Student Mental Health Framework 2.0: Building a Thriving Community
acknowledgements

The Student Mental Health Framework 2.0 emerged from the need to continue the conversation of well-being and mental health on the Carleton University campus that started with the first Student Mental Health Framework in 2009. The scope has since expanded to include proactive and preventative strategies in building a holistic, campus-wide approach to mental health and well-being.

The Student Mental Health Advisory Committee (see Appendix A) was formally established in the fall of 2008 to develop a comprehensive framework outlining an integrated and consistent approach to responding to students in need of support. This committee was reprised in October of 2015 to share their collective wisdom and provide direction for Phase II of the Framework. The committee draws its membership from across the university to ensure that the perspectives of all stakeholders are reflected in all recommendations and activities. The Student Mental Health Framework 2.0 could not have been developed without the support and commitment of the members of this committee. We would also like to acknowledge the role of the Student Mental Health Advocacy Collective in helping to engage students, shape content and provide continuous feedback for the Framework. Additional feedback was collected through focus groups, online feedback forms, one-on-one meetings and a social media campaign (see Appendix B) which provided us with student perspectives and ideas for both enhancing mental health and well-being on campus and the direction to take with Phase II of the Framework.

Finally we would like to acknowledge the Working Group which drew from the committee and implemented the feedback received from students. This group of very dedicated students and staff members met on a weekly basis to share insights, ideas and research to produce a draft that was presented to the Student Mental Health Advisory Committee in August 2016.

Not only has the development of this framework benefitted immensely from the input and shared knowledge of students, faculty and staff, but also from the following documents which informed and influenced our Framework:

- **Post-Secondary Student Mental Health: Guide to a Systemic Approach** (Canadian Association of College and University Student Services and Canadian Mental Health Association (BC))
- **Campus Mental Health Strategy** (The University of Calgary)
- **Campus Mental Health Vision and Framework** (Camosun College)
- **Student Mental Health Strategy 2014 – 2017** (The University of Victoria)
- **Student Mental Health and Wellness: Framework and Recommendations for a Comprehensive Strategy** (Queens University)
- **Mental Health and Well-Being in Post-Secondary Education Settings: Literature and Environmental Scan to Support Planning and Action in Canada** (McKean, G.)
- **Mental Health Strategy** (Simon Fraser University)
- **Mental Health and Well-Being Strategy** (The University of British Columbia)
- **Campus Mental Health Strategy** (The University of Manitoba)
- **Student Mental Health Framework** (University of Toronto)
Acquiring a university education can be exciting, transformative and demanding. We know that students are diverse and that each one will have a different experience and different challenges. Each student brings a unique set of interests, skills and life experiences to their university experience. Juggling financial, academic, family and personal demands, in addition to being away from home, family and friends for the first time are some of the new experiences that our students share. While challenging for some, these experiences are common across campus and are an opportunity for all students to grow and learn new coping skills. The key to not only surviving such events and experiences, but also to prosper during such change and upheaval, is resilience.

“Emerging adulthood” is the span between adolescence and adulthood, ages 18 to 25, when adolescents gain independence and explore various life possibilities (Arnett, 2000). This is also a time where they are more susceptible to developing mental health issues: 75% of people who receive a diagnosis of a mental disorder first receive this diagnosis between the ages of 16 and 24 (NIMH, June 2005).

For first-year students, the transition to adulthood can be especially exciting but also complex. While the vast majority successfully navigate this unique transitional phase by acquiring new skills and perspectives, the road to independence, identity and employment for some can lead to temporary but acute emotional distress. For others, this period can mark the onset of more serious and protracted mental health problems.

There are a greater number of students coming to campuses with diagnosed mental health disorders and recent surveys indicate that 50% of students use campus mental health services with 10% being seen in urgent or crisis situations (Transitions between Secondary and Postsecondary, Mental Health Commission of Canada, 2015). The growth in service demand and the change in complexity of mental health issues faced by students, can create challenges for post-secondary institutions.

The overall participation rate in post-secondary education among those aged 18 to 20 years increased steadily from 54% in December 1999 to 79% in December 2005 and, in Ontario, the postsecondary participation rate is 83% (Shaiekins, Gulszynski and Bayard, 2008).

