Mental Health Commission of Canada

Commission de la santé mentale du Canada

Five years in:

What we know about implementation of the Standard & early outcomes



August 19, 2026



Agenda: Evaluating uptake & implementation

01 —

Evaluating uptake & implementation of the Standard

02 —

Key insights on institutional implementation

03 —

Outcomes and recommendations

The National Standard for Mental Health and Well-being for Post-Secondary Students

- **Flexible** set of guidelines
- **Adaptable** to any campus community
- **Voluntary** to adopt and use



Guiding Principles as a Roadmap

- Student centered
- Health promotion & harm reduction
- Equity, diversity & inclusion
- Thriving community & culture of well-being
- Knowledge informed
- Continuous Improvement

The Commission's Role with the National Standard

Champions

- **Development** and **release** of the Standard
- **Promotion** in the post-secondary sector

Convenors

- Knowledge exchange on **best practices** and **lessons learned** in implementation

Collaborators

- Developing **implementation resources** to support engagement

Five years in:

Evaluating uptake & implementation

Evaluation Objectives

1. To describe **adoption** and **implementation** of the Standard across Canada

2. To identify **barriers** and **facilitating** factors of Standard implementation

3. To understand what **institutional** and **student outcomes** might be expected from adopting the Standard

Methodology & Data Sources

Key informant interviews (n=8)

- Represented PSIs and various partner/stakeholder organizations
- All key informants were well-connected, informed, and experienced experts on the Standard and its implementation

Review of documents (n=7)

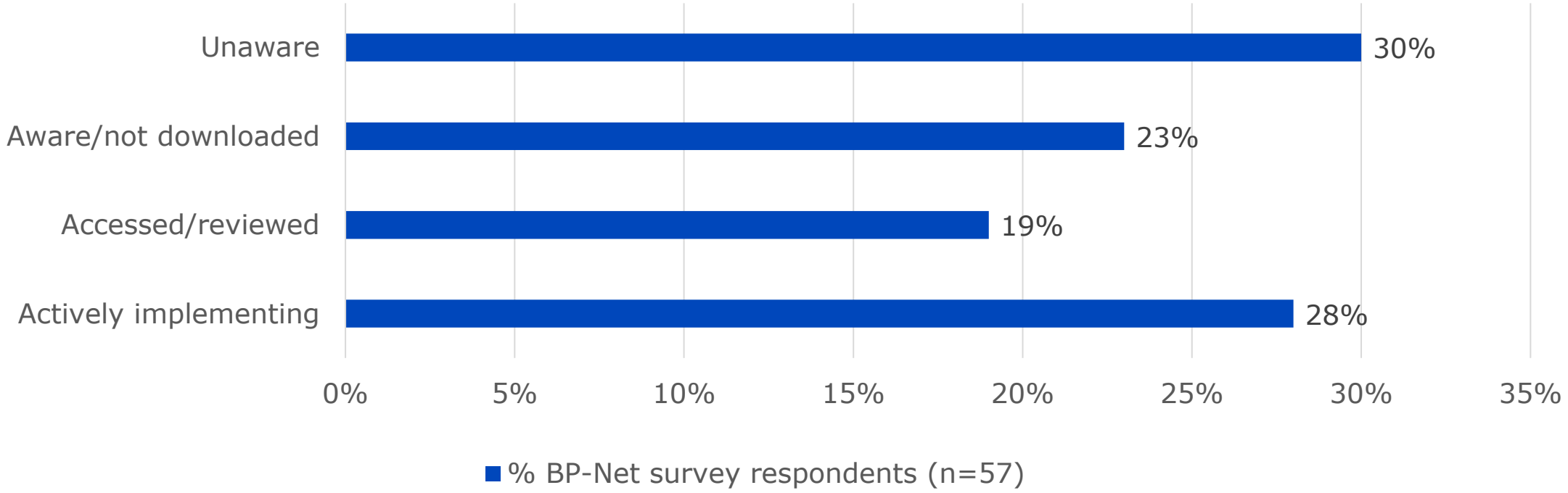
- "CSA Group/MHCC Survey Report"
- "Action Tracker Report"
- "BP-Net Survey Report"
- "Unlocking the Standard"
- "Championing Campus Wellbeing"
- "Insights on Implementation"

Evaluation outcomes:

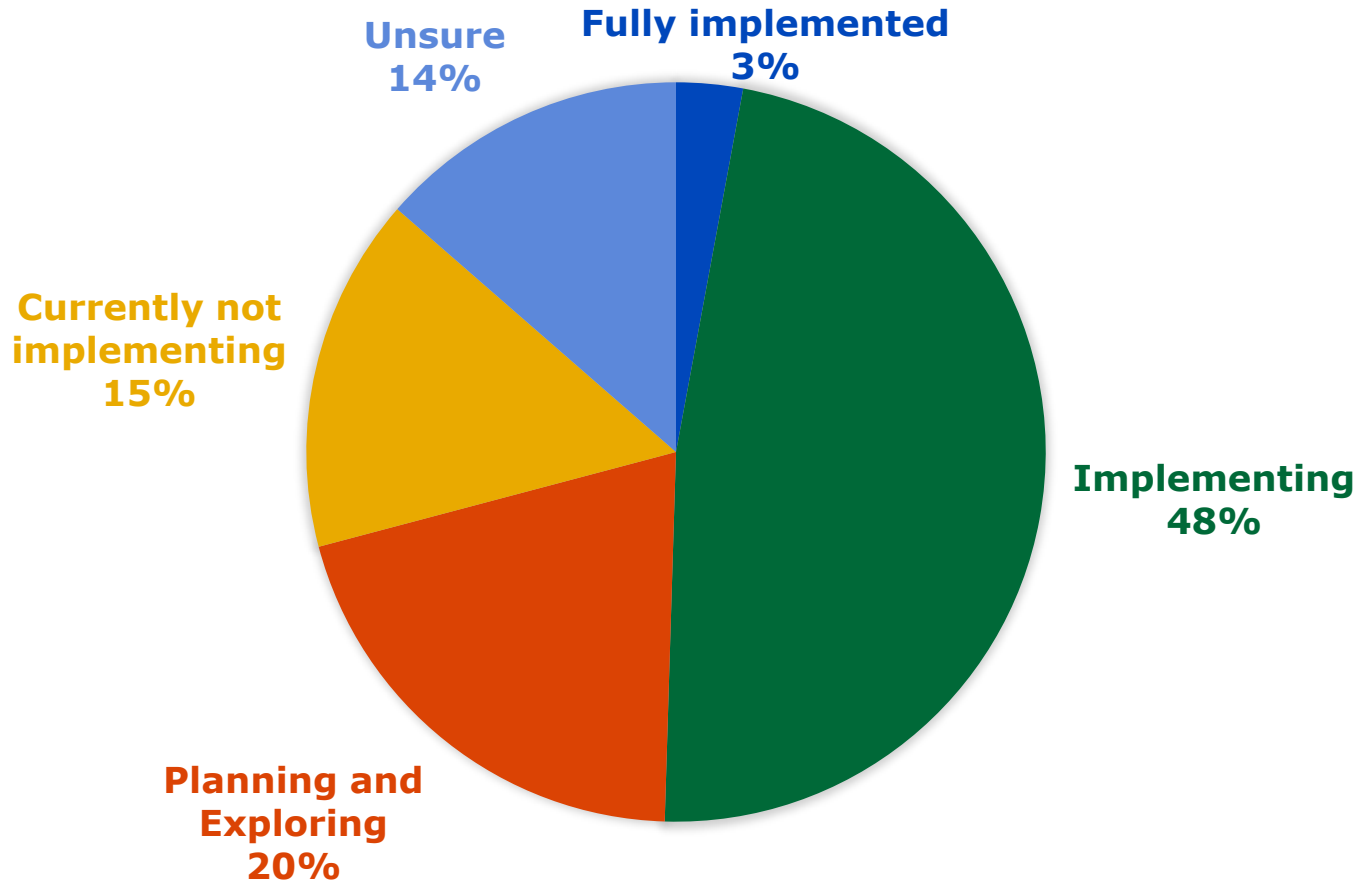
What we know about adoption and implementation

Awareness & adoption across Canadian PSIs

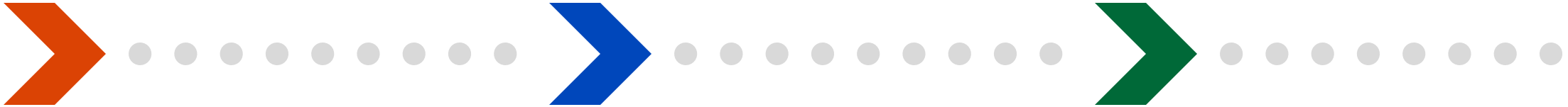
"My assumption would be about 40 to 60%, with differences in intensity"



Where are post-secondary institutions in their implementation journey?



