



# MENTAL HEALTH POLICY

Adopted by Legislative Council: 2014/02/20

Expires: 2020/01/01

[Adopted Motion \(Link\)](#)

## 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. Two SSMU Mental Health Coordinator positions 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:
  - promote student empowerment
  - mobilize support for sustainable and innovative student initiatives
  - help to change university or service regulations that can diminish mental health
  - 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

National Institute of Mental Health <http://www.nimh.nih.gov/index.shtml>

- Some US stats revised in 2012 for depression among college students  
<http://www.nimh.nih.gov/health/publications/depression-and-college-students/depression-and-college-students.pdf>
- Canadian Mental Health Association <http://www.cmha.ca/>
- Quebec division 514-849-3291
- Mental Health Commission of Canada <http://www.mentalhealthcommission.ca/>

American College Health Association (ACHA) National College Health Assessment. Canadian Reference Group Executive Summary Spring 2013. (2013) Retrieved from [http://www.cacuss.ca/Library/documents/NCHA-II\\_WEB\\_SPRING\\_2013\\_CANADIAN\\_REFERENCE\\_GROUP\\_EXECUTIVE\\_SUMMARY.pdf](http://www.cacuss.ca/Library/documents/NCHA-II_WEB_SPRING_2013_CANADIAN_REFERENCE_GROUP_EXECUTIVE_SUMMARY.pdf)

Andrews, B., & Wilding, J. M. (2004). The relation of depression and anxiety to life-stress and achievement in students. *Br J Psychol*, 95(Pt 4), 509-521. doi: 10.1348/0007126042369802

Canadian Association of College & University Student Services and Canadian Mental Health Association (2013). *Post-Secondary Student Mental Health: Guide to Systemic Approach*. Vancouver, BC: Author.

Hodgson, K. J., Shelton, K. H., van den Bree, M. B., & Los, F. J. (2013). Psychopathology in young people experiencing homelessness: a systematic review. *Am J Public Health*, 103(6), e24-37. doi: 10.2105/ajph.2013.301318

Kessler, R. C., Chiu, W. T., Demler, O., Merikangas, K. R., & Walters, E. E. (2005). Prevalence, severity, and comorbidity of 12-month DSM-IV disorders in the National Comorbidity Survey Replication. *Arch Gen Psychiatry*, 62(6), 617-627. doi: 10.1001/archpsyc.62.6.617

AKeyes, C. L., Eisenberg, D., Perry, G. S., Dube, S. R., Kroenke, K., & Dhingra, S. S. (2012). The relationship of level of positive mental health with current mental disorders in predicting suicidal



**Students' Society of McGill University**

Tel: (514) 398-6800 | Fax: (514) 398-7490 | [ssmu.ca](http://ssmu.ca)  
3600 McTavish St., Suite 1200, Montréal, QC, H3A 0G3  
*Located on Haudenosaunee and Anishinaabe, traditional territories*

behavior and academic impairment in college students. *J Am Coll Health*, 60(2), 126-133. doi: 10.1080/07448481.2011.608393

Lo, C. C., Monge, A. N., Howell, R. J., & Cheng, T. C. (2013). The role of mental illness in alcohol abuse and prescription drug misuse: gender-specific analysis of college students. *J Psychoactive Drugs*, 45(1), 39-47.

McGill Student Services Briefing Book 2012 - 2013. (2013) Working document. Retrieved from [http://www.mcgill.ca/studentservices/sites/mcgill.ca.studentservices/files/student\\_services\\_briefing\\_book\\_2012-2013\\_0.pdf](http://www.mcgill.ca/studentservices/sites/mcgill.ca.studentservices/files/student_services_briefing_book_2012-2013_0.pdf)

Mental Health Commission of Canada. (2013). Issue: Child and Youth. Retrieved from <http://www.mentalhealthcommission.ca/English/issues/child-and-youth?routetoken=712425bd2919361c055080696825385e&terinitial=20>

Purcell, R., Fraser, R., Greenwood-Smith, C., Baksheev, G. N., McCarthy, J., Reid, D., Sullivan, D. H. (2012). Managing risks of violence in a youth mental health service: a service model description. *Early Interv Psychiatry*, 6(4), 469-475. doi: 10.1111/j.1751-7893.2012.00372.