The transition to post-secondary life is a major milestone and it can include a range of emotional challenges that span beyond academic transitions. During this transition, the risk of developing a mental health problem may increase. If a mental health condition already exists, symptoms may intensify.
### Profile of Carleton Students (Fall 2015)

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>29,127</td>
<td>Total students enrolled (87% undergrad/special and 13% grad)</td>
</tr>
<tr>
<td>42%</td>
<td>Of undergrads are under 20 years of age</td>
</tr>
<tr>
<td>56%</td>
<td>Of undergrad students are from outside the Ottawa area (includes international)</td>
</tr>
<tr>
<td>52%</td>
<td>Of grad students are from outside the Ottawa area</td>
</tr>
<tr>
<td>3,620</td>
<td>Students living in residence</td>
</tr>
</tbody>
</table>

### Students Accessing Mental Health Services at Carleton (2015-2016)

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2,728</td>
<td>Number of students receiving counselling in Health and Counselling Services (HCS)/Residence</td>
</tr>
<tr>
<td>10,430</td>
<td>Counselling visits in HCS/Residence</td>
</tr>
<tr>
<td>1,570</td>
<td>Residence counselling visits</td>
</tr>
<tr>
<td>932</td>
<td>Psychiatry visits in HCS</td>
</tr>
<tr>
<td>2,964</td>
<td>GP Psychotherapist visits in HCS</td>
</tr>
<tr>
<td>65</td>
<td>Support group sessions offered by HCS for a variety of topics (total of 124 attendees)</td>
</tr>
<tr>
<td>26%</td>
<td>Of students who registered at PMC indicated mental health as primary disability</td>
</tr>
<tr>
<td>218</td>
<td>Students supported by the From Intention to Action (FITA) program</td>
</tr>
</tbody>
</table>
mental health on campus

The National College Health Assessment (most recently conducted in 2016) provides us with a snapshot of how students experience mental health challenges within the context of their post-secondary environment, and how these challenges impact learning and engagement. A total of 43,780 students from 42 post-secondary institutions participated. The chart below illustrates that the Carleton student population responses are lower than or on par when compared with the overall national student response. These responses increase our understanding of the most common factors affecting student mental health and well-being and can help to ensure that our programs and services are able to respond to the wide range of mental health issues students experience while on campus, from typical and healthy stress and anxiety to more serious mental health problems.

The most common issues that students report having a negative impact on their academic performance are stress, anxiety and sleep difficulties.

National College Health Assessment (NCHA) Statistics Related to Student Mental Health (Spring 2016)

<table>
<thead>
<tr>
<th>Students Reported Experiencing the Following Any Time Within the Last 12 Months:</th>
<th>Carleton Student Population Response (%)</th>
<th>National Student Population Response (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Felt overwhelmed by what they had to do</td>
<td>87.1</td>
<td>89.5</td>
</tr>
<tr>
<td>Felt exhausted (not from physical activity)</td>
<td>86.7</td>
<td>88.2</td>
</tr>
<tr>
<td>Felt very lonely</td>
<td>66.8</td>
<td>66.6</td>
</tr>
<tr>
<td>Felt very sad</td>
<td>72.7</td>
<td>73.7</td>
</tr>
<tr>
<td>Felt things were hopeless</td>
<td>59.6</td>
<td>59.6</td>
</tr>
<tr>
<td>Felt overwhelming anxiety</td>
<td>62.6</td>
<td>64.5</td>
</tr>
<tr>
<td>Felt overwhelming anger</td>
<td>47.5</td>
<td>47.3</td>
</tr>
<tr>
<td>Felt so depressed it was difficult to function</td>
<td>45.7</td>
<td>44.4</td>
</tr>
<tr>
<td>Seriously considered suicide</td>
<td>12.4</td>
<td>13.0</td>
</tr>
</tbody>
</table>
Carleton University is a dynamic and innovative university with over 27,000 undergraduate and graduate students and approximately 2,000 faculty and staff.

The university experience can be a very exciting time, and our community provides students with innumerable opportunities to learn, grow and thrive, inside and outside the classroom.

At the same time, students face many demands and challenges as they pursue their academic interests and life goals. Student health and well-being is essential to student success.

This understanding led to the creation of Carleton’s first Student Mental Health Framework in 2009.

The 2009 Framework created a strong foundation for the many mental health and wellness services, programs, and initiatives that have been offered since the launch of the initial Framework and also led to a strong campus culture of recognizing, responding, referring and reporting a student in distress.

In Phase II of our Student Mental Health Framework, we endeavor to continue this coordinated crisis management while also building a holistic, campus-wide approach to mental health and well-being.