How do institutions get started with the Standard?



Planning

- ❑ Review the Standard
- ❑ Assess areas needing improvement
- ❑ Develop a plan with objectives, targets, and measures

Engagement

- ❑ Engage students
- ❑ Engage senior management
- ❑ Employee consultation

Leadership

- ❑ Identify an organizational champion(s)
- ❑ Form working groups or committees

What are institutions using the Standard for?

Aligning policies with best practices

- ❑ Revising and informing institutional policies from a mental health lens
- ❑ Informing institutional strategic plans

Informing strategies

- ❑ Development of a mental health strategy
- ❑ Integrating with other frameworks (e.g. Okanagan Charter)
- ❑ Creation of specific strategies (e.g. suicide postvention, EDI)

Enhancing programs & services

- ❑ Health promotion programs or services
- ❑ Clinical programs or services

What are institutions using the Standard for?

> *A lot of what I see is … **using the Standard to inform strategies**…and then the other bucket is **programs and services**.*
>
> *Assessing what current programs and services they have, what gaps there are in those, and then rolling out or enhancing programming where they might identify gaps.*

Why are institutions adopting the Standard?

1. It addresses a genuine need

2. Competitive advantage

3. Credibility and comprehensiveness

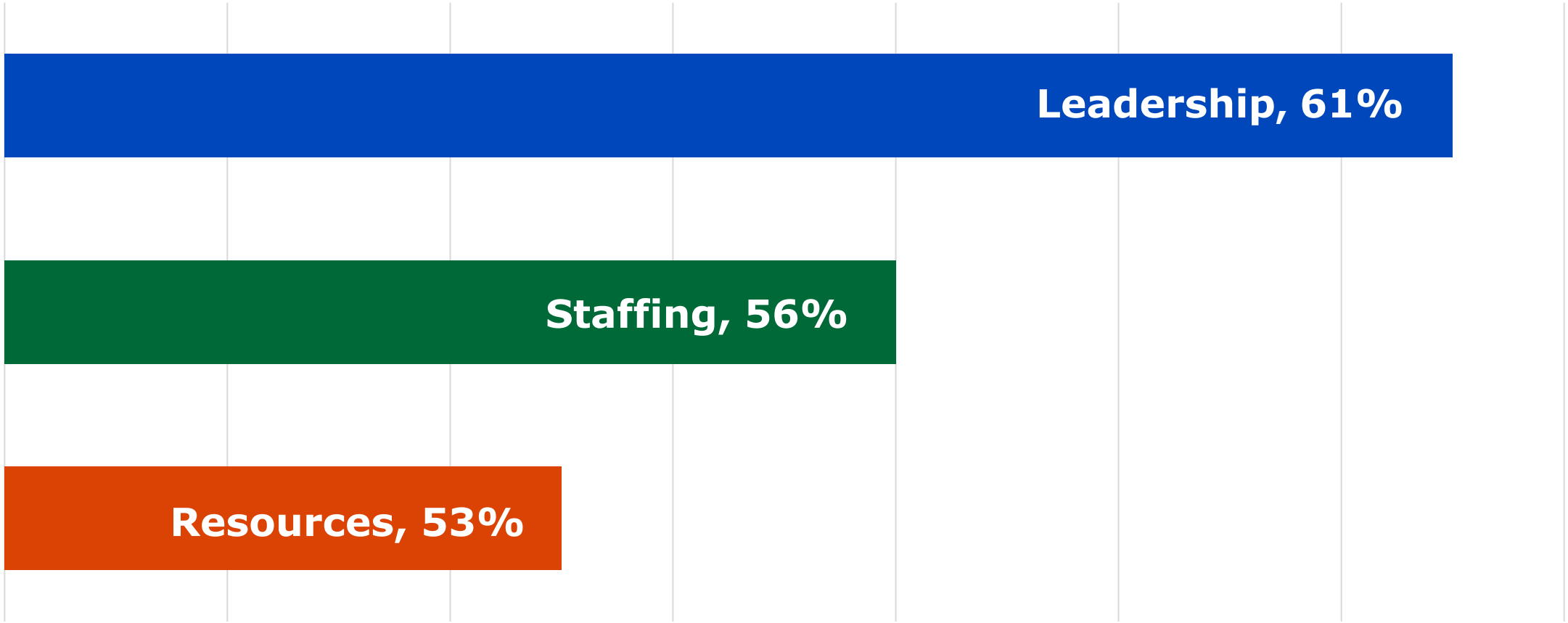
Barriers and Enablers

Enablers for implementation

- **Leadership buy-in** is the top-rated success factor
- **Dedicated budget** and **staffing capacity** play an equally important role
- **Cross-departmental collaboration** was an additional facilitator enabling buy-in from staff/faculty

"It was really supported at the leadership level. Wherever there's that leadership support … that's huge. If there's that understanding and appreciation for the Standard at the institutional level."

