# Mental Health Matters at the University of Manitoba

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#### **Overview**

- What factors are affecting our current mental health landscape?
- What resources are available at the University?
- How can we identify and respond to students/colleagues in distress?
- How can we look after ourselves?
- Questions and discussion



#### Mental Health Matters... to Everyone

- Lifetime prevalence rate for mental illness is about 20%
- Global burden of mental illness exceeds that of cardiovascular disease and cancer
- Factoring in direct costs and lost productivity, mental illness costs the Canadian economy more than \$50 billion/year
- Most people with mental health problems do not seek help
- Those who do seek help often wait years before doing so





## **Major Factors Influencing Student Mental Health**

- Developmental factors
  - 75% of mental disorders have an onset prior to age 25
  - Anxiety and depression peak in the 18-24 year age group
- Psychological factors
  - Low levels of mental health literacy
  - Self-stigma
  - Underdeveloped coping resources
  - Worries about uncertain future
- Contextual factors
  - Social and relationship issues, including family pressure
  - Financial concerns
  - Stress associated with transition to university, demands of studies
  - Unexpected events



# Major Factors Influencing Staff and Faculty Mental Health

- Developmental factors
  - Health concerns for self and family
  - Caregiver burden
- Psychological factors
  - Maladaptive coping (e.g., denial, avoidance, substance misuse)
  - Self-stigma
  - Worries about uncertain future
- Contextual factors
  - Social and relationship issues
  - Financial concerns
  - Work-related stress
  - Unexpected events



#### Why is the University Such a Stressful Environment?

- Competitive environment
- Critical mindset
- Strong achievement orientation
- Not safe to show weakness
- High expectations (internal and external)
- Time urgency
- Constant change
- Resource limitations
- Workload level and complexity
- Isolation from peers
- Lack of structure
- Lack of control





#### Now for Some Better News...

- Each dollar spent on prevention saves about six dollars in health care costs associated with mental illness
- Early intervention has similar cost-offset benefits
- Effective treatments are available
- Our campus has a guiding mental health strategy as well as resources targeted at prevention, early intervention, and treatment



#### **Mental Health Strategy**

- Guiding framework is the University's mental health strategy, <u>Success</u> *Through Wellness*
  - Initial version approved by PET in 2014
  - Success Through Wellness 2.0 under development since 2019
- "Whole-campus approach" inclusive of faculty, staff, and students
- Implementation facilitated by 'Champions for Mental Health'
- STW 2.0 focuses on supports for application of its guiding principles at a local level (unit-based) along with an implementation toolkit







# **General Mental Health Resources: Faculty and Staff**



Wellness resources for faculty, staff, and students at <u>Live Well @ UM</u>

Free, confidential 24/7 <u>counselling and</u> <u>wellness supports</u> for all employees





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# **Specialized Mental Health Resources: Faculty and Staff**

- Academics at Risk
  - Consultation and short-term treatment resource for faculty who are concerned about their own mental well-being or that of a colleague
- Employee Wellness
  - Employee Wellness Specialist coordinates workplace accommodations, return-to-work plans, and other supports
  - Offers employee wellness programs, such as <u>Live Well @</u>
     <u>Work</u>, in collaboration with campus and community partners



#### Mental Health Resources for Students

- Health care services
  - <u>University Health Service</u> Fort Garry Campus
    - University Health Service Bannatyne Clinic
- Health and Wellness Office Health promotion and prevention
  - Nurse educator provides direct service, consultation and programming
  - Coordinates peer-led health promotion programs, including <u>Healthy U</u> (with SCC), <u>Body Project</u>, and Active Minds
- Spiritual Care and Chaplains Support for grief, loss, relationship issues
- Student Support Case Management Support for high-risk students
- Student Accessibility Services Support for students with disabilities
- Counselling services
  - Student Services at Bannatyne Campus
    - Student Mental Health Service
  - Empower Me UMSU extended health benefit offering 24/7 counselling
  - Student Counselling Centre