SELECT HIGHLIGHTS SINCE 2009

New programs were introduced, for example From Intention to Action (FITA), to support students who self-identify as overwhelmed and those on Academic Warning;

New programs implemented, for example The Mentorship Network (undergraduate students) and iThrive (Residence Fellows);

Student-led initiatives such as the Student Alliance for Mental Health, the Student Mental Health Advocacy Collective, and Jack.org Carleton cross-promote campus resources, and regularly engage the student body in education and advocacy around mental health and illness;

Case Manager position created in Student Affairs; fully participates in the Student At-Risk Evaluation Team (SARET);

Mental Health Nurse position established in Health and Counselling Services;

Student referendum passed to add two additional counsellors to Health and Counselling Services;

Over 4,000 faculty, staff, TAs and student leaders completed Student Mental Health Level 1 and Level 2 training;

Initiatives launched for faculty and staff around wellness and mental health (Mental Health First Aid);

National College Health Assessment (NCHA) Survey completed in 2013 and 2016;

Academic Advising Centre (and other support services) implemented walk-in models;

Changes were made to academic regulations (drop dates, “continue in alternate”, etc.)

Fall Break was implemented.
Mental health can be defined as:
“...The capacities of each and all of us to feel, think, and act in ways that enhance our ability to enjoy life and deal with the challenges we face.

It is a positive sense of emotional and spiritual well-being that respects the importance of culture, equity, social justice, interconnections and personal dignity.”
(Human Face of Mental Health, Government of Canada 2006).

A holistic, campus wide approach includes a supportive campus climate and environment which supports student engagement. This type of environment has been found to have a positive impact on both academic performance and mental health (Centre for the Study of Collegiate Mental Health, 2010). To support a healthy, supportive, safe and inclusive campus environment, we need to consider the campus environment both inside and outside the classroom.

For our students, much of their time at Carleton is in a classroom learning environment, interacting with faculty, TAs and supervisors or out in the community completing a practicum placement or a co-op work term. Fulfilling academic expectations at the undergraduate and graduate levels can impact mental health and wellness.

There are peaks and valleys throughout the academic year in relation to academic study and research, and in interactions with classmates, instructors and supervisors that contribute to student well-being. Outside of the classroom, there can also be elements of the student experience at university that impact student mental health and well-being including financial pressures, balancing academic expectations, participating in experiential learning or extra-curriculars, making connections to a new community and navigating a large campus with many different services and programs. Additionally, students in the Carleton community are balancing more than just their student experience but also many other elements of their lives.
The committee has created a Purpose, Vision and Guiding Values that will help to inspire and inform our community as we move through the implementation of the Framework 2.0.

**PURPOSE**

To continue to foster a university community that proactively promotes mental health and well-being, encourages mental health literacy and which recognizes the need for a holistic approach to mental health.

**VISION**

Through our ongoing interactions with students on campus, faculty research, and the delivery of our support services, we will continuously strive for a welcoming, healthy, supportive, and inclusive campus environment at Carleton.

This framework will serve as a guide to effectively and strategically coordinate our student programs, services and initiatives to build skills and foster resilience and to enhance the personal and academic success of Carleton students.

**GUIDING VALUES**

The following values are shaped by the defining characteristics of Carleton University as identified in the Strategic Integrated Plan; Collaboration, Leadership and Resilience. These values will shape and reinforce our commitment to student mental health and well-being within our campus community.

- **Collaboration**
  We aim to take a whole campus approach in building collaboration, partnerships and capacity and to facilitate and support the sharing of knowledge, experience, and expertise, as well as innovative and effective programs and practices among students, staff and faculty.

- **Holistic Approach**
  We recognize that mental health and well-being exist on a continuum and are influenced by many socio-cultural factors present in the learning environment and community. As such, a variety of complementary strategies is most effective to enhance well-being, including addressing multiple areas for action and organizational levels from individual to institutional.

- **Supportive Environment**
  We actively support the optimal mental health, personal well-being, coping skills and success of Carleton students by offering support and opportunities to empower students, build capacity and create an environment that allows students to thrive and develop a sense of belonging.

- **Inclusivity and Accessibility**
  To provide a healthy, supportive, safe and inclusive campus environment, we first need to understand our students’ unique needs. In doing so, we will be able to provide mental health services that are respectful of culture and identities and are inclusive of those from marginalized communities.

