

## MENTAL HEALTH COLLABORATIVE PROJECT STAFF AND FACULTY TRAINING

**ENVIRONMENTAL SCAN SUMMARY** 

This report was prepared by Katherine Moore (katherinemoore6@gmail.com).

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**SUGGESTED CITATION**: Moore, K. (2019). *Mental health collaborative project, student resilience and coping training workshops: Environmental scan.* Vancouver, BC: BCcampus.

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### **Executive Summary**

### **Project Overview**

An environmental scan was commissioned by the Collaborative Projects team at BCcampus to inform a larger project that aims to develop an open access educational resource, which will help staff and faculty support student mental health. The environmental scan explored current professional development opportunities through a descriptive analysis of postsecondary institutions websites as well as qualitative interviews with postsecondary professionals. Data was analyzed using a thematic approach. Project deliverables included an inventory of all resources identified throughout the scan, and a report that discusses findings.

### **Findings**

This scan found that most professional development opportunities are delivered *online* through *guides, handbooks* and *webpages* that contain content about *supporting students in distress, teaching practices that promote student wellbeing* and *mental health in general*. These resources are largely available to *staff and faculty*, with very few targeting *sessional faculty, teaching assistants* or *new employees*.

Qualitative interviews revealed that **student mental health training** for staff and faculty was a gap—particularly for sessional faculty and new employees. Furthermore, they highlighted that educating faculty to support **student mental health in the classroom** was an unmet need. Given that most of the wellbeing in learning environment resources identified in this scan were clustered among 3 institutions, this gap is in fact consistent with the authors findings.

Postsecondary personnel are challenged with providing these supports due to a *lack of qualified staff* to provide expertise on the topic, uncertainty around the *boundaries of care* and struggles to penetrate *busy faculty schedules*. Yet, they all expressed enthusiasm for receiving an open access resource from BCcampus—on the condition that it is highly adaptable so that it can be tailored to their institutions unique needs and context.

An opportunity exists for BCcampus to partner with SFU to create a teaching assistant training curriculum as well as a wellbeing in learning environment resource in open access formats. Furthermore, there is room to ensure that all institutions are equipped with a supporting students in distress guide. *Co-creating materials alongside faculty and staff* is imperative to ensure that resources are practical, useful and desired by this population. Lastly, a mental health literacy framework should guide this work to ensure that the postsecondary workforce is trained comprehensively.



### **Background**

Students are faced with a myriad of challenges as they enter postsecondary education. Leaving home, learning to manage finances, navigating professional interests, building networks and balancing jam-packed academic schedules are just a few of the hurdles students face throughout their studies. The stress of postsecondary is something that is felt by all, but some more than others. According to the National College Health Assessment, the academic performance of Canadian students was negatively impacted by stress (41.9%), anxiety (34.6%), sleep difficulties (29.0%) and depression (24.2%) within the past 12 months (American College Health Association, 2019). Within that same time period, 23.7% of students were diagnosed with an anxiety disorder (American College Health Association, 2019), and more than half of respondents felt overwhelmed and exhausted over the past two weeks (American College Health Association, 2019). These figures are consistent with research that shows people aged 15 to 24 are "more likely to experience mental illness and/or substance use disorders than any other age group" (Pearson, Janz & Ali, 2013).

Students spend a great deal of their time on campus bouncing from one classroom to the next. This has fueled a growing demand for staff and faculty to be equipped with the skills needed to support students' mental health. In response to this, the Collaborative Projects (CP) team at BCcampus embarked on a project to help staff and faculty meet this new demand. This team "provides evidence-based, collaboratively developed open access education and training resources for all post-secondary institutions [PSI] across British Columbia [BC]" (BCcampus, 2019). To begin this journey, the CP team commissioned an environmental scan to explore current professional development opportunities that help staff and faculty support student mental health. This report details the methods and findings from that environmental scan.

### **Project Overview**

This environmental scan explores existing learning resources for staff and faculty that were developed, are delivered, and/or are incorporated into PSI's across BC. It also investigates the perceived needs for open learning resources, challenges and potential opportunities for future learning initiatives. Project deliverables include a database containing all identified resources, as well as this report. Results from this scan will guide the next steps for the overall project.

### Methodology

Project deliverables will be achieved through 1) a comprehensive scan of PSI's websites, and 2) qualitative interviews with resource providers. The following describes the methodology for this scan in more detail.



### Scope

This scan will explore learning resources that were provided in the past academic year (2018/2019). Learning resources include, but are not limited to, courses, workshops, seminars, speaker series, annual events, podcasts, print materials, videos or online content. Resources that were developed in Canada and abroad will be investigated if they are being used by PSI's in BC. The following research questioned guided this work:

What professional development opportunities have been available in the past year for staff and faculty of BC's postsecondary institutions (PSI) to guide them in supporting student's mental health?

### **Descriptive Data Collection**

An in depth search of all 25 PSI's websites was conducted to extract the following descriptive data:

Institution Name	Title of Resource	Duration
Department	Overview of Resource	Number of Users
Audience	Subject Matter Experts	Frequency of Delivery
Type of Resource	Learning Outcomes	Licensing and Access
Type of Access	Perception of Success	

The following departments were initially explored before expanding to others as needed: human resources, centres for teaching and learning, counselling, health services, and wellness centres.

### **Exclusion Criteria**

The following exclusions helped ensure that deliverables were relevant to the project scope:

- Employee health insurance companies
- New faculty/staff orientation events
- In the event that a PSI has more than one campus, only resources available at the largest campus were investigated
- Links to the home page of community organizations were not included (e.g. Canadian Mental Health Association; CMHA, Anxiety BC). Only links to specific pages within these websites were included (e.g. www.anxietybc.ca was not included, but a webpage about stress reduction techniques on this website was included)
- Sexual violence resources were not included unless the content directly addressed mental health



### **Qualitative Data Collection**

Informal, open-ended conversations provided insight into the student development context at each institution—with particular attention being paid to key resources—, supplemented descriptive data collection and informed the gap analysis.

