

Student Mental Health at the **University of Alberta**

FINAL REPORT OF PROVOST FELLOW

Dr. Robin Everall

Edmonton, Summer 2013

TABLE OF CONTENTS

Executive Summary.....	4
Introduction	6
Why Now?	8
The Way Forward	14
It Takes a Campus to Support a Student.....	15
The U of A Landscape: Resource Allocations	16
The Model	21
Recommendations	23
Appendix A: Mental Health Services - Old Structure.....	38
Appendix B: Mental Health Services - New Structure.....	39
Appendix C: HIAR Initiative	40
Consultations.....	43
References.....	44

EXECUTIVE SUMMARY

In alignment with the University of Alberta's initiative to delve into the state of student mental health services on its campuses, a Provost Fellow, Student Mental Health was tasked with examining services available to University of Alberta students, exploring best practice at other institutions, and producing a report to guide relevant, responsive and accessible mental health strategies and initiatives.

Fifty four recommendations are organized into 10 categories.

A VISIBLE CAMPUS COMMITMENT

Emphasizing the importance of student mental health at the University of Alberta requires a strong and visible endorsement by senior administrators. The renewed commitment will provide a lens that will be considered in policy and procedures development across the institution.

EXPAND WELLNESS INITIATIVES AND RAISING THEIR PROFILE

The importance of removing structural barriers and the importance of increasing peer support are addressed. Encouraging student-initiated mental health programming is an important area to focus upon in the future.

DEDICATED RESOURCE ALLOCATION

Sustained and cohesive initiatives require secure funding envelopes. Recommendations include the need for more physical space and financial sustainability.

COHESIVE MENTAL HEALTH AND WELLNESS PROGRAMMING

All student services, including disability services, academic services, spiritual services, ombud services or mental health and/or wellness services, deal with students impacted by mental health issues. Reducing silos will hasten the movement to more streamlined and adequate access and will allow diverse units to collaborate more effectively. Less visible services for students, whether available at the department, faculty or unit levels need to be included in the larger conversation about student mental health.

EDUCATING OUR COMMUNITY

Recommendations include developing workshops and training sessions for faculty, staff and APOs to educate them about the changing needs and expectations of students, creating handbooks and resources for parents and students. Modifications to the mental health training programs offered at the University of Alberta are recommended.

COMMUNICATIONS STRATEGIES

An efficient and effective and integrated communication strategy is essential to ensuring that information about the availability and breadth of mental health services at the University of Alberta is accessible to students, parents, and university personnel.

STRUCTURAL RECOMMENDATIONS

A university infrastructure needs to be created to develop campus-wide mental health initiatives. Recommendations include the creation of a committee structure tasked with prioritizing, developing, and overseeing the implementation of mental health initiatives across the institution. An expansion of the Helping Individuals at Risk program is strongly recommended as is the development of a new policy for dealing with students severely impacted by mental health issues.

ORIENTATIONS

A thorough overview and evaluation of all departmental, faculty, service unit, and association orientations needs to be completed. Orientation content, delivery models, and scheduling need to be carefully scrutinized to ensure that students are receiving accurate and adequate guidance as they embark upon their academic careers.

INTERNATIONAL STUDENTS

In conjunction with the increasing numbers and cultural diversity of international students comes the need to re-evaluate how targeted services are designed and delivered. Recommendations focus upon augmenting the ability of international students to become meaningfully engaged in the university-at-large as well as the general community.

OUTREACH

Alumni are a most valued resource of the University of Alberta. Augmented involvement in student mental health initiatives, specifically, would benefit the university community. A formal relationship with Alberta Health Services would facilitate the provision of ongoing medical and psychological supports for students with serious mental health issues.

In addition to the recommendations, the report outlines structural changes to student mental health services that were completed in 2012 that provide the foundation for restructured services in 2013 and onward.

INTRODUCTION

The desire to enhance and improve the way the University of Alberta approaches and deals with student mental health and wellness is rooted in the institution's ongoing dedication to fostering student success and student retention. One needs to look no further than the integral commitment made by our founding president Henry Marshall Tory, that the University of Alberta would serve to 'uplifting the whole people.' Indeed, our current president, Dr. Samarasakera has recently recast this promise in individual terms, stating that "we begin by uplifting the whole person, one person at a time" (speech, March 15, 2013). This pledge is infused into the Dare to Deliver, Academic Plan, 2011-2015: "It is also important...that students have the range of effective and appropriate supports that allow them to fully realize their potential during their time at the University of Alberta. ... When we focus on our students, we consider the student holistically."

In alignment with the University of Alberta's initiative to enhance the student experience, my appointment as Provost Fellow, Student Mental Health was created in January, 2012 to examine services available to our students dealing with mental health issues. This initiative aligns with the increased public scrutiny of North American post-secondary institutions to ensure that adequate mental health services are available to their students. It also correlates with increased attention on mental health issues in the public sphere. The creation of the Alberta Lieutenant Governor's Circle on Mental Health and Addiction is just one example of the focus on the impact of poor mental health on society at large.

The importance of mental health issues and their impact upon student engagement and academic success is receiving increasing attention in post-secondary institutions across North America. The academic experience occurs in the larger context of a student's life that has increasingly complex demands and pressures. Personal expectations, interpersonal challenges, academic demands, and life transitions, represent psychosocial or environmental stressors that may impact academic success. Although traditionally mental health issues in post-secondary populations were undervalued and an often dismissed influence upon academic achievement, there is growing consensus in the research community that these issues are becoming more complex, chronic, and severe. In a report completed by the Canadian University Survey Consortium (2011), more than 1% of Canadian undergraduate students identified themselves as having a learning or mental health disability that created obstacles to academic success and 18% reported using student counselling services that were available on campus. It is not a stretch to surmise that for some students already struggling with mental health issues, academic demands may negatively impact their mental health over the course of their academic careers. Because of the breadth and severity of documented student mental health challenges, post-secondary institutions have a seemingly overwhelming task of providing adequate services to their students and providing support structures that facilitate academic success. For a university as large and complex as the University of Alberta, this is a critical issue that requires careful scrutiny and strategic planning and constant assessment.

In order to fulfill the mandate assigned by the Provost to investigate student mental health services, the following questions were asked:

- How does the University of Alberta provide relevant, responsive and highly accessible mental health services to its students?
- Is there a need to increase capacity and offerings for the delivery of mental health services?
- How does the U of A increase its capacity to provide adequate mental health services to its' students?

To answer these questions, it was necessary to: identify the landscape of mental health services on our campuses to determine if there were overlaps or gaps in services; develop a model or models to enhance service availability; and propose a strategy to enhance support and mental health services for students. To ensure that perspectives from a spectrum of stakeholders had input into the report, senior administrators, faculty members, APOs, sessional and contract staff, support staff, mental health specialists, graduate students, undergraduate students, and external stakeholders were consulted. What follows includes: the results of an examination of the University of Alberta's current mental health services and delivery models, recent modifications to services based upon these findings, and recommendations for further improvement on our campuses.

To identify best practices suitable for the University of Alberta, the search needed to be completed with institutions that are comparable in structure, mandate, and size. A one-size-fits-all model is not appropriate for our large, research and teaching intensive university, therefore it was important to think creatively about how to best meet student mental health needs in our complex institution. Institutions large and small are challenged to develop strategic plans that will guide student service initiatives within the contexts of the size and nature of the institution and its access to sustainable funding sources. The emphasis on mental health grows as a burgeoning body of

research provides evidence that meeting student service needs creates a safe and supportive learning environment in which students thrive and succeed in their personal and academic endeavors. Health - physical, spiritual, emotional, and mental - are integral to realizing one's potential and achieving one's goals. Moving the University's initiatives forward requires insight into the connections between student mental health, learning and academic achievement, and student engagement as a constellation of factors that contribute to student success. In 2003, the Healthiest Campus Taskforce was created to make recommendations on moving toward a cultural shift. In 2009, the Provost's Advisory Task Team on Student Engagement built upon previous reports and made specific recommendations that would enhance the student experience and forge strong connections between student communities and our university. With this in mind, examining mental health and institutional best practice cannot be investigated in isolation.

WHY NOW?

The revelation that mental health impacts student learning and success is not new. In fact, the 1911, the Joint Committee on Health Problems in Education identified health education, health services, and a healthy environment as the three components required to support student mental health (Silverman, Underhile, and Keeling, 2008). More recently, following tragic incidents on university campuses that were perpetrated by students with mental health difficulties, the importance of the issue has again been highlighted and high profile incidents in other countries have garnered considerable attention. While fewer in number, significant incidents closer to home have increased attention and raised concerns about mental illness, particularly the relationship with harm to self and to others, on campuses across the country. With increasing evidence that mental health has a significant impact upon on students' learning, discovery and citizenship, universities are responding to the new reality and more demanding expectations from students, parents, and society.

Mental Health, Mental Illness and Mental Wellness

The terms 'mental health' and 'mental illness' are often used interchangeably and often call to mind those individuals who are suffering from severe and incapacitating disorders. Likewise, within post-secondary institutional contexts, the concepts of 'mental health' and 'well-being' are frequently disconnected. The World Health Organization (2011), however, connects the concepts of mental health

and mental wellness closely by defining mental health as "a state of well-being in which the 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 own community." The Mental Health Commission of Canada (2011) clarifies the definition by stating that "'mental health problems and illnesses' refer to the full range of patterns of behaviour, thinking or emotions that bring some level of distress, suffering or impairment in areas such as school, work, social and family interactions or the ability to live independently." More generally, mental wellness refers to proactive, supportive environments with approaches that are fundamentally more community-based. These definitions emphasize how the environment influences mental health within the context of everyday experiences and events. Clearly then, individual, systemic, community, and social factors influence mental health, for better or for worse. By extension, the responsibility for mental health does not fit directly into the jurisdiction of any one sector or service, but rather is a responsibility of all who participate in a community. Within the PSE context, an institutional commitment to the promotion of mental health and wellness requires cohesion between policies, procedures, organizational structures, and services.

Academic Success and Mental Health

The simple fact is that learning, academic achievement, and mental health are intertwined. An emerging body of research demonstrates relationships between mental illness, mental health, academic problems, and academic success (e.g., Heiligenstein & Guenther, 1996; Hunt, Eisenberg, & Kilbourne, 2010). In response to the increased understanding about these interactions, Canadian and American post-secondary organizations have developed compelling plans that

are designed to maximize student mental health initiatives in an academic environment and tie the plans to how they facilitate student success (Canadian Association of College and University Student Services (CACUSS), 2012; American College Health Association (ACHA), 2012). Not surprisingly, comprehensive strategies closely link individual mental health and wellness with the environment in which students function and emphasize that piecemeal, predominantly reactive strategies lack the power to build healthy campuses. The CACUSS (2012) conceptual guide to student mental health is based upon the premise that mental health is an essential component for student academic success and engagement; these are symbiotic relationships. There will be minimal success in improving student engagement and success in the campus community if mental health issues are overlooked.

Therefore, mental health and wellness strategies and plans need to include every level and each individual of the institution. Post-secondary wellness frameworks encompass programs that benefit all who attend an institution by building a strong foundation that supports engagement, community involvement, support for success, personal growth, and academic achievement. Whether institution-specific or more global, services, supports, and opportunities influence the full community. The intent is to make a large campus feel small enough to be engaging and for each student to find a place where they feel they fit and belong. Post-secondary institutions are charged with strengthening all students through opportunities to be involved in peer programming and support, undergraduate and graduate clubs and interest groups, cohorts within specific programs, a learning environment that provides a sense of identify and multiple methods of engagement with the institution, and opportunities for involvement in research such as those supported by the Undergradu-

ate Research Initiative. Every student should be able to find a niche to be “more active and engaged with the Academy” (Dare to Deliver, 2011-2015).

Changing demographics and mandates

Over the past ten years, societies have begun to acknowledge the prevalence and impact of mental health issues. With the increasing number of societal initiatives to de-stigmatize mental health issues, when speaking to the Canadian Mental Health Association, Dr. John Kirby contended that universities have a “moral obligation” to attend to the mental health needs of their students (Tamburri, 2012). Rising to the challenge, post-secondary institutions are acting proactively and systemically to meet the emerging mental health needs on campuses rather than solely reacting to critical incidents.

