

University of British Columbia, Vancouver

Investing in Student Mental Health and Wellbeing

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Introduction

The University of British Columbia, Vancouver (UBC; the University) has worked with Keeling & Associates (K&A) to design and develop a comprehensive, coherent, and sustainable strategy to advance students' mental health and wellbeing within an engaged, supportive, and caring campus community. This brief summary describes the background and context of the project; highlights key findings; outlines a set of strategic recommendations through which to transform the University's structures, programs, and services to better support students' mental health, wellbeing, learning, and success; and outlines an assessment plan through which to evaluate and document the effectiveness of implementation of the overall strategy.

Background

UBC has an extraordinary opportunity to reconsider how best to support students' mental health and wellbeing in the context of a new, substantial, and annually recurring investment of financial resources. Over the past year, the University has engaged in a comprehensive, highly tactile process that engaged a broad array of campus constituents and experts in exploring and embracing high-level principles, mental health and wellbeing goals, and operational objectives, as well as the key aspects and components of models for programs and services related to mental health and wellbeing that UBC might consider. (The methodology and scope of activities for the project are described in the Appendix.)

The challenges that the University faces—most critically, a rapid and continuing rise in the need for responsive, accessible, and effective programs and services related to mental health and wellbeing for an increasingly diverse student population, and existing services that are struggling to meet that need adequately—are characteristic of many of its peers across North America. However, UBC's assets and strengths, combined with new resources, have provided the opportunity to think and plan differently, with an innovative spirit and through a creative lens.

University Context

The experience of UBC is normative within post-secondary education in both Canada and the US in that students are presenting with, seeking assistance for, or demonstrating the effects of significant mental health concerns at an increasing rate and with greater acuity. A large proportion of students—including, but not limited to, those with specific mental

health problems such as anxiety or depression—face the challenges and experience the stresses of satisfying or exceeding high academic demands in a competitive campus culture. Excessive stress and mental and behavioral health problems jeopardize students' learning and undermine their opportunities for success. UBC data describe the scope and seriousness of these concerns:

- According to the University Experience Survey 2015, mental health issues and concerns are very common among UBC students; ninety-three percent say they have experienced anxiety, depression, and/or stress in the past year, and 61 percent say their academics have been negatively affected by these issues. Among respondents, 86 percent said they have experienced sleep difficulties and/or illness in the past 12 months.
- Among student respondents to the 2014 Alma Mater Society (AMS) Student Experience Survey, 58 percent said they had experienced a level of stress or anxiety considered by themselves or others to be unhealthy; many students identified their experiences at UBC as causes of high stress, depression, or even suicidal thoughts.
- In their responses to the 2013 AMS survey, 76 percent of students identified course workload as a factor that results in regular stress or anxiety. Of respondents who indicated that they had experienced health issues that negatively influenced their academic performance, 84 percent indicated course workload was a major stressor.
- According to intake data from Counselling Services, the most frequent presenting problems among students who seek treatment are anxiety (49.8 percent), depression (45.6 percent), academic performance (37.4 percent), and stress (33.4 percent).
- Between 2010-11 and 2013-14, the number of students seen by Counselling Services increased by 17.7 percent, and the percentage of international students who sought care nearly doubled, from 12.4 percent in 2010-11 to 23.7 percent in 2013-14. (In both cases, increases in utilization exceeded levels of growth in enrolment.) The number of clients served by Access and Diversity increased from 770 in 2002-03 to 1,860 in 2013-14, and psychiatry visits in the Student Health Service increased from 3,712 in 2010-11 to 4,998 in 2013-14. These upward trends have continued.

During summer 2015, UBC allocated a portion of first-year funding from the additional investment in mental health and wellbeing to increase the staff complement in Counselling

Services, Access and Diversity, and Case Management; the additional counsellors and advisors were hired in response to the high priority need for improved access to those services. However, from the beginning of the project, the additional investment in mental health and wellbeing has been recognized (and celebrated) as an opportunity not just to do more of the same, but to do things differently; participants in this process have discussed not only a range of service innovations and potential enhancements to current programs and services, but also changes to the culture and environment of UBC that may mitigate the increasing demand for those services and better promote mental health and wellbeing for *all* members of the campus community.