### Sample/Recruitment

Discussions with service providers were limited to trainers, department leaders, and other staff working within BC post-secondary institutions. This also included personnel from teaching and learning centres (e.g. instructional design and curriculum developers), committees and working groups responsible for staff/faculty educational development.

Key resources were selected for further discussion based on the following criteria: online presence, relevance and availability of contact information. In other words, initiatives that were promoted across numerous PSI webpages, had considerable overlap with project scope and had contact information available received an interview request.

Interviews were requested to discuss a minimum of 3 resources per institution. In the event that 3 resources were not available, an email was sent to key departments to inquire further and set up an interview to discuss the professional development context in general.

### Interview

Interviews took place over the phone, and data was captured as needed by the interviewer. Each interviewee was asked a core set of questions (see Appendix 1), but additional follow up questions were asked as needed.

### **Qualitative Data Analysis**

Given the project timeline, data analysis methods were adapted from peer-reviewed methods to allow for expediency. As such, findings should be considered anecdotal and are not suitable for peer-reviewed publication. Evaluation of interviews followed a thematic approach, where data is given lower order codes that are later grouped into higher order themes (Strauss, 1987; Boyzatis 1998; Braun and Clarke 2006). This allowed patterns to emerge from the data while also highlighting service gaps.



### **Findings**

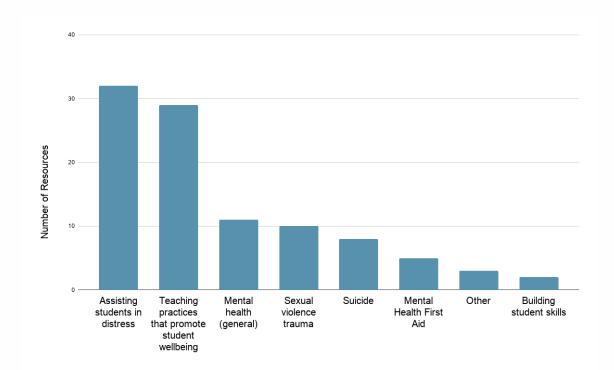
### **Descriptive Data**

### **Topic**

The topic that came up the most often across resources was *supporting students in distress* (32%). This content is delivered through print and online guides that quickly and easily teach users how to identify students in distress as well as appropriate ways to respond. An example of this can be found in Appendix 2. The second most common delivery format for this topic is workshops.

The second (29%) most common group of resources is about *teaching practices that promote student wellbeing*. However, this statistic is misleading as many of these resources are clustered between Simon Fraser University (SFU) and the University of British Columbia (UBC).

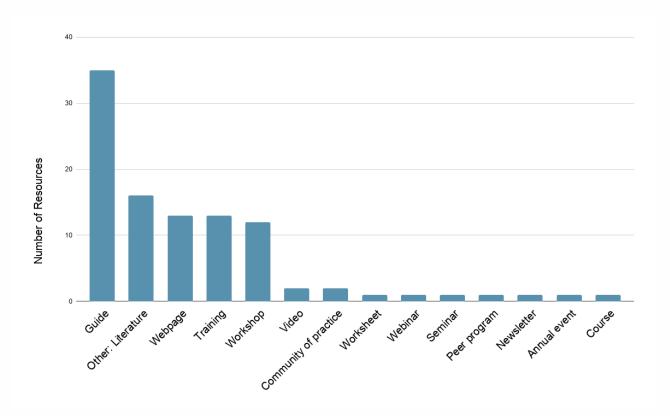
11% of resources targeted *general mental health education*, and was the third most common topic identified in this scan. Yet, many of these resources were links to content from other websites, which were not tailored to the postsecondary context.





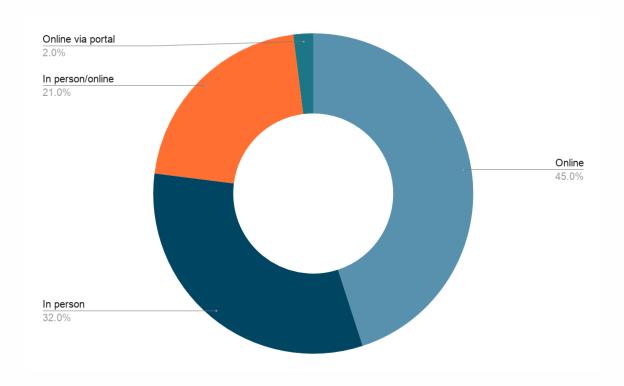
### **Delivery Format**

35% of resources are delivered through *guides*, such as the one seen in Appendix 2. 16% are *various forms of literature* (i.e. Other: Literature) that include infographics, online booklets, handbooks, or links to external webpages that have relevant content. Additionally, 13% are PSI *webpages* that disseminate information without linking to other sites, and another 13% are *formal training* opportunities, such as QPR Suicide Prevention Training. Only 12% of development opportunities are delivered through *workshops*.



### **Type of Access**

45% of resources are provided *online*, whereas 32% are provided *in person* and 21% are available both *online and in-person*. Note that print material that is also available online, such as supporting students in distress guides, were captured in the *online and in person* statistic.

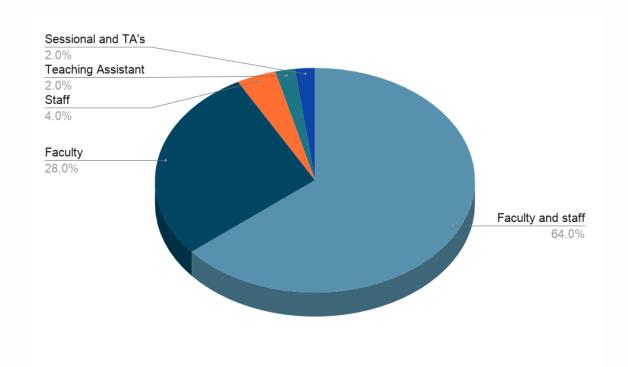


### **Duration and Frequency of Delivery**

Most resources (e.g. webpages, online handbooks, print material etc...) are provided on an ongoing basis. Workshops on the other hand are mostly offered upon request and last between 1-3h, whereas formal trainings are held 1-6 times per year and can run between 1.5-17h.