- **Effective Communication**
  We endeavor to successfully and intentionally convey and share ideas and exchange information or news related to mental health to our students at Carleton utilizing our existing networks.

- **Continuous Improvement**
  We strive to create a campus-wide culture of continuous improvement in all aspects of mental health and recognize the need for continued evaluation of programs, services and initiatives, and for the implementation of best practices as they become available.

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**Inclusivity and Intersectionality:**

Intersectionality is a term used to describe the intersecting effects of race, class, gender, and other marginalizing characteristics that contribute to social identity and affect health. According to an intersectionality perspective, inequities are never the result of single, distinct factors. Rather, they are the outcome of intersections of different social locations, power relations and experiences.

Viewing the mental health issues of our students with an intersectional approach allows Carleton to provide supports based on more than one explanatory factor and contributes to our vision of holistic services and programs.
areas of focus, objectives, and recommendations

For the purpose of the framework, we have identified the following six areas of focus that will help us build a thriving community:
area of focus

student engagement
Student Engagement

Student Engagement acknowledges and values the role of students in improving student mental health at Carleton and encourages participation of students through meaningful opportunities to share knowledge, connect with peers and play a role in decision making processes. Engagement exists on a continuum with many ways to foster meaningful engagement. Following best practices, Carleton, through the Student Mental Health Advisory Committee, aims to create opportunities for student consultations, partnerships, and leadership in mental health initiatives while recognizing that the level of engagement will vary to best fit all of our needs. When students are actively engaged, this helps build capacity within the university, can prevent mental health crises and also contributes to overall academic success.

Student engagement is not just an action, but a continuous process guided by core principles that include building positive working relationships based on reciprocity amongst students, staff, and faculty where all groups are in partnership with each other. It requires us to be inclusive of the full scope of lived experiences, circumstances, and backgrounds students bring to the table, while also taking an intersectional approach to engaging students in mental health initiatives.

Objectives

1. Continue to develop partnerships between students, staff, and faculty as well as within the student body.

2. Increase opportunities for student engagement in mental health initiatives and determine how to maintain these opportunities.

3. Promote opportunities to all students through various channels, with a dedicated effort to be as inclusive and accessible as possible.

Recommendations

Continue to involve students in all Areas of Focus of the Framework 2.0 through partnerships with staff and faculty in order to facilitate student engagement.

Provide support and resources for student-led groups and initiatives connected to mental health and well-being. This can be in the form of promotion, room booking, funding, etc.

Support and recognize student volunteer initiatives in the area of student mental health and investigate means to offer paid opportunities for students to engage in mental health promotion, advocacy, program development, and other activities.

Develop peer support programs with a focus on mental health.

Determine opportunities for continuous improvement to accountable feedback mechanisms that allow students to voice their concerns and suggestions about mental health at Carleton. This can be in the form of surveys, social media campaigns, focus groups, town halls, etc.

Work with students and student groups to research and implement strategies for continuing to include student engagement in student mental health initiatives and programming, including the communication of available opportunities to be involved.
area of focus

well-being, skills building and resilience
Well-Being, Skills Building and Resilience

Resilience describes a person’s capacity to cope with changes and challenges, and to bounce back during difficult times. It is an essential set of skills for students to develop in order to have a successful university experience and ensure future success. University can be a challenging time for students, both as they navigate the transition into post-secondary education and as they complete their degree. The stressors faced by students can impact their emotional, mental and physical health as well as their social connections and academic success. Providing education and opportunities to students to develop core skills and characteristics critical to resilience and well-being can allow them to build the awareness, coping skills and mindset to be at their best and to thrive at university.

Objectives

1. Foster an inclusive campus environment that supports meaningful student and campus community engagement and positively influences student mental health and well-being.

2. Increase campus awareness of impact of mental health on academic success.

3. Encourage personal growth through opportunities to develop self-awareness and acquisition of effective coping skills.

4. Help students understand key transition points into, through and out of post-secondary studies and how to strive for positive mental health while navigating these changes.

Recommendations

Develop programing and initiatives to provide students with opportunities and resources that will help them recognize personal strengths, develop coping skills and build resilience.

Incorporate themes of overcoming feelings of loneliness and isolation into existing programs.

Create a social norms campaign using data from the National College Health Assessment (NCHA) to show students that their peers are experiencing similar stressors and emotions.

Educate the campus community on major transition points throughout the year and how to help students seek mental health and well-being resources and support accordingly.