On top of this, the 15-24 age range is the single largest group of Canadians who face mental health challenges (Mental Health Commission of Canada, 2011; Eisenberg, Gollust, Golberstein & Hefner, 2007). This is an age when many mental health issues begin to emerge and are most malleable to intervention and amelioration. However, while the post-secondary demographic is the most likely to develop disorders, it is the least likely to seek help. The good news is that parents, faculty, staff and students on campus are increasingly aware of the indicators of mental health issues and are acknowledging students’ struggles when they are observed. By raising the profile of mental health in the society at large, there is an increased acknowledgement of the significant impact of mental health on performance, persistence, and the ability to contribute to society overall. Thus, there

is a perception that mental health issues are more prevalent now than in past generations. Simply put, with growing awareness comes growing demand for services. It is incumbent upon the University and post-secondary institutions to provide these services to ensure that students are able to meet their goals, successfully complete their programs of study, and become contributing members of society.

The demography of today's student population is in flux, changing as it draws from a broader population than ever before. Kitzrow (2009), Zivin, Eisenberg, Gollust & Golberstein (2009), the American College Health Association (ACHA, 2012), the Canadian Association of College and University Support Services (2012) and the Royal College of Psychiatrists (2011) concur that the changing composition of the student body has a dramatic impact upon a university community. The major forces of change include student characteristics, parental expectations and oversight, and increasing numbers of international and non-traditional students, and an increasingly complex world. The environmental impact of financial concerns, developmental challenges, family responsibilities, psychological distress, as well as academic pressures affect the learning experiences of many students.

All post-secondary institutions are grappling with the responsibility to ensure that they are providing safe environments for students and staff to learn, develop, and grow. As such, they face the challenge of determining the extent to which student mental health issues are accommodated in policies and procedures. The University of Alberta, through its *Dare to Discover* and *Dare to Deliver* documents, clearly makes student health and wellness a priority of the institution. The organizational structure of student mental health, welfare and wellness services must reflect the philosophy of a focus on student success. The vision and mission of each faculty, department, and unit

must align with the institutional mission: the value of its students. The U of A is dedicated to fostering an institutional culture based upon a shared commitment to student health, wellness, and success.

Student Expectations

For most students, pursuing post-secondary studies is far more than obtaining just academic credentials. Students come to campus expecting to become members of a community in which they grow academically, developmentally, and personally. Rodolfa (2008) states "The goal of a campus community that cares is to develop an environment where students feel welcome, feel that they can reach their potential in a healthy supportive environment, and feel they can come to a greater understanding of who they are, who they want to be with, and where they are headed in life." The University of Alberta addresses the aspirations of students in *Dare to Deliver 2011-2015*: "When we focus on our students, we consider the student holistically... How will we know we are making progress? Students report they have the tools and support they need to succeed, including a more student-friendly bureaucracy."

As the diversity of undergraduate and graduate students increases, it is incumbent upon the academy to adapt and deliver services that will contribute to meaningful student engagement and academic opportunities for all. Wellness services, the structures for providing services, and a diversity of available resources are required to keep pace with the changing demographics of our student population. The contemporary challenge is to recognize and accommodate the individual as well as the common aspects of our students. At the U of A we want to create spaces for learning and inquiry that allow our students to feel comfortable in being themselves as well as identify-

ing as U of A students. In striving for this balance, we improve the quality of the university experience while harnessing the full benefit of diversity in our community.

Our programs and services need to be delivered in a coordinated and consistent fashion that meet the needs of all students, avoids duplication and is not sequestered into silos of administrative units. When one becomes a U of A student, her/his individual background comes as well, and this diversity enriches our community. Students need to believe that their culture, religion, gender, and/or ethnic backgrounds are valued and that our institution strives to provide meaningful services that are easily navigable for all students. Fracturing services based upon student status or background creates inadvertent barriers or fosters the perception that mental health support or academic success services are differentially available. This appears to be particularly true for international students who feel disconnected from this institution.

The U of A Reality

In the spring, 2011, the National College Health Assessment (NCHA) was completed at the University of Alberta for the first time. The NCHA is a research-based student survey that was developed in 2000 and has since been used by major American and Canadian universities to determine and track changes in student mental health, as well as to identify factors that impact student performance, engagement, and success. The survey asked respondents about their alcohol, tobacco, and other drug use, sexual health, weight, nutrition, exercise, mental health, personal safety, and violence. This was the first comprehensive snapshot the University of Alberta had obtained to understand the breadth and depth of mental health issues that our students contend with.

NCHA data, 2011

Students experienced the following issues within the 12 months prior to the survey:

	U of A Spring 2011	Ontario Cohort 2009	North American Reference Group, 2011	U of A Students (35,500) - survey data extrapolated to a campus statistic
Felt overwhelmed by all you had to do	87.5%	86.3%	89%	31,062
Felt exhausted (not from physical activity)	87.1%	81.6%	N/A	30,920
Felt very lonely	61.7%	57.3%	61.9%	21,903
Felt very sad	65.6%	61.1%	67.7%	23,288
Felt so depressed it was difficult to function	34.4%	31.1%	N/A	12,212
Felt overwhelming anxiety	52.1%	50.6%	52.9%	18,495
Felt overwhelming anger	40.7%	37.1%	N/A	14,448
Seriously considered suicide	6.8%	6.4%	7.2%	2,414
Attempted suicide	1.2%	1.1%	1.2%	426
Intentionally cut, burned, bruised or otherwise injured yourself	4.8%	5.2%	N/A	1,704
Felt things were hopeless	51.4%	45.1%	54%	18,247

Within 12 months prior to survey, students were diagnosed or treated by a professional for the following:

	U of A Spring 2011	Ontario Cohort 2009	North American Reference Group, 2011	U of A Students (35,500) – survey data extrapolated to a campus statistic
Anxiety	8.1%	10.4%	8.8%	2,875
Attention Deficit and Hyperactivity Disorder	1.7%	3.9%	N/A	603
Depression	8.2%	9.7%	7.5%	2,911
Insomnia	3.2%	3.7%	2.8%	1,136
Panic Attacks	3.8%	5%	4.6%	1,349
Substance Abuse or Addiction	0.7%	1.2%	N/A	248

These statistics are concerning given that depression and anxiety have been shown to be associated with academic impairment and are related to drop-out rates and lower GPA (Eisenberg, Golberstein & Hunt, 2009).

The National Survey of Student Engagement (NSSE) is conducted yearly to measure the level of student engagement and to track the impact of institutional initiatives that foster engagement at the University of Alberta. “Students perform better and are more satisfied at colleges that are committed to their success and cultivate positive working and social relations among different groups on campus.” (NSSE, 2011). The student engagement category is comprised on responses to the following statements:

- Campus environment provides the support you need to help you succeed academically
- Campus environment helps you cope with your non-academic responsibilities (work, family, etc.)
- Campus environment provides the support you need to thrive socially
- Quality of relationships with other students
- Quality of relationships with faculty members
- Quality of relationships with administrative personnel and offices

The National Survey of Student Engagement

Agreement that the U of A is a Supportive Campus Environment

Degree Completion	2008	2011
Year One	52.6%	55.1%
Year Four	47.4%	51.3%

The National College Health Assessment

	Affirmative response	Negative response
The University has a sincere interest in students’ health and wellbeing	61%	39%
Experience a sense of belonging to the U of A	66%	34%

The results demonstrate that the ongoing efforts and new initiatives taken to improve student supports and engagement have resulted in improvements in the campus culture. Taken together with the NCHA data, these surveys provide us with the evidence that enhancing student services and supports is critical to the student experience.

Whether students are at a crisis point or getting through the ups and downs of student life, the means and methods by which they access or receive information from the University can have a dramatic effect: on their wellbeing as well as their academic success. Students need to be able to find help when they need it and in many cases, before they need it. They need to be able to readily access the information and/or assistance required to take action to mitigate the situation in which they find themselves.

Some initiatives such as the soon to be launched Student Connect within the Registrar's Office are moving toward organizing and offering services as defined by the students' points of view and needs. For instance, current and future cohorts of students expect websites to be functional and mobile, to provide useful and up-to-date information, and to be relevant, engaging and accurate. They expect the U of A programs and services, whether online or face-to-face, to be effective, accessible and coordinated.

In order to be successful, effective communication with students requires an ongoing commitment that works in coordination with all aspects of health and wellness programs and services and continually adapts to the newest technologies and communication methods. While communication efforts need to be targeted to increasing mental health and wellness, they must also include the other programs and services that we offer including the physical, spiritual, academic and social.

University Structure and Commitment

To be truly effective, post-secondary mental health initiatives require an ongoing commitment from the institution. This requires:

- a sustained focus on the impact of health and wellness on academic achievement
- identification of institution-wide priorities
- flexibility to address constituent needs as they evolve
- adequate resource allocations
- appropriate delivery models
- and active oversight of outcomes

Universities must adapt as evidence increasingly supports the impact of mental health and wellness upon retention rates, student engagement, learning and development, and ultimately academic success. Mental health and wellness initiatives must be championed at all levels of the institution, including senior administrators and the topmost echelon. A sustained initiative needs to be visible to faculty members, APOs, support staff, sessional, and contract workers as well as by undergraduate and graduate students. Student groups, the Students' Union and the Graduate Students Association have peer credibility that can create momentum for action that reaches out to all students on campus.

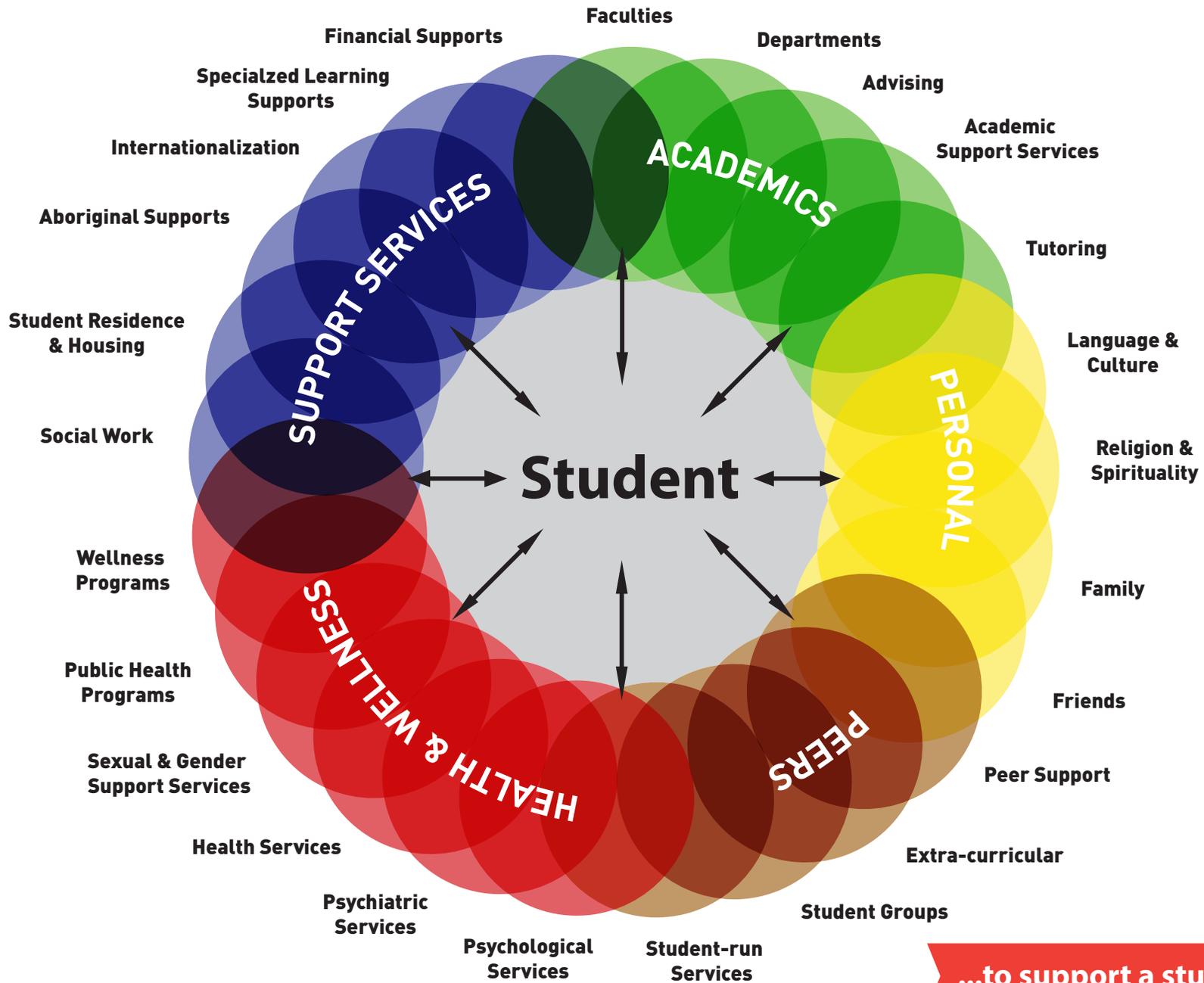
THE WAY FORWARD

In 2003, the University of Alberta Senate Task Force on Wellness was created to make recommendations that would guide future initiatives to create a healthy and vibrant community. In 2005, the Senate Task Force on Student Engagement built upon the Wellness report and made specific recommendations to enhance the student experience and student connection with U of A campus communities. The U of A Comprehensive Institutional Plan (2012) reinforces the institutions commitment to ensuring that student experiences remain forefront in the institution's initiatives. The groundwork has been laid, and it's time to seize the opportunity and build the mentally healthy, well University that we want and need.