Romano, V., Genova, L., (2013). Student Psychological Wellbeing at McGill University: A report of findings from the Counselling and Mental Health Benchmark Study. Retrieved from [http://www.mcgill.ca/senate/sites/mcgill.ca.senate/files/student\\_psychological\\_well-being\\_at\\_mcgill\\_october\\_2013.pdf](http://www.mcgill.ca/senate/sites/mcgill.ca.senate/files/student_psychological_well-being_at_mcgill_october_2013.pdf)

Wittchen, H. U., Nelson, C. B., & Lachner, G. (1998). Prevalence of mental disorders and psychosocial impairments in adolescents and young adults. *Psychol Med*, 28(1), 109-126.

2013/11/29: Called Florianne, Association facultaire étudiante des sciences humaines (AFESH-UQAM).

## UQAM

- UQAM university services <http://vie-etudiante.uqam.ca/conseils-soutien/nouvelles-ressources.html>
- Centre d'écoute > Ressources > Santé mentale [http://www.ecoute.uqam.ca/sante\\_ment.htm](http://www.ecoute.uqam.ca/sante_ment.htm)
  - A bit like Healthy McGill + phone line/in person support
- Health Challenges <http://www.8defis.uqam.ca>
  - Health promotion program that targets several aspects including mental balance
  - For students, professors, staff
  - Free





### Students' Society of McGill University

Tel: (514) 398-6800 | Fax: (514) 398-7490 | ssmu.ca

3600 McTavish St., Suite 1200, Montréal, QC, H3A 0G3

*Located on Haudenosaunee and Anishinaabe, traditional territories*

- Service de soutien psychologique 514 987-3185
  - Basically, access to a psychologist through Student Services
  - 3 appointments
- Centre de services psychologiques de l'UQAM 514 987-0253
  - Psychotherapy
  - 12-15 appointments offered by students doing their PhD placements
- 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>
- 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](http://vie-etudiante.uqam.ca/medias/fichiers/conseils-soutien/trousseaide_automne2013.pdf)  
Student-run initiatives
- 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>  
Access to nurse, GP, psychologist, psychiatrist
- Resources & workshops <http://www.concordia.ca/students/health/topics.html>  
Including practical guides, e.g. for stress management

### UdeM

- Centre de santé et de consultation psychologique <http://www.cscp.umontreal.ca/>  
For students only
  - Psychology assessment: 20-80\$ depending on student category  
<http://www.cscp.umontreal.ca/ConsultationPsychologique/frais.htm>
  - Health promo workshops & activities, support groups, group psychotherapy
  - 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.”

References: <http://knowledgebase.mcgill.ca/media/pdf/Email-Calendar/Listserv-Policy-2011.pdf>



**Students' Society of McGill University**

Tel: (514) 398-6800 | Fax: (514) 398-7490 | [ssmu.ca](http://ssmu.ca)

3600 McTavish St., Suite 1200, Montréal, QC, H3A 0G3

*Located on Haudenosaunee and Anishinaabe, traditional territories*

References: <http://ssmu.mcgill.ca/wp-content/uploads/2010/04/how-to-run-a-service-2010-2011.pdf>

References: Canadian Mental Health Association. (2012). Get Informed: Awareness Weeks. Retrieved November 20, 2013 from <http://www.cmha.bc.ca/get-informed/events/awareness-weeks>



# MENTAL HEALTH FIVE YEAR PLAN

## I. Five Year Plan

The following is the SSMU plan for Mental Health for the next five years:

### A. Mental Health Fee Levy

Timeline: Ongoing; beginning in Fall 2015

A Mental Health Fee Levy shall be presented in a SSMU referendum ballot if it is identified as a need by the Mental Health Committee to sustain and expand student-led mental health initiatives. The Mental Health Committee shall solicit feedback from student-led mental health groups on this subject via an email feedback form at least once per semester.

### B. SSMU Mental Health Website

Timeline: to be operational by the end of the 2014-2015 academic year

The website will serve as a centralized platform where McGill students can easily find mental health-related information and both on and off-campus resources.