Investigate the possibility of online modules, workshops or programming that introduce students to the concept of well-being and thriving within the university environment.

Investigate existing online or mobile tools that assess well-being, identify signs of poor coping and that provide feedback and resources to help students regain balance.

Develop a centralized website to provide access to comprehensive information on well-being and mental health to students, staff, faculty and parents.

Produce a resource that identifies student-led, faculty or student-service based programs and support that are currently contributing to building resilience and coping skills based on results from the environmental scan.
area of focus

mental health awareness, literacy and education
Mental Health Awareness, Literacy and Education

Mental health awareness activities are an important element of improving mental health because they help our community understand the impact on and important relationship to academics, workplace and personal success. Raising mental health awareness is a contributing factor to a healthy, supportive and inclusive campus environment because it acknowledges the relevancy and importance of mental health, continues to educate members of our community and reinforces the role we all play and encourages us to support one another. Carleton’s 2009 Student Mental Health Framework included resources on how to recognize, respond, refer and report a student in distress and helped all members of our community notice indicators of distress. It is important to build campus capacity to recognize indicators of concern, not only for students in distress, but for those at risk to help prevent the student from reaching distress. Increasing this capacity should not only be targeted to faculty and staff but also to students, so they know how to recognize indicators for themselves and for their peers.

Objectives

1. Enhance anti-stigma programming and campaigns and continue to work towards raising mental health awareness.

2. Create an environment which encourages help-seeking and helping behaviours across campus.

3. Increase knowledge of existing campus resources, programs and services for mental health and well-being that are available to students.

4. Educate and equip students, staff and faculty to respond to early warning signs of mental health issues and identify students who may need connection to resources and services.

Recommendations

Determine, through working with student groups, awareness building strategies, workshops, communication strategies or campaigns, and partner with faculty, staff and students to offer activities and initiatives on campus that increase awareness, anti-stigma and help-seeking behavior.

Incorporate messaging consistently throughout the year into student communications across many channels to address anti-stigma, and promote awareness, recognition and support.

Investigate training with an intersectional approach to enable staff and faculty to provide mental health services that are respectful of culture and identities, and which reflect the diversity of Carleton community members.

Expand “Recognize, Respond, Refer, Report” (existing protocol for identifying and assisting students in distress) to include indicators that a student may be experiencing difficulty but may not be “in distress”, with options for how to direct these students to additional support.

Continue to offer Student Mental Health Framework training to faculty and staff and include expanded “Recognize, Respond, Refer, Report” (with indicators for students experiencing difficulty); update Student Mental Health resources.

Explore mental health training options for students and investigate expanding Student Mental Health Framework training to include students.

Investigate pre-existing online training modalities for suitability for students, staff and faculty (for example More Feet on the Ground).

Determine best practices for training peers in coordinated mentor programs across the Carleton campus and ensure consistent mental health training provided to all mentors.

Investigate informal events and programming options and how they can be delivered in conjunction with students and peers throughout the year.
area of focus

accessible services
Accessible Services

Carleton prides itself on being a Canadian leader in the delivery of support services that are personalized, varied and effective. The wide range of programs and services available touch on many aspects of academic and student life. We are known for our diverse and inclusive campus environment, our accessible campus, strong support for the transition to university, growing mentorship programs, integration of meaningful engagement opportunities inside and outside of the classroom, connection to community, and the focus on an enriching academic and co-curricular student experience.

A number of factors can contribute to student wellness and mental health. To best support student mental health, it is important that all student support services play a role. Taking a stepped approach (the level of support is matched to the complexity of the need) and making a thoughtful referral means that students will have the support they need from the most appropriate service. It is also important for Carleton to set clear expectations of its services on campus.

Objectives

1. Build capacity to ensure the provision of accessible, adequate, effective, and interconnected campus mental health services, which employ “best practice” knowledge and strategies.

2. Provide a variety of means for students to access mental health services to ensure optimal service responsiveness.

3. Enhance the communication of information for students on mental health-related services.

4. Ensure the development of effective partnering relationships between Carleton mental health-related services and provincial resource networks and maintain effective liaison and referral protocols with community mental health resources.

Recommendations

Develop an online resource which outlines student services and programs and communicates a streamlined “Stepped Approach” depending on need for the range of mental health services available at Carleton University.

Update referral training for faculty, staff and students in key roles to include the “Stepped Approach”.