Key Findings

Across all constituencies at UBC—students, staff, faculty, and senior officers—there was strong recognition of the need for change in the University's overall understanding of and approach to issues of students' mental health and wellbeing:

- ▶ UBC—as an institution and community—will benefit from a more comprehensive understanding of mental health and wellbeing; the power that mental health and wellbeing have to influence academic functioning and success; and the scope, roles, and reasonable expectations of mental health and wellbeing programs and services.
- Several dimensions of change in university culture are needed—including (1) balancing the demand for exceptional academic performance and rigour with humane attitudes and empathy; (2) the systematic infusion of an ethic of care in policy, decision making, and mentoring, teaching, and supervisory relationships with students; (3) a stronger commitment to supporting students' learning, wellbeing, and success; (4) accounting for, or assisting members of the campus community in managing, the negative effects of intense levels of academic competition; and (5) helping students engage with both academic goals and personal needs.
- Senior institutional leaders need to communicate a clear, authentic, and unambiguous message of support for mental health and wellbeing among students, faculty, and staff.
- Several factors may adversely influence decisions about students' academic concerns in relation to mental health and wellbeing: (1) interpretation of a student's actions (or inactions) as a lack of responsibility, engagement, or professionalism rather than the

effects of a mental health issue; (2) rigidity in applying academic rules/policies and determining academic concessions; (3) a fundamental distrust of students; and (4) high workload levels and a lack of resources among staff, which can foster rushed or poorly-considered decisions.

- Faculty could be more consistently and deeply engaged in the conversation about mental health and wellbeing, including reviewing current data about students' mental health status and needs; best practices in creating and sustaining a caring, empathic, and healthy learning environment; and responding to student mental health concerns in their roles as teachers/mentors (but *not* as counsellors).
- Pesources in the mental health and wellbeing service units are insufficient to provide both (1) timely and effective clinical services for students and (2) strong community-based and prevention-oriented mental health promotion, education, and outreach. The addition of more staff will not alone be a satisfactory and definitive solution; novel approaches are required to anticipate, manage, and satisfy student demand for mental health and wellbeing resources. It is essential to think differently about service models.
- Communication with students, staff, and faculty about mental health and wellbeing services could be improved, such as by enhancing current web resources to help students decide which service or resource to access, how best to access that service, and what expectations to have about service levels.
- Historically underserved populations face particular challenges—including Aboriginal students, international students, and graduate students—and programs and services need to be tailored and sensitive to their needs.

Recommendations: Enhancements and Innovations in Environment, Culture, Academic Policy, and Service Delivery Model

Conversations held throughout the project revealed characteristics in the environment at UBC, including its institutional and academic cultures, that either obstruct (as barriers) or undermine (impair or worsen) students' mental health and wellbeing. Those included the wide range of differing practices in the application of certain academic policies (along with some conceptual problems in the policies themselves) and a broader set of behaviors and

attitudes toward students that affect their quality of life and their capacity for and effectiveness in learning.

Participants acknowledged the importance and influence of the mental health and wellbeing of faculty and staff in relation to the mental health and wellbeing of students, and, more generally, the close relationship of mental health and wellbeing within any category of members of the campus community—students, staff, or faculty—to the overall quality of experience, learning, and success at UBC. There was strong interest in creating a sustainable campus environment and culture that fully support students' mental health and wellbeing in order to promote their success, and a consensus gradually emerged that the strategy must incorporate a focus on the wellness of the entire community. The recommendations that follow are built on the foundational belief that changes in environment and culture at UBC are necessary to support a successful and sustainable strategy for mental health and wellbeing.

- 1. Foster and sustain improvements in the campus <u>environment</u> that (1) better enable faculty and staff to support students and their mental health and wellbeing, and (2) encourage students to attend to and support their own mental health and wellbeing.
- 2. Work to change campus <u>culture</u> to better support the mental health and wellbeing of all members of the community—students, faculty, and staff.
- 3. Support changes in <u>academic policy</u> that advance student mental health and wellbeing.
- 4. Renew the <u>service delivery model</u> by (a) co-locating mental health and wellbeing services for students in an attractive, welcoming facility; (b) centralizing, strengthening, and re-designing a welcoming first point of contact with services, while maintaining other effective points of entry; (c) implementing a more collaborative and stepped-care approach to services; (d) integrating proven, or promising, online resources to improve access to and complement in-person resources and services; (e) improving communication about services with students, faculty, and staff; and (f) using feedback from students, faculty, and staff and data and ongoing assessment to strengthen the effectiveness of services.

Assessment Plan

In order to assess and evaluate the success of this strategy for advancing student mental health and wellbeing, the University will need to investigate the extent to which the conditions that prompted its development have been properly and effectively addressed. In addition to objective- and activity-specific assessments, a higher level, overall assessment is required to determine the net effectiveness of all elements of the strategy, using the same (or very similar) methods employed prior to and during the development of the strategy. The University should seek evidence of positive change in each of the areas listed in the table below.