### **Audience**

64% of the resources identified target both staff and faculty and 28% focus specifically on faculty, while only 4% target staff. Moreover, only 2% of resources provide training to Teaching Assistants (TA) and another 2% considers sessional faculty.



### **Qualitative Data**

A total of 88 emails were sent out to inquire further about resources as well as to request interviews. 20 interviews were conducted.

### **Perceived gaps**

A wide range of gaps were identified:

Training	Topic: Provision of care responsibilities	Topic: Mental health from diverse cultural perspectives	No mental health strategy	Integrating training into policies and procedures
Recognizing champions	g Topic: Students in distress	Wellbeing in learning environments	No Early Alert system	Dedicated/qualified training staff



35% of interviewees indicated that there is a dearth of *training opportunities in general* for faculty and staff in this domain. Interviewees also mentioned that training for new faculty and staff was a critical gap to be filled, and the rest highlighted the importance of providing training specifically to sessional faculty. Furthermore, the need for training specifically on how to foster *wellbeing in learning environments* (WBLE), and the need to *integrate training into institutional policies and procedures* both received equally large amounts of attention (20%). With regards to the latter, some interviewees suggested that student mental health training should be mandatory for all new staff/faculty, and that tenure track requirements should include evaluations of teaching practices that support student wellbeing.

### **Challenges**

Out of all the challenges brought up during interviews (see below), the following four received the most attention: **connecting with faculty, defining boundaries around provision of care**, and the **lack of human resources**.

Connecting with faculty	Educational model of institution	Defining boundaries around provision of care	Lack of senior leadership support
Lack of human resources	Lack of healthy campus culture	Providing consistent mental health messaging	Student diversity
Identifying who will be responsible for this work	Bureaucracy	Funding	

opportunities for professional development. Some say that faculty express an interest in training about supporting student mental health, but when an opportunity is offered faculty rarely show up. Additionally, interviewees pointed out that there is a growing trend amongst PSI's to hire sessional faculty members instead of full time professors. This trend has made it more difficult to ensure that the workforce is properly educated as sessional positions are typically short-term and have a high turnover rate. Further, without mandatory new faculty training, efforts to reach out to sessional's are often missed. The challenge of *connecting with faculty* is intensified by deep silos that exist between central institutional departments (e.g. human resources, wellness centres etc.) and Faculties. According to stakeholders, professors rely heavily on their Faculties for support and rarely seek assistance from central departments. Therefore, uptake tends to be low unless Faculties help advertise and/or offer training. Similarly, it was mentioned that raising awareness about professional development opportunities is a challenge, as information about



existing opportunities is not well integrated amongst the plethora of webpages belonging to PSIs. For example, advertising for a Mental Health First Aid course may exist on a sub-page of the Human Resources website, but nowhere else. Thus, the pathways that direct individuals to this information are limited.

25% of interviewees explained that the lack of agreement and clarity around the **boundaries of care** is a challenge. They mentioned that some faculty don't believe that it is their responsibility to support students mental health, and others have a hard time identifying how much and what kind of support they should be providing. Moreover, some staff expressed that they didn't feel qualified to help faculty address these concerns. In sum, interviewees believe that these discussions need to happen to gain further clarification. Similarly, 15% of stakeholders indicated that the **lack of human resources** adds a significant challenge to educating employees, as qualified personnel—particularly health promotion specialists—aren't available to provide guidance and content expertise.

### **Enablers**

Despite these challenges, PSIs are still offering a number of training, education and professional development opportunities to staff and faculty. 35% of stakeholders credit their success to having *senior leadership support*, namely through the provision of professional development funds and work hours that can be used to complete training. Some stakeholders have used these funds to become facilitators of popular mental health trainings such as Mental Health First Aid (MHFA), while others have used these funds to complete such trainings. Furthermore, stakeholders indicated that strong *collaborations between departments and with faculty* have contributed to their success. For instance, UBC's Health Promotion and Education team works closely with the Human Resources and Centre for Teaching, Learning and Technology departments to coordinate suicide awareness training and share teaching practices that foster student wellbeing. Other institutes tap into their faculty networks to co-develop resources to increase applicability and uptake.

Lastly, 20% of interviewees report that having *faculty that are willing* to learn about supporting student mental health has nurtured their health promotion efforts. Although having unwilling faculty is an issue on some campuses, institutions that have been championing student mental health for a while indicated that they noticed a culture shift over time. One respondent said:

"In the past we did workshops for [departments] around supporting students in distress. This is often where the conversation starts. They need to know what challenges students are facing and how to support them. But then it moves to the proactive ways to supporting student wellbeing, like the Wellbeing in Learning Environments project. Now, people are reaching out to us....asking about resilience, student wellbeing and wellbeing in learning environments..." (Interview 3, UBC)



Senior leadership support	Funding	Signing the Okanagan Charter	Collaborations
Having a small campus	Mental health strategy (implemented)	Community partnerships	Interested and willing faculty

### **Interest in Open Education Resources**

100% percent of participants believed that their institutions would be interested in using an open educational resource from BCcampus. The majority were enthusiastic in their responses, however a few were skeptical and expressed concerns. For these individuals, it is crucial that resources be modular to allow each institution to *adapt content* to their unique context. Specifically, they want to embed their institutions visual identity throughout the resource (i.e. institutional logo, fonts, colours etc...) and incorporate the resource into existing webpages as opposed to linking to the BCcampus website. It was also mentioned that the *language used to discuss mental health* in an open educational resource would need to be consistent with what is currently used by their institution. For example, the way mental health is described (e.g. specific words used, definitions, mental health concepts) in the MHFA training is different than the content found in the Canadian Red Crosses Psychological First Aid course.

Aside from this feedback, a few interviewees suggested that any curriculum, workshop content (1-2h max) or information packages would be well received as long as they require no additional human or financial resources from the PSI.