Progress has been made, and there are a lot of the right pieces of the puzzle in place. However, we need more, much more. The U of A's priority and commitment to student wellness must be made more visible, both within our institution and to community stakeholders. There are any number of negative impacts on post-secondary institutions that are unresponsive and inflexible to students' needs, or are seen to be, particularly in a time when public expectations regarding both mental health and universities are rapidly changing. Providing support services that enhance students' ability to be successful sends an important message in a competitive market; at no time has there been a greater need to maintain our appeal to prospective and current students.

While clinical, counselling, and other acute care services on campus are necessary, they alone are not sufficient. No one unit or service holds the key to ensuring students are mentally healthy and well. Demonstrating our commitment to a high quality student experience requires holistic planning and strategic management more than predominantly reactive responses to crisis. Creating a campus that supports mental health and wellness requires an institution-wide, community-based network of supports and services that has multiple points of entry for students. It also requires an environment that considers student wellness integrally in the design of policy, procedures, and decision-making on campus. It is not overstating to say that the success of all students at the U of A requires a renewed commitment to support students as they strive to meet their personal and academic goals.

It takes a campus...



...to support a student.

THE U OF A LANDSCAPE: RESOURCE ALLOCATIONS

Mental Health Centre

The Mental Health Centre (MHC) has adopted a new philosophy regarding how to provide effective and efficient services to students on the main campus. In 2010, psychiatrists that worked in the University Health Centre were amalgamated into the Mental Health Centre that had previously housed psychologists alone. Integration of the two professions into a single unit was intended to facilitate consultation, collaboration, and seamless service provision. A psychiatric nurse, hired in 2011, bridges the gap between psychological and psychiatric services by providing clinical support to students with psychiatric illnesses. A triage intake process is available four hours per day to assess students' levels of need and appropriate service requirements. In addition, the MHC is an important training site for graduate students pursuing advanced degrees in counselling psychology and clinical psychology. Doctoral interns are required to be enrolled in accredited programs.

Resources as of December 31, 2012

The Mental Health Centre is located centrally on the main campus. The Centre is comprised of:

- 7 full-time psychologists
- 2.5 full-time contract psychologists
- 2 full-time psychology interns
- 3 full-time psychology interns (on 8 month contracts)

- 1 full-time psychiatric nurse
- 7 part-time psychiatrists (2.5 FTE)

Community Social Work Team

In January, 2012, two social workers were housed within student services. One was affiliated with the Student Success Centre and the other was utilized as a resource for students who required intermittent support services as well as being responsible for the implementation of the Community Helpers initiative. There is less stigma associated with the social work profession than psychologists and psychiatrists, thereby making them more appealing to many students seeking help. In fact, most students who currently use the services of the social workers on campus are unaware of their professional designation.

In October, 2012, two additional social worker positions were created and all four positions were reorganized to create a single unit reporting directly to the Office of the Dean of Students. The role of the social work team was grounded in preventative action that supports resiliency and fosters a sense of connection to strengthen capacity, provide bridges to resources, and advocate for greater inclusivity on our campuses. The team's work is focused within the contexts of Community Education, Community Building, Community Outreach and Resources, and Community Advocacy. With the restructuring, their roles expanded across the U of A campuses.

The revised team mandate:

- Provides mental health training and workshops across campus
- Delivers the Community Helpers program

- Links students to university and community resources
- Provides informal services to students rather than rigidly scheduled, formalized services
- Collaborates with the Peer Support Centre to guide content and delivery of volunteer training programs.
- Ensures consistency of training year over year through the development of a comprehensive, mental health component for student volunteers
- Provides training to residence coordinators and residence assistants across campus
- Delivers workshops to faculty and staff about student mental health and intervention strategies
- Works closely with international students in the International Centre. Engaged social workers facilitate stronger relationships for students in difficulty who are unwilling to seek out or access formalized professional services.

Resources as of December 31, 2012

- 4 community social workers (4.0 FTE)

Institute of Sexual Minority Studies and Services (iSMSS)

The Institute of Sexual Minority Studies and Services was created in 2008 and absorbed other sexual and gender minority youth programs on the U of A campus. The institute provides a framework for a network of programs and services that support sexual-minority students. Through its work, students have access to specialized psychological support and advocacy including Sideright, a student residence support group and Inside/OUT. It provides numerous outreach educational programs across campus. Under its banner, research,

community service, and equity programs are offered. In the past year, a part time psychologist has been added to the compliment of employees to provide confidential services to students, faculty and staff. The Institute also spearheads the Safe Spaces initiative that, in combination with lectures and workshops, educates the campus community to create an inclusive campus climate. This places the U of A in an enviable position as a recent study found that only 30% of campus counselling websites mentioned individual counselling for sexual and gender minority students (Ontario Undergraduate Student Alliance, 2012). Even fewer (12%) had personnel trained to provide services to this specialized population.

Resources as of December 31, 2012

- 1.0 FTE psychologist: provides services to the campus and City of Edmonton communities

Aboriginal Student Services Centre (ASSC)

Aboriginal students require a unique set of supports to facilitate enhanced academic engagement and student experience. With the focus on ensuring that aboriginal students have access to appropriate services, it is increasingly important that tailored mental health services be available. The ASSC offers culturally appropriate student advising, social and emotional support services, access to community elders, study space, and social and cultural events that are inclusive to the campus community.

Resources as of December 31, 2012

- A psychologist from the MHC provides service in the Centre three hours per week.

Aboriginal Students Office

Augustana Campus has an Aboriginal Students Office that provides similar culturally appropriate services, academic advising and social events. They also offer an Aboriginal Student Mentor Program, pairing senior level aboriginal students with new incoming aboriginal students to assist with the adjustment to university life.

Sexual Assault Centre

The Sexual Assault Centre (SAC) was the first free-standing independent institution-supported centre at a university in Canada. Other universities are using it as a model in the design of sexual assault centres at their own institutions. The SAC currently offers crisis intervention and short-term counselling to students, staff and faculty who have been impacted by sexual violence, harassment, and stalking. The SAC is active in innovative education and awareness programs across campus including Yoga for Healing, education workshops for classes or student groups, 'Don't Be That Guy' campaign, @You, a program for aboriginal students, safe house access, and informal community support workshops. They spearhead activities and information campaigns during the campus-wide Sexual Assault Awareness Week. The SAC delivers training workshops and seminars to student support units, student groups, as well as undergraduate classes across campus. Their student volunteers reach into the university community, deliver training sessions across campus to faculty and students, and provide support to those impacted by sexual violence.

Resources as of December 31, 2013

- 1 counsellor (1.0 FTE)

Faculty In-House Mental Health Support

Four faculties provide in-house student psychological services that extend beyond student advising services. The psychologists are well versed in the issues relevant to their specific student body and faculty programs, thus enabling them to tailor services.

Campus St Jean

- .8 counsellor/psychologist counselling services in French and English (650 students)
- Psychiatric services in French available in the community

Augustana Campus

- .8 FTE registered psychologists (1000 students)
- Psychiatric services are available in Camrose

Medicine/Dentistry

- .4 FTE counselling services available in the Learner Advocacy and Wellness Department

Faculty of Education

- 1.0 FTE registered psychologist provides services to undergraduate students

Health and Wellness Team

The Health and Wellness Team (HaWT) supports student public health initiatives. The team oversees the Unwind Your Mind initiative implemented in the university's libraries during final examination periods and the Heroes for Health, a competitive student program that provides funding for outstanding student-initiated projects to foster wellness on campus. The team is also collaborating with the Students' Union and the Office of the Dean of Students in the Furry Friends pet-assisted therapy program. The HaWT team is responsible for the organization, distribution, and analysis of the bi-annual National College Health Association student survey.

ADDITIONAL RESOURCE ALLOCATIONS IN 2013

Mental Health Centre Restructure

Supplementary government funding has provided the opportunity to revise the delivery model for student mental health services. The MHC will be able to increase its ability to meet the needs of previously underserved students by offering more flexible hours, four additional locations and types of interactions with students and staff that reduce barriers inherent in our current service structure. In October, 2012, a proposal was presented to the Vice Provost Council that outlined a change in the MHC delivery model for the main campus. The recommendation was based upon the philosophy that the U of A needs to put services where the students are most apt to access them. The revised model includes satellite offices that are located in large faculties and units thereby expanding access of mental health services to multiple locations across campus. In addition to making the services more easily accessible and visible to the student body, placement within faculties or centres provides the opportunity to develop collaborative relationships between faculty members and service providers and to tailor services to specific student groups. The hours of operation would be extended to enhance access.

With additional resources, the following additions are underway:

Four new satellite offices are being created.

- 3 satellite offices will be placed in faculties with large undergraduate populations
- 1 satellite office will be created for graduate student access

Additional mental health providers:

- 4 full-time psychologists will be located in satellite offices
- 2 psychiatric nurses will conduct intake interviews throughout the day which will increase available counselling hours for psychologists
- Service hours in the Centre will be extended two evenings per week

With the acquisition of the Government of Alberta \$3,000,000 grant announced in January, 2013, new psychologists will be hired to work in the satellite offices that will be located in the three largest faculties on campus: Arts, Science, and Engineering. The fourth largest faculty, Education, has had a full-time on-site psychologist since 1996. The Graduate Student Association has indicated the need for services tailored to graduate students who comprise approximately 19% of the clientele currently served at the MHC. To accommodate this need, a fourth satellite office will be placed in Triffo Hall.

Community Social Work Team

With additional resources, the following additions to services are underway:

Additional mental health providers:

- 1 clinical social worker (.4 FTE)

Aboriginal students have been identified as a group in need of additional mental health support therefore clinical social worker services will be extended into the ASSC on a part-time basis. International students have also been identified as a group in need and the appropriate services are currently being evaluated.