Objectives	What to evaluate
Foster and sustain improvements in the campus environment that (1) enable faculty and staff to support students and their mental health and wellbeing, and (2) encourage students to attend to and support their mental health and wellbeing.	 Understanding of roles and responsibilities in supporting a caring community Perceptions of support for mental health and wellbeing among students, faculty, and staff Awareness of information and resources for helping students with mental health and wellbeing concerns Attention to mental health and wellbeing in syllabi, classrooms, and teaching practices Effective management of stress throughout the academic year
Work to change campus <u>culture</u> to better support the mental health and wellbeing of all members of the community—students, faculty, and staff.	 Perceptions about the balance between academic rigour and caring, excellence and empathy, and competition and humanity Understanding of the role, acceptability, and management of failure in one's educational journey and personal development Awareness of and confidence in the University's commitment to mental health and wellbeing Inclusion of mental health and wellbeing in decision-making and discussions about policy Increase in perceptions of campus safety
Support changes in <u>academic</u> <u>policy</u> that advance student mental health and wellbeing.	 Perception of alignment of policies with the University's commitment to mental health and wellbeing Reduction in the number of policies and procedures for obtaining academic concessions Inclusion of mental health and wellbeing resources in syllabi Changes in demand for services in Access and Diversity
Enhancements and innovations to the service delivery model.	 Awareness of, utilization of, and satisfaction with mental health and wellbeing services

Appendix: Methodology and Project Activities

During the course of the project, K&A facilitated the following activities and produced a sequence of documents to help advance discussions about and development of the University's strategy for mental health and wellbeing:

Phase One: Discovery and Vision

- Preliminary Research: In order to obtain background information and gather essential perspectives on UBC mental health and wellbeing programs and services, including possible gaps and areas of opportunity, K&A (1) reviewed pertinent documents and data regarding existing programs and services; and (2) conducted individual and group telephone interviews with selected leadership in Student Development and Services, as well as University leaders and collaborators.
- First Campus Visit: K&A visited the UBC Vancouver campus June 10-12, 2015 for meetings with the President and Vice Chancellor and other designated University officers and leadership; individual and group meetings with leadership and staff in Student Development and Services; the Project Working Group and Steering Committee; selected members of the faculty, and academic and staff partners; and groups of students, as well as tours of health-related units and facilities. During this visit, K&A also (1) delivered the presentation, "Strategy Development for Mental Health and Wellbeing Programs and Services," to leadership and staff in Access and Diversity, Counselling Services, and Student Health Services; (2) delivered a variation of that presentation to a larger and more general audience consisting of Vice President, Students' staff and undergraduate and graduate student leaders; and (3) facilitated a discussion following presentations by a panel of external experts and researchers.

In addition, while attending the International Conference on Health-Promoting Universities and Colleges on the UBC Okanagan campus in Kelowna, BC on June 24-25, 2015, K&A held additional meetings with UBC's Director of Counselling Services, the project's Working Group, and graduate students.

Data and Information Synthesis, Summary, and Gap Analysis and Recommendations: Following the first campus visit, K&A developed (1) a summary of findings from all telephone and in-person meetings and interviews; (2) a derivative theme analysis highlighting the major points emerging from those findings; and then, informed by the research, findings, and themes, (3) an analysis of gaps in existing mental health and wellbeing programs and services. A brief summary of that gap analysis provided the foundation for discussions during K&A's second campus visit, which launched the *Innovation* phase of the project.

Phase Two: Innovation

- Second Campus Visit: K&A returned to campus on October 20-22, 2015 for a series of discussions to help UBC formulate an integrative, holistic, and inspirational cross-campus strategy for and approach to advancing students' mental health and wellbeing. During the visit, K&A met with multiple groups, including (1) student leaders and senators; (2) the Office of the Vice President, Students Executive Group; (3) groups of faculty and staff from the faculties and advising offices; (4) the Interim President and Vice Chancellor, the Interim Provost and Vice President, Academic, and the Senior Advisor to the President; and (5) members of the Project Working Group and Steering Committee. In addition, members of the Working Group and staff members from Access & Diversity, the Student Health Service, Counselling Services, Case Management, and Communications met for a half-day strategic discussion about fundamental options for the design of the strategy to advance mental health and wellbeing. K&A facilitated and took notes on the discussion and developed a summary of major themes that emerged.
- Strategy for Mental Health and Wellbeing Programs and Services: Following the second campus visit, K&A presented a recommended strategy for mental health and wellbeing, building upon the theme summary, gap analysis, and strategic themes; including the full range of findings, observations, analysis, and options emerging from the discovery phase; and shaped and nurtured by the perspectives of participants from throughout the project.
- Implementation and Assessment Plan: K&A has continued to work remotely with the Managing Director and Working Group to develop a phased, practical, and resource-conscious implementation and assessment plan that will map UBC's steps toward accomplishment of the goals as defined in the strategy.