Top 3 enablers for implementation

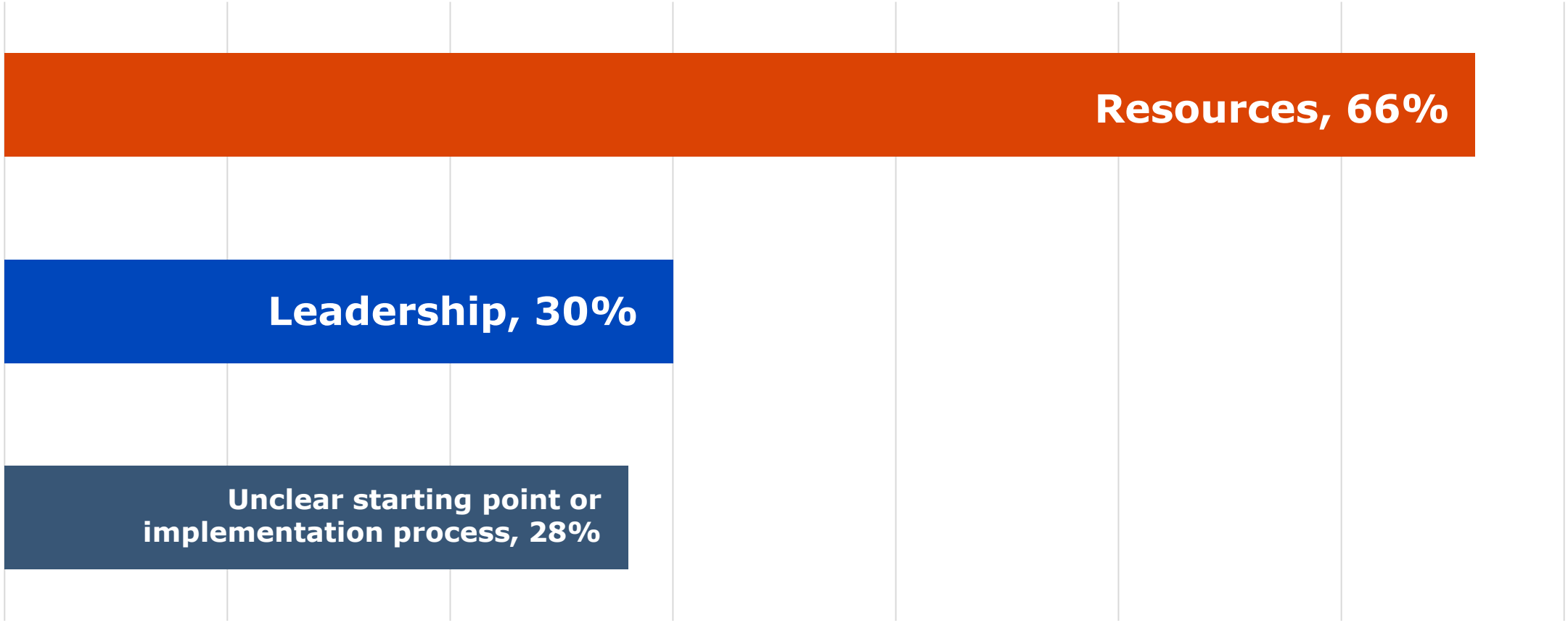


Barriers for implementation

- Lack of dedicated **time, funding, and human resources** is the top-rated barrier
- **Institutional silos** hinder collaboration on mental health
- **Competing priorities** seen as separate or inconsistent
- **Overwhelm** with the complexity of the work

"Part of the challenge is how do you turn all the stuff in the Standard into questions that you would answer...how do you operationalize the document?"