### **Non-Learning Support Services**

Given the lack of training and professional development opportunities available, data regarding services that aimed to help staff and faculty support student mental health were also collected. Of the 25 institutes across BC, early detection systems were discovered at 8. These systems allow staff, faculty and sometimes students to alert the institution about a student who may be in need of support. The definition of need differs between PSI (e.g. academic vs. psychological, or financial + academic + psychological), but responding to an alert largely consists of connecting with the student to ensure that they are able to seek out proper support. According to interviewees, these systems (often referred to as Early Alert) offer faculty a way to supporting students mental health with minimal demands on their time. Moreover, one interviewee suggested that these systems are a good way to engage faculty that are hesitant or unwilling to provide care otherwise.



### **Discussion**

### **Trends**

### Responsibility to Train

The discussion around how institutions should operationalize student mental health training appears to be bubbling across institutions. There is uncertainty around who and what department should be responsible for providing student mental health training to staff and faculty. Where this has not been clearly defined, responsibility is usually directed towards Student Services/Development staff. Yet, these professionals don't feel that they should be fully responsible for this type of training, as employee development has traditionally fallen under Human Resources portfolio. However, Human Resource professionals are not qualified to provide mental health training. As a result, the responsibility of providing training to PSI employees appears to be unclear on many campuses. However, some institutes seem to be further along in this line of thinking. An interviewee from UBC, for example, says that "It's not one or the other [Human Resources or Student Services], it's both. That's where the training for staff and faculty lie." (Interview 3, UBC).

### **Early Detection Systems**

The provision of early detection systems is one way that PSI's are helping their staff and faculty support student's mental health. According to 2 PSIs that employ these systems, they are seeing a consistent positive uptake in use each year after the initial adoption. Other interviewees expressed that their institutions are either upgrading their current systems, planning to implement one or are in need of one. This may highlight a trend in using a systems approach to support student mental health that places minimal demands on faculty and staff.

### **Mental Health Initiatives**

There are a lot of mental health initiatives being undertaken across the province. Several PSIs are in the process of developing a mental health framework, while others are training staff to become MHFA facilitators. Notably, Royal Roads is developing an Employee Mental Health Strategy that follows the National Standards of Psychological Health and Safety in the Workplace. Although, it is unclear at this time whether student mental health training for staff and faculty will be included. Furthermore, recent funding from the government has enabled some institutions to expand their existing mental health peer programs and others—like Camosun College—are developing new ones.

### Gaps

### Audience

There is a huge gap in training and professional development opportunities available for *Teaching Assistants*. These students hold regular office hours, mark assignments/exams, teach classes, and facilitate exam prep/review sessions. In some cases, undergraduate students



interact more with their TA's than their professor. Thus, TA's are in a unique position to identify students in distress and connect them with support services. Similar to faculty, TA's also have the opportunity to support student wellbeing through their teaching practices.

Additionally, training made specifically for *sessional faculty* is lacking across PSIs. Given the short-term nature of sessional positions, these professionals have a limited amount of time to learn about their institutions resources, understand their student populations' unique needs and become capable of supporting their wellbeing. Not only is there an absence of training with this novel context in mind, but training that currently exists is not mandatory for sessional's to complete.

### **Mental Health Education**

Significant efforts have been made to help staff and faculty identify students in distress and guide their responses. However, very little formal training is being done to provide them with a baseline understanding of psychological health and illness. What is available mainly consists of courses or workshops that require a significant time—and sometimes financial—commitment, as well as in-person attendance. Aside from these options, institutions with fewer financial and human resources attempt to provide mental health education by sharing links to relevant content online. Yet, it is unclear how effective these methods are as few PSIs collect data on the number of engagements these links receive or user feedback. Most staff and faculty are able to quickly reference a guide to identify when students need support, how to communicate with them and what services to connect them with, but likely lack a deeper understanding about mental health that could spark a response before crises occur.

### Targeted Marketing to Staff and Faculty

There are very few resources related to student mental health that are curated for staff and faculty. There is a healthy amount of mental health information provided on a number of webpages throughout each institution—many of which are links to other websites or short blurbs. Yet, this content is primarily housed on student facing webpages such as Counselling Services, Student Services or Health and Wellness Center's. This information could be useful to staff and faculty but aren't marketed to them, nor are they located in employee facing webpages such as Human Resources or Teaching and Learning departments. Therefore, there is a low probability that staff and faculty will naturally encounter opportunities to educate themselves about mental health. Furthermore, discussion around mental health is often missing in key staff and faculty resources. For example, many Responding to Sexualized Violence guides or Disclosure Trainings do not mention the psychological impacts of sexualized violence, nor do they discuss how to support students experiencing symptoms of trauma.

### **Wellbeing in Learning Environments**

With the exception of UBC, SFU and Camosun College, resources that help faculty understand how to foster student wellbeing in the classroom are either nonexistent or consist of links to



reading material about Universal Design for Learning. The learning environment is an integral part of the postsecondary experience that has the potential to maximize student wellbeing. For example, adopting a flexible grading scheme (e.g. offering a variety of assignment options), building in time for students to connect with one another and ensuring that expectations are clearly communicated at the start of term are a few teaching practices that have been found to support student wellbeing (Lane et al., 2018). Unfortunately, these practices are seldomly promoted through teaching and learning centres—despite there being interest in doing so. As per my conversations with teaching and learning centre staff, their major barrier to providing this type of training is their lack of expertise on this topic.

### **Opportunities for Improvement**

### **TA Training**

SFU has an existing TA training regime that consists of an in-person workshop followed by a monthly newsletter. The workshop, which lasts 1.5 hours, reviews how students can care for their own wellbeing throughout the term, provides education about how to support students in distress as well as how to foster wellbeing in learning environments. This content is taken from a number of resources SFU provides to all students, staff and faculty (i.e. their Bouncing Back course, Make SPACE for Wellbeing content, and the 10 conditions of Wellbeing in Learning Environments). The subsequent newsletter is optional, and balances information about supporting their own, as well as their students', wellbeing. Notably, this training is available to Tutor Markers (TM; i.e. students that mark papers and administer online courses, but do not run labs/tutorials) in addition to TA's. This TA/TM training curriculum has been running successfully with increasing demand for the past three years. See Appendix 3 for their 2017/2018 annual report.