Sexual Assault Centre

With additional resources, the following additions to services are underway:

Additional mental health provider:

- 1 psychologist (.75 FTE)

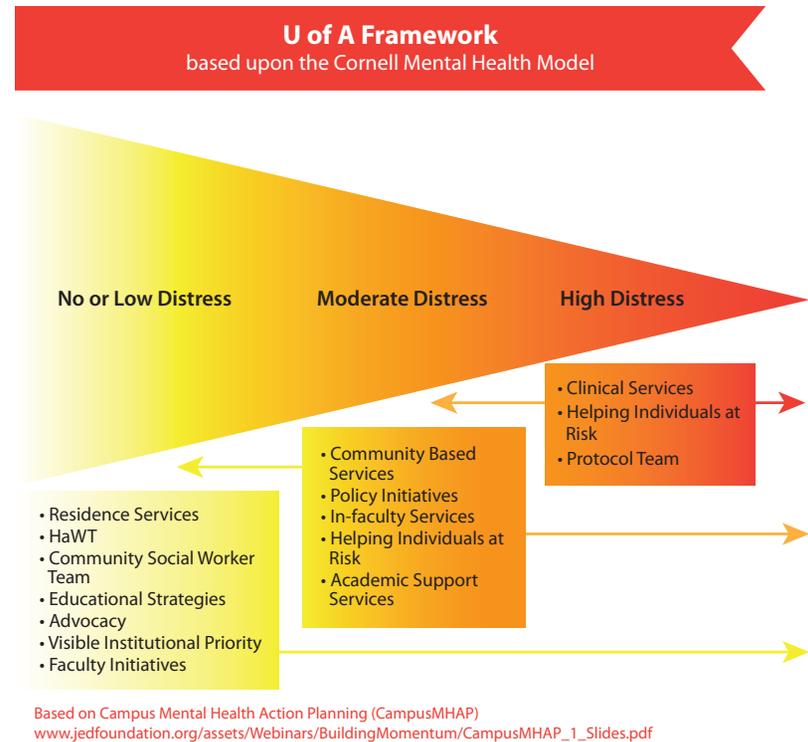
Government funding has provided the financial resources to hire a part-time psychologist for a three year period, beginning September, 2013. The current counselling program will be revised to include ongoing individual counselling and group counselling.

THE MODEL

A model developed by Cornell University provides a useful framework for developing and implementing student services and information delivery that includes engagement at all levels of the campus community. Historically, student mental health and wellness services have been approached from the perspective of providing mental health interventions by clinicians and medical facilities and have functioned within silos (Eisenberg, Golberstein, & Hunt, 2009). Operating parallel or uncoordinated services lacks efficiency, risks duplication of resource allocations, and impedes the delivery of impactful programs and services. With a health-promoting approach, the totality of students will be impacted by an emphasis on promoting, maintaining or regaining their mental health. Creating an environment that is intentionally designed with a breadth of services and avenues of access “foster[s], support[s] and sustain[s] a campus culture in which students’ growth, resiliency and learning are fostered.” (p. 9, Silverman, Underhile & Keeling, 2008).

The right side of the triangle represents those students who require direct clinical support services from doctors, psychologists, psychiatrists, and psychiatric nurses in the Mental Health Centre, community social workers and existing in-faculty psychological services. These are the students that are forefront in people’s minds when conversing about student mental health occur.

The middle segment of the triangle encompasses access to services by students who require a variety of non-clinical supports to facili-



tate their academic success. It focuses upon providing targeted interventions for non-traditional and academically struggling students on campus and enhancing the ability to access the breadth of student support services. Non-traditional groups include First Nations, Metis and Inuit students, second career students, international students, and gay-lesbian-bisexual-transgender students, while more-at-risk groups include first year and transfer students. At the U of A, the existing Helping Individuals at Risk (HIAR) program can be extended to identify students with declining mental health and/or academic difficulties in order to facilitate early intervention and access to support

resources. Developing institutional awareness of the link between student mental health and learning and academic success could be facilitated by designing workshops that provide faculty, staff, and administrators with awareness training to assist them in identifying and responding to distressed students. Awareness of the available support services on campus needs to be enhanced. A focus upon mental health and wellness issues during student orientations could be incorporated in such a way as to encourage resilience and adaptation to the U of A.

The left side of the model focuses on the quality of the culture and learning climate of the institution, and the level of student engagement. Given that the U of A is committed to the development of citizenship, its institutional commitment to personal growth and development as well as academic success should be visible to the campus community and community at large. While the following statements by the Senate Task Force for Student Engagement are framed within that context, the power of feeling valued and belonging is critical to fostering and maintaining student health and wellness.

There can be an extraordinary value in a single positive encounter with another person in such a large and diverse campus community. Feedback from focus groups suggests that front line campus personnel play a central role in ensuring that students are not only informed, they are also valued as contributing members of the campus community. ...

Each encounter with a student is an opportunity to promote and support student engagement in social and academic campus life. Students who want to get involved and search for resources are also in the process of defining their role in the university community.

Students are not just seeking information - they are also seeking a sense of place and a sense of belonging." (2005, p. 43)

As institutional policies and procedures are developed, their impacts upon mental health and wellness cannot be discounted. Importantly, peer-to-peer support has been shown to be highly effective for assisting students with overcoming personal challenges and therefore plays a crucial role in fostering a healthy and supportive campus.

Given the insight and usefulness of the model in both range and scope, the recommendations that follow in later in this report have been developed based upon the Cornell framework.

RECOMMENDATIONS

MAKE OUR COMMITMENT VISIBLE

1. Student mental health issues must be a visible priority of the University of Alberta

"...the university supports the development of the whole student and dedicates resources to both academic and student life development." (University of Alberta, Comprehensive Institutional Plan, 2011, p. 40)

Creating a University that supports, nurtures, and promotes student mental health and wellness requires a pledge that the institution is mindful of mental health and wellness in policy, procedure, practice, and all levels of decision-making. An explicit statement in the U of A strategic plan affirming that mental health and wellness impacts academic achievement, retention, and success is required to send a strong message to both internal and external communities. It will provide the foundation for a sustained commitment to student mental health services and wellness programs, and reaffirm the importance of ongoing campus initiatives and administrative support to student success.

2. Ensure that the U of A community recognizes the importance of student mental health on learning, academic success, academic persistence and program completion

Senior level advocacy is essential to maintain a focus on the impact

of student mental health on learning, academic achievement, retention, and success. Mental health and wellness are foundational to students' abilities to reach their full potential and achieve their aspirations. Acknowledging that mental health impacts the student experience, academic success and community engagement must be at the forefront of a comprehensive approach that includes enhancing awareness, education, and training for faculty and staff, offering sustained support programs, and developing supportive policies and procedures.

3. Review policies and procedures to ensure they are consistent with mental health initiative

The Academic Policy and Process Review (APPR) Task Force has a mandate to review current policy. "The mandate of the Academic Policy and Process Review (APPR) Task Force is to facilitate students' learning by ensuring that the University's academic policies and processes for academic programs do not present unnecessary barriers to student engagement and do not prevent students from having positive and rewarding experiences at the University of Alberta." www.provost.ualberta.ca/en/CommitteesandTaskForces/APPR.aspx

Their mandate should be expanded to ensure that policies and procedures are consistent with fostering and maintaining student mental health and wellness by reducing bureaucracy and institutional impediments

4. Encourage faculties, non-teaching, and student service units to review their policies and procedures to ensure that they align with the larger institutional initiatives

The effects of programs, policies, and procedures on students must

be a fundamental consideration for all academic and non-academic units. Including a health and wellness ‘lens’ should be encouraged in the development of programs, policies, and procedures that are more student-friendly and student-centred. By seeking better alignment between institutional and faculty policies and procedures, the U of A can remove unintended barriers that impede the ability of students to navigate the bureaucracy of this large institution.

5. Reconsider student services across the University from the students’ point of view.

The contemporary challenge for delivering student services is to recognize and accommodate both the particular and the general, the individual and the common aspects of our students. At the University of Alberta, we want to create a space for learning and inquiry that allows our students to feel comfortable in being themselves as well as identifying as a U of A student. In striving for this balance, we will at once improve the quality of the university experience for our students while harnessing the full benefit of diversity in our community.

Our programs and services need to be delivered in a coordinated and consistent fashion, but that is not incompatible with a truly heterogeneous, diverse student community. When one becomes a U of A student, their individual background comes with them and enriches the U of A community, and the community needs to respond with its programs and services that are no more or less than are offered to a student coming from any other background.

The sense of care and interest that the institution shows in its students needs to come through to students as individuals, who share in common the experience of being students. We need to be respectful of their backgrounds (cultural, language, religion, gender, ethnicity,

etc), and strive to be relevant and engaged in *their* transformative experience—in who they are now and who they want to be after their time at the U of A.

This is not just about administrative and bureaucratic efficiency and effectiveness; this is about the best way to approach the organization and delivery of programs and services to students.

EXPAND WELLNESS INITIATIVES AND RAISE THEIR PROFILE

6. Rename the Mental Health Centre

The name “Mental Health Centre” has been identified by students, support staff, and faculty as creating a barrier for many who require counselling services but are reluctant to seek services there because of the stigma associated with the term ‘mental illness’. While the name was intended to represent the spectrum of services provided in the Centre, it creates an unintended barrier for many students seeking services. The name of the Centre should change to Counselling and Clinical Services, which will accurately reflect the psychological and psychiatric services that are being provided, but reduce the stigma associated with the current name.

7. Develop and deliver addictions and substance abuse student services and support groups on campus

Addictions and substance abuse services are considered to be crucial student services and are becoming standard on many North American campuses. It is strongly recommended that a comprehen-

sive addictions and substance abuse program that includes ongoing education campaigns, student support, and direct student services be developed for implementation by the 2013/2014 academic year. This initiative could build upon existing resources, such as the online “Check Yourself” resource.

8. Promote health and wellness for all students

Despite the tendency to focus upon acute care and student crisis, we need to focus upon promoting mental health and wellbeing for all students on campus. In order to be truly proactive and comprehensive, mental health and wellness strategies need to encompass all aspects of campus life to facilitate enabling and nurturing communities that support student wellness. Ensuring that mental health and wellness stays at the forefront of institutional decisions and policies will help to create a culture of care, while continuing to demonstrate to students that their welfare is important to the institution.

9. Student groups should be encouraged and provided with support mechanisms by the university.

A rich diversity of student groups is a strength the U of A enjoys, but we are not making full or best use of this strength; we need to try to find better ways of activating and extending the many benefits that come from a dynamic and participatory student population. In essence, this is about student driven student engagement; we need to look for these ways to engage students with our large, comprehensive campus, whether they commute or live in residence, come from elsewhere in Alberta, Canada, or around the world. The trust and connection that students make with their peers is often crucial to a student’s individual wellbeing and sense of community.

10. Promote peer-to-peer mentoring and support services

Beyond the immediate impact to individuals, the full value of peer-to-peer interactions lies in the development of community across the student body. Many students identify turning to peers for advice, support and assistance as their preferred choice, as it provides multiple avenues for trusted and trustworthy engagement without the stigma of seeking professional services. Peer support and student-to-student engagement opportunities should be enhanced by:

- promoting and expanding the Peer Support Centre;
- engaging senior level students to become ambassadors for student mental health and wellness;
- compiling a student-to-student guide about “Everything you need to know about adjusting to the challenges of being at the U”, including one that is graduate-student specific;
- encouraging student-driven health and wellness groups to work more collaboratively across the university so that mental health and wellness campaigns are more impactful for a broader student audience;
- developing a network for collaboration between mental health clubs on campuses; developing graduate student specific “What I wish I knew about grad school”; and
- facilitating the development of campaigns designed for targeted student populations (mature students, transfer students, international students, aboriginal students, rural students).

Unfortunately, institutional structures are too often impeding student group collaboration; the development of cohesive programs should be considered to determine whether procedures could be modified and streamlined to improve effectiveness. There are also potential connections with Recommendation #9.

11. Expand Health and Wellness Team (HaWT) involvement in student health initiatives

By virtue of its role to oversee all-things-students, the Office of the Dean of Students (DoS) houses expertise and maintains connections throughout the university community that can augment health promotion initiatives. The Health and Wellness Team, housed within University Wellness Services, plays an important role in facilitating student-lead public health initiatives on campus. To achieve the goal of developing strong collaborative relationships, the HaWT and DoS should ensure that a close working relationship is developed that will enhance campus-wide initiatives. Team leaders have the expertise to design campus-wide student health promotion campaigns and the leadership ability to expand their involvement in student-lead mental health programming. It is important that the HaWT team work in close collaboration with the DoS communications office to maximize campus awareness of mental health initiatives. Eliminating organizational barriers that interfere with cohesive, seamless, and broad-based implementation strategies is essential.

