SSMU Mental Health Policy

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I. Executive Summary

The Student's Society of McGill University Mental Health Policy explicates the Society's approach to mental health. It contextualizes this approach via a comprehensive background and summation of the current mental health climate. Finally, it sets out three overarching goals of the Society in regard to mental health. This Policy is meant to be understood in conjunction with the SSMU Mental Health Five Year Plan.

II. The SSMU's Vision for Mental Health on Campus
Towards a Comprehensive, Diverse Mental Health Network

This policy is meant to lay out a long term vision for the improvement of mental health for all undergraduate members of the Student Society of McGill University (SSMU), and accomplishes this by outlining both the SSMU philosophy for mental health and a concrete plan for change. The SSMU also recognizes the importance of working with the PGSS, the MCSS and the MACES to improve mental health for all students. Mental health is arguably the most pressing issue facing students at university. This policy is a living document that will serve as the foundation for a new mental health network and for a new culture of community, wellness, awareness, and acceptance of mental health diversity at McGill. This policy's mandate will last for a minimum of five years, and should be updated and renewed before the mandate expires.

Our founding principles are that all students have a right to live and study in an atmosphere that promotes and facilitates wellness and mental and physical health. The SSMU also believes that all students have a right to a diversity of accessible and equitable mental health services and support options. Furthermore, the SSMU believes that these services should be provided to them with respect for their rights, beliefs, identities, dignity and autonomy. Our vision is to gather together student groups, community members, stakeholders within the University, and individual students to create a cohesive network whose aim is to provide these services and work towards this cultural change. The network will be organized by a Mental Health Committee, comprised of representatives from student mental health groups on campus, which will fall under the portfolio of the SSMU VP University Affairs.

It is important to understand that this document is intended not only to help students facing mental health issues. It also emphasizes overall wellness and the right of students to have a positive experience, not one simply free of negative mental health challenges. We also wish to highlight the innate resiliency of individuals and communities, and to affirm our belief in the importance of building a strong sense of solidarity amongst students. We also wish to highlight the fact that each individual experiences mental health, wellness, and mental health challenges differently, and that all mental health and wellness initiatives must respect this diversity of experiences and choices.

This policy and the network it envisions aim to achieve three interdependent mental health goals: resources, awareness, and advocacy and solidarity. These three goals, which will exist in the context of a commitment to equity and accessibility for all, will serve as the guiding principles for the application and evolution of this policy.

The ultimate aim of this policy is to make concrete improvements to the state of mental health on campus. The three goals clearly lay out a framework for a new approach to mental health, an approach aimed at providing everything from education and awareness about mental health issues to treatment and group support. Education and prevention campaigns will help students to access care as well as provide resources aimed at teaching students to avert potential negative changes to their mental health; this will reduce the stress on existing resources, therefore reducing wait times and improving access. A focus on resources will build capacity for multiple levels and kinds of support. Research and advocacy will empower students to guide the evolution of this network and push for a more cohesive mental health community on campus.

The mental health network, as envisioned by this policy, will be composed of students, the university, and community groups who are sharing information and coordinating their activities so that all mental health needs are covered. A student group, the Mental Health Committee, which will exist within the SSMU, shall administer a website and, eventually, a physical space, in order to provide hubs through which students can access mental health information and services. A fee, collected by the SSMU and administered by the Mental Health Committee, shall be used to fund student-led mental health initiatives and research. The SSMU will itself take on an active role in advocating for change on campus that will lead to improved mental health. A SSMU Mental Health Coordinator position will ensure institutional memory and keep projects moving forward.

Our belief is that, together, we can not only change the way care is delivered on campus, but also take responsibility for mental health and become a more supportive, accepting, responsive, and ultimately, happier and healthier community.

III. Background

1. The Current Mental Health Climate

- Young adults are increasingly experiencing mental stress in order to compete and succeed in a complex and rapidly changing world.
- University students, in particular, face a unique set of challenges as they try to acquire both academic and life skills while adjusting to major life changes surrounding their relationships, education, and finances.
- With over 75% of all mental disorders first appearing between early adolescence and young adulthood (Kessler et al., 2005; Andrews & Wilding, 2004), it is important to be aware of and address the mental health needs during the critical years spent in college or university.
- The accessibility challenges and pervasive stigma surrounding mental illness dissuade many who need help from seeking care and solidarity with peers. Only an estimated 20% of youth with mental health challenges receive help (Mental Health Commission of Canada, 2013).
- Serious impairments in young adult mental health and well-being may lead to loss of productivity at school or work, hospitalization, homelessness, violence, and legal problems.
- Steps to understand and address this issue are imperative to inform health promotion and prevention efforts to target the issues faced by students, and help improve overall mental health and stability for their learning, engagement, and satisfaction.

