GRADUATE STUDENTS MENTAL HEALTH AND WELLBEING: A TOOLKIT

National Graduate Caucus – Canadian Federation of Students

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The National Graduate Caucus (NGC) of the Canadian Federation of Students engaged in a one-year research project to develop a graduate student mental health toolkit. This toolkit aims to equip graduate students' communities to evaluate and improve the state of graduate students' mental health and wellbeing at post-secondary institutions in Canada.

We realize and acknowledge that any meaningful initiative for an effective mental health strategy on Canadian campuses requires structural reforms, decolonization and indigenization of the post-secondary education system in Canada. We need to reimagine and work towards a post-secondary education system that is free for all, and better meets the needs of BIPOC, LGBTQ+ and all other different groups on campuses. While the Canadian Federation of Students continues to fight for these changes, this toolkit intends to help to resist the existing structures and institutions in place.

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1.1 WHAT IS THIS TOOLKIT ABOUT?

This toolkit contains tools and resources for evaluating and improving the state of graduate students' mental health and wellbeing at post-secondary institutions in Canada. It is particularly designed to help post-secondary institutions and Graduate Students Associations (GSA) to build and improve their capacity for offering mental health programs and services on campuses and to evaluate the effectiveness of their work. It further provides initial support with clear, accessible and relevant tools both online and in print to individual graduate students.

1.2 WHO IS THIS TOOLKIT FOR?

This toolkit has been primarily developed for graduate students' unions and member locals of the Canadian Federation of Students who play the important role of supporting their peers in navigating mental health services and safe spaces on campus. Components of the toolkit may also be useful for post-secondary institutions, including staff at Student Health and Counselling Offices, Accessibility Offices, Campus Health and Wellness Centers and/or other offices on campus that are responsible for running and delivering mental health programs and services to observe gaps in institutional tools and student services. The toolkit is also aimed at individual graduate students who may also find this source useful (i.e., general mental health education as well as the resource guides and contact numbers in Chapters 5 and 6 in particular). Others who might find this toolkit useful include groups that are involved in mental health work on campus. This may also include academic staff or researchers interested in service models or administrators on campus who are invested in strategy, planning and/or policy relative to the mental health and addictions needs of their student population.

1.3 HOW IS THIS TOOLKIT USED?

This toolkit is structured to facilitate easy access to key information and tools that can be used in evaluating and developing mental health programs on campuses. It includes four major sections: evaluating mental health at your institutions, tools for institutional use, tools for GSA/community use and, tools for individuals use. Each section includes an explanation of the subject matter, offers some practical tools and worksheets that can be used to support your work and highlights select case examples to illustrate how the information can be applied in a different setting. Links to further resources are also included at the end of each section.

This toolkit is a free resource that can be accessed through the Canadian Federation of Students website (https://www.cfs-fcee.ca/research).

1.4 WHAT ARE THE GOALS OF THIS TOOLKIT?

The goal of this toolkit is to provide users with a one-stop-shop to tools, resources, and best practice recommendations for improving and maintaining graduate students' mental health and wellbeing in the post-secondary setting. Furthermore, the suggestions within this toolkit should serve as a starting point or a supplement but shouldn't hinder the collective and radical imagination of different groups on campuses from utilizing their unique grassroots strategies for executing their plans.

2.1 UNDERSTANDING THE MENTAL HEALTH CONTINUUM

In recent years, concerns surrounding the mental health of post-secondary students have increased, with national, cross-sectional surveys revealing a high prevalence of stress, symptoms of psychological distress, and diagnosed mental illnesses among students [1]. Mental health is traditionally defined as more than just simply the absence of a mental illness, but an integral part of health which we all share. The World Health Organization argues that mental health is "a state of wellbeing in which an individual realizes their own potential, can cope with the normal stresses of life, can work productively, and can make a contribution to their community" [2].

Often, the terms "mental health" and "mental illness" are used interchangeably, but this is inappropriate. "Mental illness" implies that a person has received a clinical diagnosis, or is experiencing clinically significant symptoms of a mental illness. It is important to note that it is possible for an individual to be experiencing symptoms of general psychological distress without experiencing a mental illness. In other words, we all have mental health, but we do not all have a mental illness.

In 2006, Corey Keyes introduced his dual-continuum of mental health[3], an important tool for understanding the difference between what he refers to as "languishing" and "flourishing" (Figure 1). This model has since been adopted and endorsed by leading mental health professionals across North America. In this model, a person experiencing optimal mental health is "flourishing" in life, while a person experiencing poor mental health is "languishing." This model clearly demonstrates how it is possible for an individual to experience poor (or "languishing") mental health, but not a mental illness. Similarly, it is also possible for an individual who is experiencing optimal (or "flourishing") mental health to be experiencing, but effectively managing, a mental illness. This is an important message for recovery.

Figure 1. Keyes' Dual-Continuum of Mental Health and Mental Illness

Mental health is complex, and can be affected by social, psychological, and biological factors. Certain things can place individuals at increased risk for experiencing a deterioration in their mental health and the development of a mental illness. For example, some mental illnesses carry a genetic component, meaning that a family history of mental illness may increase your risk of developing a mental illness yourself (i.e., schizophrenia, bipolar disorder) [4]. However, the evidence of genetic links to mental illnesses remains relatively limited, with leaders in the field looking forward to the future of genomics and neuroscience in mental health research [5].

In most cases, risk factors for poor mental health and the development of mental illnesses are socio-environmental in nature. These risk factors can take many forms, including social (i.e., lack of social support, isolation) and psychological (i.e., continued exposure to stressful situations). Some risk factors for mental illness are structural in nature (i.e., poverty, discrimination), while others are more personal and can occur in a person's regular day-to-day (i.e., stressful situations or conditions at work, home, or school).

2.2 CAMPUS MENTAL HEALTH CHECKLIST

Post-secondary students may be at increased risk for mental health deterioration due to the multitude of stressors experienced within the post-secondary setting. While some degree of stress is to be expected and can sometimes even improve performance, chronic stress is highly correlated with negative mental health outcomes [6,7] and has been shown to have a negative impact on students' academic achievement [1]. As a result, it is important for institutions to evaluate not only the mental health of students, but also the degree to which services and supports are provided to students to foster a mentally healthy campus. The following three sections comprise a basic "checklist" for institutions to consider.

2.2.1 MONITORING STUDENTS MENTAL HEALTH

In order to effectively target mental health service and supports on campus, institutions are encouraged to participate in the regular surveillance of their students' mental health. This can be done through several avenues, including opting in to the American College Health Association's National College Health Assessment Survey (www.acha.org/NCHA/NCHA_home), which includes both physical and mental health indicators and is conducted among participating Canadian post-secondary institutions every three years. To date, this is the most complete data available on the Canadian students' mental health and wellbeing of students in Canada.

More recently, a research group out of the University of British Columbia has been developing the Canadian Campus Wellbeing Survey (CCWS), designed specifically to evaluate mental health indicators on post-secondary campuses (https://www.ccws-becc.ca/)[8]. Finally, the Post-Secondary Student Stressors Index (PSSI) is an instrument created by Dr. Brooke Linden at Queen's University, designed to evaluate the sources of post-secondary student stress and better inform mental health services and supports on Canadian campuses[9].

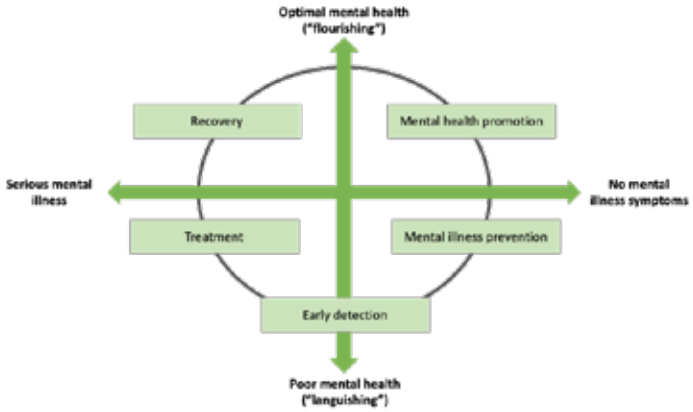
☐	REGULAR SURVEILLANCE OF MENTAL HEALTH INDICATORS FOR STUDENTS ON CAMPUS

2.2.2 THE MENTAL HEALTH SERVICE CONTINUUM

The majority of post-secondary institutions offer a number of mental health services and supports. However, offerings are not consistent across campuses. One tool that can assist institutions in determining whether they are offering a holistic set of services and supports is the Mental Health Service Continuum. This continuum proposes five categories of service delivery, with each serving an important purpose. Figure 2 demonstrates where each of these categories of service delivery fits intoin to the Keyes' continuum of mental health and illness.

In 2016, Jaworska and colleagues conducted a cross-sectional survey of over 168 publicly funded Canadian post-secondary institutions regarding their campus mental health services [10]. The results of this study indicated that the most frequently offered services and supports at institutions included mental health promotion services (73%) and counselling/treatment services (91%), with much less focus laid on mental illness prevention, early detection, and recovery.

Figure 2. Mental Health Service Continuum within the Keyes' Dual Continuum



Mental Health Promotion

Services and supports that fall under this category enable individuals to develop the skills and tools required to improve (and maintain) their overall health and wellness, with a focus laid on the determinants of health [11]. Promotion activities fall within the upper right-hand quadrant of the Keyes' continuum (no symptoms of mental illness and optimal ("flourishing") mental health).

Mental health promotion activities at institutions range widely in nature. This may include helping individuals to learn to maintain healthy behaviours (i.e., physical activity, healthy cooking and nutrition, healthy sleep habits), how to effectively manage and cope with daily stressors (i.e., time management workshops), and how to cultivate and maintain strong social support networks and supportive relationships.

☐	MENTAL HEALTH PROMOTION SERVICES AND SUPPORTS

Mental Illness Prevention

Mental illness prevention efforts aim to reduce the prevalence of mental illnesses by reducing risk factors. The goal of this "primary prevention" approach is to provide services and supports before the onset of symptoms. Prevention activities fall within the lower, right-hand quadrant of the Keyes' continuum (no mental illness symptoms and poor ("languishing") mental health). It is important to note that mental health promotion and mental illness prevention are often interrelated and overlapping activities [12]. As a result, many mental health promotion activities often include elements of mental illness prevention, achieving different, but complementary outcomes. For example, peer support networks at post-secondary institutions are often viewed as a mental health promotion service (i.e., promoting mental wellbeing by ensuring students have a strong peer-to-peer social support resource), but may also serve as a prevention service (i.e., offering students a strong peer-to-peer resource in times of excessive stress when they may not otherwise reach out).

