

President's Task Force on Student Mental Health

Student Mental Health Implementation Task Force Year Three 2015-16 Update to Community



Summary

We are pleased to provide you with an update on the progress of the third year of implementing the recommendations of the President's Task Force on Student Mental Health.

In May of 2013 the President's Task Force on Student Mental Health delivered a <u>full report</u> outlining the eighteen month process and outcome of their work to support student mental health at Mount Royal University. Their efforts were influenced and guided by the *Post-Secondary Student Mental Health Guide to a Systemic Approach* developed by the Canadian Association of College and University Student Services (CACUSS) and the Canadian Mental Health Association.

The report contained several recommendations that when implemented would act to enhance existing services or engage in new initiatives to support students at Mount Royal University. These recommendations were divided into timelines of short term (1-3 years), medium term (3-5 years), and longer term (5-8 years). With year one-three having passed, we are now reporting on the progress of the recommendations for the time period of year three.

The following document provides highlights of work conducted in the 2015-2016 year as outcomes of the President's Task Force on Student Mental Health and its recommendations.

One key highlight was the implementation of the Peer to Peer Mental Health Education Program. In this program students are educated about campus mental health, and work to decrease the stigma associated with mental illness. They were involved in initiatives such as Mental Health Week, Eating Disorders Awareness Week, #MRULetsTalk, and National Depression Screening Day. Students involved in the program report feeling like they belong at MRU and have increased their knowledge of mental health and resources both on campus and in the community.

A new Student Counselling Services blog called "Ask a Counsellor" was developed this year to increase students' access to online resources. Students are invited to submit questions anonymously online. A counsellor prepares a response and the question and answer are posted on the blog site. Further development and implementation of this resource will commence in the fall of 2016.

A new workshop "Faculty Options for Responding to Students in Distress" was developed to increase Faculty members' knowledge about the tools and resources available to them to support students who are in distress or crisis. This workshop was delivered to 37 faculty members and will continue to be delivered in 2016-17. In addition, a Blackboard module was developed by Wellness Services and implementation was supported by the Academic Development Centre. The module houses relevant campus and community mental health resources.

The Office of Student Success is a newer office that aims to help students learn what is available on campus to support them and to help students navigate resources. Beginning in fall 2015 this office implemented an Early Support system which is an early intervention mechanism to support students who may be struggling. The most common topics impacting students were work, stress, financial concerns, and academic performance.

With respect to the recommendation related to exploring a mental health triage system to ensure timely access to appropriate care, Health Services increased continuity of care for patients seeking mental health support within the clinic. Additional nurse hours resulted in the ability to facilitate mental health care between healthcare professionals including the physicians, psychiatrist, and behaviour management consultant. The need for this support is required particularly during high needs/high volume periods of the academic year. The nurse is the first point of contact for crisis triage for patients presenting to the clinic for urgent or timely mental health support. The triage role assesses the severity of the patients' mental health needs and coordinates access to the appropriate health care professional. The nurse follows up on any post visit referral processes. During this period, 3,546 mental health visits were supported through Health Services.

In response to continuous improvement processes, Student Counselling Services explored the impact of single session counselling appointments. They interviewed 58 students who participated in one counselling session only and never returned for a second session. Key highlights from the report include 54 of the 58 students identified their needs were met through the single session, and talking with someone and receiving guidance/intervention were main reasons identified as meeting students' needs. Based on this information, Student Counselling Services concluded that single session counselling sessions were effective in meeting the majority of the students' needs. As Student Counselling seeks to increase capacity to serve students, this work will be informative.

In terms of education and training, The Working Mind is a 3.5 hour workplace based mental health education program designed by the Mental Health Commission of Canada aimed at reducing stigma and raising awareness of mental health in the workplace. In May 2016, 8 employees and 4 students from MRU were trained as facilitators of The Working Mind, which will further increase our capacity to offer this valuable workshop to our campus members. Throughout the 2015-2016 year 11 sessions of The Working Mind were organized and promoted for employees, including one session for the University Leadership Group.