Enhance coordination, collaboration and communication across support services both on and off campus.

Establish a Health and Counselling Services Advisory Committee (which will include student representatives) to provide the opportunity to develop a shared understanding of the changing needs of students as well as the provision of professional mental health care and services and their necessary limitations within the university context.

Continue to offer wellness programming and enhance online tools that provide information on managing stress and recognizing the signs and symptoms of anxiety and depression, among other mental health problems.

Continue to develop collaborative partnerships with the Ottawa community mental health services, including working with hospitals for coordinated discharge processes and liaising with off-campus services for after-hour care.

Communicate to students about what to expect when accessing on-campus services.

Promote the Care Report to the entire campus community and encourage its use to flag indicators of concern so our community can respond in the most appropriate way.
area of focus

coordinated crisis management
Coordinated Crisis Management

Coordinated crisis management and student in distress protocols and procedures were the main elements of Carleton’s 2009 Student Mental Health Framework.

Crisis situations (acute distress, risk of self-harm) have a significant impact on students’ mental health and ability to succeed. They are often complicated situations that require the support and perspectives of multiple roles across campus and therefore require well-documented protocols and a coordinated response. In some cases, crisis situations can impact others or the entire campus community.

When responding to a crisis situation, there is the potential for many people at Carleton to be involved and it is important that those involved understand the coordinated response from Carleton and their roles within that response. Existing policies and protocols support campus community efforts in their capacity to respond and help ensure that students receive prompt, responsive and appropriate support.

Together we are a team and as such are expected to work together in addressing all levels of a crisis.

Objectives

1. Continue to build awareness of signs of mental health crises and suicidality.

2. Continue to build awareness of appropriate responses and resources for referral.

3. Increase awareness of support offered by the Manager of Student Care and Support for students in distress.

Recommendations

Update Student Mental Health section of the VPSE website for faculty and staff and list all policies and protocols as individual documents (current policies and protocols are embedded in the 2009 Student Mental Health Framework).

Review Communication and Documentation in collaboration with the Privacy Office and update as needed; ensure updates are communicated to the Carleton community.

Review and update all protocols as they come up for renewal.
Institutional Structure

The broader organizational context can have a significant impact on the wellness of those within it. How a post-secondary institution is structured and its strategic goals, policies and practices, therefore, impact student mental health which, in turn, impacts student learning. Carleton has shown its commitment to student mental health and its impact on student learning through the Student Mental Health Framework in 2009 and through the Strategic Integrated Plan 2015-2018.

Carleton, through the Student Mental Health Framework 2.0, is renewing its commitment to addressing institutional barriers to campus-wide mental health and well-being. Carleton acknowledges that there are external factors at play in the conversation about mental health.

Objectives

1. Continue to develop institutional awareness of the impact of policies and practices that may create unintended stress, and outline steps to consider issues of mental health and well-being in the review of policies and procedures.

2. Cultivate awareness of the importance of student mental health promotion and integration at all levels of the university.

3. Work collectively to advocate to the community and to provincial and federal governments for increased support for student mental health care, programs and initiatives both on- and off-campus to provide effective, accessible and coordinated mental health services for emerging adults.

Recommendations

Provide training opportunities for those who develop policies so that they may review policies and procedures with a mental health lens.

Engage in opportunities to learn about best practices and protocols at Canadian institutions in supporting the well-being of students.

Investigate ways Carleton can create conditions inside the classroom leading to positive mental health outcomes for our students, including access to course materials, information in course syllabi, articulation of learning outcomes, embedding language that emphasizes the importance of student well-being in the design, writing, and delivery of educational curriculum.

Continue to advocate for the needs of post-secondary students, and explore ways to include them in above processes by developing feedback mechanisms for reporting back to the Advisory Committee.
Carleton University is committed to providing an educational environment that supports student mental health and well-being and provides opportunities for growth and development. For many years, Carleton students have been able to use student support services, and in particular since 2009, Carleton has seen a shift in culture in how student mental health and well-being are supported.

However, adapting in order to meet changing student needs is an ongoing process. This document recognizes the need for a refreshed Student Mental Health Framework, to refocus student support with a systemic and holistic approach.

Upon the implementation of the Student Mental Health Framework 2.0, the Student Mental Health Advisory Committee will prioritize the recommendations, assign ownership, and create a five-year plan for implementation and continued support. Members of the Student Mental Health Advisory committee will follow the Terms of Reference, meet regularly and complete annual reports with the intent of maintaining sustainability and transparency. Committee members will be invited to renew their position on the Advisory Committee yearly to confirm their ability to continue to participate in the implementation of recommendations or suggest new members to take on new tasks.