☐	MENTAL ILLNESS PREVENTION SERVICES AND SUPPORTS

Early Detection

Where mental illness prevention (or "primary prevention") aims to deliver services and supports before the development of symptoms of a mental illness, early detection (or "secondary prevention") involves intervention as soon as possible following the development of symptoms. Early detection activities fall within the lower half of the Keyes' continuum (poor ("languishing") mental health, with either symptoms of a mental illness or a mental illness).

To date, few post-secondary institutions offer dedicated early detection services and supports, instead relying on self-referral for help-seeking [10]. It is possible that this stems from the fact that many institutions find themselves overwhelmed with the demand for treatment services, and are therefore reluctant to incorporate additional programming that may increase that demand. Ironically, early detection programming is intended to result in a decrease in the prevalence of mental illness on campus by catching cases of mental illness early, prior to them becoming severe and more difficult to treat.

☐	EARLY DETECTION SERVICES AND SUPPORTS

Treatment

During the treatment phase, mental illnesses are treated until individuals move forward into recovery. While symptoms are treated in the early detection stage, treatment most often begins when a mental illness has reached a diagnosable point, or when symptoms have reached a clinical level. Treatment activities fall within the lower, left-hand quadrant of the Keyes' continuum (mental illness and poor ("languishing") mental health). The vast majority of post-secondary institutions in Canada offer some form of treatment services and supports [10], including counselling and psychotherapy offered by mental health professionals.

☐	TREATMENT SERVICES AND SUPPORTS

Recovery

Recovery constitutes the ongoing management of a mental illness over the course of one's life. Recovery supports and services focus on helping individuals to live stable, productive lives and foster strong social support networks to maintain resiliency and effectively manage their mental illness. Recovery and mental health promotions activities share much in common, with the main difference being that recovery services lie in the upper left-hand quadrant of the Keyes' continuum (a well-managed mental illness paired with optimal ("flourishing") mental health).

In a post-secondary context, recovery services might be the provision of referrals or connections to services and supports in the broader community. Several post-secondary institutions have begun to explore partnerships with community services, particularly in cases where a student's need for treatment exceeds the number of sessions or time a post-secondary counsellor can spend on a single client

☐	RECOVERY SERVICES AND SUPPORTS

Upstream vs. Downstream Services

Traditionally, health services are further (and more broadly) categorized as being either "upstream" or "downstream" in nature. In the context of mental health, upstream services are those that take place before the onset of mental illness (i.e., mental health promotion and mental illness prevention). Downstream services are those that take place following the onset of symptoms, or the development of a mental illness (i.e., early detection, treatment, and recovery).

It is important for holistic service provision to include both upstream and downstream approaches. Traditionally, post-secondary environments have laid the majority of focus and funding on downstream approaches (i.e., treatment). In fact, Jaworska and colleagues' 2016 study revealed that while the majority of institutions offered some form of mental health promotion programming, many respondents felt that these were not a good use of resources [10].

However, a shift towards a renewed investment in upstream services has begun in recent years. It is important to recognize that improving upstream approaches, including mental health promotion and mental illness prevention, may help to alleviate both the burden of mental health problems among student populations as well as the demand currently placed on overtaxed campus treatment services. That being said, the provision of downstream services should not be altogether abandoned, as these are necessary to taking a holistic approach to mental health and wellbeing on campus.

☐	SUPPORT FOR BOTH UPSTREAM AND DOWNSTREAM APPROACHES

2.2.3 EVALUATION OF SERVICES AND SUPPORTS

Another important component of service delivery on campus is to ensure that these services and supports are working as intended (i.e., are effectively achieving your goals) and are not doing any harm. Formal evaluation of the workshops and training opportunities provided by your institution is highly recommended. While program evaluation is a field of research in and of itself, formal evaluation of the programs offered on campus doesn't necessarily need to be complicated. Here, we have outlined six simple steps to evaluation. For more detailed information, the Centres for Disease Control provides a series of online tools, free of charge (www.cdc.gov/eval/resources/index.htm), while more detailed program evaluation and dissemination guides are available on PREVnet (www.prevnet.ca/resources/program-dissemination-and-evaluation). Finally, Public Health Ontario offers a ten-step guide to conducting an evaluation (www.publichealthontario.ca/-/media/documents/at-a-glance-10step-evaluation.pdf?la=en).

Step 1) Determine the goal and objective(s) of your workshop/training

Goals are more overarching in nature, while objectives are more specific and measurable. A goal is a broad statement about the long-term expectations for your program or service (i.e., a reduction in mental illnesses among students on campus). Objectives are more narrow statements describing the desired results to be achieved and the manner in which they will be achieved.

Step 2) Determine how best to quantify the specific outcome(s) you're interested in

Once you have clearly stated objectives, the next step is to determine the best way to measure whether or not an objective is being met – in other words, determine what outcomes you are interested in. For example, if an objective for a mental health promotion service is to reduce student stress, this might be measured by asking participants to take a screening test for stress before and after the workshop/presentation, etc. and observing whether scores improve. Outcomes may be separated into those that are short-term (proximal) and long-term (distal). Remember that measures like 'number of people who attend the workshop' can be useful in terms of determining program uptake, but don't actually tell you much about whether or not the program or service is working the way you intended.

Step 3) Draft a logic model of how you expect your program/service to function

A logic model is a graphical representation of the logical flow of your program or service. It resembles a flowchart, and is a useful method of mapping out the steps required to meet your ultimate goal. Logic models typically include the following components: inputs (what you are going to need in order to provide this service, such as money and staffing); activities (the things your service will provide, such as workshops, or educational materials); and outcomes (both short- and long-term).

Step 4) Determine and execute an evaluation plan

Now that you have articulated how your program or service is intended to achieve your goals, the next step is to determine the best way to evaluate whether or not it is working. The simplest, and most common method of evaluation is to perform a pre-test/post-test survey evaluation. Surveys are not costly to administer, and typically receive good response rates (the number of people who participate) if done in person before and after the workshop or service. Online surveys can also be conducted with even fewer costs, but often receive lower response rates. For longer term evaluations, you may also be able to observe before and after differences in your institution's student wellness services administrative data (i.e., reduction in the number of students seeking help for stress, anxiety, or other mental health issues among those who have attended a wellness workshop on campus).

Step 5) Report the findings

Finally, reporting the findings of your evaluation is an important last step that should not be skipped! While your institution may choose to keep this report internal to the organization, it is encouraged to publicly post evaluation results so that other institutions can learn from what you have achieved. Lastly, while it can be tempting to avoid reporting the less exciting findings of your evaluation (or even "bad" results), remember that it can be just as important to share mistakes. Avoiding this publication bias (or the tendency to only want to publish the "good" results) means that others may avoid making the same mistakes in the future. Acknowledging the things that didn't work so well also provides your institution with ready-made goals for improvement upon offered programs and services.

☐	FORMAL EVALUATION OF MENTAL HEALTH SERVICES, WORKSHOPS, AND PROGRAMS OFFERED

Please note that while this section is intended to provide institutions with a general idea of the "boxes" that might be checked as they move towards ensuring a mentally health campus, it is important to that there are more comprehensive guiding frameworks available specifically designed to assist institutions with identifying gaps and areas for improvement in mental health service delivery on campus (see Chapter 3 of this Toolkit).

2.3 Listening to Graduate Students

In addition to participating in the regular surveillance of students' mental health indicators (i.e., a 'whole campus' approach), it is also important for institutions to recognize that different groups within their student body may have unique needs of their own.

While some stressors and mental health challenges may be experienced by students at all levels of study (i.e., financial concerns), graduate students are a subgroup on campus with unique needs of their own. Individuals enrolled in graduate studies are typically older, more mature students, with more life experience than an average undergraduate student. As a result, many major stressors for undergraduate students (i.e., having to cook meals, learning to manage an academic workload, adjusting to a new, autonomous lifestyle at university or college) do not apply to graduate students, while new stressors emerge on their wake. Additionally, graduate students tend to fill various roles on campus, including student, researcher, teacher, and mentor for more junior students. Each of these roles produces stressors of its own.

The CFS-Ontario report, Not in the Syllabus, describes the results of an Ontario-wide survey conducted at 21 institutions to determine the most salient sources of stress and poor mental health in graduate students. Participants identified several factors that affected their mental health, including: bullying and harassment, time to completion anxiety, pressure to finish degree, fear of failure, and lack of support from academic institution [13]. Among the most prevalent factors that fell within the category of bullying and harassment (experienced or witnessed) were: verbal abuse (71%), pressure to overwork (70%), undermining behaviours (63%), sexism (55%), and racism (49%).

Given that graduate students' experiences are not necessarily equal to the experiences of other groups on campus, institutions should strive to empower smaller groups or societies on campus dedicated to serving the graduate student population (i.e., Society of Graduate and Professional Studies, Graduate Student Services, etc.) to conduct their own, more in-depth, investigations into graduate students' mental health needs. Empowering these groups to more closely monitor graduate students will allow institutions to obtain a "deeper dive" and clearer picture of the specific needs of graduate students, and therefore better support them.

CHECKLIST: EVALUATING MENTAL HEALTH AT YOUR INSTITUTION

☐	REGULAR SURVEILLANCE OF MENTAL HEALTH INDICATORS FOR STUDENTS ON CAMPUS
☐	REGULAR SURVEILLANCE OF MENTAL HEALTH INDICATORS FOR STUDENTS ON CAMPUS
☐	MENTAL ILLNESS PREVENTION SERVICES AND SUPPORTS
☐	EARLY DETECTION SERVICES AND SUPPORTS
☐	TREATMENT SERVICES AND SUPPORTS
☐	RECOVERY SERVICES AND SUPPORTS
☐	SUPPORT FOR BOTH UPSTREAM AND DOWNSTREAM APPROACHES
☐	FORMAL EVALUATION OF MENTAL HEALTH SERVICES, WORKSHOPS, AND PROGRAMS OFFERED

In this section, you will find guidelines that can assist post-secondary institutions with developing a mental health promoting campus. Section 3.1 emphasizes the importance of mental health awareness and education, with recommendations as to how to make improvements in this area at both the institutional level, as well as the student level. Section 3.2 outlines a series of guiding frameworks to assist institutions in developing comprehensive mental health strategies. Section 3.3 provides a selection of examples of existing mental health services and supports at post-secondary institutions.

3.1 MENTAL HEALTH AWARENESS AND EDUCATION

3.1.1 IMPROVING INSTITUTIONAL AWARENESS

Improving institutional awareness of mental health related issues is imperative in order to effectively target the mental health services and supports offered by the institution. Institutional awareness can be improved through the following four avenues.

