co-chair), and Access Ryerson. Students were invited to answer the question 'What would make Ryerson the best university in the world for student well-being?' (see Appendix 3).

#### CACUSS Presentation (2016)

- Presented at the Canadian Association for College and University Student Services (CACUSS) Conference (June 2016) on the current Academic Policy Review happening within senate, and the role the RMHC is playing.

### New Roles

#### Mental Health Coordinator (2015)

- Funding was secured to create a position that would provide coordination of initiatives and projects resulting from RMHC work and discussions, and provide overall administrative guidance.

#### Mental Health Projects Assistant (2016)

- Funding was secured to create a Career Boost student position, who supported the creation of a catalogue of instructor flexible teaching practices, an initiative of the Policy and Procedures subcommittee.

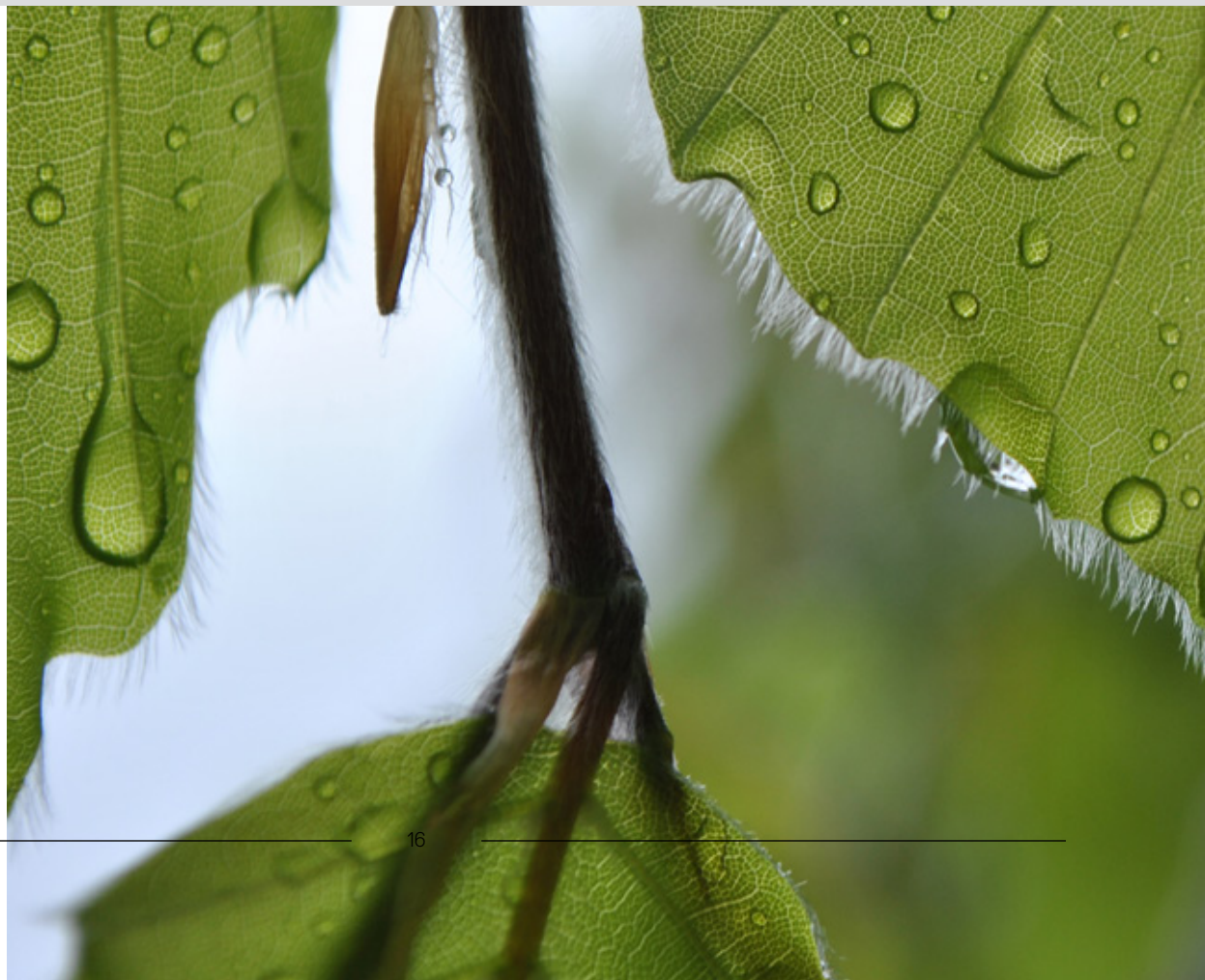
# Appendix 2

## Ryerson Statement of Commitment to Mental well-being

Ryerson is committed to the success of all its community members by creating an environment that is supportive of mental well-being. This includes an ongoing dedication to creating and sustaining a supportive campus culture and institutional ethos without stigmatization and discrimination with regard to mental health.

Drawing from the Public Health Agency of Canada definition of mental health, Ryerson's understanding of mental well-being is: "The capacities 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."

Issues of mental well-being, stigma, and discrimination against people with perceived mental health issues can affect all members of the Ryerson community, and can interfere with their success as well as impact on the university's mission. In order to support Ryerson's vision, the aim of this statement is to develop and maintain a vibrant, flourishing university community and environment that sustains mental well-being for all members to succeed. This will be achieved through providing opportunities for mental well-being promotion, education, capacity-building and support. Equity, respect and fairness will be promoted through an accessible and accommodating work, learning and social environment. Ryerson will take a proactive stance regarding the mental well-being of all members of the community. Ryerson recognizes the shared responsibility of the institution and all community members to support mental well-being on campus, and encourages collaboration among all faculty, staff and students to this end. Ryerson will provide a range of services and programs that promote mental well-being awareness, education and support for all community members.