Goals:

- To enable students to easily find mental health-related services on and off campus as well as educational materials online
- To enable students to offer feedback on mental health services in an anonymous and secure fashion
- To enable students to complete a standardized survey of Health Services, Mental Health Services, Counselling Services, the Office for Students with Disabilities (ODS), and Eating Disorder Program
- To enable students greater accessibility to other students' opinions of mental health-related services on campus
- To enable students to stay informed of upcoming events with the implementation of an e-Calendar
- To provide easy-to-use information regarding mental health and prevention
- To adopt a network format, in which clicking on a link to one service will lead to a display of that services and related/supporting services
- To be developed in collaboration with Student Services



The website shall be collaboratively maintained by the Mental Health Committee and McGill Mental Health Services.

## C. Hiring SSMU Mental Health Coordinators

**Timeline: By the end of 2013-2014 academic year**

The Mental Health Coordinators will be the people responsible for the administration of the SSMU Mental Health Committee, the maintenance of institutional memory via the creation of exit reports, and for ensuring that the provisions of this policy are pursued and implemented in a timely manner.

## D. Formation of the SSMU Mental Health Committee

**Timeline:** To commence operations in the 2014-2015 academic year as an official committee of the Legislative Council

### **About the Committee:**

- The Committee will exist under the portfolio of the SSMU VP University Affairs (UA)
- The SSMU Mental Health Coordinators will be responsible for the administration of the Committee and shall chair its meetings
- The Committee shall meet at least once a month, and shall report to the Legislative Council at least once a year
- The Committee will be formed of representatives from all relevant and willing student Mental Health initiatives. Initial and future membership will be determined by the Vice-President (University Affairs) and approved by the Legislative Council
- The Committee's membership will include:
  - Two (2) SSMU Mental Health Coordinators (co-Chairs)
  - The SSMU Vice-President (University Affairs)
  - Two (2) Councillors
  - One (1) representative from each relevant student-run mental health initiative, as determined by the Vice-President (University Affairs) and approved by Council
  - Two (2) members-at-large recruited from the student body
  - One (1) representative from PGSS (non-voting)
  - Observers from university or community mental health services, as invited by the Committee (non-voting)

### **Objectives of the Committee:**

- **Cohesion:** connect and facilitate cooperation between groups
  - Prevent resource splitting
  - Encourage collaboration
  - Increase inter-group awareness of activities and projects
  - Increase referral of students between groups



- Facilitate student feedback on professional and peer-run mental health services
- Support advocacy for students who have had negative experiences with available mental health resources
  
- **Planning & Assessment:**
  - Update and maintain website
  - Event planning
  - Evaluate successes and setbacks on projects and policy goals
    - Prepare summaries of data collected on student mental health
    - Increase, amongst services and within the general student population, awareness of social, cultural, political and economic factors affecting student mental health
  - Allocate funds (from the planned SSMU Mental Health fee levy) and further resources, and determine their use
  - Revise the SSMU Mental Health Policy
  - Prepare a complete exit report by the end of each academic year
  
- Carry out the provisions of this policy, and seek to attain the goals described within it
- Coherently address broader issues affecting student mental health
- Ensure institutional memory

## E. Mental Health Listserv

**Timeline: by the start of the 2014-2015 academic year**

The purpose of the listserv is to communicate to students information about mental health, mental health services, and healthy living. It is to be sent out by the Coordinator as needed, but at least once a month. This listserv is to be managed and written by the Committee and shall be sent out by the Mental Health Coordinators.

## F. Events

**Timeline: Ongoing; the first annual Mental Health Awareness Week should be held in October 2014.**

**Mental Health Awareness Week:** The SSMU aims to establish a university-wide mental health awareness week to build awareness and engage students in activities that will encourage them to take ownership of their individual mental health, while shifting the general student population's perception of mental health from one of awareness to one of understanding. Furthermore, we aim to maintain a high frequency of events throughout the semester. This will be achieved by creating and maintaining a Mental Health e-Calendar that will be sustained but the Committee and the Coordinator and will be accessible to all students via the SSMU Mental Health website.