Surveillance of Post-Secondary Mental Health

Understanding the state of mental health and illness on one's individual campus, as well as among the broader student population in Canada is an important first step to improving overall institutional awareness. This can be achieved through the use of resources such as the National College Health Assessment Survey (NCHA), conducted every three years among Canadian post-secondary students. The NCHA Survey contains over 300 questions evaluating both physical and mental health indicators. Institutions interested in participating must opt-in to the survey for a fee via the American College Health Association (www.acha.org).

As an alternative to the NCHA, institutions may also be interested in participating in the Canadian Campus Wellbeing Survey (CCWS), currently in development at the University of British Columbia. The CCWS is Canadian-made and focuses on helping institutions to better support student health and wellbeing. Interested institutions can sign up now to take part in the 2020-2021 deployment of the CCWS (www.ccws-becc.ca).

Finally, campuses should examine regular reports from their Student Wellness Services Department to remain informed about the mental health challenges students are experiencing most frequently. These records should be anonymized in order to protect students' confidentiality. Tracking this information can help institutions to improve the targeting of their mental health promotion and mental illness prevention activities year over year.

Understanding Stressors

Aside from obtaining a clear picture of the state of post-secondary students' mental health and tracking the most commonly experienced mental illnesses on campus, understanding the factors that contribute to students' overall mental health and wellbeing is also important.

Students experience a multitude of stressors during their time in post-secondary education. The link between chronic stress and mental health deterioration has been well established in previous research, while a connection between chronic stress and poor academic performance has also been suggested. In order to combat stressors and best align mental health promotion and mental illness prevention services and supports, institutions must first have a clear understanding of the stressors on their campus, including what causes stress for undergraduate students versus graduate students. The Post-Secondary Student Stressors Index (PSSI) was created to fill this gap, and is available for use at no cost through Dr. Brooke Linden (brooke.linden@queensu.ca).

The PSSI is a 46-item inventory of stressors covering five domains of stress: academics, learning environment, campus

culture, interpersonal stressors, and personal stressors. This tool was created over the course of two years by students, for students, through a combination of open-ended, online survey responses, focus groups, and individual interviews 9. The PSSI is delivered as an online survey, where respondents are invited to rate each stressor by severity and frequency of occurrence. Stressors can then be easily plotted by average severity and frequency on a simple 2x2 graph that can assist institutions with determining the areas most in need of improvement on their campus. As not all campuses are created equally, the PSSI is a useful tool for assisting institutions with improving the tailoring of mental health promotion and mental illness prevention services and supports.

Figure 3. Example of Distribution of Stressors on PSSI at a Canadian Post-Secondary Institution

Staff and Faculty Mental Health Education

While having a mentally healthy student body should be a priority for institutions, it is important not to overlook the equal importance of promoting mental health among staff and faculty. In order to best support students, staff and faculty must be mentally healthy themselves. This is particularly true for graduate students, who receive one-on-one support from their faculty supervisors and thesis committee members. Mandatory mental health education for staff and faculty is highly recommended.

Recognizing that staff and faculty members' time is both limited and valuable, effective training can often take place in 1 to 2-hour sessions at a convenient, on campus location. This training can and should be introduced as a mandatory component of new hire orientation, where staff and faculty are paid for their time spent in training. Ensuring that staff and faculty have an underlying, basic understanding of the mental health continuum, as well as knowledge of how to monitor and bolster their own mental health is a warranted expense for institutions to assume. Examples of mental health education that may be helpful for staff and faculty are included below.

A) Mental Health Awareness and Anti-Stigma Education

Education in this area will allow staff to better understand the concepts of mental health and mental illness as well as the role of stigma. In order for staff and faculty to effectively support students' mental health, they must first be able to recognize changes in their own mental health, and have the tools to employ healthy coping and resilience bolstering strategies

B) Identifying and Responding to Students in Distress

Being able to support students experiencing a deterioration in their mental health should be an important component of staff and faculty members' mental health training, particularly for those who will be providing direct support to students. This may be a training session designed and delivered by your institution's Student Wellness Services. Another excellent, free-of-charge resource in this area is More Feet on the Ground, developed by the Council of Ontario Universities, Brock University, and the Centre for Innovation in Campus Mental Health (www.morefeetontheground.ca). This program is comprised of four educational modules followed by quizzes to test your knowledge. After completing the program, users receive a certification as acknowledgement.

C) Mental Health First Aid Canada

Mental Health First Aid (www.mhfa.ca) is a nationally recognized program that aims to improve mental health literacy, and provide the skills and knowledge to help people better manage mental health problems in themselves, a family member, a friend, or a colleague. The program teaches people to: recognize signs and symptoms of mental health problems, provide initial help, and guide a person towards appropriate professional help. Typical delivery is two 12-hour sessions over a two-day period. Participants are awarded with a certificate for completion of the program. A MHFA one-hour "refresher" course is also offered for those who have already taken the full program.

Planning Action on Campus

There are several resources available to institutions who are interested in developing a mental health action plan on campus, including:

- **The JED Foundation Mental Health Action Planning Tool** (www.jedfoundation.org/wp-content/uploads/2016/07/campus-mental-health-action-planning-jed-guide.pdf)
- **The Healthy Universities Self-Review Tool** (www.healthyuniversities.ac.uk/toolkit-and-resources/self-review-tool/).

Both of these tools provide guidance on developing a "whole system approach" to campus mental health and wellbeing. The JED Foundation's planning tool includes strategies for promoting mental health and preventing mental illness, including increasing help-seeking, identifying students at risk, and preventing self-harm and suicide. The Healthy Universities Self-Review Tool offers case studies from post-secondary institutions who have implemented whole campus health policies and initiatives, which institutions may use as a jumping off point.

3.1.2 IMPROVING STUDENT AWARENESS

While improving the overall institution's mental health education and awareness, it is also important to ensure that students are similarly educated and well-informed regarding mental health and mental illness. While recent calls have been made to improve mental health education at the secondary level,[14] many students are arriving at post-secondary education (at both the undergraduate and graduate levels) with limited knowledge in this area.

Mandatory Mental Health Education

While many institutions offer mental health promotion services including mental health education, it is unlikely that every graduate student is being exposed to this valuable information. Some institutions have adopted a model whereby mental health training is incorporated as a component of the mandatory training students must take to hold a Teaching Assistant (TA) position. As TA positions are often included in many graduate student funding packages, this may be one way to ensure that many graduate students are exposed to mental health education. However, since not all graduate students will hold a TA position, another feasible option to ensure the widest audience is being reached may be to incorporate mandatory mental health education training as a component of graduate students' orientation weeks.

Stigma Reduction

There are two main types of mental illness-related stigma: public stigma, and self-stigma. Public stigma refers to the discrimination and stereotyping of individuals living with a mental illness, while self-stigma refers to the internalization of these negative stereotypes about oneself[15]. Individuals who experience stigma (either public or self-stigma) are significantly less likely to seek help for mental health related issues, which can lead to the development of severe mental illnesses [16]. In several studies, students have identified stigma as a primary barrier to help seeking [17–20], often citing concerns about confidentiality [21,22] which go hand-in-hand with perceptions of stigma.

Additionally, research has shown that mental illness-related stigma is stronger among particular subgroups of the post-secondary population. Male students, for example, tend to express a strong reluctance to seek help for mental health related challenges, and report intense stigmatization associated with men's emotional health [18,21,23]. Additionally, students belonging to cultures that emphasize health as a private, personal matter experience more self-stigma, and therefore seek help much less frequently than their peers [24–26].

Stigma reduction is therefore imperative to promoting a healthy campus environment and is identified as such in several

existing campus mental health strategies. Importantly, there may already be groups on your campus working to combat stigma. One such group is Jack.org, a non-profit organization that empowers student leaders to change the conversation around mental health and advocate for de-stigmatization and mental health promotion among post-secondary students. In addition to student-led initiatives like Jack.org, many institutions have begun to implement a "mental health week" (or "thrive" week) to support student mental health and reduce stigma.

Cultural Sensitivity

Over the past decade, the proportion of international students studying at Canadian post-secondary institutions has dramatically increased [27], with numbers continuing to climb as institutions strive to grow their international student cohorts [28]. However, along with this strategy comes the responsibility for institutions to acknowledge that international students may have unique needs compared to domestic students. It is vital that institutions be able to effectively answer the call for culturally sensitive and diverse student wellness services and treatment options, as well as work to educate domestic students in the areas of cultural sensitivity, diversity, and equity.

First Nations students within the post-secondary community have also been identified as being particularly at risk for the development of mental health issues [29,30], and have unique needs of their own. The First Nations Mental Wellness Continuum Framework is an educational resource for institutions and students alike to improve their cultural competency regarding the perceptions of mental health and holistic well being among First Nations [31]. Included in this framework is the First Nations Mental Wellness Continuum, a model based in culture and comprised of several foundational elements to supporting First Nations mental wellness, highlighting the interconnection between mental, physical, spiritual, and emotional behaviour.

3.2 ADOPTION OF A COMPREHENSIVE MENTAL HEALTH STRATEGY

There are a number of resources available to assist post-secondary institutions with developing a comprehensive mental health strategy. The following initiatives listed here are available for free, and can provide institutions with a guiding framework from which to work.

The Okanagan Charter

In 2015, experts representing educational institutions and health organizations from over 45 countries came together to collaborate on the development of the Okanagan Charter: An International Charter for Health Promoting Universities and Colleges 32. The Okanagan Charter is a framework which provides institutions with a common language and principles to become a health and wellbeing promoting campus. The Charter outlines two main calls to action: 1) to embed health into all aspects of campus culture, across the administration, operations and academic mandates; and 2) to lead health promotion action and collaboration locally and globally. The Charter is available for public download from the University of British Columbia (https://open.library.ubc.ca/clRcle/collections/53926/items/1.0132754).

The Okanagan Charter is endorsed by several national and global leaders in mental health and wellness, including the World Health Organization, CACUSS, the Canadian Mental Health Association, and Healthy Minds, Healthy campuses. As of January 2020, 21 institutions have adopted the Charter.

National Standard for the Psychological Health and Safety of Post-Secondary Students

In 2017, the Mental Health Commission of Canada began overseeing the development of Canada's National Standard for the Psychological Health and Safety of Post-Secondary Students ("the Standard"). The Standard , funded by Bell Canada, RBC Canada, and the Rossy Family Foundation strives to provide post-secondary institutions with a set of voluntary guidelines designed to achieve the following goals:

- Raise awareness and decrease stigma around mental health;
- Increase access to student supports, both on and off campus;

- Promote life and resiliency skills students can use at school, work, and in daily life;
- Provide healthier and safer institutional environments; and
- Improve opportunities for student success.

The Standard is set for release in 2020, and was developed in consultation with hundreds of subject matter experts, including researchers, mental health professionals, and students. For further information on the Standard, visit the Mental Health Commission of Canada (https://www.mentalhealthcommission.ca/English/studentstandard).