# Appendix 3

## Terms of Reference

### Vision

A vibrant, flourishing university community and environment that sustains mental health and well-being for all members to succeed.

Informed by multiple approaches, we understand mental health to be “The capacities 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” (Public Health Agency of Canada)

In keeping with our diverse community, it may extend not only to medical conceptions of illness and health but Indigenous conceptions of social, spiritual and community well-being, critical notions of Madness and disability and cultural interpretations of wellness.

### Mission

- To create a comprehensive mental health strategy for Ryerson that aims to develop and maintain a campus environment that fosters this broad vision of mental health and well-being. Through decision-making, policies, systems, pedagogy, structures and delivery of education and services the strategy will align with the Ryerson University mission, the Academic Plan, diverse knowledge bases, campus cultural centres and external strategies.
- To provide continuing oversight in the strategy’s implementation, sustainability, evaluation processes, and timeliness to ensure it is responsive to the community and its diverse and evolving needs and perspectives.
- Provide advocacy for mental wellness and celebrate community successes at Ryerson.
- Provide leadership in the eradication of stigma, sanism and mental health discrimination on campus.



# Appendix 4

## Transformational Cafe: 'What would make Ryerson the best university in the world for student well-being?'

### Student Responses

- Centralized platform for communication between university and students.
- A sense of community.
- More networking and sharing ideas.
- Financial Transparency (students see where money goes).
- More accessibility to textbooks (i.e., older versions).
- Paying off tuition with work experience - a program between the university, province and city:
  - E.G. City of Toronto staff needs team of 50 people to help research and implement bike lanes in Toronto. Ryerson University matches students having experience, interest and knowledge with this city job. The Province pays that student directly, which affects/pays off student loans. Goal: student gains experience, networks and pays off tuition!
- Link volunteering to paying off tuition.
- Promoting safe sublet/housing options for commuting students.
- Create awareness of night study options for students via events (i.e., RSU).
- Students' residence on downtown campus.
- Break down marks into smaller/more assignments.
- Student empowerment.

