



BCcampus
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MENTAL HEALTH COLLABORATIVE PROJECT

STUDENT RESILIENCE AND COPING TRAINING WORKSHOPS

ENVIRONMENTAL SCAN SUMMARY

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

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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 postsecondary students across British Columbia build resilience and coping skills. The environmental scan explored current opportunities for students to develop these skills through 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 learning opportunities are delivered **online** through various **webpages** about **meditation and mindfulness, mood and anxiety disorders, or mental health in general**. In addition to this, a large number of in-person **workshops** are available on similar topics. Although these resources are offered to all students, targeted training for **Indigenous, graduate and international students** are sparse. Furthermore, crucial training regarding **suicide awareness, substance use and resilience** represented an alarmingly small portion of resources identified in this research.

Postsecondary professionals believe that **group programming** and **culturally diverse resources** are a pressing need, but are challenged with providing them due to low **human resources, busy student schedules** and institutional **education models** comprised of short-term programs. However, strong **collaborations** between **passionate** and allied professionals have contributed positively to their efforts. These professionals are enthusiastic about receiving an open access resource from BCcampus, but caution that it must be highly adaptable to fit their institutions unique needs and context.

More and more institutions are developing mental health strategies, mental health peer programs and other mental health initiatives, which signals an increased interest in supporting student's mental health. This provides BCcampus with an opportunity to create an open education resource that discusses suicide awareness, substance use and/or resilience, in a way that addresses the unique needs and perspectives of Indigenous, graduate and international students. **Co-creating materials alongside students** is imperative to create something that is practical, useful and desired by this population. Potential partners in this work may include the University of Victoria's Canadian Institute for Substance Use Research, UBC's Dr. Michael Lee—who is interested in graduate wellbeing research—and Indigenous Service professionals across the province.

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).

Evidently this group would benefit from help in managing the stresses of postsecondary life and achieving greater psychological health. Given the plethora of factors that can negatively impact student’s mental health, it’s difficult to determine the best place to put ones energy and to determine what resources would best support them. Over the past few years, resilience building has become a popular strategy to transcend this problem. Resilience is ones “relative resistance to an environmental risk or the overcoming of stress and adversity despite traumatic exposure” (Rutter, 2006). In other words, people who are resilient bounce back more quickly when faced with a stressful event than those who are less resilient. Enhancing students’ resilience has been found to increase retention in individuals with psychiatric disabilities (Heartly, 2010) and correlates with a higher quality of life (Tempski et al., 2015). In light of this, focusing on resilience as a health promotion intervention appears to be both practical and effective in a postsecondary context.

In response to this, the Collaborative Projects (CP) team at BCcampus embarked on a project to support students and institutions across the province. 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 opportunities for students to build resilience and coping strategies. This report details the methods and findings from that environmental scan.

Project Overview

This environmental scan explores existing learning resources for students that were developed, are delivered, and/or are incorporated into PSI's across BC. It will also investigate 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 over the past academic year (2018/2019). This includes courses, workshops, seminars, speaker series, annual events, podcasts, print materials, videos or online resources. Mental health learning resources that were developed in Canada and abroad will be investigated if they are being used by PSI's in BC. The following research question guided this work:

What educational resources have been available to postsecondary students in BC over the past year that aims to build their resilience and coping strategies?

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: counselling, health services, Indigenous services, international services and student development.

Exclusion Criteria

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

- Student health insurance companies
- Student clubs, unions or societies
- Student 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
- General wellness events or services (e.g. yoga, meditation groups, counselling) that did not have a significant educational component were not included

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.

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 student 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 will allow patterns to emerge from the data while also highlighting service gaps.