# Student Counselling Centre

- The Student Counselling Centre (SCC) offers free and confidential mental health services to University of Manitoba students. Primary services offered are:
  - Intake and triage
  - Individual counselling
  - Group and workshop programming
  - Outreach programming
  - Learning disability assessment
- We also offer some services to staff and faculty primarily consultation and trauma debriefing
- Meeting the growing and increasingly complex mental health support needs of students is an ongoing challenge for the SCC



# Student Counselling Centre

- The SCC is under-resourced relative to benchmarks:
  - The SCC is staffed by the equivalent of 13.5 FTE counsellors for a counsellor to student ratio of about 1:2400
  - International accreditation standards recommend a counsellor-to-student ratio between 1:1000 – 1:1500
  - Canadian national average staffing level is about 1:1750
  - To be on par, the SCC would have to add a minimum of five full time counsellors
- To maximize its resources, the SCC employs a "stepped care" approach:
  - Stepped care models of service delivery strive to match the intensity of service provided to the intensity of the need

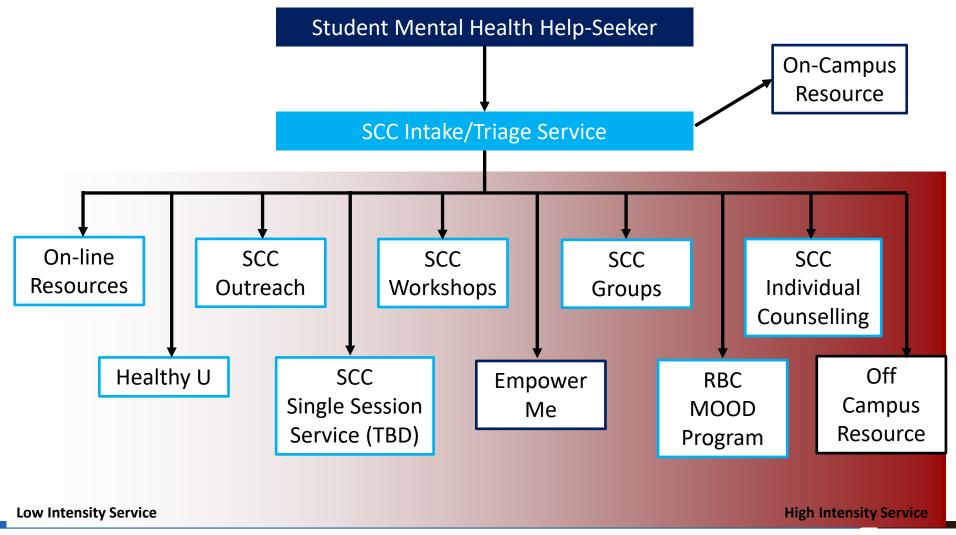


# Benefits of a Stepped Care Model

- Increases service accessibility
- Ensures immediate screening for risk and threats to safety
- Facilitates service navigation and service matching
- Works from a strengths-based perspective, activating student's coping abilities
- Increases diversity of service alternatives for students
- Facilitates greater utilization of all SCC programs (e.g., groups and workshops; RBC MOOD Program)
- Streamlines referrals to other resources both on and off campus
- Optimizes use of counsellor skill and time
- Ensures every student is offered an appropriate service based on a professional assessment of their needs



#### **SCC Stepped Care Service Delivery Model**





## **SCC Intake/Triage Service Process**

- Graduate Students offered an appointment with a SCC intake/triage worker or the counsellor working within the "embedded counselling" arrangement between SCC and the Faculty of Graduate Studies
- This first appointment is typically 30 to 50 minutes in duration and focuses on assessing the student's needs and providing initial support and stabilization if needed
- Post-intake, the most appropriate services are identified on campus and/or in the community - students are provided with detailed information on all recommended services
- If referred to SCC individual counselling:
  - May be prioritized for immediate assignment to a counsellor if urgent need exists (i.e., even when a waitlist exists, many students do not wait for this service)
  - Will be assigned to a counsellor or placed on the SCC waitlist for individual counselling if a waitlist exists
  - Average time on waitlist since September 1, 2020 is 8.98 days



## SCC and Crisis Support

While we're not resourced to be a crisis centre, we will do everything we can to provide support when a crisis or emergency situation exists.