Health Promoting University and Colleges Network

This network, initiated in 2016, aims to engage institutions of higher education to advance the health-promoting campuses movement within Canada. The network is accessible online (https://healthpromotingcampuses.squarespace.com).

In addition to resources for developing a comprehensive mental health strategy, the network also provides links to post-secondary institutions across Canada that have made commitments towards actively promoting health and wellbeing on their campuses. In light of the increased awareness of mental health related challenges among post-secondary students, several Canadian campuses have developed their own comprehensive, campus-wide wellness frameworks. Many of these frameworks incorporate principles outlined in the previously listed initiatives, and are inclusive of both staff and student wellness, acknowledging that in order to best support students, the mental health of post-secondary staff and faculty must also be considered.

3.3 EXAMPLES OF MENTAL HEALTH SERVICES AND SUPPORTS

This section provides **examples** of existing campus support services at post-secondary institutions across Canada. Services and supports are categorized into subsections as per the Mental Health Service Continuum introduced in Chapter 2. The goal of this section is to provide institutions with models of existing services and supports within each category of service delivery that may be adapted or expanded upon.

3.2.1 PROMOTION AND PREVENTION

Mental Health Education

The majority of post-secondary institutions provide workshops and/or downloadable resources on general mental health education, available to all students for free. Common topics include: general mental health knowledge, recognizing symptoms of poor mental health, how to support a peer who might be struggling with their mental health, anti-stigma education, how to develop personal resiliency, alcohol and substance use education, and official Mental Health First Aid courses (which may be associated with a fee). Some institutions offer specific workshops for international students, Indigenous students, and other student sub groups.

INSTITUTION	EXAMPLE
University of Ottawa	Health Promotion Services on Campus (mental/physical) https://www.uottawa.ca/health/students
Brock University	Wellness Tips and Resources https://brocku.ca/mental-health/wellness/
Western University	Mental Health Resource Guide for Students https://www.uwo.ca/health/MHWRG2018.pdf

Healthy Living and Self-Care

Many institutions also offer health promotion workshops that focus on elements of physical health, including healthy eating (e.g., cooking classes and nutritional guidance), making time for physical activity, smoking cessation, and healthy sleep strategies. Given the interrelation of mental and physical health, it is important for health promotion activities to educate students about both.

INSTITUTION	EXAMPLE
Queen's University	Peer Health Educator Workshops (physical health) https://www.queensu.ca/studentwellness/health-promotion/peer-health-educators/workshops
University of British Columbia	Sleep for Success https://students.ubc.ca/health/health-topics/sleep-success Food and Nutrition https://students.ubc.ca/health/health-topics/food-nutrition

Mental Health Awareness Campaigns

Many post-secondary institutions across Canada host week-long mental health awareness campaigns to support student wellness. These "mental health weeks," or "thrive" weeks, include mental health education, workshops and activities, and often are designed to coincide with events like Bell Let's Talk Day or stressful periods, such as the week leading up to exams.

INSTITUTION	EXAMPLE
Simon Fraser University	Thrive Week at SFU https://www.sfu.ca/students/health/events-and-workshops/thrive-week-.html
McMaster University	Thrive Week at McMaster https://wellness.mcmaster.ca/thriveweek/
Western University	Bell Let's Talk Week 2020 https://www.csmh.uwo.ca/resources/bell-lets-talk.html

Coping Resources

Many post-secondary institutions offer a series of coping resources for students, designed to build resilience. At some institutions, this may take the form of activities or workshops for tools like mindfulness, meditation or yoga, stress reduction, and time management skills. Other institutions have begun to implement pet therapy programs as a stress reduction measure, partnering with local animal shelters. Finally, institutions in Ontario promote the Good2Talk hotline for students who are in need of assistance.

INSTITUTION	EXAMPLE
All Ontario Institutions	Good2Talk Hotline https://good2talk.ca/
Simon Fraser University	Dog Therapy Program https://www.sfu.ca/students/health/events-and-workshops/dog-therapy.html
Carleton University	Koru Mindfulness Program https://carleton.ca/health/koru/

Peer Support

Peer support programs are increasing in popularity. Peer mental health support programs exist on several campuses, where student leaders are trained to provide empathetic support to their peers. In another model, mentorship programs have been implemented where incoming graduate students are partnered with older graduate students who are further along in their program to guide them through the expectations and demands of graduate school. Finally, culturally based peer support is increasingly provided at institutions (e.g., international student peer support, First Nations sharing circles).

INSTITUTION	RESOURCE
McMaster University	Elder in Residence Program https://indigenous.mcmaster.ca/indigenous-service-and-community/elder-in-residence-program
Guelph University	Peer Support Network https://wellness.uoguelph.ca/ssn
Lakehead University	Peer Mentorship Program https://www.lakeheadu.ca/programs/departments/history/undergraduate-programs/peer-mentorship

3.2.2 EARLY DETECTION

Early Alert Systems

Several post-secondary institutions have begun to adopt an early alert system, where faculty and staff who are concerned about a student may discretely and anonymously report their concerns to the Student Wellness Centre (e.g., UBC's "Early Alert" system). Additionally, some schools offer a similar service where students can submit concerns about fellow peers (e.g., Carleton University's "Care Report" system).

The Centre for Innovation in Campus Mental Health (CICMH) offers a free, introductory webinar on how to develop a campus "early alert" system for institutions who may be interested (https://campusmentalhealth.ca/webinars/developing-a-campus-early-alert-system/).

INSTITUTION	RESOURCE
University of British Columbia	"Early Alert" system (staff/faculty concern) https://facultystaff.students.ubc.ca/systems-tools/early-alert
McGill University	"Early Alert" system (staff/faculty concern) https://www.mcgill.ca/deanofstudents/staff/early-alert-system
Carleton University	"Care Report" system (peer concern) https://carleton.ca/studentaffairs/care-report/

Suicide Prevention

Many post-secondary institutions have begun to provide suicide prevention training to both staff and faculty. Among these specialized training workshops are SafeTALK and ASIST (Applied Suicide Intervention Skills Training).

INSTITUTION	RESOURCE
University of Saskatchewan	SafeTALK Suicide Prevention Training https://students.usask.ca/events-calendar/2019/02/SAO-safeTALK.php
University of Calgary	ASIST Suicide Prevention Training https://www.ucalgary.ca/wellness-services/staying-healthy/learning/workshops-training/asist

Residence Staff Training

Similar to an early alert system, many institutions have incorporated training for staff in student residences (e.g., floor monitors, RAs). The purpose of this is to educate staff on the signs and symptoms of mental health deterioration so that they may detect first-year students who may be struggling.

INSTITUTION	RESOURCE
Guelph University	Mental Health Training Suite for Student Leaders/ Mentors https://www.uoguelph.ca/studentaffairs/mental-health-and-wellness-training-student-leadersmentors

3.2.3 TREATMENT AND RECOVERY

Counselling and Psychiatric Services

The majority of institutions across Canada provide limited access to mental health counselling, therapy, and psychiatric services to their students. Therapy is offered in a one-on-one setting or in groups, and typically by appointment. In order to manage high demand, institutions often limit the number of sessions a single student can receive, in addition to managing long wait lists. Some schools, in an attemptin attempt to meet demand and minimize wait times, have begun to partner with online therapy programs such as TAO (Therapy Assisted Online) and Feeling Better Now (FBN). These resources, in addition to 24/7 helplines found in Section 6 of this Toolkit, can be helpful when mental health crises strike outside of regular business hours.

INSTITUTION	RESOURCE
Queen's University	Therapy Assisted Online (TAO) https://www.queensu.ca/studentwellness/TAO
Guelph University	Feeling Better Now (FBN) https://www.mystudentplan.ca/uofguelph/en/mywellness
University of Waterloo	Counselling Services at uWaterloo https://uwaterloo.ca/campus-wellness/counselling-services

Specialized Therapy

Outside of basic mental health counselling, many institutions offer specialized therapy. For example, faith-based counselling, trauma counselling (for victims of harassment, assault, or discrimination), and culturally specific counselling (e.g., counsellors specializing in Indigenous mental health or international student mental health). In addition to these specialized areas, the majority of institutions also offer academic counselling through Academic Success Centres, designed to support students who are struggling with their coursework (typically delivered by appointment, or through walk-ins).

INSTITUTION	RESOURCE
Western University	International Student Counselling https://www.uwo.ca/health/psych/international_students.html
University of Victoria	Indigenous Counselling https://www.uvic.ca/services/indigenous/students/supports/counselling/index.php

Referrals and Community Partnerships

In order to meet the growing command for counselling services and mental health treatment on campus, several institutions have begun to form partnerships with community organizations, where clients' care can be transferred when and if it is required. Several institutions in Ontario have formed partnerships with local Canadian mental Health Association chapters to provide after hours and crisis support for at-risk students, as campus mental health services do not run 24/7. Additionally, forming community partnerships like this also ensures that graduating students who have been receiving treatment on campus do not fall through the cracks, and instead experience continuity of care upon leaving university.

The Centre for Innovation in Campus mental Health (CICMH) has developed a helpful guiding document for institutions interested in cultivating community partnerships. The document can be accessed for free online (www.campusmentalhealth.ca/wp-content/uploads/2019/11/Campus-Community-Partnerships-V6.pdf).

3.4 INSTITUTIONAL POLICIES, PROCESSES, AND PROCEDURES

Applying a Mental Health Lens to Campus Policies

In 2014, OCAD U and Ryerson University released a report on policy approaches to post-secondary student mental health [33]. The goals of this report were to review existing student mental health policies in Canadian post-secondary institutions, and educate the reader on the ways in which typical university policies may impact student wellness. In addition to this, the report provides a conceptual framework for understanding the types of policies that have implications for student mental health and mental wellness.

The authors differentiate between individual and universal policies. Individual policies tend to be more reactive in nature and are concentrated on individual needs. These are policies that specifically support individual students experiencing mental health concerns, such as: accessibility and accommodations, medical leave, privacy and confidentiality, policies for supporting a student in crisis. In contrast, universal policies are more proactive in nature, establishing broader institutional processes, rules, and structures that support all students in thriving academically and emotionally. Examples include: creating fair and flexible processes for grading and conflict resolution (academic policies, student code of conduct), and promoting inclusive curricula and pedagogy (academic principles).

The authors further refined existing mental health policies as taking a consolidated or mainstreamed approach to design, implementation, and evaluation. Where a consolidated approach brings together all policies and procedures pertaining to student mental health, a more mainstreamed approach applies a mental health lens to all institutional policies.
Following their review, the authors concluded that most Canadian policies focused on individualized care, rather than a universal approach, with the vast majority falling into the realm of disability and accommodations [33]. Existing policies were found to cover the following four themes: accommodations, voluntary and involuntary leave, student code of conduct, and confidentiality and privacy. However, the authors noted that increasingly, a growing number of institutions are attempting to integrate a mental health perspective into institutional policy review and development, applying an overall wellness promotion approach that supports the needs of the campus as a whole [33].