In year three, we continued to utilize social media to enhance knowledge and access mental health services, information and support. We increased opportunities to share data on mental health statistics and facilitate conversations on campus to increase awareness. For example, the @MRULiveWell twitter account has over 780 followers, a significant increase from the year before when there were 400 followers. The twitter account promotes mental health initiatives such as #MRULetsTalk; Eating Disorders Awareness Week; National Depression Screening Day in addition to Stepping Up (a Healthy Relationships program), Who's Frank (an anti-bullying initiative), and Diversity and Human Rights events. Stories related to mental health had a large readership, for example, a story about mental health funding for post-secondary (The Metro, March 2016) had over 600 clicks. Further, the #MRULets Talk initiative in January 2016 saw a 200% increase in tweets about mental health. University Advancement has played a significant role in helping to move this recommendation forward.

The Breathing Room, an 8-week online resiliency building program available to the MRU community, continues to be part of our mental health initiatives. Participants work through modules which are designed to help them cope with stress, manage difficult situations and emotions, and find ways of

coping with loss, challenges, and changes in their lives. The total new number of Breathing Room participants for 2015-2016 was 358. In a post program survey, 92% of 120 MRU respondents indicated they "definitely" or "somewhat" feel better able to cope with life's challenges as a result of being in the program. In addition, the majority of the respondents (64%) indicated that they would plan to use the tools and techniques from the program in the future.

At MRU, the Breathing Room was incorporated into 2 courses (3 sections) as part of the course curriculum for 2015-2016. A qualitative research study was undertaken by MRU faculty members to understand students' experiences of using the Breathing Room as a self-care tool in these courses. While the researchers continue to analyze the data, preliminary results suggest those with lived experience (past or present mental health concerns) or those with life experience (mature students or students with meaningful life events) appreciated what the program had to offer and could understand the importance of self-care being incorporated into the curriculum.

Mount Royal University is dedicated to student success, and by prioritizing student mental health we are also supporting academic success. A major achievement this year was the successful implementation of the 2016 National College Health Assessment (NCHA). This is the 5th time MRU has implemented this survey, and we achieved a record response rate of 41.5%. The NCHA serves as a measure of success within the MRU institutional strategic plans. We can use this data to further understand students' mental health, and this can help inform our mental health initiatives on campus, which in turn impact student wellbeing and academic success.

Mount Royal University gratefully acknowledges the external funding support from the Government of Alberta Advanced Education, Alberta Blue Cross, and a private donor for their support of the work of the President's Task Force on Student Mental Health.

Respectfully submitted by,

Student Mental Health Implementation Task Force

Kandi McElary, Director, Wellness Services (Chair)
Jim Zimmer, Dean, Faculty of Teaching and Learning (Dean's Council)
Phil Warsaba, Associate Vice-President, Enrolment Management (Dean's Council)
Melanie Rogers, Director, Marketing and Communications, University Advancement
Marcy Fogal, Executive Director, Students' Association of Mount Royal University

Resources:

Rhonda Anderson, Mental Health Facilitator, Wellness Services Courtney Warren, Administrative Assistant, Office of Student Affairs and Campus Life

Student Mental Health Implementation Task Force Year Three 2015-16 Update to Community

We are pleased to report on the progress made on year three of the *President's Task Force on Student Mental Health*. The following chart focuses on the recommendations for year three and outlines the rationale, progress and next steps for each of them.

Recommendation	Rationale	Progress	Next Steps
Explore and design a peer-to-peer model for implementation in 2014-2015.	Students build capacity and lifelong skills around resiliency, health and wellness. Program created by students for students.	The Peer to Peer Mental Health Education Program was launched and implemented in Sept. 2015.	Mental Health Facilitator to continue to connect with students to form a larger group interested in peer work. Ongoing program development.
Implement online resiliency resources for all students.	Build capacity to help students learn resiliency and stress management skills with increased accessible resources.	Breathing Room launched Nov 2013. Program will be offered again in 2016- 17. Student Health 101 (Online campus health magazine) is being accessed by students regularly.	Continue to promote the Breathing Room and Student Health 101.
Develop a comprehensive communication plan for mental health messaging and information (including services, programs, resources, training opportunities, referral	Mental health website would bring the resources together and create space for newer resources such as the "Mental Help" folder, Breathing Room, on and off campus mental health resources.	Wellness Services website as well as President's webpage has messaging on student mental health. Mental health website is updated regularly.	Updating mental health website as needed going forward. Mental Health Facilitator to work with UA and MarComm on comprehensive plan.