Additionally, there will be ways for faculty, staff and students to be involved in the implementation of various recommendations - everything from being aware of Carleton’s Student Mental Health Framework and promoting our continued work to becoming more involved in the development or delivery of specific recommendations. Students, faculty and staff are all encouraged to think about how they can contribute to a healthy, supportive and inclusive campus environment that is consistent with this Framework.

As the recommendations are prioritized and implemented, evaluation criteria for the Framework will be established and monitored. The Student Mental Health Advisory Committee will also aim to develop an evaluation process for individual recommendations to assess their impact and effectiveness.

Necessary adjustments will be made where the recommendations do not achieve intended results. New research and emerging best practices will also inform the implementation and evaluation of our framework.

It is the hope of the Student Mental Health Advisory Committee that this framework will be a living document and will support all members of the Carleton community – students, faculty and staff – to provide our students with a supportive and safe environment in which to pursue educational and life goals.
Appendix A: References


Shaienks, Danielle, Gluszynski, Tomasz, and Bayard, Justin. 2008. Postsecondary Education: Participation and Dropping Out: Differences Across University, College and Other Types of Postsecondary Institutions. Ottawa: Statistics Canada.


Appendix B: Carleton Student Mental Health Advisory Committee

Terms of Reference

In 2009, Carleton University launched its Student Mental Health Framework: A Guide for Supporting Student in Distress. An advisory committee was created to guide the development of the framework and its recommendations. At that time, Carleton University was one of the few postsecondary institutions that had a framework. Since then, there has been a lot of work in student mental health across Canada. The focus has expanded to a systems-wide approach, covering the continuum of mental health. This approach is comprehensive and views the whole campus as the domain to be addressed. The work of this advisory committee reflects the University’s recognition that student mental health and well-being are integral to student engagement and academic success.

Purpose of the committee

Best practices/emerging trends - Identify, discuss and share knowledge of evolving best practice models for addressing mental health needs of university students

Program & policy - Recommends, develops and implements policies, programs, and initiatives that will enhance the mental health of students on campus

Evaluation/research - Advocate that student mental health programs/initiatives are monitored and evaluated for impact and effectiveness with the intent to revise and improve as needed

Awareness and reducing stigma - Identify environmental and cultural factors that contribute to mental health and wellness

Training & education - Identify, develop and recommend mental health training for staff, faculty and student leaders that will increase their mental health literacy

Shared resource folder - Use of share resource folder to collaborate online, share comments and feedback and stay connected outside of committee meetings

Advisory Committee Membership

Suzanne Blanchard, Vice-President (Students and Enrolment) – Chair
Maureen Murdock, Director, Health & Counselling Services
Patty Allen, Mental Health Nurse/Counsellor, Health & Counselling Services
Nicholas Connolly, Manager, Strategic Initiatives, Office of the Vice-President (Students & Enrolment)
Michelle Baulch, Assistant Manager, Student Success & Advising, Office of the Vice-President (Students & Enrolment)
Samantha Munro, Healthy Workplace Coordinator, Office of Quality Initiatives
Vicki Boman, Manager of Student Care and Support, Student Affairs
Kelly Dumas, Director, Student Academic Success Centre
John Meissner, Project Leader, From Intention to Action
Larry McCloskey, Director, Paul Menton Centre for Students with Disabilities
Natalie Allan, Assistant Director, Residence Life, Department of Housing & Conference Services
Brenda Morris, Instructor II, School of Social Work, Faculty of Social Sciences
Paul Van Geel, Chair, Civil Engineering, Faculty of Engineering and Design
Brian Billings, Assistant Director, University Safety
Bruce Marshall, Manager, Health and Wellness, Athletics
Alexandra Noguera, Vice-President (Student Issues), CUSA, undergraduate student
Charissa Feres, Student Alliance for Mental Health, undergraduate student
Hazel Kabibi, Residence Fellow, undergraduate student
Vipul Kolan, graduate student
Lauren Montgomery, PhD candidate in Sociology, graduate student representative
Trevor Deley, graduate student
Lauren Boivin, Admissions Services, responsible for taking minutes
Steering Group
A small standing steering group provides ongoing support to the Committee through the Chairperson. Its members include, at minimum, the Manager, Strategic Initiatives, Assistant Manager, Students Success & Advising, Director, Health & Counselling Services, Student Support Case Manager, FIT:Action and PMC - additional members will be included depending on the activity that is being focused on.