Recent work in the area of Canadian post-secondary mental health and wellness suggests that a mainstreamed approach to policy development is recommended, particularly with the increasing development of comprehensive mental health action plans at individual institutions. Given the multitude of areas for policymaking in the posts-secondary setting, it is likely that most institutions will seek to develop both individual and universal policies, depending on the topic at hand.

Some areas where policies should be developed, incorporating a mental health lens include:

- **Minimum Funding Packages for Graduate Students**
  *All graduate students should receive minimum funding packages in the same amount, regardless of mental health status. Temporary leave for mental health-related reasons shall not result in the removal or reduction of funding packages. *Note: This policy may be determined at the Faculty or even Departmental level depending on where budgetary decisions lie.*

- **Student Academic and Non-Academic Misconduct**
  Students with declared mental illnesses shall be held to the same standard as those without for issues

pertaining to student academic and non-academic misconduct.

- Employment Equity Policy
  Students with declared mental illnesses upon entry to university, or students who develop a mental illness over the course of their post-secondary career should not be penalized during application processes.
- Absences from Work Policy
  All students should be equally entitled to protections for absences from work and/or academics (i.e., parental leave, sick leave, bereavement leave, etc.), similar to university employees. Temporary mental health leave should be made available, and should not impact students' academic standings, funding packages, or employment statuses.
- Sexual Harassment and Discrimination
  All students should be equally entitled to protections from sexual harassment and discrimination, regardless of mental health status. All students, regardless of mental health status, will be held to the same no-tolerance policy regarding acts of sexual harassment and discrimination.
- Occupational Health and Safety
  All students should be equally entitled to workplace health and safety protections, which should include the right to refuse work that exceeds hours contracted for, or that is not explicitly denoted on one's contract.
- Student Accommodations
  All students should be equally entitled to receiving formal academic accommodations, where applicable. Faculty members will respect formal accommodations, and are responsible for meeting students' needs and for maintaining students' privacy and confidentiality. Students will not be penalized for having academic accommodations.
- Alcohol and Substance Use
  Students with declared mental illnesses shall be held to the same standard as those without for issues pertaining to alcohol and substance use misconduct, with the exception of those who hold a medical prescription (i.e., cannabis use for anxiety).
- Workplace Violence Policy
  All students should be equally entitled to protections from workplace violence, regardless of mental health status. All students, regardless of mental health status, will be held to the same no-tolerance policy regarding acts of workplace violence.

3.5 ASSESSING STUDENT WORKLOADS AND ACADEMIC EXPECTATIONS

3.5.1 STUDENT–SUPERVISORY RELATIONSHIPS

The student-supervisory relationship can be a key source of stress over the course of a student's graduate career, particularly if the fit between student and supervisor is unsuitable. In fact, on the 2016 Canadian Graduate and Professional Student Survey, only 50% of student respondents indicated that they would select the same faculty supervisor again were they to start their graduate career over [34]. In extreme cases, graduate students have reported being subjected to academic bullying in the form of a supervisor taking credit for a student's work, a student being berated for not meeting expectations, or feeling that a supervisor's behaviour was otherwise unethical [35]. More frequently, students report issues around lack of mentoring and poor communication.

Strengths and Weaknesses in Academic Supervision

Overall, advisors appear to be well-versed in the academic requirements for students (e.g., providing feedback and constructive criticism, providing helpful advice for qualifying examinations and dissertation development), but perform less well at tasks related to mentorship beyond academia. For example, 30% of students indicated that they disagreed with the following statement: "my advisor encouraged discussions about the current job market and various career prospects" [34.]

This issue of mentorship applies not only to the end of a student's graduate career, but throughout its lifespan. Graduate students require mentorship in many areas over the course of their program: support and guidance in learning to manage the graduate school workload; meeting major early milestones like comprehensive examinations and thesis proposals; and support for continual development over the course of one's graduate student career (i.e., preparing

publications, conference presentations, etc. to build a competitive CV).

Communication Challenges

Despite effective and regular communication being one of the major expectations graduate students have of their supervisors, over one fifth of respondents on the Canadian Graduate and Professional Student Survey indicated meeting with their advisor less than once per month to discuss ongoing research, with meeting frequencies slightly higher when the intention of the meeting was to discuss the dissertation [34]. This is particularly concerning for master's level students who are usually only conducting one year of research (usually following one year of coursework). In these cases, meeting with an advisor less than once per month (<10-12 occasions over the course of a year) is unlikely to constitute enough time to build a strong working relationship, as well as fit in opportunities for mentoring beyond academia. While it certainly stands to reason that there may be periods where frequent meetings are not required, regularly scheduled meetings can be helpful to support student-supervisory communication (beyond that which can be achieved in a quick e-mail), manage expectations, and monitor student progress. As a result, many institutions have incorporated regular meetings as a criterion in their student-supervisor policies, agreements, or frameworks.

Sample Student-Supervisory Policies

For institutions looking to develop a policy or framework in this area, we have included below a few examples of relevant documents from post-secondary institutions across Canada.

- **Queen's University Graduate Supervision Handbook**
  https://www.queensu.ca/sgs/sites/webpublish.queensu.ca.sgswww/files/files/Students/Aug%202018%20Graduate%20Supervision%20Handbook-electronic(1).pdf
- **University of British Columbia Graduate Student and Supervisor Agreement**
  https://www.grad.ubc.ca/sites/default/files/forms/student_supervisor_agreement.pdf
- **UBC's Guidelines for Building an Effective Graduate Student-Supervisor Relationship**
  https://www.grad.ubc.ca/faculty-staff/information-supervisors/building-effective-graduate-student-supervisor-relationship
- **Memorial University's Responsibilities of Supervisors and Graduate Students**
  http://www.mun.ca/sgs/responsibilities.pdf

3.5.2 EXTENSION POLICIES

Many post-secondary institutions have policies surrounding extensions for late coursework. Typically, among these are formal academic accommodations and extenuating circumstances policies. In this section, we would propose a third extensions policy be added to those currently in formal use in institutions: discretionary extensions.

Academic Accommodations

The majority of extension policies at Canadian post-secondary institutions pertain to formal academic accommodations. These are typically granted on a case-by-case basis to students with learning, physical, or mental disabilities, and fall into the realms of: teaching and learning (e.g., note taking), assessment and evaluation (e.g., private space to write exams), environmental (e.g., strategic seating), or auxiliary services and supports (e.g., sign language interpreters, alternate format text, assistive technology). Academic accommodations may be granted on a permanent, interim, temporary or retroactive basis with supportive documentation from a health care professional.

Extenuating Circumstances Policies

Some institutions have incorporated "extenuating circumstances" policies. These policies arethough frequently these are applied only to physical health ailments or unpredictable leaves (i.e., bereavement leave due to a death in the family) and require the provision of a doctor's note from the student for a due date to be waived and extension to be granted. In keeping with the highlighting of universally applying a mental health lens to all institutional policies, as discussed in Section 3.4, we propose that extenuating circumstances policies be applied to unexpected mental health leaves, in addition to physical health leaves (note that this is already the case at some institutions). Note that transportation issues, personal or family events (vacations, weddings), and technological issues are rarely eligible as extenuating circumstances. Extensions granted for extenuating circumstances require the submission of official paperwork.

Discretionary Extensions

Here, we propose a third type of extension policy be integrated into post-secondary institutions: discretionary extensions. This type of extension would be granted to students experiencing unexpected disruptions in their ability to complete academic coursework, on a case-by-case basis at the discretion of the course instructor. Unlike academic accommodations and extenuating circumstances, this type of extension would not require medical or other formal documentation to be granted.

This flexibility would not only allow course instructors to provide extensions at their own discretion (student by student and class by class), but would also serve to support graduate students experiencing an acute and unexpected state of mental distress, or an unmanageable workload. Discretionary extensions are already being unofficially provided by many course instructors in many post-secondary institutions, however, this is not currently a recognized policy.

4.1 GRADUATE STUDENT ASSOCIATIONS

The purpose of Graduate Student Associations (as well as broader Student Unions that serve the entire student population) is to advocate for the needs of students, act as a resource, and provide supports and services that improve the overall student experience at a post-secondary institution. These organizations can be champions for graduate student mental health through a number of avenues, including: designing mental health campaigns tailored to graduate students, lobbying the Canadian government for students' mental health and wellness rights, and advocating the administration.

4.1.1 DESIGN A GRADUATE STUDENT MENTAL HEALTH CAMPAIGN

To design an effective graduate student mental health campaign, graduate student associations should refer to the lessons communicated in Sections 2 and 3. To build a campaign to last, consider three main factors: scope, sustainability, and scalability.

Scope

Scope refers to how narrow or broad your campaign or project is in terms of either the issues it addresses, the activities it is comprised of, or a combination of both. When deciding on the scope of your project, consider the following points

1. **Know your target population.**
   What are graduate students' most in need of? What can you do to help? Design your campaign or program around this.
2. **Have a specific goal in mind.**
   While there are likely several areas that could be addressed, resist the temptation to try to do everything at once. Select one "problem area" to address. Otherwise, you run the risk of trying to do too many things and stretching yourself too thin.
3. **Have a communication plan.**
   Universities are big places, with varied student groups (even within graduate studies alone). Ensure that you have developed a communication plan that will reach all of your graduate students, ensuring that they are each offered a way to participate and be involved (including off-campus, online, and part-time students).

Sustainability

Sustainability refers to the lifespan of your campaign or program. Whether your project will survive in the long run depends on thoughtful planning.

1. **Don't neglect the importance of program evaluation.**
   When developing your program or campaign, keep future evaluation work in mind. Develop an evaluation plan that will allow you to provide evidence that your campaign is effective and valuable. Positive evaluation results will help you to secure funding to support your program.
2. **Secure renewable funding.**
   Many excellent programs or campaigns are launched by students, but are then unable to continue due to lack of funding. Donations accrued through fundraising initiatives make for great start-up funds, but it is wise to seek renewable funding as soon as possible in order to ensure the future of the program. Alternatively, try to design a program or campaign that does not require financial investment to keep it going.
3. **Have a change management plan.**
   Incorporate a "binder pass" or some other form of transferring the campaign/program management to a new project lead every year to avoid losing momentum.
4. **Secure administrative buy-in.**
   With administrative buy-in, your program or campaign is likely to be more stable in the long-run. Consider partnering with your campus' Student Wellness Centre or Student Health Centre, which may expand your reach and help you to reach those students who may be most in need of the messaging your campaign or program is sending.