processes)			
Develop an assessment plan and strategies to measure impact of mental health initiatives.	Important to have assessment of initiatives to guide future work and have evidence of impact.	Recommendations are being monitored and assessed as appropriate.	Mental Health Facilitator continues work in this area in collaboration with stakeholders.
Recommend the development of a mental health strategy for employees at MRU.	Employees stated on several occasions the need for attention to support themselves as being a piece of supporting students.	Employee Wellness survey results were disseminated in spring 2016. The MRU Psychological Health and Safety Framework and Plan was developed.	The Working Mind program was being offered to employees in winter/spring 2016 and will continue into 2016-17.
Develop criteria for physical space conducive to wellbeing. (ie. Community building, comfortable, accessible, lighting and ergonomic considerations, single/group settings.)	The physical environment impacts wellbeing. Guidelines or recommendations are needed to support creating spaces which facilitates wellbeing.	Report has been completed and given to key stakeholders on campus including the Campus Master Plan developers.	Key stakeholders have relevant information to act upon.
Develop concise and practical tools for new and returning faculty to facilitate response/support student mental health. (ie. Mental Help Folder)	Important faculty know how to respond to students in distress.	Workshop "Faculty Options for Responding to Students in Distress" was delivered in 2015- 16. Over 300 Mental Help Folders were distributed.	Continue to offer workshop in 2016-17. Continue to distribute the Mental Help Folder to campus stakeholders.
Increase opportunities to share data on mental health statistics	Important for MRU community members be aware and	2016 NCHA was completed.	Exploring future opportunities to share

and facilitate conversations on campus to increase awareness, i.e. University Leadership Group, SAMRU, Board of Governors, etc.	understand need for initiatives based on data.	41.5% response rate.	this data.
Create/enhance website to assist faculty and staff with communicating mental health resources for students and facilitate a referral process.	Improved information- sharing about available resources: to increase awareness of services, to improve quality of referrals, and to increase appropriate usage of services.	Mental Help folder can be accessed online. Mental Health Website updated regularly.	Will continue to track numbers for usage and access.
Create/enhance access to information via easy navigation for students seeking mental health information, support and services (i.e. Campus Connect).	Reduce process complexity and eliminate roadblocks to students' finding and accessing resources to help them during difficult times.	Pamphlet created on mental health resources. Health Services updates referral list for Student Counselling. A Blackboard module has been developed.	Promote Blackboard module.
Utilize social media to enhance knowledge and access mental health information, services, and support.	Reach out to students using their preferred communication tools. Using their tools helps makes message more palatable/accessible/comprehensible.	Digital displays have been used to send messages. Podcasts still being accessed.	Mental Health Facilitator to ensure message stays to the front, including through the @MRULiveWell Twitter Account.
Support increased awareness of the "Concerning Behaviour Campus Team" (CBCT).	Recognizes there are many places where students will share their need for help. Shared information ensures students	CBCT is a resource on Mental Health website and Mental Help Folder. CBCT team meetings	"Faculty Options for Responding to Students in Distress" Workshop has been developed and implemented by

	receive coordinated, effective, consistent response.	are underway.	Student Counselling Services. Continue to offer workshop in 2016-17.
Communicate/post Distress Centre information for everyone to be aware of and anyone to access anytime, especially after hours.	Ensure reasonable 24/7 access to adequate supports, while recognizing the limits of campus ability to serve.	Numbers have been posted around the university. Health Services referring to Access Mental Health. New student club "Student Distress Centre Club" established October 2014 and still active in 2015-16.	Done posting of signs. Continue to promote and support Student Distress Centre Club in 2016-17.