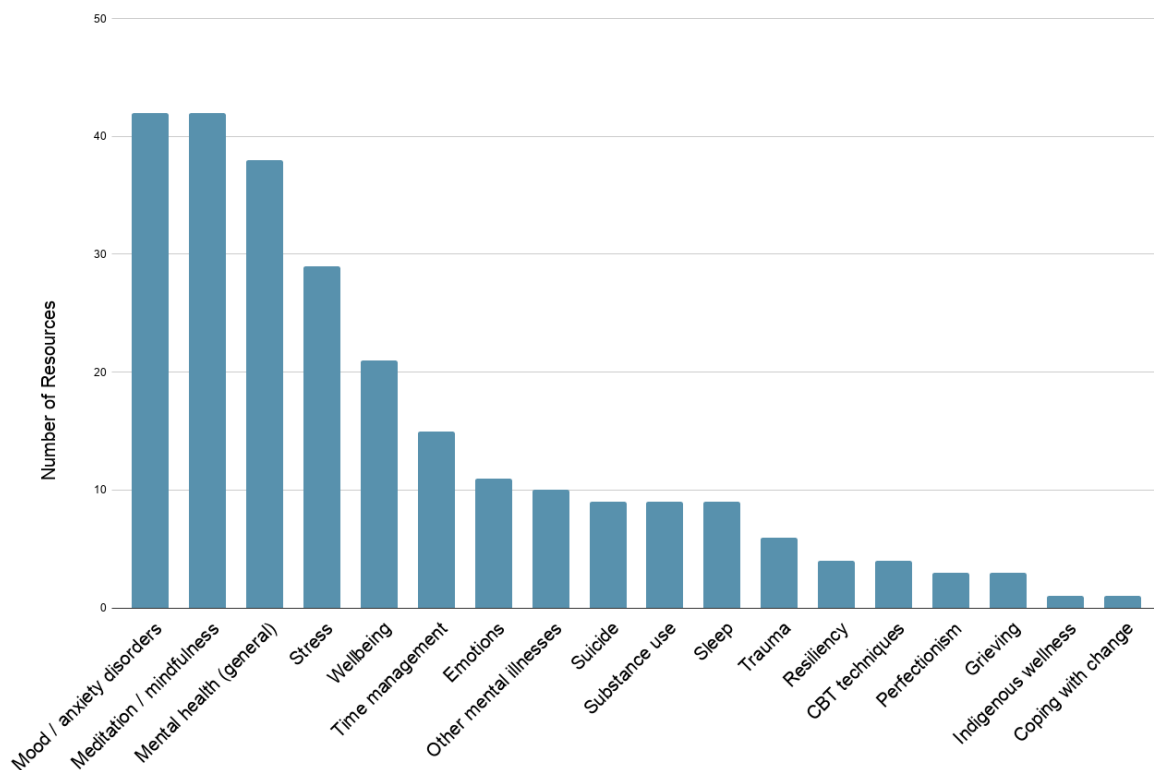
Findings

Descriptive Data

Topic

The topics that came up the most often across resources were ***meditation and mindfulness*** (16.34%) and ***mood and anxiety disorders*** (16.34%). Meditation and mindfulness resources are available predominantly through links to external webpages that provide text-, video- or audio-based content. There are also a large number of referrals to meditation apps such as MindShift, Head Space, or Thinkful. Although many PSI's have regular meditation groups, these initiatives were not included in this scan unless a clear educational component was identified. There was also a large number of links to external webpages with text- or video-based content related to mood and anxiety disorders. However, a larger number of these resources were delivered through in-person workshops or discussion groups. A healthy amount of content from both of these topics was tailored to a postsecondary audience.

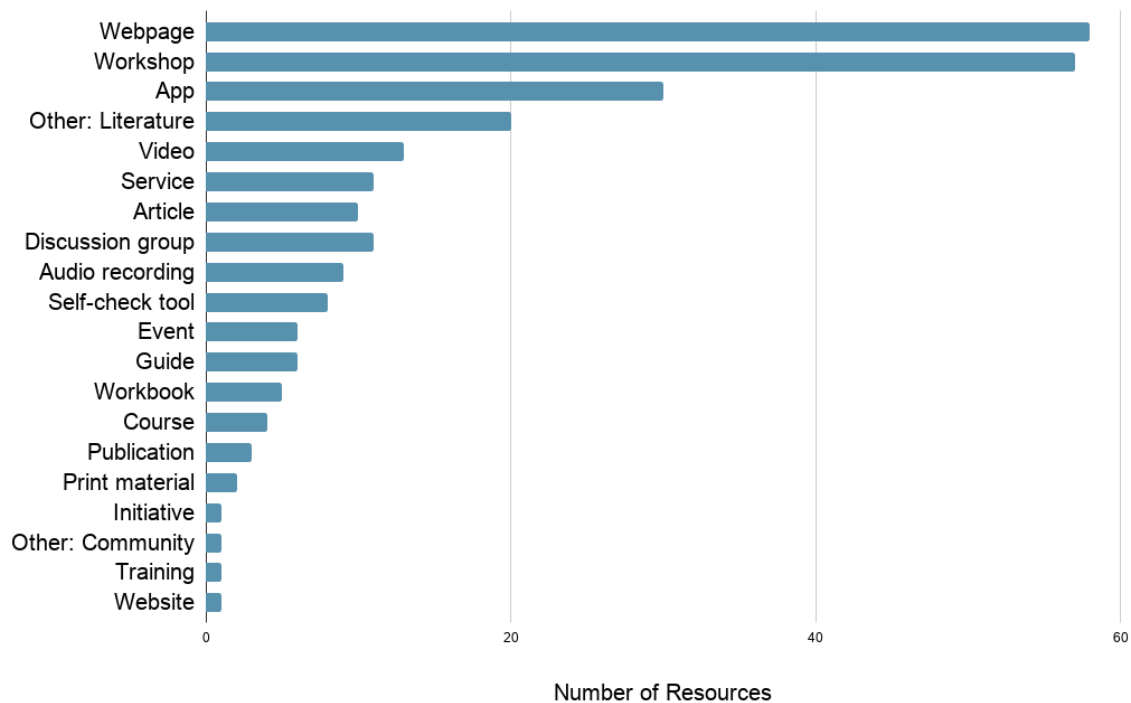
The second (14.79%) most common group of resources was about ***mental health in general***. These were webpages, articles, workbooks (etc...) that discussed the importance of caring for ones mental health, the impact of mental illness on ones functioning and techniques to maintain mental health. In some cases, students were linked to webpages that contained information about a variety of mental illnesses as opposed to focusing on one topic. Furthermore, 24.56% of the total number of workshops offered discussed mental health in general.