Scalability

It's a good idea to start small until you know your program is sustainable. Once you can be confident in the stability of the program, however, you may want to consider scalability. Scalability refers to the reach of your campaign or program.

1. **Expand your goals.**
   Can your sustainable program or campaign be expanded? Are there other important messages (or student needs) that can be added to your existing campaign or program?
2. **Expand your audience.**
   Are there other student groups that might benefit? Remember that if you do plan to expand your campaign/program, it's important to circle back to considerations around scope and sustainability.

4.1.2 LOBBYING THE GOVERNMENT

The Canadian Federation of Students regularly represents students by bringing concerns directly to the government on Parliament Hill and provincial legislatures. The CFS meets regularly with Federal Members of Parliament (MPs) and Members of Provincial Parliament (MPPs), as well as other government officials, civil servants, and political representatives.

Each year, the CFS hosts provincial and national "lobby weeks" where students from across the country have the opportunity to meet with MPs and MPPs with requests for how to better the lives of post-secondary students. Lobby weeks are typically organized in the early Spring in advance of the federal budget.

The CFS's 2020 lobby document, "Be Bold: Education and Climate Justice for All," was provided to MPs and Senators the week of Feb 17, 2020. This document included recommendations pertaining to federal funding and tuition fees for post-secondary education, Indigenous access to education, graduate student research funding, international students, climate justice and student housing. The document can be viewed here: www.cfs-fcee.ca/wp-content/uploads/2020/02/CFS-Lobby-Document-2020.pdf

4.1.3 LOBBYING THE ADMINISTRATION

In addition to lobbying the government, Graduate Student Associations may also lobby their post-secondary institution's administration directly. This may look different on each campus given that every campus has unique needs and realities. Members of the CFS have previously lobbied their administrations for things such as campus wide committees and initiatives to support campus and student wellness and more diverse counselling services and supports.

The CFS provides guidance on how to take action on campus. The **Organizing Guide** is designed to give Student Unions and other student organizations a toolkit with which to run and promote student union membership, run effective campaigns on campus, and engage in activism on behalf of post-secondary students 36. The document provides guidance on how to best leverage campaign tactics, including educating (e.g., leafleting, class talks, presentations), agitating (e.g., petition collection, town halls, testimonials), and organizing (e.g., walk outs, rallies and protests).

This section of the toolkit contains information sheets on common stressors among graduate students [9,13,37]. These information sheets are not designed to provide exhaustive information on each topic, but rather to give students some basic guidelines for how to manage stressors.

5.1 STRESS MANAGEMENT

Definition

Stress is a normal response to a challenging event, or a constant build-up of demanding events. Sometimes, stress can be a good motivator, leading to increased productivity, growth, and motivation (this is termed "eustress"). However, negative, long-term stress can lead to a deterioration of both mental health and physical health, so it's important to learn some stress management techniques.

Common Challenges

Feeling Overwhelmed

Sometimes it can be difficult to take a step back when we become so stressed out that we are feeling overwhelmed.

Solution: Recognize that some degree of stress in life is normal, and that learning to manage your stressors is part of the process. Take a step back and determine what your stressful triggers are. Then, make a plan to address them. If the stress you are experiencing is becoming debilitating (i.e., you are not able to cope on your own), it may be time to reach out to your family doctor or other health provider.

School is Stressful

By nature, achieving your post-secondary education is a challenging, stressful task. Between juggling courses (both those you are taking, and those you're assisting with), research, and other academic responsibilities, some degree of stress is to be expected. This is true of life beyond post-secondary as well.

Solution: As noted above, a certain degree of stress is normal in life. Time management skills and the ability to prioritize are key to managing multiple demands and reducing stress. Though tempting, stay away from negative coping mechanisms in favour of positive ones. Some examples are listed below.

Heavy Workload

Many graduate students carry heavy workloads, from regular coursework, to dissertation writing and research, to research projects on the side, to teaching responsibilities, publications, and conferences. Sometimes everything seems equally important to your graduate career.

Solution: There are certain things graduate students have to get done (i.e., coursework, dissertation research). However, if your stress is reaching an unmanageable point, it's time to have a conversation with your supervisor about your workload. After all, mentoring you and managing workload expectations is what your supervisor is there for.

Strategies

- **Relaxation.**
  Particularly if the stress you are feeling is becoming overwhelming, some simple relaxation techniques can make a big difference. Some options include deep breathing (or technical breathing), progressive muscle relaxation, yoga practice, and meditation.
- **Hobbies.**
  Turn to some of your favourite hobbies for a short period of time to reduce the amount of stress you're feeling (e.g., artwork, knitting, board games, or reading).
- **Energy boosters.**
  Eating a nutritious diet, getting enough sleep, and engaging in physical activity all act as energy boosting, stress-busting activities.

- **Time management**
  Improve your time management skills by learning to "block" your day into periods of time dedicated to specific tasks or to do's. Not only will this keep you on a schedule and potentially improve your productivity, it will give you a sense of control over your list of to do's.
- **Something's got to give.**
  If you're finding your stress impossible to manage, ask yourself whether it's possible that you simply have too much on your plate. In this case, you will need to do some prioritizing – if something's got to give, what can you drop (i.e., an extracurricular activity, a publication that has been stalled for months)?

5.2 SELF–CARE

Definition

Self-care consists of any activity done deliberately to take care of one's mental, emotional, and physical health. While many of us are experts at taking care of those around us, we often do so at the expense of our own mental, emotional, or physical health. Self-care is an important component of health promotion; it is vital that we put an effort into carving out time for ourselves to recharge and relax.

Research shows that individuals who engage in regular self-care have better mental and emotional health outcomes. One study conducted among Australian post-secondary students found that those with the healthiest self-care behaviours demonstrated the lowest levels of anxiety, depression, stress, sedentary behaviour and binge drinking [38].

Common Challenges

Finding Time

When managing what feels like an already very full schedule, carving out time for self-care is often one of the biggest perceived barriers for post-secondary students. Time management is one of the most important, practical skills you can develop during your post-secondary career.

Solution: One simple way to start putting time aside for self-care is to start a "no [x] after [y] PM" rule. For example, no checking or responding to e-mails after 8PM. By removing small (but surprisingly time consuming) tasks like this, you free up time for self-care.

Battling Guilt

Feeling guilty about taking time for one's hobbies or interests can be a major barrier for achievement-oriented students, who likely feel like their time might be better spent on upcoming projects and deadlines.

Solution: The fact of the matter is we will always have competing priorities, and it's okay to take some time for yourself. In fact, many studies have shown that taking time for self-care leads to increased productivity. Make a concerted effort to block off some time for self-care at the end of your day. Start with 15 minutes, and slowly work up to one hour.

Forcing It

If you find you are forcing yourself to engage in something for "self-care" purposes – you are not practicing self-care! Hate running? Maybe going for a jog isn't the best option for your physical activity mood-booster.

Solution: To practice self-care, engage in activities that are enjoyable for you. For some, that might be taking a yoga class, but for others, this might look more like reading a few pages from a good book or watching an episode of your favourite TV show.

Strategies

- **Relaxation.**
  Read a book, watch an episode of your favourite TV show, or do a five-minute meditation.
- **Soothing activities.**
  Get a massage, take a bubble bath, or take a quick nap.
- **Get enough sleep.**

It's important to let your body properly recharge. Adults should aim for 7-9 hours of sleep per night.

- **Exercise.**
  Endorphins are a mood-booster, and keeping your body moving is important for overall health. Take a yoga class, go for a walk, or join a group exercise class.
- **Socialize.**
  Spending time with friends and family is another important mood booster. Call your mom, grab a coffee with a friend, or take a walk with a peer on your lunch.

5.3 WORK LIFE BALANCE

Definition

Achieving a clear separation between work life and home life can be a major challenge for graduate students. Often, the nature of graduate school is such that students feel they are never "off the clock," unlike more traditional careers where working hours are clearly laid out (i.e., 9AM - 5PM). As a result, many graduate students experience their work and home lives bleeding into each other.

While challenging, it is important to set aside clear time frames for "work" and "home." Lack of a healthy work/life balance can lead to burnout and negative mental health consequences [39.]

Common Challenges

Feeling Guilty for Not Working

A common challenge to achieving that ideal work/life balance for graduate students is the ever-present feeling that they "should be working" or "should be writing". As a result, taking any time "off" from work can result in feelings of guilt.

Solution: Put simply, graduate students must strive to change their mindset on the idea that they must always be working. Yes, there is a lot of work to be done, particularly in an ever-increasingly competitive academic environment. However, the consequences of not taking a break here and there can be dire. As recommended for finding time for self-care, one simple way to start working towards a work/life balance is to put a "no [x] after [y]" rule in place (i.e., no reading or answering e-mails after 8PM).

Pressure from Supervisor

Sometimes, graduate students feel that they must meet, and in some cases exceed, their supervisor's expectations.

Solution: A supportive supervisor should always be available to discuss your workload and progress. If you are feeling overwhelmed and finding that achieving a work/life balance is not possible given your current workload, it's time to sit down with your supervisor to see what can be pushed to next semester or handed off to someone else so that you can do your very best work on your most important tasks (i.e., your dissertation).

Comparing Myself to Others

One major challenge with graduate studies is that often, your peers seem as or more driven to succeed than you. This can lead to unhealthy comparison to others (i.e., I'm not being as productive, working hard enough, or doing enough to further my academic career).

Solution: Just as with social media, we must be cautious with comparing ourselves to others. Everyone tends to put their best outward-facing self forward at work, particularly if they are working in a competitive environment, like academia. However, that doesn't mean that they aren't struggling with their own challenges, or even feeling the exact same way as you! Research is often a slow process, so celebrate the small successes, and celebrate those of your peers'. Forming a supportive, collaborative environment in your lab or research group may go a long way to reducing negative comparisons.

Strategies

- **Boundaries.**
  Set aside places in your home where work is never done. For example, never do work in your bedroom if it can be avoided. If you have a separate room in your home that can serve as an office, ensure that you only do work there. Similarly, try not to engage in "home" activities at the office.

- **Step away from the phone.**
  Set aside places in your home where work is never done. For example, never do work in your bedroom if it can be avoided. If you have a separate room in your home that can serve as an office, ensure that you only do work there. Similarly, try not to engage in "home" activities at the office.
- **Set a goal outside of work.**
  Setting a personal goal to reach outside of academic responsibilities (i.e., running a 10km race, finishing a knitting project, finishing a book for book cub) can help you to block your time more effectively. If you have to set aside time for training, this will force you to take a step back from work during that time.