- If the student is in a crisis state and it is a potential emergency (e.g., the student is crying, breathing heavily, struggling to talk, and has stated that they have thoughts of suicide and don't feel safe):
  - o Invite and encourage them to talk to a mental health professional;
  - Invite them to use one of the crisis line services available 24/7 (info on the SCC website);
  - Offer to check with the SCC to see if someone is available immediately to speak with them this should be
    a secondary option because we can't guarantee we'll have someone immediately available and we don't
    want the student to wait;
  - When in-person services resume, the student can come to our centre (accompanied or unaccompanied) and wait for assistance – we can then monitor their safety while we work to find someone for them to speak to.
- If the student is in a crisis state and it is not an emergency (i.e., they are safe but very upset):
  - Invite the student to contact the SCC for an initial intake appointment and/or offer to consult with the SCC to arrange for an urgent appointment for the student – if consulting to schedule an appointment, call the SCC Director (204-474-8619);
  - You can still offer the crisis line services too.
- If a student is not in a crisis state and there is no emergency, consider all SCC service
  options and encourage the student to use workshops to receive the quickest assistance



## Signs of Mental Health Distress

 Best way to recognize mental health distress is identifying a negative change from baseline behavior – but, not always possible because none of us know everyone.

#### Self-Care

- Overall, poor personal hygiene;
- Disheveled hair;
- Body odour not consistent with context:
- Wearing same clothes each day – clothes becoming increasingly dirty.

#### Performance

- Missing class or work;
- Not participating as much in class or at work;
- Decreased achievement;
- Not handing in assignments or completing work duties;
- Increased disorganization.

#### **Physical Condition**

- Exhausted
- Sunken and/or bleary eyes;
- Unhealthy skin;
- Hunched body posture;
- Frequent or chronic illness;
- Visible changes in weight;
- Noticeable cuts, bruises, or burns

#### **Cognitive Functioning**

- Distracted;
- Increased number of small errors;
- Struggling to understand complex concepts;
- Disrupted memory;
- Forgetful

#### Interpersonal

- Increased social difficulties overall;
- Increased isolation from others;
- More frequent conflicts;
- Threatening/concerning behaviour toward others;
- Excessive use of supports.

#### **Emotion Regulation**

- Crying or tearfulness
- Expressing anxiety
- Expressing low mood, hopelessness, worthlessness
- Angry or hostile outbursts
- Appearing jittery, nervous

**Jniversity** 

Panic attack

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## **Supporting Self and Others**

- Remember that few of us are at our best these days have a compassionate response to self and others
- If someone you work with appears to be struggling, consider approaching them to see if you can help:
  - Use the sign of distress you've seen to anchor your approach (e.g., "You've been more quiet than normal in meetings this past month and I don't hear from you much anymore. I was worried so thought I would see how you're doing. How are things these days?")
- Nurture relationships human beings are relational creatures
  - Most of us are missing those brief connections we have at work that help us to feel connected and supported
  - Try to arrange regular contact with some of your closer colleagues



## **Supporting Self and Others**

- Research shows that people working remotely tend to log more hours than office-based workers (though they do not necessarily work more efficiently)
  - Be mindful of how long you're working and ensure you are taking breaks
  - Develop a healthy beginning and end of day work routine
- If struggling with the increased uncertainty of the world:
  - o Remind yourself that you've gotten through uncertain times before
  - It is rare that everything about a situation is uncertain look for what you can control and focus on that
  - o Remind yourself that uncertainty can work out well at times, too
- Because most of us have had several losses since the advent of the pandemic (loss of opportunity, treasured rituals and routines, relationships, etc.), give room for grieving and recognize that you and others may be grieving even if no loss of life
- Consider modifying what we call a "good day"



#### **Questions and Discussion...**







#### For more information:

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umanitoba.ca/student/counselling/