Delivery Format

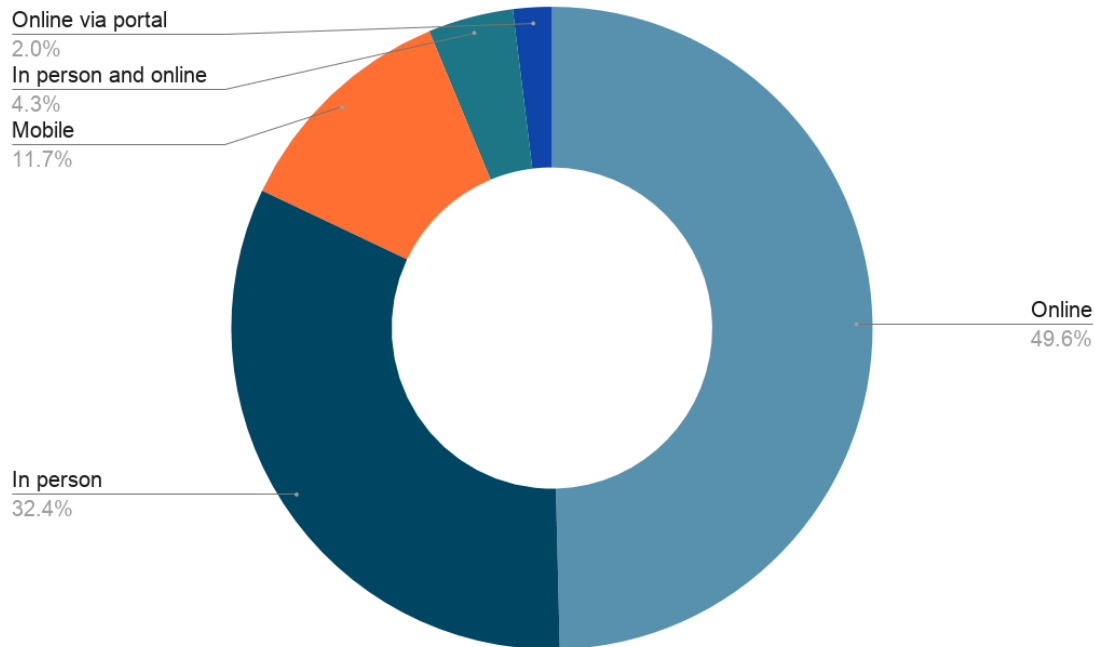
22.57% of resources are available through **webpages**, and 22.18% are **workshops**. Webpages include both institutional landing pages, as well as external web content that students are linked to. Out of all workshops identified, general mental health education was facilitated 24.56% of the time, followed by time management (15.79%) and mood/anxiety disorders (14.04%).

Beyond this, students were referred to use apps (11.67%) and engage with other online literature (8.56%), which includes handbooks, online documents, booklets and brochures.