2. Canadian Universities and Colleges

- Addressing student psychological well-being has gained more attention recently and has become an important priority for many campuses across Canada (Canadian Association of College and University Student Services and the Canadian Mental Health Association, 2013).
- University campuses have seen not only a steady rise of students seeking access to campus mental health resources, but also an increased complexity and severity of symptoms experienced by students (Kitzrow, 2009).
- A recent study conducted by the Canadian Organization of University and College Health published the largest amount of data, collected from 34,039 Canadian university and college students in the Spring of 2013. This National College Health Assessment (NCHA) found that almost 90% of students said that they felt overwhelmed by all they had to do in the past year, 57 percent felt overwhelming anxiety, while more than 50 percent said they felt hopeless, and 63 percent said they felt very lonely. The report also found that 38 percent felt so depressed that it was difficult to function and 9.5 percent of students seriously considered taking their own lives in the past year while 1.3 percent said they had attempted suicide (American College Health Association, 2013).

- Queen's University's Commission on Mental Health (2012) examined their students' mental health needs and developed a four-level pyramid strategy with the following goals: promoting a healthy community, transition and resilience, encouraging help-seeking and helping behavior, and effective response, service, care. In order to foster a mentally healthy community, the Commission made recommendations including, but not limited to: more balanced exam schedules; a role for professors, staff, teacher assistants, and student leaders in acknowledging the normality of stress; more education to raise awareness about mental health, for instance, through inclusion of information about resources in course syllabi; and the development of programs in recognition of the need to foster resilience, or the ability to manage adversity.

3. McGill University

- During the 2012-2013 academic year, there were 3133 cases followed in McGill Mental Health Services, of which 1350 cases were new; this represents a 25% increase from the prior year (McGill Student Services Briefing Book, 2013).
- In the Winter 2012 academic term, 2500 McGill students (1800 undergraduate and 700 graduate students) were invited to complete an anonymous online survey administered to assess and better understand the mental well-being of McGill students (Student Psychological Wellbeing at McGill University: A report of findings from the Counselling and Mental Health Benchmark Study, 2013). Findings were as follows:
  - 19% (n = 463) responded.
  - Between 5% and 9% of McGill respondents reported receiving mental health support services on campus compared to 3% to 5% off campus.
  - 6% of respondents reported taking a prescribed medication for a mental health concern.
  - Approximately 10% of McGill respondents indicated that they seriously considered attempting suicide while at University.
  - Overall, 18% of the participants from McGill reported having seriously considered attempting suicide in their lifetime and 4% had made a suicide attempt.
  - The proportion of McGill respondents having experienced harassing, controlling and/or abusive behaviour from another person while at University ranged from 5% to 16% with rates significantly higher for females (14%) and graduate students (16%).
  - The proportion of respondents having experienced a traumatic event that caused them to feel intense fear, helplessness, or horror while at University spanned 10% to 18%. International students reported the highest incidence at 18%.

4. Filling the Gap at McGill

The results mentioned above paint a picture of rising and increasingly complex mental health needs that cannot be accommodated by currently available services. In addition, there has been little coordination between student-led, university, and community initiatives and services, and many students who could benefit from these services are unaware of their existence or how to access them.

In sum, wait times are long, services are not well advertised, and stigma regarding mental health issues still exists. As a result, many students do not access services until they are in crisis and many feel guilty about using these services. This not only negatively impacts the lives of individual students, but places great strain on the mental health system, as students in crisis require significantly more resources to treat.

Thus, there exists a gap in mental health services here at McGill: students do not have access to, or are not aware of, services that can help them deal with mental health issues early on. This delay in access leads to a greater strain on McGill Mental Health Services. Because it cannot expand its workforce due to budgetary and governmental restrictions, McGill Mental Health Services cannot simply grow in

order to accommodate more students. This has caused the current situation where many students cannot access the care they need.

As such, a strategy of supporting a network of diverse services will go a long way towards filling this gap. Each service will fill one or several particular mental health needs -- including, but not limited to, prevention, promotion of healthy living, peer support and/or group therapy. The strategy must also ensure that students are provided with easy ways to understand and navigate this mental health network.

IV. Three Goals

The following are three fundamental goals that will guide the SSMU's engagement with the mental health discourse, and will serve as a directive framework for action henceforth.