ALLOCATE DEDICATED RESOURCES

12. Align an increase in required physical space with the increased demand for services

Despite the growing numbers of students on campus and the increasing demand for services provided by mental health and wellness units, restricted space precludes the ability of some units to provide accessible and timely services. It is strongly recommended that adequate space be provided to allow support units to fulfill the ever-increasing demand for services. It is incumbent upon Facilities

and Operations to work collaboratively with the Office of the Dean of Students to ensure that space availability does not restrict the U of A's ability to provide mental health and support services that are in alignment with the U of A mandate.

13. Ensure sustainable funding

The U of A has already committed to providing access to mental health and wellness services for students. As stated in the Comprehensive Institutional Plan, the University will "provide foundational support structures for students in order to create a nurturing environment that allows for positive student experience and engagement." (Access Goal 14, p.40) With an increasing focus upon the importance of mental health on learning, student success, academic achievement, and retention, post-secondary institutions are being charged with an additional mandate to provide adequate access to supports. Adequate student services require stable, predictable funding envelopes to develop strategic plans to address the need. Cohesive, comprehensive, and integrated services require short-term and long-term strategic planning.

14. Allocate necessary resources to support the growing demand for support services

As the student population at the U of A increases, the demand for services will assuredly grow. The concern about student mental health has grown exponentially in post-secondary institutions over the past decade. A new commitment to providing mental health and wellness services has resulted in the development of a number of comprehensive and strategic documents intended to guide long range plans. Initiatives are designed upon services already in place, the size and nature of the institution and access to sustainable funding. The U of

A has a solid foundation upon which to continue to advance its student mental health initiatives, thus ensuring that they are accessible and effective. All student services, including the ASSC, MHC, SAC, Student Success Centre (SSC), and Specialized Support and Disability Services (SSDS), contribute significantly to providing mental health support to students, both graduate and undergraduate.

15. Office of Advancement should engage in fundraising initiatives that support student mental health and wellness services

Fund-raising campaigns to enhance student services and mental health supports are strongly recommended. There are few individuals in society that have not been directly impacted by a loved one or acquaintance struggling with mental health issues. Student mental health has been brought to increased public attention through the media. In the context of the reality of tight budgets and competing realities, the University needs to commit to a directed and high profile fundraising effort to provide financial support that will help build and sustain student health and wellbeing services. It is important to communicate the value that the U of A places upon providing mental health services as it focuses upon supporting students, facilitating success, and fulfilling its commitment to enhancing the learning experience for all students.

MOVE TOWARDS COHESIVE MENTAL HEALTH & WELLNESS PROGRAMMING

16. Reduce the fragmentation and “siloeing” of student mental health services

The creation of a Student Mental Health Coalition comprised of mental health service providers housed across the U of A campuses would facilitate strong working relationships between faculties and service units. It is strongly recommended that a committee be struck that comprises representatives of Campus St. Jean, Augustana, Mental Health Centre, community social workers, as well as faculty-based and institute-based psychologists and counsellors. Regularly scheduled meetings would facilitate campus wide collaborative initiatives and best practices across units. As the structures for providing mental health and wellness services change to become more infused into faculties, stronger relationships between diverse providers will ensure continuity and cohesiveness between services.

17. Recognize the roles that the Specialized Support and Disability Services (SSDS) and the Student Success Centre (SSC) have in addressing student mental health issues

SDSS and SSC have observed an increased number of students requesting accommodations because of mental health concerns. Less psychologically robust students often turn to academic services rather than mental health or wellness services for support. In addition, a large percentage of students who initially present with physical disabilities or learning disabilities are also compromised by secondary mental health challenges. Complex cases involving multiple disabilities require increased resource allocation to facilitate academic

success and student wellbeing. In addition, accommodations and adherence to the university's commitment to provide learning supports to all students needs to be consistently applied across all faculties.

18. Enhance the profile of the chaplains and acknowledge the value of spiritual support

Spiritual and faith based guidance is valued by many students and staff on campus. Chaplains and religious leaders have contributed their services and support to the U of A community for many years; however, their contributions to student health and wellness could be made more visible. Despite having the capacity and mandate to provide counselling and spiritual guidance, they are, for the most part, an untapped resource. Chaplain services should become a standard referral to students by mental health providers, student support personnel and student advisors. The partnership between the Chaplain's Office and the University should be officially recognized with established roles, responsibilities and mandate to acknowledge their value on campus.

19. Dedicated prayer and meeting spaces should be made available to the campus community

As the diversity of the campus community increases so does the need for space to accommodate the needs of students and staff who practice their faith. International students, in particular, have expressed concern about the lack of dedicated prayer spaces (iGrad survey, 2011) at the U of A. A dedicated prayer space on campus would not be restricted to any one faith, nor would it be restricted to student use alone. By providing spaces for prayer and spiritual events the university will acknowledge the multiple needs of its' members, providing resources that support its campaigns for an ever-increasing diversi-

fied population, as well as recognizing the value of spiritual health in mental health and wellbeing.

20. Profile wellness programs across campus

Physical wellness programs are offered through the Faculty of Physical Education and Recreation and a multitude of student groups. As part of a coherent health and wellness initiative, it would be beneficial to highlight the importance of physical health, sleep, eating patterns, the impact of stress, mind breaks, and drug and alcohol use. The Heroes for Health program, sponsored under the auspices of the Health and Wellness Team (HaWT) also organizes the Unwind Your Mind initiative that could be expanded beyond examination periods. Raising the profile of the breadth of healthful opportunities provides multiple points of access to health promotion activities on campus. Collaboration between faculties and the HaWT would be assist in advancing mental health initiatives.

ENGAGE OUR COMMUNITY

21. Provide regularly updated comprehensive information about student services to all faculty and staff

The structures and roles of student service units across campus as well as in the Office of the Dean of Students have undergone significant re-alignment and name changes in the past two years. Lack of updated information hinders faculty and staff referrals of students to appropriate services. The dissemination of updated information should be provided to faculties, departments, support staff and student organizations for broader distribution. Regular updates of stu-

dent services and presenting institutional initiatives being addressed will keep student mental health and wellness issues in the limelight.

22. Develop orientation and refresher sessions for faculty, APOs, and staff that focus on the student landscape

It is important that faculty, APOs, and staff understand the changing expectations of the student body. Faculty and/or APO orientations should be designed to focus extensively on the student experience and the university's commitment to creating a supportive environment. At minimum the content should include information on the Helping Individuals at Risk program, the role of the Office of the Dean of Students, student support services and resources, procedures for referrals, and University policy for accommodations. A rotational schedule of orientations and education sessions should be available throughout the year through a variety of avenues including online information, face to face seminars, social media, etc., to facilitate ready access of updated information.

23. Increase and improve online resources for faculty and staff

As the internet and social media has become a common first point of access to information, we need to ensure that we are providing high-quality online resources related to health education and health promotion that educates faculty, staff, and even parents. Online education programs designed for faculty, APOs and staff have been introduced on campuses across North America. They include basic information regarding mental health and wellness, common disorders in emerging adulthood, suicide, appropriate interventions, listings of university supports and services and the impact of mental health problems upon academic success.

24. Adopt a modified Mental Health First Aid program

The U of A takes pride in the success of the Mental Health First Aid (MHFA) program on campus. While many faculty and staff have completed the training, the necessary time commitment precludes a large number of employees from participating in the program. It is strongly recommended that a revised MHFA program be made available to campus community members. A commitment by senior administration to encourage faculty and staff to participate in mental health education through on-line and workshop training opportunities would demonstrate the University of Alberta's pledge to student wellness. A recommendation to modify the program was made by the Senate Task Force on Wellness in 2003.

Several universities have found that the MHFA training program is not suitable for an institutional setting and have turned to creating their own modified versions. The University of Guelph has developed shorter modular versions that range from a one hour sessions for faculty that focus on warning signs and how to refer appropriately to campus services, to a full day training for residence assistants, peer helpers and front-line staff in the registrar's office. The Council of Ontario Universities, in conjunction with the University of Toronto, York University and Guelph, is developing an online training program for faculty that, with permission, could be used by any university.

25. All faculty and staff should participate in revised Mental Health First Aid (MHFA) training

In alignment with the University's commitment to attending to student mental health and wellness, personnel at every level of the community, from senior administrators and faculty members, to

APOs, to ongoing sessional instructors and contract staff, to support staff should be expected to participate in revised awareness training. Educating incoming deans, associate deans, chairs and APOs could be delivered through online modules or in face-to-face orientation sessions. This is the most direct way to highlight changing characteristics and demographics of students and ensuring that mental health initiatives are visible, valued, and sustained.

26. Provide resource information and handbooks for parents, students, and staff

Comprehensive parent, student, and staff handbooks have been developed at major North American institutions. In the spirit of sharing best practice documents and programs, permission will be granted to sister institutions to adapt these materials for their use. While each handbook would require modification to reflect the University of Alberta reality, it would be useful to investigate, and amalgamate these resources to provide comprehensive need-to-know information. In particular, the availability of a faculty-specific resource handbook for parents is becoming common practice as parental involvement and parental support is recognized as beneficial to first year students and students transferring between institutions.

27. Develop resources for sessional instructors

Sessional instructors and contract staff are actively engaged with incoming undergraduate students; however, they are overlooked as important gatekeepers of student mental health. Resources should be made available to sessional instructors and contract staff to update them on signs of behavioral or academic distress, intervention procedures, university resources, and mechanisms for referring students to available supports. Those sessionals and contract staff with

regular involvement would benefit from participating in education sessions and mental health awareness training with faculty, APOs, and staff.

ENHANCE STUDENT-CENTRED COMMUNICATIONS STRATEGIES

28. Fundamentally reconsider the way student services are marketed and communicated at the U of A from a student's point of view

If there is one thing that we should change about the current situation, it is the way we communicate with our students. There needs to be a concerted and coordinated effort at improving the way we communicate with current students, both undergraduate and graduate. Students need to be at the centre of our communication processes, and we need to consider all student services as contributing to the mental health and wellbeing of our students, regardless of who they are and where they find themselves on the spectrum of mental health and wellness. Perhaps the most obvious example of this need for improvement can be found in the University's online space, particularly in the 'current students' or 'student life' areas.

29. Renovate the online space for current students at the U of A

Students (and others) expect our online platform to be a dynamic and reliable source of information, venue of discourse, and functional tool for being a student in the 21st century. However, the online space ostensibly aimed at current students is currently underwhelming despite having the potential for being our most important tool of awareness, dialogue, and outreach. Even when focussing directly on health

and wellness services, information, activities, and programs are often promoted within the organizational frame of reference, and not from the point of view of a student.

Students should not need to understand the organizational structure in order to get reliable information and access programs and services. Students need to be at the centre of our communication processes, and the online renovation should be a first priority at the outset. Redundancies and duplications can be reduced; information about programs and services that are relevant and useful to students should be clarified and organized, made more engaging, student-focused, and more easily findable.

30. Implement a university-wide approach to increasing awareness of student services

Both graduate and undergraduate students commonly report that they are unaware of many aspects of the university's support services, particularly in the first two years of their programs and other transitional stages during a post-secondary education. However, there are a lot of valuable and effective student programs and services already in place and operating at the U of A. The Office of the Dean of Students should be charged with coordinating a comprehensive awareness strategy with up-to-date, and need-to-know information for all students. Faculties and departments should be consulted to assist in developing information and strategies to best communicate with specific student groups.

All tools, channels, and platforms should be considered, including: the creative and active use of social media; more comprehensive and current information on University websites, including the homepages, with a particular focus on improving the findability of information

and accessibility of services; engaging various methods of delivering information electronically; and, developing university/student association partnerships. Other ideas raised included power point slides prior to the beginning of classes in large lecture halls or including student services information on course syllabi.

31. Conduct a University-wide communications campaign emphasizing mental health

This campaign needs to be coordinated and collaborative across campuses, and founded firmly on public and mental health and wellness principles. It should aim to de-stigmatize mental illness while also building awareness and educating our campus communities about mental health and wellness from a 360 degree perspective. It would also support, directly and indirectly, the work of the various parts of our institution that are dealing with mental health and wellness issues on a day-to-day basis.