Working Groups
As needed, working groups may be formed to address needs identified by the Advisory Committee. These Working Groups may include members that are not formally on the Advisory Committee. These groups should have an association to one of the Advisory Committee members so that the committee is kept up-to-date.

Frequency of meetings
The advisory committee will meet quarterly or more frequently if issues arise that need the committee’s input. The Working Group will meet on a monthly basis.

Reporting
An annual report will be created that will cover the committee’s activities which will include an overview of the current trends in post-secondary student mental health and the opportunities for improvements. The report will make recommendations on what the priorities should be for the following year.
Appendix C: Student Engagement Working Group

Working Group Membership
Jennifer Elliott, Assistant Director, Recruitment (previously Manager, Strategic Initiatives, Office of the Vice-President (Students and Enrolment))
Patty Allen, Mental Health Nurse/Counsellor, Health & Counselling Services
Michelle Baulch, Assistant Manager, Student Success & Advising, Office of the Vice-President (Students and Enrolment)
Vicki Boman, Manager of Student Care and Support, Student Affairs
Shannon Noonan, Residence Manager, Leeds, Stormont, and Dundas Houses, Residence Life Services
Smita Bharadia, Equity Advisor, Equity Services
Charissa Feres, VP (Student Issues), Student Alliance for Mental Health, undergraduate student
Sabreen El Awad, VP (Student Engagement), Student Alliance for Mental Health, undergraduate student
Alexandra Noguera, VP (Student Issues), CUSA, undergraduate student
Trevor Deley, graduate student

Student Outreach Details

Focus Group Questions
1. Based on your experience or the experiences of your peers, what contributes most to feelings of stress at university?
2. Do you know when you are feeling distressed? What are the signs?
3. What are the strategies you use in order to cope with stress, distress or challenging situations?
4. How can Carleton promote positive mental health?
5. In your time at Carleton, what has worked well for you and your peers in supporting your mental health?
6. What should Carleton continue to do to support student mental health?
7. What are some of the common barriers that you or your peers have faced when dealing with mental health issues at Carleton? What is Carleton doing that isn’t working well in the area of student mental health?
8. What emerging mental health issues should Carleton look to address? What are the trends you see in mental health and in supporting one another?
9. Is there anything that we should have asked that we didn’t, or anything further you’d like to comment on?

Focus Groups conducted during March 2016:
Undergraduate Students (x2)
Graduate Students (x2)
Student Leaders (x2)
International Students (x1)
Residence Students (x2)
Social Media Campaign:
Question themes asked on a daily basis during the week of March 21st, 2016
March 22
How can Carleton promote positive mental health?
March 23
What are some of the common barriers that you or your peers have faced when dealing with mental health issues at Carleton? What is Carleton doing that isn’t working well in the area of student mental health?
March 24
What is Carleton doing to support student mental health that is working well? What should Carleton continue to do to support student mental health?
March 29
What emerging mental health issues should Carleton look to address? What are the trends you see in mental health and in supporting one another?

Feedback form:
Text for website:
The Student Mental Health Advisory Committee is collecting feedback from our community on student mental health at Carleton for phase II of the Student Mental Health Framework. There are a few different ways that you can provide feedback including:
• Participating in a Focus Group (anchor link to below)
• Joining our student mental health social media campaign starting on March 21 by using #CU4MH
• Filling out this feedback form

You can use this feedback form to provide feedback on student mental health overall or to respond to one of the following questions:
• How can Carleton promote positive mental health?
• What is Carleton doing to support student mental health that is working well? What should Carleton continue to do to support student mental health?
• What are some of the common barriers that you or your peers have faced when dealing with mental health issues at Carleton? What is Carleton doing that isn’t working well in the area of student mental health?
• What emerging mental health issues should Carleton look to address? What are the trends you see in mental health and in supporting one another?

Flyer
Text for flyer:
We want to hear from you about student mental health at Carleton
The Student Mental Health Advisory Committee is collecting feedback for phase II of the Student Mental Health Framework
You can RSVP to a focus group, provide feedback with #CU4MH on social media or fill out a feedback form
Visit students.carleton.ca/smh to find out more and provide your comments!