Other institutions provide training to TA's as well, but lack content that is specifically designed for this population, as seen with SFU's newsletter. For example, UBC advertises several professional development opportunities to TA's such as their Early Alert, Suicide Awareness, and MHFA training. TA uptake for each of these resources is unknown.

SFU's TA/TM curriculum would be in ideal starting point to develop an open educational TA training resource for the rest of the province. Given that SFU's subject matter experts are willing to share their curriculum with BCcampus, an opportunity for co-creation also exists.

### Mental Health Literacy Framework & Mental Health Education

Mental health literacy (MHL) is comprised of four components: "...[1] understanding how to obtain and maintain positive mental health; [2] understanding mental disorders and their treatments; [3] decreasing stigma related to mental disorders; and, [4] enhancing help-seeking efficacy" (Kutcher, Wei & Coniglio, 2016). Help-seeking efficacy relates to ones understanding of how to seek help, which may entail awareness of when help is needed and what services are

Promising Practice



available. BCcampus could follow a MHL framework when building open access professional development resources for PSI's to ensure comprehensive training is available.

When considering existing training opportunities, the 4<sup>th</sup> component of MHL is covered in most institutions through supporting students in distress material, but the first 3 are lacking. It's important to note that *decreasing mental health stigma* can be achieved through enhanced *understanding of mental health disorders* (Schomerus et. al., 2016). Thus, additional training could target improvements in staff and faculty's *understanding of mental disorders and their treatments* as well as *how <u>students</u> can obtain and maintain positive mental health*. Given the lack of formal mental health education that is curated with postsecondary faculty/staff in mind that also addresses student mental health, this training would fill a much-needed gap.

Considering the concerns expressed around maintaining consistent mental health language, continued PSI engagement is advised when developing these resources. However, the Mental Health Commission of Canada's MHFA training curriculum would be a good reference point when tailoring communications, as it contains content that is preferred by many PSI's. Furthermore, the University of the Fraser Valley (UFV) is currently developing a 1.5h workshop based off the MHFA training that will be shorter and contain high-level information. This may be an opportunity for co-creation.

### **Wellbeing in Learning Environments**

SFU has a comprehensive collection of resources that help faculty support student wellbeing within their learning environments. This work is based on research conducted at the institution that identified 10 conditions for wellbeing in learning environments (Stanton, Zandvliet, Dhaliwal, & Black, 2016; Simon Fraser University, 2017). From that, they've developed a downloadable guide containing WBLE strategies and suggestions (Simon Fraser University, 2017), a workshop, a network that has 160 faculty to date, a quarterly newsletter, an annual event (i.e. Building Connections) where faculty share teaching practices, and a Teaching and Learning Development Grant, which allows faculty to evaluate the impacts of their teaching practices on student wellbeing.

UBC has also started developing their portfolio of WBLE resources. Based on research conducted at their institution, they identified their own collection of conditions that support student wellbeing in learning environments (Lane et. al., 2018). From this research they've developed a workshop and a guide containing relevant strategies (see Appendix 4).

Given that these two institutions contain expertise that is lacking at other PSI's, an opportunity exists to build off of their existing work to co-create new material.

Promising Practice



### **Supporting Students in Distress**

Although supporting students in distress was the most common resource topic identified in this scan, the need for training on this topic came up amongst institutions that had fewer financial and human resources. Furthermore, student distress material was identified at only 16 out of 25 PSI's investigated, and quick reference guides similar to the one found in Appendix 2 were identified at even fewer. Given the lack of time faculty have to engage with time intensive training, such as workshops, these quick reference guides may be an ideal delivery format. As such, it may be strategic to develop an adaptable Supporting Students in Distress template that can be used by institutions where this is type of resource is currently absent.

Pease note that further investigation should take place to confirm the absence of distress guides at these institutions, as it is possible that they exist but were not identified in this scan (e.g. interviewees may not have thought to bring this resource up, this resource may not be advertised on a PSI's website etc...)

### **Delivery Format**

Considering that faculty have limited availability for professional development and many institutions have minimal resources to provide training, a resource that is free, requires nominal human resources (or none) that can be consumed in small periods of time would be ideal. For example, short videos could be bundled into a "course" that could be completed by faculty and staff when needed. These video-based courses could be uploaded to online learning management systems already used by PSI's (e.g. Moodle, Canvas) or on relevant webpages. This delivery format could be used for mental health literacy, WBLE and TA training.

### Limitations

This scan was conducted during a popular vacation/retirement time as well as a very busy work period for faculty and staff. This added a barrier to obtaining information as well as securing interviewees. Furthermore, data collection practices across PSI's are inconsistent, and in many cases they could not produce all of the data sought in the descriptive data collection phase of this project.

Due to the lack of clarity around who is responsible for providing student mental health training to staff and faculty, many professionals redirected interview or information requests to student service professionals. Yet, student service professionals felt uncomfortable speaking about staff and faculty education during interviews and tended to discuss student services instead. Thus, the findings of this research may be limited due to a collection of these factors.



### Conclusion

This scan found that most professional development opportunities are delivered online through guides, handbooks or webpages that contain content about supporting students in distress, teaching practices that promote student wellbeing or mental health in general. These resources are largely available to staff and faculty, with very few targeting sessional faculty, teaching assistants or new employees.

Qualitative interviews revealed that student mental health training for staff and faculty was a gap—particularly with sessional faculty and new employees. Furthermore, they highlighted that educating faculty to support students mental health in the classroom was an unmet need. Given that most of the wellbeing in learning environment resources identified in this scan was clustered in 3 institutions, this gap is consistent with findings.

Postsecondary personnel are challenged with providing these supports due to a lack of qualified staff to provide expertise, uncertainty around the boundaries of care and struggles to penetrate busy faculty schedules. They all expressed enthusiasm for receiving an open access resource from BCcampus, on the condition that it is highly adaptable so that it can be tailored to their institutions unique needs and context.