5.4 FINANCIAL LITERACY

Definition

Financial literacy refers to the ability to understand and apply financial skills to managing one's money, including budgeting and managing debt. Financial concerns are a major source of stress for post-secondary students [40,41]. Today, the necessity of having to work in addition to attend classes has been linked to students feeling overwhelmed as well as experiencing increased stress levels. In contrast, financial confidence has been found to be a significant contributor to students' positive emotional wellbeing [42–45].

Common Challenges

Not Knowing Who to Ask

Depending on the nature of our financial literacy needs, it can be challenging to figure out who to ask for help. Don't be afraid to ask for help – it's important to take control of your finances!

Solution: If your questions have to do with student loans, it may be prudent to talk to a customer service agent with the organization you take your loan from (i.e., OSAP in Ontario), or to a representative from your bank. If your questions relate to more long-term or complex financing goals, your best bet is to speak with your bank. If your questions are more straightforward, or short-term (i.e., learning how to budget or set aside some savings), you might want to talk to your parents, a frugal friend, or investigate whether or not your institution offers financial literacy education for students on campus.

Feeling Embarrassed

Talking about money can be stressful for some people, particularly with friends and family. As a result, some graduate students may choose to avoid talking about money completely.

Solution: It's important to remember that having a clear understanding and control over your personal finances is an important life skill. There is no rule that says you have to discuss your finances with your friends and family, but speaking to a financial advisor should not come with a layer of guilt or embarrassment – these representatives are there for exactly this purpose.

Strategies

- **Finance workshops.**
  Ask your graduate student association (or equivalent) if there are financial workshops offered for graduate students at your post-secondary institution. Many institutions offer some form of financial literacy education for students for free, whether it be on tax information, basic budgeting, or student loans.
- **Career planning.**
  Often for graduate students, stress associated with finances stems from concerns surrounding obtaining a job following graduation (this is often linked to stress around having to pay back hefty loans). One way to counter this stress is to speak with a career counsellor at your post-secondary institution. Feeling more confident about your job prospects post-graduation may help to alleviate some of the stress associated with finances.

5.5 SOCIAL MEDIA

Definition

While social media has helped us to become more connected to our friends and family than ever, it has also had some unexpected negative consequences on our mental health. Students have reported that comparing themselves to others based on peers' social media accounts is a growing source of stress [9].

It's important to recognize that along with social media profiles comes an element of performance. Rarely do individuals post about negative goings on in their lives, which results in presenting an outward picture of perfection. In the context of graduate studies, this might mean that peers post exclusively about the papers successfully published, grants won, and conferences they've had the opportunity to attend, but not about rejected manuscripts, funding challenges, or exhausting work schedules that led to these achievements. In addition to the comparison aspect, spending time with social media can also become so all-encompassing that it begins to interfere with other activities that improve our overall health (i.e., exercise, taking time for hobbies, spending time outdoors, and more).

Common Challenges

Fear of Losing Connection

Now that we have grown so accustomed to constant connectivity, the idea of leaving our phones behind – or even limiting our use of them – can seem very challenging. In addition to this, many of us are now tethered to our devices through work responsibility.

Solution: Start small. Leave your phone behind while you go to grab a coffee, or while you go out to lunch with a co-worker or peer. Leave your phone in a different room of the house while you watch a movie with your partner or roommate. Eventually, you will grow more accustomed to this habit and begin to lose the muscle memory of always reaching for social media.

Breaking the Habit

Routinely checking your Instagram, Facebook, or Twitter multiple times a day can become a hard-to-break habit. This habitual "checking" can become an ingrained behaviour.

Solution: One simple solution you can try to limit your habitual checking in is to move your social media apps off your home screen or into a folder system. This means that routinely checking in on your social media feed will require a bit more work, and may help you to reduce your time spent staring at your phone screen. You can also try turning off social media notifications on your phone.

Strategies

- **Practice self-reflection.**
  Recognize that everyone puts their best foot forward on social media, and that the information shown on someone's profile does not necessarily reflect the truth. Think about the types of stories you share on your social media, and work to change your perspective.
- **Social media "cleanse".**
  Increasing in popularity is the social media "cleanse," which involves deactivating your social media accounts for a certain period of time, and returning to them later. You can make your cleanse more extreme (i.e., deleting your accounts) or less extreme (restricting use to a few hours a day) according to your needs
- **Turn off push notifications.**
  Of course you are tempted to check in on your social media accounts when you receive constant notifications on your device. Try turning off notifications temporarily, and see if this helps you to reduce your overall usage.
- **Unfollow problematic accounts.**
  Do you "follow" one or more accounts that you find you are constantly comparing yourself to? Do yourself a favour and hit the unfollow button.

5.6 IMPOSTER SYNDROME

Definition

Imposter syndrome is increasingly becoming a source of stress and languishing mental health among graduate students in North America. Imposter syndrome refers to an inability to accept or internalize deservedness for one's accolades, and is often accompanied by overwhelming self-doubt and feeling like a fraud. Graduate students struggling with imposter syndrome often dismiss their successes as stemming from "luck," "good timing," or resulting from another peer's withdrawal of their own, superior work.

Imposter syndrome can be very problematic, as it often results in individuals underestimating their abilities and therefore missing out on opportunities (i.e., not applying for a job or submitting an abstract to a prestigious conference or journal due to the assumption that one's work is 'not good enough'). Research suggests that the syndrome affects females more often than males, but all graduate students can experience it.

Common Challenges

Worry You'll be Exposed

One of the cornerstones of living with imposter syndrome is a persistent feeling that you may be "exposed" as a fraud – in the context of academia, perhaps this means that you feel as though your supervisor or peers will "found out" that you aren't cut out for graduate school after all. Often, this fear of exposure can lead to attempting to ignore or live with feelings of imposter syndrome, rather than overcoming them.

Solution: Spoiler alert – a large proportion of graduate students (and faculty, for that matter) experience imposter syndrome. Chances are, there are other peers in your research group or lab that are sharing your experience. Talking to your peers, family, or supervisor about how you are feeling are all great ways to start to overcome imposter syndrome.

Perfectionism

Research has linked the personality characteristic of perfectionism to imposter syndrome. In fact, it is often the highest achievers that experience the worst symptoms. The problem with perfectionism is the tendency to set unrealistically high expectations or goals for oneself, resulting in disappointment and/or feelings of failure when these goals are unmet. Perfectionists tend to fixate on their failures, rather than celebrating their achievements.

Solution: Work towards setting realistic goals by breaking up large projects into smaller components you can achieve. It may also be helpful to work with your supervisor to develop realistic expectations.

Strategies

- **Logical reasoning.**
  Particularly for graduate students, one strategy for battling imposter syndrome is to logically consider why you are where you are. You went through a formal, impartial admission competition, and were selected out of a number of applicants to attend your program, at your school. Therefore, you deserve to be where you are. Taking a logical approach can combat feelings of imposter syndrome.
- **Rewire your thinking.**
  Frequently, imposter syndrome comes from unwritten "rules" graduate students elect to follow. These can be things like "I shouldn't have to ask for help" or "I shouldn't need an extension." Rewire your thinking; if the job is turning into a much larger one than initially expected, it is perfectly acceptable to ask for help or request an extension.
- **Discuss with your supervisor.**
  Supervisors are there to support you throughout your graduate school career. Forming a positive, supportive relationship with your supervisor can be key to overcoming imposter syndrome. Ask for specific feedback on your work, and determine ways you can improve even more
- **Formal counselling.**
  Seeking professional help from a therapist or counsellor can help you to work through feelings of imposter syndrome, and provide you with a toolkit of methods to combat imposter syndrome (i.e., mindfulness, CBT, etc.)

5.7 SUPERVISORY RELATIONSHIPS

Definition

As discussed in Section 3.5.1 of this Toolkit, a positive and productive relationship with one's thesis supervisor (or advisor) is a major component of a graduate student's post-secondary experience. It is your supervisor's job to effectively communicate with and support students for the duration of their graduate education. Poor "fit" between student and supervisor, or simply an unsupportive and/or uncommunicative supervisor can become a major source of stress for graduate students.

Common Challenges

Power Differential

One of the greatest challenges for students who are experiencing ill "fit" with their supervisor is the enormous power differential that exists between supervisor and student, particularly in cases where supervisors are providing funding support for the student. Students may be concerned that raising concerns about their supervisor might negatively impact their academic career or delay their degree.

Solution: Many post-secondary institutions in Canada have developed student-supervisor policies or guidebooks to remedy this issue. If you are uncomfortable speaking to your supervisor directly, you may consider reaching out to your Graduate Program Coordinator. In extreme cases (e.g., a supervisor taking credit for student work, other bullying, etc.) you may wish to reach out to your Graduate Student Association and/or Department Head.

Lack of Communication

Poor communication (or lack of communication altogether) can be a big challenge for graduate students to address. While it is important to recognize that there will be busy periods for both supervisor and student where regularly scheduled meetings or check-ins may not be achievable (i.e., final exam and grading period), clear and effective communication between student and supervisor is one of the cornerstones of this relationship.

Solution: First, establishing up-front a regular meeting schedule with one's supervisor can be a good strategy for alleviating future communication challenges. Secondly, students should make professional requests for meetings with a clear, delineated agenda included, outlining the exact things they would like to address. This will help both student and supervisor to adequately prepare for the meeting.

Strategies

- **Know your rights.**
  It's important for graduate students to be well-versed in their rights regarding their program. If a student-supervisor relationship is negatively affecting your progress or ability to complete your program, it is your right to speak up and advocate for yourself.
- **Clear communication.**
  Establishing regular, clear communication with your supervisor is an excellent strategy for avoiding supervisory conflicts down the road. Regular communication with your supervisor, be it progress check-ins or more specific meetings about your dissertation, teaching, or research projects can all be helpful in normalizing expectations between the two of you.
- **Seek a co-supervisor.**
  While this may not be a strategy that every graduate student can take, if you are feeling that your primary supervisor's workload is too heavy to provide your project with sufficient attention, you may consider suggesting a co-supervisor. Alternatively, if you have a thesis committee already assembled, you may want to turn to your committee members for additional feedback.

6.1 IMPORTANT CONTACT NUMBERS

This toolkit is not intended to resolve mental health crises or cases of acute mental illness. If you - or someone you know - is in crisis, the following numbers can provide crises services. Contact numbers are organized into national and provincial categories, detailing the names of the organizations, the areas they serve, and contact numbers.