Goal 1: Resources

SSMU will work with a broad array of campus-based (both student-led and university run) and off-campus resources in order to ensure coordination and a steady rate of progress on mental health issues. To achieve the goal of improving and increasing resources available to students, the SSMU will focus on:

- *Improvement of resources*: improving the quantity (increasing the capacity of existing resources, and supporting new initiatives) and quality (student experience, efficiency) of resources
- *Access to resources*: streamlining processes (e.g. simplifying registration for services), increasing access points to services (e.g. having resources for referral), advertising all resource options, and ensuring that each service maintains a commitment to equity and accessibility for minority, disadvantaged and vulnerable populations
- *Cohesion/collaboration between resources*: fostering mutually beneficial partnerships and communication between resources, minimizing overlap between the services provided by resources (except when warranted by demand)
- *Evaluation of resources*: feedback-based assessments of resources, and other initiatives outlined in this report

Goal 2: Awareness

The SSMU recognizes that, for campus mental health to improve, student awareness should be targeted in two ways:

- *Improving education:* reducing stigma and building understanding within the student population, and between that population and mental health professionals, professors, administrators and advocates.
- *Improving student practices:* giving students resources for achieving holistic well-being and focusing on prevention, self-care and peer support.

Goal 3: Advocacy and Solidarity

SSMU promotes a progression from awareness to a sense of ownership of personal and community mental health. Advocacy and solidarity is aimed at supporting this transition while empowering students to make change on campus that will lead to improved mental health. This goal will be pursued in the following ways:

- *Advocacy:* aims to both help individual students and strive for systemic change. This will:
  - o promote student empowerment
  - o mobilize support for sustainable and innovative student initiatives
  - o help to change university or service regulations that can diminish mental health
  - o help individual students experiencing difficulties, abuse, discrimination or oppression while accessing care to resolve these issues and seek appropriate recourse when desired

- *Solidarity:* aims to encourage shared efforts by students to improve mental health by:
  - sharing experiences among the student population, specifically those who have faced or are facing their own mental health issues
  - committing to practices that support mental health as a collective responsibility and benefit
  - fostering a sense of mutual cooperation and community building to achieve positive change and development
  - supporting group and peer support initiatives
- *Research:* to focus on understanding mental health, providing information to mental health advocates, and finding ways to improve mental health or services in the McGill context.

VII. References

Other potentially useful sources
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- Quebec division 514-849-3291
Mental Health Commission of Canada http://www.mentalhealthcommission.ca/

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- UQAM university services http://vie-etudiante.uqam.ca/conseils-soutien/nouvelles-ressources.html
- o Centre d'écoute > Ressources > Santé mentale http://www.ecoute.uqam.ca/sante_ment.htm
- ▪ A bit like Healthy McGill + phone line/in person support
- o 8 Health Challenges http://www.8defis.uqam.ca
- ▪ Health promotion program that targets several aspects including mental balance
- ▪ For students, professors, staff
- ▪ Free
- o Service de soutien psychologique 514 987-3185
- ▪ Basically, access to a psychologist through Student Services
- ▪ 3 appointments
- o Centre de services psychologiques de l'UQAM 514 987-0253
- ▪ Psychotherapy
- ▪ 12-15 appointments offered by students doing their PhD placements
- o Good list of frequent difficulties experienced by students with various resources (questionnaires, docs, pamphlets, external resources with contact info…) http://vie-etudiante.uqam.ca/conseils-soutien/psycho/difficultes.html
- o A "first-aid kit" prepared for Fall 2013 which includes some tips about stress: http://vie-etudiante.uqam.ca/medias/fichiers/conseils-soutien/trousseaide_automne2013.pdf
- Student-run initiatives
- o Comité de soutien aux parents étudiants 514 987-3000, poste 5669
- ▪ To help with study-family balance

Concordia
- Mental Health Services http://www.concordia.ca/students/health.html
- o Access to nurse, GP, psychologist, psychiatrist

- Resources & workshops http://www.concordia.ca/students/health/topics.html
o Including practical guides, e.g. for stress management

UdeM
- Centre de santé et de consultation psychologique http://www.cscp.umontreal.ca/
o For students only
o Psychology assessment: 20-80$ depending on student category http://www.cscp.umontreal.ca/ConsultationPsychologique/frais.htm
o Health promo workshops & activities, support groups, group psychotherapy
o All kinds of resources http://www.cscp.umontreal.ca/ConsultationPsychologique/publications.htm
***see http://www.unleashthenoise.com/2013-summit-findings and scroll down to "The Objective"; you'll see that Awareness roughly corresponds to UTN's "awareness/understanding" and Advocacy/Solidarity corresponds to UTN's "leadership/ownership."

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