An opportunity exists for BCcampus to partner with SFU to create a TA training curriculum and WBLE resource in open access formats. Furthermore, there is room to ensure that all PSI's are equipped with a supporting students in distress guide. Co-creating materials alongside faculty and staff is imperative to create something that is practical, useful and desired by this population. Lastly, a MHL framework should guide this work to ensure that the PSI workforce is trained comprehensively.



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### **Appendices**

### **Appendix 1: Interview Questions**

- 1. In your opinion, how successful is this initiative in meeting its objectives?
  - a. Has this initiative been systematically evaluated? If so, is this data publically available?
- 2. Does your institution plan on changing this initiative in any way?
- 3. In your opinion, what gaps exist at your institution to train/support (staff & faculty/students) in (supporting student mental health/in building their resilience and coping strategies)?
- 4. What are the **challenges** your institution faces when providing training/support to (staff & faculty/students)?
- 5. What has **enabled** your institution to provide resources to (staff & faculty/students)?
- 6. In your opinion, would your institution be **interested in using an open educational resource** to supplement the initiatives it already has? These would be administered at the local, regional and provincial level.
  - a. If yes, what might it look like?



### **Appendix 2: Supporting Students in Distress Example**

The following document was created by the University of British Columbia and was obtained on September 18, 2019 from: <a href="https://wellbeing.ubc.ca/supporting-students-distress">https://wellbeing.ubc.ca/supporting-students-distress</a>

### STUDENT HEALTH AND WELLBEING

raculty and for

### **ASSISTING STUDENTS IN DISTRESS**

### Recognize signs of distress

You may be the first person to see signs that a student is in distress or they may come to you specifically for help. Use this folder to familiarize yourself with common signs of distress, from mild to severe, and the steps you can take to offer assistance.

### Reach out and refer

Your role is not to diagnose or treat students, but you are in a position to make them aware of the help available. Early intervention plays a key role in helping students get back on track

### Access expert advice when needed

There may be times when you need more advice about how to support a student in distress. For more severe and urgent concerns, you can consult with:

- 1. UBC Student Health Service 604.822.7011
- 2. UBC Counselling Services 604.822.3811

Please identify yourself as a faculty or staff member who would like to consult about a student in distress



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### HAVING A CONVERSATION WITH A STUDENT IN DISTRESS

### 1. IF YOU'VE REACHED OUT TO THE STUDENT

- Be specific about the signs and behaviours that you've noticed > "I've noticed you've missed the last two midterms"
- Express your concern > "I am concerned and wanted to check in to see how you're doing"
- Reassure the student that reaching out to students who may be struggling is something all UBC faculty and staff do to help
- If a student doesn't want help, respect their decision.
   Accepting or refusing assistance must be left up to them, except in emergencies
- Try to leave room for reconsideration later on

### 2. RESPOND WITH EMPATHY AND NORMALIZE STRESS

- Listen actively and help the student feel heard and understood > "It sounds like you're facing a lot of difficulties in your life right now"
- Where stress seems related to traditional academic pressures, acknowledge that stress is a normal part of the university experience

### 3. ASK OPEN-ENDED QUESTIONS:

Giving students an opportunity to talk often has a calming effect and helps to clarify their concerns

- What have you tried so far?
- What do you think the main challenge is?
- What kinds of supports have you been accessing or drawing on up to now?

### 4. DISCUSS RESOURCE OPTIONS

- Point out that help is available; while seeking help can feel difficult at first, it is a sign of strength
- Provide the student with information about resources and supports (see next page) >
- Encourage the student to identify the next steps they plan to take

### **5. ENTER AN EARLY ALERT CONCERN: (SEE BACK COVER)**

 Whether or not you've had a conversation with the student, enter an Early Alert concern earlyalert.ubc.ca

### IF A STUDENT DOESN'T WANT HELP

- Respect their decision. Accepting or refusing assistance must be left up to the student, except in emergencies
- Don't force the issue or trick them into going to a referred resource
- Try to leave room for reconsideration later on



### TALKING TO A STUDENT IN DISTRESS

### **USE EARLY ALERT**

Always submit an Early Alert concern as part of your response, regardless of the perceived severity.

Early Alert allows faculty, staff, and TAs to identify their concerns about students sooner and in a more coordinated way.

### **EARLY ALERT:**

- Provides support for all students
- Allows for earlier support before difficulties become overwhelming
- Results in less time and fewer resources needed for students to recover
- Collects concerns from different sources across campus, allowing for a better understanding of individual student needs and how to provide appropriate support in a coordinated way
- Protects student privacy using a secure system
- Is not connected to the student's academic record

### **SUBMIT AN EARLY ALERT CONCERN**

earlyalert.ubc.ca

### **HOW DOES EARLY ALERT WORK?**

- Faculty and staff notice a student is facing difficulties and identify their concerns using Early Alert
- Managers, Student Support Services review all concerns submitted and identify the most appropriate resources for students in need of support
- 3. Advisors then reach out to students and offer to connect them with resources and support

92% of students respond positively to the invitation to meet with an advisor

### TAKE CARE OF YOUR WELLBEING:

UBC faculty and staff have access to a wide range of benefits and services to support their positive mental health and physical wellbeing

www.hr.ubc.ca/wellbeing-benefits/

QUESTIONS, COMMENTS, OR REQUESTS FOR COPIES OF THIS DOCUMENT CAN BE DIRECTED TO:

**Student Development and Services**Office of the Vice President, Students
604.827.2565
urgent.vps@ubc.ca

Original concept for this document courtesy of Queen's University and McMaster University.