6.1.1 NATIONAL

CANADA	
Canada Suicide Prevention Service (Crisis Services Canada)	1-833-456-4566
Crisis Text Line (Kids Help Phone)	Text TALK to **686868** (ENG) Text TEXTO to 686868 (FR)
First Nations and Inuit Hope for Wellness	1-855-242-3310
Canadian Indian Residential Schools Crisis Line	1-866-925-4419
Trans Life Line	1-877-330-6366

6.1.2 PROVINCIAL

ALBERTA	
Distress Centre Calgary (Calgary and Surrounding Areas)	Main Crisis Line: **403-266-4357**
Distress Line of Southwestern Alberta (CMHA) (Chinook Health Region and Southern Calgary	Crisis 24 hours: **1-888-787-2880** Crisis 24 hours: **(403) 327-7905**
Doctor Margaret Savage Crisis Centre (Cold Lake Area)	Crisis 24 hours: **1-866-594-0533** Crisis 24 hours: **(780) 594-335**
Salvation Army Community and Family Centres (Greater Edmonton Area)	Mon – Fri, 9:00 –11:30 pm: **(780) 424-9223**
St. Paul & District Crisis Centre (Serving all Alberta and Northeastern Saskatchewan)	Crisis 24 hours: **1-800-263-3045** Crisis 24 hours: **(780) 645-5195**
The Support Network Distress Line (Edmonton and Surrounding Areas)	Crisis 24 hours: **1-800-232-7288**

BRITISH COLUMBIA	
British Columbia Crisis Line (Serving all areas in BC)	Crisis 24 hrs: **1-800-784-2433**
Canadian Mental Health Association Crisis Line (East Kootenay Region)	Crisis 24 hours: **1-888-353-2273**
People in Need Crisis Line (CMHA)(Serving the Vernon area)	Crisis 24 Hour: **1-888-353-2273**
Kelowna Crisis Line (Kelowna, Westbank, Winfield, Lakecountry)	Crisis 24 Hour: **1-888-353-2273**
Crisis Prevention, Intervention and Info Centre (Northern BC)	24/7 Crisis Line: 250-563-1214 1-888-562-1214
Vancouver Island Crisis Society	24/7 Crisis Line: **1-888-494-3888**
Central Fraser Valley Telecare Crisis Line (Serving Fraser Valley)	Crisis 24 hrs: **604-852-9099**
West Kootenay – Boundary Regional Crisis Line (Serving West Kootenay and Boundary Regions)	Crisis 24 hrs: **1-888-353-2273**
Crisis Intervention and Suicide Prevention Centre (Serving Greater Vancouver Area)	Crisis 24 hrs: **604-872-3311**

MANITOBA	
Crisis Stabilization Unit (Serving Winnipeg Health Region)	Crisis 24 hrs: **(204) 940-3633**
Klinic Community Health Centre (Serving Winnipeg Area)	Crisis 24 hrs: **1-888-322-3019** Suicide Line: **1-877-435-7170**
Mental Health Crisis Service (Serving Central Regional Health Authority	Crisis 24 hrs: **1-888-310-4593**
Mobile Crisis Services (Serving Winnipeg Health Region)	Crisis 24 hrs: **(204) 940-1781**
Mobile Crisis Unit (MCU) (Serving Brandon and Assiniboine Regions)	Crisis 24 hrs: **1-888-379-7699** Crisis 24 hrs: **(204) 725-4411**

NEW BRUNSWICK	
Chimo Helpline	Crisis 24 hrs: **1-800-667-5005**

NEWFOUNDLAND AND LABRADOR	
Mental Health Crisis Centre	Crisis 24 hrs: **1-888-737-4668** Crisis 24 hrs: **(709) 737-4668**

NORTHWEST TERRITORIES	
NWT Help Line	Crisis 24 hrs: **1-800-661-0844**

NOVA SCOTIA	
Crises Intervention and Short-Term Crisis Mgmt (Serving Halifax, Dartmouth, Bedford)	Crisis 24 hrs: **1-888-429-8167** Crisis 24 hrs: **(902) 429-8167**

NUNAVUT	
Nunavut Kamatsiaqtut Help Line (Serving Nunavut and Nunavik)	Crisis 24 hrs: **1-800-265-3333** Crisis 24 hrs: **(867)-979-3333**

ONTARIO	
ConnexOntario - Mental Health Help Line	Crisis 24 hrs: **1-866-531-2600**
Good2Talk (Serving Post-Secondary Students in Ontario)	Crisis 24 hours: **1-866-925-5454**
Kenora Rainy River District of Ontario (Serving Kenora, Dryden, Fort Frances, Rainy River)	Crisis 24 Hour: **1-866-888-8988**
Hamilton Crisis Service	Crisis 24 Hour: **905-522-1477**
Kitchener-Waterloo Crisis Service	Crisis 24 Hour:**519-745-1166**
Kingston Crisis Services	Crisis 24 Hour: **613-544-1771**
London and District Mental Health Crisis Line	Crisis 24 hrs: **519-433-2023**
Niagara Region Crisis Services	Crisis 24 hrs: **905-688-3711**
Ottawa and Region Crisis Services	Crisis 24 hrs: **613-722-6914 or 1-866-996-0991**
Sarnia and Lambton County Crisis Services	Crisis 24 hrs: **519-336-3000 or 1-888-347-8737**
Six Nations Crisis Line Crisis Services	Crisis 24 hrs: **1-866-445-2204 or 519-445-2404**
Toronto Region Crisis Services	Crisis 24 hrs: **416-408-4357** Survivor Support: **416-595-1716**
Windsor and Essex County Crisis Services	Crisis 24 hrs: **519-256-5000**

PRINCE EDWARD ISLAND	
Island Helpline	Crisis 24 hrs: **1-800-218-2885**

QUEBEC	
Quebec National Crisis Line(Serving Province of Quebec)	Crisis 24 hrs: **1-866-277-3553**
Suicide Action Montreal (Serving Montreal Area)	Crisis 24 hrs: **(514) 723-4000**
KRTB the Suicide Prevention Centre (Rivière-de-Loup)	Crisis 24 hrs: **(418) 862-9658**
Suicide Prevention Centre of Quebec (Serving Capitale-Nationale)	Crisis 24 hrs: **(418) 683-4588**
Suicide Action Montreal(Montreal Area)	Crisis 24 hrs: **(514) 723-4000**

SASKATCHEWAN	
Hudson Bay and District Crisis Centre (Serving Saskatchewan)	Crisis 24 hrs: **1-866-865-7274** Crisis 24 hrs: **(306) 865-3064**
Mobile Crisis Service(Serving Saskatoon)	Crisis 24 hrs: **(306) 933-6200**
North East Crisis Intervention Centre (Serving Northeastern Saskatchewan)	Crisis 24 hrs: **1-800-611-6349** Crisis 24 hrs: **(306) 752-9455**
Prince Albert Mobile Crisis Unit (Serving Prince Albert)	Crisis 24 hrs: **(306) 764-1011**
Regina Mobile Crisis Services (Serving Regina and Area)	Crisis 24 hrs: **(306) 525-5333** Crisis after hours: **(306) 569-2724**
Southwest Crisis Services (Serving Southwestern Saskatchewan)	Crisis 24 hrs: **(306) 778-3386**

YUKON	
Distress and Support Line (Serving Yukon)	Crisis 24 hrs: **1-844-533-3030**

6.2 USEFUL WEBSITES

This section includes a wealth of information for Toolkit users, comprised of organizations that produce evidence-based mental health education, contentious research, clinical resources and assessments and more.

Mental Health Commission of Canada

The MHCC leads the development and dissemination of innovative programs and tools to support the mental health and wellness of Canadians. The MHCC's current mandate from the Government of Canada aims to deliver on priority areas identified in the Mental Health Strategy for Canada in alignment with the delivery of its strategic plan. The MHCC's most recent project in the area of post-secondary mental health is the development of Canada's National Standard for the Psychological Health and Safety of Post-Secondary Students.

Contact: https://www.mentalhealthcommission.ca/English

The Centre for Addiction and Mental Health

CAMH provides a wide range of clinical care services, including: assessment, brief interventions, inpatient programs, day hospital services, continuing care, outpatient services, and family support. In addition to these services, CAMH also develops and evaluates educational resources, and conducts science and research related to mental health and wellness.

Contact: http://www.camh.ca/

Canadian Mental Health Association

CMHA is the most extensive community mental health organization in Canada, with a presence in more than 330 communities across every province and territory in the country. CMHA provides advocacy, programs and resources that help to prevent mental illness, support recovery and resilience, and enable all Canadians to thrive.

Contact: https://cmha.ca/

Canadian Alliance on Mental Illness and Mental Health

CAMIMH is a non-profit organization comprised of health care providers as well as organizations which represent individuals with lived experience of mental illness. With a focus on advocacy, the organization provides mental health education to the public and aims to engage Canadians in conversation about mental illness.

Contact: https://www.camimh.ca/about/

Centre for Innovation in Campus Mental Health

The CICMH's mission is to help Ontario's colleges and universities enhance their capacity to support and optimize students' mental health and wellbeing. CICMH stakeholders include post-secondary mental health service providers and partners, including student wellness, counselling, accessibility and more, in addition to student leaders and community partners. The CICMH hosts a conference annually to promote idea sharing and collaboration.

Contact: https://campusmentalhealth.ca/

6.3 IMPORTANT STUDENT–FOCUSED ORGANIZATIONS

This section of the CFS Toolkit details important nation-wide student-run organizations, including mission statements and contact information. These organizations strive to support post-secondary students in their academic journeys.

Canadian Federation of Students

The largest and oldest post-secondary student organization in the country, representing over 530,000 college, undergraduate, graduate-level students, including full-time and part-time students. The Federation advocates on a national level for quality publicly-funded post-secondary education. It's members span from British Columbia to Newfoundland and Labrador. The CFS is also the home of the National Graduate Caucus, a standalone body whose mandate is to represent and advocate for graduate students at a national level and oversee campaigns ranging from mental health matters to supporting student parents and free education for all.

Contact: https://cfs-fcee.ca/

Universities Canada

Universities Canada is a membership organization providing university presidents with a unified voice for higher education, research and innovation. Universities Canada, formerly the Association of Universities and Colleges of Canada, advances the mission of our member institutions to transform lives, strengthen communities and find solutions to the most pressing challenges facing our world.

Contact: https://www.univcan.ca/

Colleges and Institutes Canada

CICan is the national and international voice of Canada's publicly supported colleges, institutes of technology, CÉGEPS, polytechnics and universities with a college mandate. We work with government, industry and international partners to champion employment-focused post-secondary education that benefits learners and contributes to growing and prosperous communities.

Contact: https://www.collegesinstitutes.ca/

National Educational Association of Disabled Students

NEADS supports full access to education and employment for post-secondary students and graduates with disabilities across Canada, collaborating with post-secondary stakeholders, NGOs, employers, and disability service providers on college and university campuses. The organization focuses on three strategic areas: student debt reduction, student experience in class and on campus, and student and graduate employment.

Contact: https://www.neads.ca/en

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