Top 3 barriers for implementation



*The concept of **decentralizing well-being outside of student affairs** is a new concept for a lot of institutions.*

*We see a capacity building for faculty, staff, student leaders in terms our mental health awareness….cultural changes in terms of how we think about and conceive like **mental health is not in one department, it's everyone's business.***

Outcomes & Recommendations

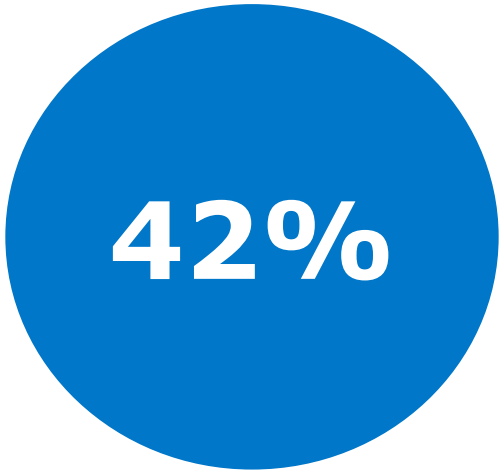


Institutional outcomes

- Enhanced mental health **awareness** and **education** efforts for students, staff and faculty
- Increased buy-in to student mental health as a **shared institutional responsibility**

"[Understanding that student mental health] is everyone's role. And so when you talk about mental health literacy …. the whole campus needs to feel equipped to respond to and support student mental health."

Institutional outcomes: Resource allocation



of those actively implementing the Standard report allocating new resources to student mental health and well-being as a result of implementation

Student outcomes

- **50%** report **increased awareness** of mental health programs
- **50%** report **easier student access** to programs and services
- **48%** report **reduced stigma** around mental health
- **46%** report **increased mental health service use**



CSA Group/MHCC Survey Report

Student outcomes

*The number of **students that access student wellness** services has increased significantly, about 40% every year on average.*

*The **retention of the students** that access supports is bigger than our overall institution...for students who accessed two or more supports, the retention rate was over 85%, which is much higher than our overall institution.*

Logic model for the Post-Secondary Standard

PSI Cultural Outcomes	• Socialization of the idea that student mental health is an institutional responsibility • More integration of social determinants of health (e.g., housing, affordability, etc) with student mental wellbeing • Reduction in stigma at the cultural & structural level • Students & staff feel their PSI is psychologically safe & has a supportive mental health culture • Students & staff feel PSI has healthy (non alcogenic) substance use culture (e.g., recovery support, alcohol free events, harm reduction) • Mental health-supportive infrastructure embedded throughout programming, admin, policies, strategies and other PSI services & activities • Culture of evaluation and continuous improvement
Student/staff Outcomes	• Increased student awareness of mental health and supports services • Increased help seeking/using of supports, on & off campus • Increased use of positive coping e.g. improved life and resiliency skills • Reductions in interpersonal and self stigma • Increased mental health literacy among staff and improved capacity to respond to students in distress • Increased / retention and improved opportunities for student success • Student engagement and input in campus mental health priorities and work
PSI Institutional Outcomes	• Understanding of alignment and gaps vis-à-vis the Standard • Infrastructure for PSS implementation (e.g., mental health strategy/ dedicated staff) • Dedicated / increased resources for mental health (e.g. funding, staff, physical spaces) • New & expanded mental health programs & services • Improvements in access to mental health supports & services • Policy changes • Establishment of metrics to assess progress / outcomes • Training for staff & faculty / increased mental health literacy & capacity of staff & faculty • Increased cross-departmental collaboration
Key Activities & Outputs	• Access and familiarize Standard and implementation and evaluation resources • Completion of assessment/audit • Identification of champion(s), committee(s), working group(s) • Student and staff engagement activities
Inputs / Key External Resources	• National Standard for Mental Health and Well-Being for Post-Secondary Students • Implementation and evaluation resources (e.g., implementation toolkit, Campus Mental Health Action Tracker, webinars) • Support organizations (e.g., MHCC, SRDC, Best Practices Network) • Provincial Communities of Practice • Implementation grants

Key recommendations for the sector

Pick a section and get started

- Use the audit tool for gap analysis
- Focus on understanding where you are, set priorities from there
- Leverage available implementation resources

Embed mental health as a shared institutional responsibility

- Engagements with students, staff, and faculty
- Capacity building efforts
- Integration with policy

Track your progress

- The *Campus Mental Health Tracker* can help operationalize the Standard, document baseline, and measure progress

Thank you!
Q&A

Questions for the MHCC?

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Student Standard Resources