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FS-V5-2018-08



### SIGNS OF DISTRESS AND RECOMMENDED RESOURCES

### **IMMINENT RISK OF HARM**

### Examples:

- Active thoughts of suicide with a plan or suicide attempt
- Behaviour that is violent, destructive, aggressive, or threatening to self or others
- Student is confused, hallucinating, or has trouble remaining conscious

### **HIGH LEVEL OF DISTRESS**

### **Examples:**

- Deterioration in personal appearance and hygiene and significant impairment with daily tasks
- Expressions of severe hopelessness or references to suicide
- Self-harm behaviour such as recent cutting or hitting, severely restricted eating with weight loss/ severe binge eating
- Substance use concerns
- Loss of touch with reality/severely disorganized thinking
- · Serious physical health concern

### **MODERATE CONCERN**

### Examples

- Low or irritable mood with change in energy, appetite, sleep, and/or concentration, which is impacting daily functioning
- Family or relationship problems, interpersonal conflict
- Traumatic event such as loss of loved one, homesickness, lack of social support
- Difficulty concentrating or learning new tasks
- Binge eating

### **GENERAL SUPPORT**

### **Examples:**

- Stress about exams, deadlines, grades, roommates, relationships, finances, adjustment to university
- · Advice about healthy eating, sleep, or sexual health

### STEPS TO TAKE:

- 1. Student to go to nearest hospital Call 911
- 2. Call UBC Campus Security 604.822.2222
- **3. Enter an Early Alert concern** (see back cover), monitored 7 days/week

### **RESOURCES AND SUPPORTS:**

**During office hours** 

• UBC Student Health Service 604.822.7011 Or student's family doctor or nearest medical clinic

After-hours or in an emergency

- 24/7 Crisis Centre 1.800.784.2433 crisiscentre.bc.ca
- Urgent Care, UBC Hospital 604.822.7121 (until 10 pm) Or nearest hospital emergency department (24/7)
- Access and Assessment Centre, Vancouver General Hospital 604.675.3700 (7:30am-11pm)

### **RESOURCES AND SUPPORTS:**

**During office hours** 

Counselling Services, Room 1040, Brock Hall
 Drop in to book an assessment with a Wellness Advisor

After-hours or anytime

- Empower Me 1.844.741.6389 (toll free, 24 hours)
  Call for free life coaching or counselling
- Mind Health BC mindhealthbc.ca

Take an online mental health assessment and find resources

• Health Link BC healthlinkbc.ca

Check physical health symptoms online and find resources

### **RESOURCES AND SUPPORTS:**

**During office hours** 

UBC Wellness Centre, Room 1400, UBC Life Building
 Drop in to talk with a trained student, or attend a workshop

After-hours or anytime

- Empower Me 1.844.741.6389 (toll free, 24 hours)

  Call for free life coaching or counselling
- Students.ubc.ca

Find resources, tutorials, and helpful tips organized by topic  $% \left\{ 1,2,\ldots ,n\right\}$ 



### Appendix 3: TA/TM Well-Being Project 2017/2018 Annual Report

The following document was created by Simon Fraser University and was obtained on September 18, 2019 from:

https://www.sfu.ca/content/dam/sfu/healthycampuscommunity/PDF/TA%20TM%20Wellbeing%20Report%202017%20and%202018%20Combined.pdf

### **TA/TM WELL-BEING PROJECT**

### 2017-2018 REPORT

SFU Teaching Assistants and Tutor Markers learn skills for maintaining resilience and well-being in grad school and create conditions for well-being in learning environments through their roles.



Introductory Workshop

### COMPONENTS



Weekly E-mail Inspirations with Practical Tips



End of Term Check-in and Evaluation

### **OUTCOMES**



**85%** become more aware of strategies for enhancing their own well-being



136 TAs involved



**81%** experienced positive benefits to their own well-being or personal growth



**83%** learned new strategies for creating conditions for well-being through the TA/TM role



70% have seen positive benefits to students



HEALTH

### **Appendix 4: Teaching Practices that Promote Student Wellbeing**

The following document was created by the University of British Columbia and was obtained on August 28<sup>th</sup>, 2019 from: <a href="https://wellbeing.ubc.ca/teaching-practices-promote-wellbeing">https://wellbeing.ubc.ca/teaching-practices-promote-wellbeing</a>

(Next page)



### Student wellbeing is enhanced when students are holistically supported

Students learn in the context of their lives, and instructors making a mistake or holding a different opinion, and where wellbeing related topics, and creating a safe classroom academic aspects of students' lives, openly discussing can support student wellbeing by acknowledging nonenvironment as one where they did not feel judged for they could participate in a way that they felt comfortable. environment. Students described a safe classroom

Student wellbeing is supported when students are supported holistically

## **RECOGNIZING THAT STUDENTS HAVE**

- ☐ Engaging in conversation not directly related to LIVES OUTSIDE ACADEMICS
- ☐ Reminding students that their marks do not determine their worth
- ☐ Setting office hours that accommodate students'
  - schedules
  - Ensuring that the workload is reasonable

    Reducing cost of course materials

    Clearly communicating grading and assess
- nunicating grading and assessi

- policies

  Not requiring proof from students experiencing a crisis

  Offering deadline extensions

  Incorporating flexibility into the grading scheme

  Setting deadlines to encourage work-life balance

Taking care of your own wellbeing is important

In addition, UBC is proud to offer a wide range of workshops and programs to help keep you working and living well. Visit www.hr.ubc.ca/wellbeing-benefits/ to learn more about the available resources.

### Additional information:

References:

Treating student input as valuable
Their press as necessary during challenging discussions
Respecting student automoroung
Asking for volunteers (s.c. ode-alling)
Acknowledging that university can be seary and

**CREATING A SAFE CLASSROOM ENVIRONMENT** 

wellbeing with the students

- ☐ Establishing a relationship based on trust with the students ☐ Allowing students space to be wrong, and gently redirecting
  - students as appropriate
- Ensuring that discussions allow space for different
- Using inclusive language
   Addressing safety and support early on in the term
   Allowing students to participate in multiple ways, if
   participation marks are deemed necessary
  - Offering trigger warnings when necessary

## **OPENLY DISCUSS WELLBEING-RELATED TOPICS** Discussing your own mental health and wellbeing Checking in with students who appear to be struggling Addressing campus issues that affect multiple students Sharing general information about mental health and

☐ Letting students know about campus ☐ Asking students how they are doing

### **PROMOTE STUDENT WELLBEING: TEACHING PRACTICES THAT** A Tool for Educators



This reflection tool is designed to give you an opportunity to think about your teaching practices through the lens of promoting student wellbeing. In this list, you may notice teaching practices that you already use. 