CREATE INSTITUTION-WIDE INFRASTRUCTURE

32. Create a University Health and Wellness Committee (UHWC)

Comprised of senior administrators, faculty, APO, staff and student representatives this committee will be responsible for the development of a comprehensive framework that is consistent across all U of A campuses, harnessing resources, and shepherding mental health and wellness programs forward. It would also be tasked with ensuring that modifications to the framework accommodate changing stu-

dents needs. This high level committee will sustain the University's commitment to mental health and wellness issues. Once priorities are identified, sub-committees or task forces would be created to identify the scope of an identified issue, develop a strategic plan, pinpoint resource requirements, and submit recommendations to the UHWC. The committee will report yearly to the provost, Board of Governors and University Senate on initiatives and indicators of success.

33. Create a Student Health Advisory Committee

Reporting to the Health and Wellness Committee, the Student Health Advisory Committee membership would represent all levels of the institutional structure to ensure adequate representation and diverse perspectives including the Dean of Students office, Registrar's office, Physical Education and Recreation representatives, senior academic administrators, chaplains, UWell, psychologists housed within faculties, student advisors, and student representatives. It would be tasked to identify arising issues of concern, monitoring the need for adaptations to student services, ensuring that supports are appropriate for diverse populations, designing mental health programming, and making recommendations to the UHWC for new initiatives. The committee would also work in conjunction with communications officers to design updated social media outreach for students. Members of a newly constituted Healthy Campus Working Group could potentially provide the foundation for an expanded Student Health Advisory Committee.

34. Develop a Crisis Counselling Team

Under the auspices of the Crisis Management Team Action Plan, a Crisis Counselling Plan has been developed by Risk Management to

coordinate the delivery of student mental health services in the case of an emergency. A Crisis Counselling Team (CCT) will be created. Answering to the Operations Section Chief, the CCT would be tasked with determining the appropriate counselling and support services necessary for affected students in an emergency situation as well as tasked with developing post-crisis protocols for providing ongoing assistance to affected students.

35. Create an outreach protocol to students directly impacted by a crisis

Once an imminent crisis has past, ongoing support services should be available to students who have been directly impacted. Processes to facilitate access to services should be designed to include all mental health service providers on campus, regardless of their position or assignment. In addition, a standard procedure and communication plan for making students aware of the availability of service without needing to go through the routine screening process needs to be developed.

36. The Helping Individuals at Risk (HIAR) policy and program should be augmented to include a more comprehensive early intervention program

The HIAR policy is designed as a 'connect the dots' program to identify behavioural concerns of individuals at risk of harming themselves and others and to refer them to appropriate services on and off campus. Increasingly, institutions are utilizing alert programs that include both behavioural and academic at-risk behaviours. The identification of academic concerns, in addition to the current focus on behavioural issues, extends our program and policy and will allow us to identify students at risk of academic failure who are struggling

so that we can connect them with the appropriate university or community resources to mitigate their issues. The addition of a software program will make the process of identifying individuals of concern more streamlined, transparent, comprehensive and manageable. In addition, a case management team will be created that evaluates complex cases to ensure that individualized and appropriate interventions are provided to the student. (See revised structural graphic in Appendix A)

37. HIAR training must be provided in a systematic way to the university community

It is important that a schedule be developed to provide workshops and training for the newly revised HIAR platform. Education workshops for all faculty, staff and instructors must be regularly available and training sessions should be delivered through department councils, faculty councils, graduate teaching assistant training sessions, and community workshops. The role and processes of the extended HIAR software program should be an issue worthy of focus at chairs school, deans school, and faculty and staff orientations.

38. Consider Implementing a voluntary/involuntary leave policy, developed by members of the HIAR and Article 91 Protocol Teams

An involuntary leave policy is a comprehensive safety net that would be used only in those cases in which a student presents a potential harm to him/herself or others and/or is so incapacitated as to be unable to function within a community. "Determining whether involuntary leave is in the best interests of the student [is based upon] balancing his/her desire to stay in school with what services and support your college is able to provide" (The Jed Foundation, 2006, p. 3). The

benefit of an involuntary leave program is that it allows the university to make decisions that address the safety and security of all students when a student who is in need of extensive mental health services refuses them or the illness prevents her/him from continuing in a program of studies.

The voluntary/involuntary leave policy should be developed by a strategically selected subgroup drawn largely from the HIAR and Article 91 Protocol teams. This team would be responsible for developing transparent criteria for leave that can be triggered by the student or the institution; determining protocols for return to the institution; and, developing the specific criteria for a re-admission committee. The policy and procedure would include a standardized non-punitive re-admission and re-entry protocol that allows for the return to the university when the student's health is stabilized. Evaluation on a case-by-case basis would be considered by a committee comprised of the Dean of Students or representative, leader of the Mental Health Centre, and a faculty member.

39. Encourage the Graduate Student Association (GSA) to complete a cost/benefit analysis of the supplementary counselling contract.

The GSA has a health benefits contract with Homewood Human Solutions to provide supplementary wellness, financial, legal, and medical services. Graduate students interviewed in focus groups and individually consistently reported that they were generally unaware of the availability of these services. It is strongly recommended that the Graduate Student Assistance Program be made more visible to students as well as a cost/benefit analysis completed to ensure that graduate students are receiving value for their participation in this program. <http://www.gsa.ualberta.ca/05Services/GSAP.aspx>

40. Evaluate programming effectiveness and impact regularly

To provide evidence of the impact of service delivery modifications and to guide program and future initiatives, student surveys should be conducted regularly. It is recommended that NCHA, Healthy Minds, and NSSE scores be utilized to guide institutional decisions about student mental health services and innovative approaches to providing on-going student supports. Faculty, staff, APO and student focus groups would be beneficial in augmenting survey results.

REVIEW AND ENHANCE ORIENTATION

41. Orientations should be re-designed to adequately orient students to our complex institution.

In conjunction with the Dean of Student's Office, the Students' Union has been working to incorporate changes into first-year student orientations. Residence Services has re-designed their orientation for first year students by developing a one-week 'Basecamp', a first-year curriculum program. While this is an important addition to the cadre of U of A orientations, all relevant information and guidance cannot be provided to students acclimatizing to post-secondary demands in a short time period. In addition, 'Basecamp' is only available to students moving into first-year residences.

The Senate Task Force on Student Engagement (2005) recommended that orientations for first year students be extended "to include small group sessions throughout the first term" (p. 45). That recommendation was based upon feedback from students that re-engaging with others in the same orientation group would foster social support networks and build relationships that would assist with the transition

into the academy. In 2012, students reported having difficulty differentiating relevant and critical orientation information that would be helpful on a personal level, from general information. They also reported that it was common to feel higher levels of being overwhelmed and anxious following orientation rather than confident and informed as they began to embark on their university studies. This is counter to the purpose of orientation as a vehicle to ease the transition to the U of A.

42. Design orientations for students transitioning from other institutions

Increasingly, the U of A accepts students who are transferring from smaller post-secondary institutions; however, they are not provided the level of support that first year students receive, or do not avail themselves of the orientation services offered to them. While they may have adapted to their previously attended institution, the transition to the U of A can be difficult because of the differences in size, culture, and academic expectations. To facilitate student engagement and a successful transition to the U of A, further attention should be directed to orientations designed to address transitioning students' needs would be beneficial.

43. Design culturally meaningful orientations

During focus group conversations, international students provided insights into how orientations should be strengthened to address the needs of specific cultural groups. They indicated a willingness to help design and participate in culturally meaningful orientations that would provide insights into Canadian culture and academic standards by 'adding the personal touch'. While it is unrealistic to expect that every cultural group requires its own orientation, this proposal

should be considered for groups that have significant numbers on campus. Students returning to the U of A should be consulted to ensure that the delivery of orientation information is best designed to be meaningful and beneficial to specific cultural groups. Graduate students indicated an interest in facilitating orientations and being involved, even to the extent of attending to provide minimal translation if required.

44. Coordinate schedules and examine content of student orientations delivered across campus

Faculty, department and university orientations, many of which have required attendance, are frequently scheduled simultaneously, placing students in a difficult situation. Further, orientations provided by different sources tend to reiterate similar information. Rarely do they include insights into the personal demands of academic studies, managing stress and time management, or adapting to life in Canada which is information students indicated would prepare them for the diverse, and often competing, demands of being successful in their academic pursuits. These results are consistent with those reported by the U of A Senate Task Force on Student Engagement (2005). A priority should be placed upon scrutinizing the content, scheduling, and delivery of orientations for all students.

45. Make orientation information accessible throughout the year

Both undergraduate and graduate students expressed the need to find avenues for social support, to learn how to become involved in a meaningful way, and to access resources should they be needed. They looked to the orientation to provide this information. A commonly reported observation was the inability to differentiate between important versus unimportant information until the information was

needed. Students suggested that orientation content be delivered through multiple methods that would be accessible to them throughout the year, including online.

SERVE THE NEEDS OF INTERNATIONAL STUDENTS

46. Integrate international services within the larger university community

International students are expected to navigate between two somewhat-connected, somewhat-distinct, somewhat-similar streams of programs and services. To navigate bureaucracy and administration they are required to go to a separate set of offices from domestic students. While international students require some specialized services, many do not. Students interviewed indicated that there was confusion about whether they were permitted to access students services outside of those specifically designated for international students. This is not just about administrative and bureaucratic efficiency and effectiveness; it is important to re-evaluate the best way of organizing the delivery of U of A programs and services to students with the goal of ensuring international students feel they can be both themselves and be a full part of the U of A.

47. Expand institutional involvement with international students

The international student body at the U of A is comprised of a wide range of national, cultural, and religious backgrounds; a one-size-fits-all approach to fostering and enhancing good mental health and student engagement is inadequate to meet diverse needs. It is

strongly recommended that the University broaden its engagement with international students beyond the International Centre and University of Alberta International (UAI). While the International Centre is a valued resource, students reported that engagement at multiple university levels would enhance their sense of belonging to the institution.

48. Re-design acculturation workshops

Designed by a committee comprised of faculty, staff, and students, a series of workshops should be offered to acculturate international students to Canadian cultural expectations, as well as prepare them for the personal challenges of adapting to a new culture that inevitably pop up. Graduate student focus group participants strongly endorsed this approach. Graduate students indicated they felt overwhelmed by receiving critical information in a short time frame and would have appreciated receiving information incrementally over the academic term to reinforce the acculturation information delivered in orientations. By virtue of their interactions with undergraduate and graduate students in a multitude of settings, faculty members, support staff, and senior students have insight into acculturation issues that international students face. The addition of diverse perspectives into orientation seminars was identified as important to include in the future.

49. Encourage help seeking in the international student body

Research indicates that help-seeking rates are lower in international students than in domestic student populations. In interviews and focus groups, international students indicated that many are unaware that they can access health and wellness services on campus that are

available to other students. Student advisors should be well versed in directing students to the appropriate mental health services on campus and peer support groups. It is also important to reinforce that all students have access to all student services on campus and that international students are not excluded from using these services because of their status.

50. Expand social interaction and support structures for international students

Social supports are critical to adjustment to Canadian life. It is recommended that peer support structures be facilitated on campus through enhanced mentorship programs and peer-to-peer outreach programs that are facilitated by and engage, the whole university. In addition, facilitating informal programs that encourage alumni/faculty/student engagement through 'Adopt a Student' programs are recommended. While large, well-developed cultural associations exist, they tend to have minimal involvement in mental health related initiatives. Students indicated their willingness to be involved in the development of online resources that include information about culture shock and adjustment to Canadian society. This would allow students to access information despite a reluctance to seek face-to-face assistance.

51. Create opportunities for community participation during extended holiday periods

Programs to meet the needs of international students who remain on campus during extended holiday periods should be developed. The lack of availability of food services, building access and community involvement are issues of concern. International students reported feeling overlooked, abandoned, and experienced a heightened sense

of isolation, alienation and loneliness when the University was closed.