### **Goals:**

- To establish a university-wide mental health awareness week on campus in the Fall semester in coordination with Residence Life's Mental Health workshop series
- To hold events reinforcing positive mental health before exam seasons
- To enable students to view the title, description, location, length and purpose of various events via the e-Calendar (see Website)
- To enable student clubs and/or student leaders to advertise upcoming events they are organizing on the e-Calendar if judged as relevant or appropriate

## G. Space and Support for Mental Health Groups

### **Timeline: by the end of 2015-2016 academic year**

Groups represented on the Mental Health Committee will be able to access room bookings through the VP University Affairs. Additionally, permanent space in the SSMU building dedicated to mental health on campus will be created and managed by the Mental Health Committee. The space will serve as a central location for students with mental health inquiries.

### **Goals:**

- To improve accessibility to booking rooms in the SSMU building for mental-health related events and groups by having a dedicated space for these purposes
- To acquire space dedicated to mental health in the SSMU building, to be managed by the Mental Health Coordinators and the Mental Health Committee
- To offer a student-run mental health space to offer resources and information to students, and providing referrals to appropriate services on campus
- To help bring students in crisis to Mental Health Services; for this goal, it will be necessary to ensure that the space is staffed with students with mental health first aid training
- To offer a safer space on campus for the discussion of mental health issues
- To serve as a space for group therapy or peer support sessions

## H. Research and Transparency

### **Timeline: Ongoing; first survey results to be published by the end of the 2014-2015 academic year**

To ensure that SSMU effectively addresses the mental health needs of students, SSMU intends to collect information on student mental health. These methods of collection fall under three main categories:

- 1) online feedback forms
- 2) access to pre-existing data, and
- 3) surveys.

The creation of the website outlined in this policy will include a mechanism for students to offer feedback to SSMU on a variety of topics pertaining to student mental health. Once implemented, we



expect this system to be a cost- and time- effective way to monitor McGill student mental health by enabling students to give immediate feedback in an anonymous manner.

The ability to give feedback anonymously will allow the examination of coercion and marginalization within mental health and criticism of services related to mental health. This type of information may be inaccessible or unappealing to other groups who collect data on student mental health.

This feedback mechanism should provide students with the option to fill out a general survey-style form or provide specific feedback in their own text. The data collected from the survey should be made available on the website and updated annually so that students are objectively aware of challenges facing student mental health at McGill.

SSMU will actively request data from groups and services that it collaborates with when addressing student mental health (for example, the McGill Mental Health Service). Access to pre-existing information may provide key insights into the state of student mental health without overburdening the SSMU research budget. Data will be posted to the website if given permission, or kept confidential, as dictated by the services and groups that are willing to share this information with SSMU. It will be necessary to reach agreements with Mental Health Services, Counselling Services, and the OSD regarding the creation of a standardized feedback form by the end of academic year 2013-2014.

Data collected through the website and through other services may be supplemented in the form of surveys or other SSMU-funded research initiatives as needed. For example, surveys may be used to both educate the student population and gather feedback in response to specific events or topics that may heavily affect student mental health and wellbeing. This type of information may inform how SSMU chooses to respond to controversial topics that relate to student mental health.

## I. Collaboration with Student Services

### **Timeline: Ongoing**

To efficiently achieve the goals of this policy, SSMU will attempt to collaborate with the many student services available at McGill. It is proposed that a collaborative effort will allow for a streamlined promotion of services most suited to individual student needs and interests, a prevention of resource splitting, and a developed rapport between SSMU and pre-existing services that facilitate wellness. In addition, SSMU intends to collect information from students about their experiences of accessing McGill Student Services to identify key areas in which SSMU may be ideally suited to provide advocacy or complementary services.

## II. Benchmarks:

Benchmarks are necessary to evaluate the impact of this policy on mental health and include:

- The development, implementation, and maintenance of a centralized website and listserv



**Students' Society of McGill University**

Tel: (514) 398-6800 | Fax: (514) 398-7490 | ssmu.ca

3600 McTavish St., Suite 1200, Montréal, QC, H3A 0G3

*Located on Haudenosaunee and Anishinaabe, traditional territories*

- The hiring of two (2) Mental Health Coordinators
- The formation of the SSMU Mental Health Committee
- The introduction of the SSMU Mental Health fee levy
- The establishment of a university-wide Mental Health Awareness Week
- The submission of a report on the progress of this Policy's implementation to the Legislative Council