We invite you to identify and consider adopting one or two new teaching practices into your work.



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### 2012; El Ansari & Stock, 2010), and that some teaching practices are more Research shows that student wellbeing promotes learning (Keyes et al. effective than others at promoting student learning.

used mixed-methods to identify teaching practices that promote both student learning and student wellbeing. Teaching and Learning Enhancement Fund [TLEF]-funded project, Identifying the influence of teaching practices on undergraduate students' mental health and wellbeing in the Faculties of Arts and Science,

Learn more about the project methods and findings on our blog: blogs.ubc.ca/teachingandwellbeing/

### supported when students feel a sense Student wellbeing and learning are of connection and social belonging.

sense of wellbeing. Feeling connected to the instructor peer relationships in the classroom motivates students achieve academic success and in turn, have a greater motivates students to work harder in the course and makes it easier to reach out for help when necessary. Instructors who get to know their students are better to attend, helps them catch up if they miss something, When students feel included, it is easier for them to Social inclusion directly supports student wellbeing. interests, further motivating them to learn. Having able to connect course materials to the students' and supports studying outside of class.

instructors can use to foster relationships instructors identified several strategies Through our research, students and in the classroom:

## FOSTERING INSTRUCTOR-STUDENT

- RELATIONSHIP
  - Having short, informal conversations with st
     Encouraging students to attend office hours
    - Introducing yourself
    - Smiling

      Encouraging students to address you by you by playing your passion for the subject

      Sharing personal anecdotes

      Using humour as appropriate

      Learning and using student names

# FOSTERING PEER-TO-PEER RELATIONSHIPS

- Maintaining the same groups throughout the t
   Encouraging group work and in-class discussi
- Building learning communities (i.e. using icebreakers) (especially when it is not for marks)
- Offering bonus marks for students to attend 00
  - course-related community events
- Incorporating a lab, discussion group or tutorial Fostering a safe classroom envir
  - Offering field trips or other informal learning
- 00
  - Medium blue: Practices that may require some preparation by the instructor
- Dark blue: Practices that may require thoughtful preparation by the instructor

# Student wellbeing is supported when their learning (and motivation to learn) is supported

the subject matter interesting, relevant, or meaningful to them, and when they find the learning process when they feel that they are learning successfully. Students are more motivated to learn when they find engaging and enjoyable. Students feel they are learning more effectively when the course is structured to support student success, when students feel they are able to learn effectively in the classroom, and Our research showed that student wellbeing is supported when students feel motivated to learn and when students feel they are supported outside of class.

### **HELPING STUDENTS FIND VALUE IN THE** SUBJECT MATTER

STRUCTURING THE COURSE EFFECTIVELY Ensuring that all information is correct before posting

Indicating what is expected on an assig

- Sharing your passion and enthusiasm for the subject
  Explaining why a topic important
  Connecting course concepts to the "real word"
  Showing students where to learn more about a topic
  Using hands-on or applied learning
  Allowing students choice in their assignments
  Connecting students commity
- Connecting students to community

Sharing all course-related information in one place

Indicating what is expected on an assign
Ensuring that all information is correct b
Sharing the exam format
Avoid or minimize the weight of group m
Share the grade distribution
Setting all key course dates early
Providing a detailed course syllabus
Sharing all course-related information in
Indicating what will be covered on an exDesigning assessment questions that all

Indicating what will be covered on an exam

strate learning/underst

## **HELPING STUDENTS FIND VALUE**

- IN THE LEARNING PROCESS
- Hand-writing class notes on the whiteboa
  Encouraging students to ask questions
  Asking students questions
  Speaking in an engaging tone of voice
  Choosing interesting examples
  Incorporating multi-media
- Clicker questions
- In-class practice
- Field trips and attending community events

### **DELIVERING THE MATERIAL EFFECTIVELY** □ Providing lecture outlines□ Using simple language

Smaller, more frequent assessments, so long as the total volume of work is not increased

Provide timely & constructive feedback

Providing practice problems (with solutions)

☐ Allow sufficient time to complete assessm
☐ Providing practice problems (with solution
☐ Smaller, more frequent assessments, so k

- ☐ Using clear examples
   ☐ Explain things from multiple perspectives

- Conveying the material in a clear logical manner

  | Recomplied the material in a clear logical manner
  | Recorping at the end of lecture
  | Moving at a pace that is appropriate to the student
  | Using active teaching methods

## SUPPORTING LEARNING OUTSIDE

- THE CLASSROOM
  - Connect students to resources
- Suggesting effective study methods for the course □ Being accessible outside of class
- □ Soliciting feedback from your students □ Sharing your class notes online
  - ☐ Incorporate how-to's into the course ☐ Providing thorough notes ☐ Offering review sessions
    - Offering review sessions

### **Appendix 5: Community Resources**

### **Mental Health First Aid Training**

- This training provides a comprehensive understanding of mental illness and has proven to increase confidence in supporting someone with related issues.
- To become a facilitator, one must take a 5-day training course every 3 years.
- Similar training programs are available for seniors, adults who work with youth and Indigenous and first nations.
- Curriculum cannot be tailored, but examples and scenarios discussed throughout can.

### **QPR Institute**

- The QPR Institute (US) offers clients the option to either certify a trainer who can facilitate Question Persuade and Refer (QPR) training at their institute, or to hire one of their facilitators to conduct training. They also have an online training option, which is offered at a discounted price for student groups.
- Facilitator training costs \$495 US, is valid for 3 years, takes 12 hours to complete and can be completed online.

### **Centre for Suicide Prevention**

 This education centre is a branch of the Canadian Mental Health Association that is based in Calgary, Alberta. They house over 45,000 English language educational resources in print, online and interactive workshops. Two popular workshops are <u>Applied Suicide Intervention Skills Training</u> (ASSIST) and <u>safeTALK</u>. The Centre for Suicide Prevention works with <u>LivingWorks</u> to provide these workshops in areas outside Alberta. All workshops are in person and require a trained facilitators. LivingWorks conducts facilitator trainings outside Alberta, and takes a minimum of 14h over 2 days to complete