52. Provide routinely scheduled acculturation opportunities with alumni, faculty, and staff

Regularly scheduled informal gatherings that involve domestic faculty and staff are strongly recommended. The iGraduate International Student Barometer (2011) survey results indicated that a sense of isolation and lack of community involvement with Canadians are issues of concern for many. While international students reported that they received support for administrative issues related to enrolment, visa acquisition, and procedural issues, they would benefit from enhanced support for acculturation challenges. Alumni, faculty, and staff can provide significant support and mentorship to international students through the development of programs designed to increase the opportunities for social interactions. The International Centre is well suited to taking the lead on this initiative.

ENHANCE OUTREACH INITIATIVES

53. Engage alumni in supporting mental health initiatives on campus

The U of A Alumni Association is an active and visible organization that represents the face of the University in the public arena. As such, alumni campaigns that focus specifically on the student mental health and wellness would be seen as highly credible and could raise the profile of the University's initiative to be seen as a student-friendly post-secondary institution of choice. Alumni could become advocates and ambassadors in the community-at-large to assist in endorsing mental health initiatives on the U of A campuses. Well es-

tablished student outreach programs such as the hosting program by alumni for students should be expanded to include the provision of mentorship programs for students who require social support to be successful in their academic pursuits. Simple outreach programs, such as the Alumni Association sending letters of welcome to students upon admission to the university would help incoming students to feel part of, and connect with, the institution-at-large prior to stepping foot on our campuses.

54. Explore a Memorandum of Understanding between Alberta Health Services and the University

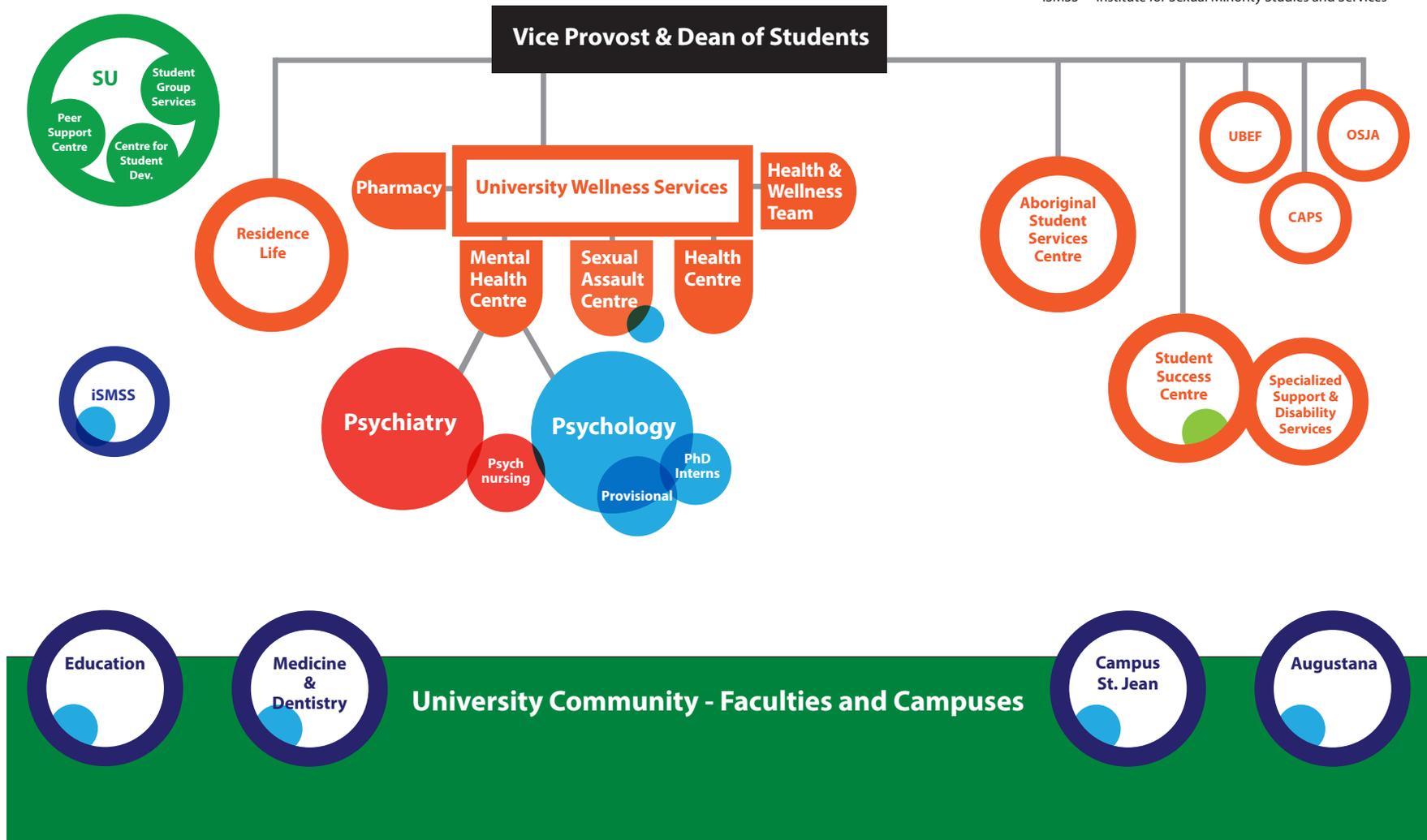
Currently, students return to campus following hospitalization for mental illness without notification to the institution. A formalized relationship with Alberta Health Services would ensure that students receive the care they require following hospitalization for suicide attempts or severe psychological problems. A protocol for obtaining student consent to share information would need to be developed. Networks for consultation and communication of relevant information would allow the University to determine whether the students' needs can be met within the institution or whether the student be encouraged to seek resources in the community. Of particular concern are international students and students in residences who may not have the necessary family or community supports available to them when they are released from hospital.

APPENDIX A

Mental Health Services - Old Structure University of Alberta, prior to 2013

Legend

- Social Worker
- Psychologist/Counsellor services
- SU Students Union
- GSA Graduate Student Association
- OSJA Office of Student Judicial Affairs
- CAPS Careers and Placement Services
- UBEF University Bursaries and Emergency Funding
- iSMSS Institute for Sexual Minority Studies and Services

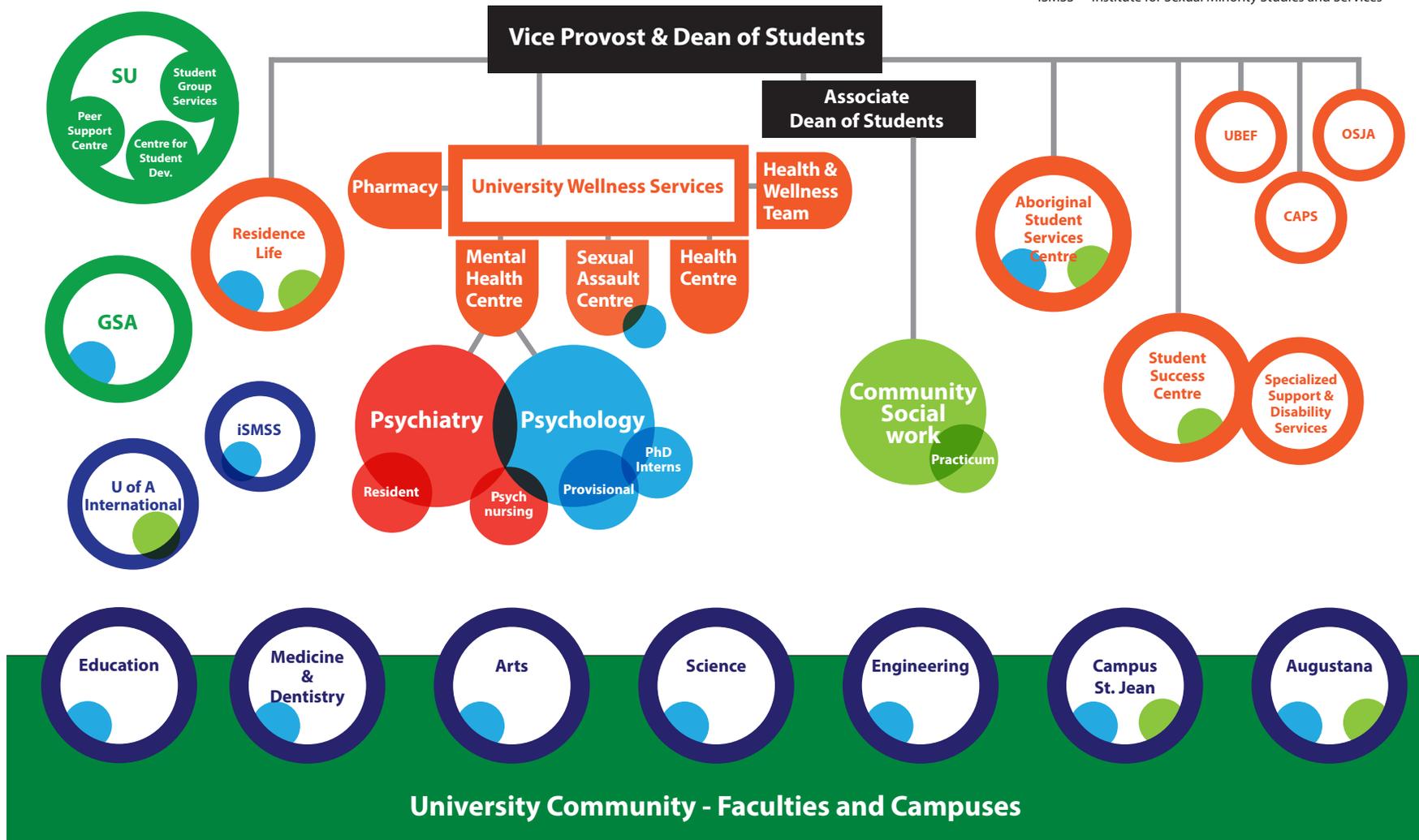


APPENDIX B

Mental Health Services - New Structure University of Alberta, Summer 2013

Legend

- Social Work team involved
- Psychologist/Counsellor services
- SU Students' Union
- GSA Graduate Students Association
- OSJA Office of Student Judicial Affairs
- CAPS Careers and Placement Services
- UBEF University Bursaries and Emergency Funding
- iSMSS Institute for Sexual Minority Studies and Services



APPENDIX C

Extend and Augment HIAR initiative

The University of Alberta developed the Helping Individuals at Risk policy and procedure housed within the Office of Safe Disclosure and Human Rights in 2010 that helps identify students and staff who demonstrate disturbing behaviors. “The purpose of this Policy is to: Provide assistance to individuals at risk of harming themselves or others, before a situation escalates; Facilitate early identification of At Risk Behavior; and Provide a confidential, centralized location for reports of At Risk Behavior to be received and consolidated.” (Retrieved from www.osdhr.ualberta.ca/HIAR.aspx.) It is designed as a ‘connect the dots’ program for behavioural issues and has been positively received across campus. In addition to the HIAR program, the faculties of Science and ALES currently have structures in place to monitor first year students’ academic progress and offer assistance to them if they are at risk of academic failure.

Early alert programs designed to identify behaviourally and academically at-risk students have emerged on campuses over the last 10 years. A confidential and secure software program is used to facilitate comprehensive early intervention outreach programs that flag struggling students with the intent to provide the earliest possible referrals to support services (Education Advisory Board, 2012). The programs are not intended to be punitive but rather to identify students who may benefit from early intervention, whether psychological, medical or academic. Collecting information from disparate sources across campus into a centralized, secure and confidential

database prevents students from falling through the cracks. Early identification allows the University to engage the student earlier rather than later so that they can receive referrals to academic supports or mental health assistance.

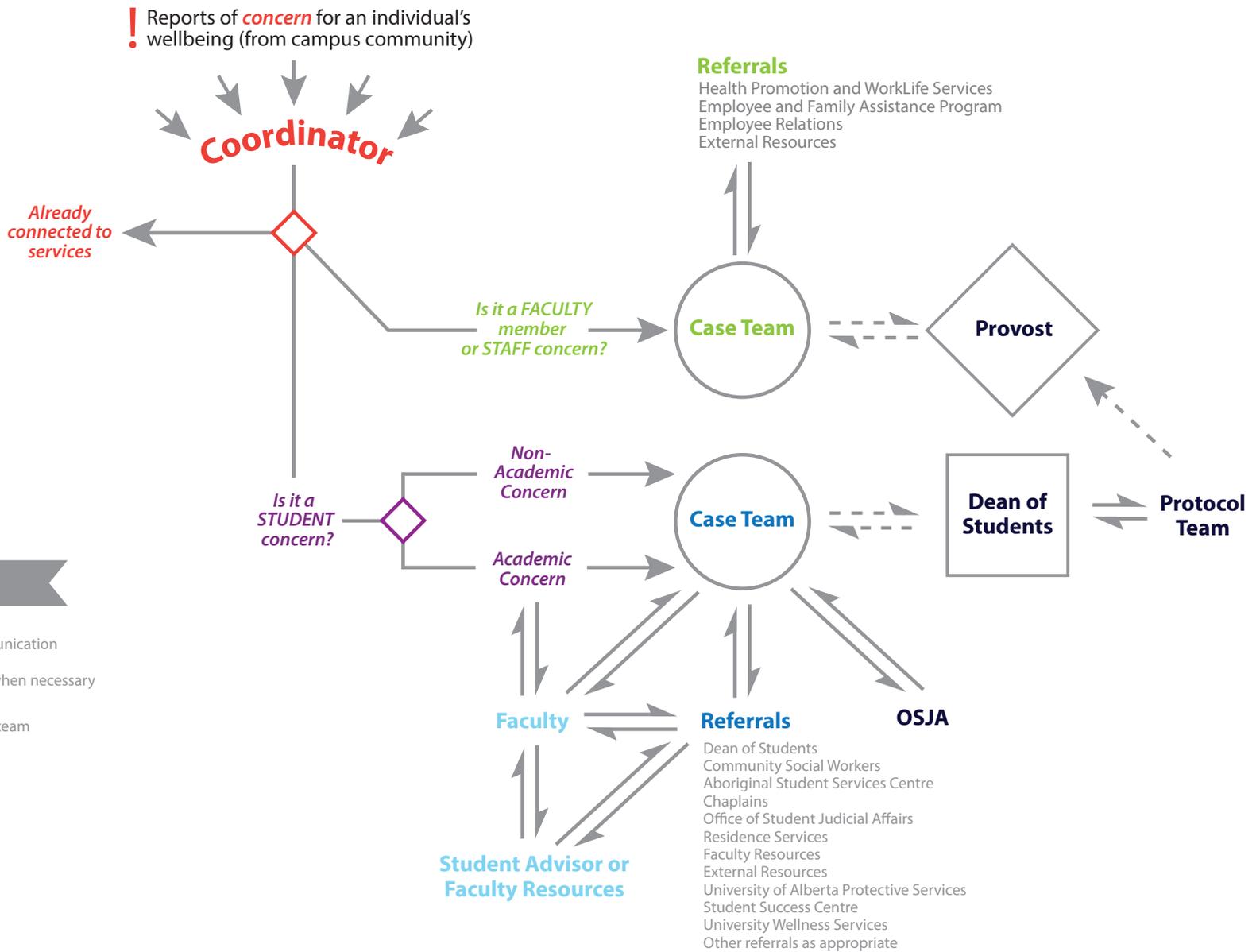
The identification of academic concerns, in addition to the current focus on behavioural concerns extends our current HIAR program and policy and will allow the identification of students who are struggling so that they can be connected with the appropriate university or community resources to mitigate their issues. The addition of a software program will make the process more streamlined and manageable. A case management team will be created that evaluates complex cases to ensure that individualized and appropriate interventions are provided to the student. In order for the extended initiative to be successful, there must be a comprehensive and extensive education strategy designed to teach the benefits to students and the institution.

The process following identification of a struggling student allows for a case-by-case response that is appropriate to the individual situation using a decision making framework that provides a defensible structure. In order to educate the campus community that the true intent of the program is to provide information and support to struggling students, consistent outreach and training for everyone in the academy is required. An easily accessible system to identify students needing support facilitates coordination and communication across the campus thus breaking down the silos of information (The Jed Foundation, 2006)

The successful implementation of an extended HIAR program will require:

- 1 A revision of the mission and mandate of the Helping Individuals at Risk program
- 2 Modification of HIAR policy to include the academic component
- 3 IT involvement to integrate Early Alert software to Peoplesoft (underway)
- 4 Working with the U of A general counsel, information and privacy officer, and VP Finance and Administration to ensure appropriate procedures and record keeping issues are adequately addressed (Business Plan and Personal Information Assessment) (underway)
- 5 Modifying university policy to ensure that the program has adequate ability to enforce decisions consistently across our campuses (ie: medical leave policy; faculty policies; medical information upon re-admission or re-entry to university)
- 6 Creating two multidisciplinary case management teams: One case management team deals with student issues; A separate team deals with faculty, APO and staff issues
- 7 The development of a decision tree to guide intervention strategies: one decision tree for student issues; one decision tree for faculty and staff issues
- 8 Preparing orientations, training and education programs for faculty, APOs and staff across the University

Proposed Helping Individuals At Risk (HIAR)



Legend

- Interactive communication
- Communication when necessary
- Staff and faculty stream
- Student stream
- Severity level 1
- Severity level 2
- Severity level 3

CONSULTATIONS

Over the term of my appointment, I regularly consulted with, and/or interviewed, service providers and stakeholders, both individually and collectively. This included graduate student and undergraduate student focus groups; the Graduate Student Association Executive and Graduate Association Council; individual graduate students; Student's Union Executive and Student's Union Council; University Wellness administrators; Mental Health Centre psychologists, psychiatrists and psychiatric nurse; Director of Student and Residence Services, Augustana; Campus St. Jean, faculty and mental health counsellors; International Centre administration and advisors; social workers; Peer Support Centre directors; Student Success Centre personnel, Sexual Assault Centre personnel, Aboriginal Student Services Centre personnel; social workers; Health and Wellness Team members; Helping Individuals at Risk coordinator; Office of Safe Disclosure and Human Rights; International Centre personnel; international graduate students; Residence Services including the Director, Associate Director, Residence Coordinators and residence administrators; Institute for Sexual Minority Studies and Services personnel; senior university administrators; support staff in the Dean of Students office; support staff from across the University; Ombudservice; HPaWs; the Office of Sustainability personnel; Associate Deans; Deans; Vice-Provosts; Chairs; and in-faculty mental health service providers.

The external stakeholders that were consulted included personnel from Alberta Health Services; hospital administrators; Canadian Mental Health Association; Canadian Association of Colleges and University Student Services directors; American College Health Association members; and senior administrators, service providers, and students from national and international post-secondary institutions.

REFERENCES

- American College Health Association. (2011, Spring). *American College Health Association, National College Health Assessment: Reference group executive summary*. Retrieved from: www.acha.org/docs/ACHA-NCHA-II_ReferenceGroup_ExecutiveSummary_Spring2011.pdf
- American College Health Association. (2012). *Healthy Campus 2020*. Retrieved from: www.acha.org/healthycampus/
- Association of Universities and Colleges in Canada (2012) *Mental Health State of Mind* <http://www.aucc.ca/wp-content/uploads/2012/06/mental-health-state-of-mind-university-manager-article-summer-2012.pdf>
- Canadian Association of College and University Student Services (CACUSS), and Canadian Mental Health Association (CMHA), (2012). *Post-Secondary Student Mental Health: A systematic approach*. Draft Proposal
- Canadian University Survey Consortium (2011). *Undergraduate University Student Survey 2011*. Retrieved from: www.cusc-ccreu.ca/publications/CUSC_2011_UG_MasterReport.pdf
- Carleton University. (2009). *Student mental health framework: A guide for supporting students in distress. (Final Report)*. Retrieved from: <http://www1.carleton.ca/studentssupport/ccms/wp-content/ccms-files/Carleton-University-Student-Mental-Health-Framework.pdf>
- Eisenberg, D., Downs, M., Golberstein, E., & Zivin, K. (2009). Stigma and help seeking for mental health among college students. *Medical Care Research and Review*, 66, 522-541.
- Eisenberg, D., Golberstein, E., & Hunt, J. B. (2009). *Mental health and academic success in college. The B.E. Journal of Economics Analysis & Policy*, 9(1). Article 40.
- Eisenberg, D., Gollust, S. E., Golberstein, E., & Hefner J. L. (2007). Prevalence and correlates of depression, anxiety, and suicidality among university students. *American Journal of Orthopsychiatry*, 77, 534-542.
- Heiligenstein, E., & Guenther, G. (1996). Depression and academic impairment in college students. *Journal of American College Health*, 45, 59-66.
- Higher Education Mental Health Alliance. (2012). *Balancing safety and support on campus: A guide for campus teams*. Retrieved from: http://www.jedfoundation.org/campus_teams_guide.pdf
- Hunt, J., Eisenberg, D., & Kilbourne, A. M. (2010). Consequences of receipt of a psychiatric diagnosis for completion of college. *Psychiatric Services*, 61, 399-404.
- Jed Foundation. (2006). *Framework for developing institutional protocols in the acutely distressed or suicidal college student*. NY. Author
- Kitzrow, M. A. (2009). The mental health needs of today's college students: Challenges and recommendations. *NASPA Journal*, 46, 646-660.
- Mental Health Commission of Canada. (2011). *Changing directions, changing lives: The mental health strategy for Canada*. Retrieved from: www.strategy.mentalhealthcommission.ca/pdf/strategy-images-en.pdf
- Ontario Undergraduate Student Association, 2012. *Student health: Bringing healthy change to Ontario's universities*. Retrieved from: [2012] www.ousa.ca/dev/wp-content/uploads/2012/05/Student-Health-2012.pdf

- Rodolfa, E. (2008, April). Creating a Campus Community That Cares. *Spectrum*, 9-12.
- Royal College of Psychiatrists (2011). *Mental health of students in higher education*. (Report CR166). Retrieved from: www.rcpsych.ac.uk/publications/collegereports/cr/cr166.aspx
- Silverman, D., Underhile, R., Keeling, R. (2008). Student Health Reconsidered: A Radical Proposal for Thinking Differently About Health Related Programs and Services for Students. *Student Health Spectrum*, June 2008, AETNA Student Health
- Tamburri, R. (2012). Universities to examine their role in students' mental health. *University Affairs*. Retrieved on February 9, 2012 from www.universityaffairs.ca/universities-to-examine-their-role-in-students-mental-health.aspx
- University of Alberta (2012). *2012 Comprehensive Institutional Plan*. Retrieved from: <http://www.resourceplanning.ualberta.ca/~media/Office%20of%20Resource%20Planning/Documents/UofAlbertaComprehensiveInstitutionalPlan2012.pdf>
- University of Alberta (2011). *Dare to Deliver: Academic Plan 2011-2015*. Retrieved from: www.provost.ualberta.ca/en/~media/provost/Documents/Academic%20Plan/AcademicPlan2015.pdf
- University of Alberta (2010). Helping Individuals at Risk Retrieved from: <http://www.osdhr.ualberta.ca/HIAR.aspx>
- University of Alberta (2009). *Dare to Discover: A Vision for a Great University*. Retrieved from: <http://www.president.ualberta.ca/en/DaretoDiscover.aspx>
- University of Alberta (2009). Report of the Provost's Advisory Task Team on Student Engagement. Retrieved from: www.ualberta.ca/~univhall/vp/vpa/AcademicPlan/SenateTaskForce.pdf
- University of Alberta. (2005). *Student Engagement: A Shared Responsibility Springboard Report of the Senate Task Force on Student Engagement*. Retrieved from: <http://www.ualberta.ca/~univhall/vp/vpa/AcademicPlan/SenateTaskForce.pdf>
- University of Alberta. (2003). *Becoming the healthiest university in Canada: Improving the overall wellness of the University of Alberta community*. Retrieved from: www.ualberta.ca/~senate/Wellness_Report_printable.pdf
- World Health Organization (2011). Retrieved December 17, 2012. www.who.int/features/factfiles/mental_health/en/
- Zivin, K., Eisenberg, D., Gollust, S.E., & Golberstein, E. (2009). Persistence of mental health problems and needs in a college student population. *Journal of Affective Disorders*, 117, 180-185