Type of Access

Close to a majority of resources are offered online (49.60%), whereas 32.40% are offered in person and 11.70% are available through mobile apps.



Duration and Frequency of Delivery

Workshops range from 10 minutes to 3 hours in length. The shorter workshops are typically conducted in classrooms and focus on raising awareness about campus services as well as quick tips to maintain one's mental health. Some longer workshops are delivered across 3 days and last 1.5 hours each. Out of the 31 workshops where data regarding frequency was obtained, 41.94% were offered only upon request, 38.71% were offered on an annual basis (ranging from 2-7 times per year), and 19.35% were held on a weekly basis spanning 1-3 times per week.

Events are held mostly on an annual basis, although one learn to meditate event occurs weekly. The duration of these activities range from 45 minutes to 2 days, but most are 2-5 hours.

Video content is typically very short (3 min) but ranges from 1-11 minutes in duration, and is available on an ongoing basis.

Discussion groups meet for 1.5h-2hs at a time on a weekly basis.

Audience

The vast majority of resources were available to all students (96.12%), with only few targeting specific populations

Audience	
Type of Student	Number of Resources
All students	247
Grad students	4
Student leaders	2
Minority students	1
International students	2
Indigenous students	1

Qualitative Data

In total 88 emails were sent out to inquire further about resources as well as to request interviews. 18 interviews were conducted.

Perceived gaps

A wide range of gaps were identified:

Topic: How to make friends	Mental health peer support	Group programming	Accessible services
Topic: Managing academic stress	In-class presentations	No health promotion staff	No mental health strategy
Topic: Resiliency training	Okanagan Charter (not signed)	Inter-departmental integration of mental health care	Culturally diverse resources

Culturally diverse resources were mentioned the most often. Staff conveyed the importance of providing incoming international students with mental health literacy training in a culturally sensitive way in order to support their transition. In addition, they believed that existing resources should be adapted to convey material in culturally sensitive ways to students, including translating content into a variety of languages.

The **lack of dedicated health promotion staff** was the second most common gap identified, followed by the **lack of a mental health strategy** and **inaccessible services**. Without dedicated health promotion staff many interviewees provide education and training to students off the side of their desk, which is challenging given their already full workload. In the absence of key institutional priorities around mental health, acquiring funds to hire health promotion

professionals is a challenge. Interviewees also highlighted the importance of providing student development opportunities beyond normal business hours, which often conflict with student's busy schedules. For example, students are commonly in class from 8 a.m.- 3:30 p.m., but offices that provide mental health programming often close at 4 or 4:30 pm.

Lastly, a few staff mentioned the need for **group programming**. They expressed the importance of providing students with the opportunity to build social networks, which can bolster their resilience in the future.

Challenges

Out of all the challenges brought up during interviews (Appendix 2), the following 4 received the most attention: **human resources, student diversity, the educational model of institutions and connecting with students**. In fact, 66.67% of stakeholders said that the mental health needs of students greatly outweigh the *number of staff* available to support them. Further, the needs of student populations are becoming more *diverse*. For example, there are a greater number of international students on campus, and they may be arriving without an understanding of what mental health is or how it impacts their academic performance. In addition, the source of students stress is diverse (e.g. financial, relationship, academic, past trauma etc...), which makes strategic programming difficult. Moreover, the type of educational programs offered at each PSI alters the type of students that enroll. For instance, a college that offers high school equivalency courses, trades or other certificate programs often has a larger number of mature students that have unique needs compared to students coming straight from high school.

The *educational models* of each institution will not only impact the type of student that enrolls, but will also impact how staff can support them. Consider Royal Roads for example, a large portion of their programs are offered online, which means that most of their students are distance learners who spend a few weeks on campus in total. This makes it hard to offer in-person resources, especially those that require weekly attendance. Institutions offering programs that run outside of a three-semester schedule face unique challenges as well. Interviewees say that students enrolled in 2-year or 7-week programs aren't easily engaged, as they often have their mind set on obtaining future goals.

Cutting across all of these factors is the challenge staff face in actually *connecting with students*. Counsellors, who work regular business hours, provide a large portion of mental health education and find it difficult to reach their overscheduled students. This scheduling issue is compounded by the complexity of mental health and resilience, which require more than an hour to fully understand—let alone develop relevant and effective skills in.

Enablers

Despite these challenges, PSIs are still offering a wide variety of resources to help students build coping skills and resilience. 50% of stakeholders credit their success to having **strong collaborations** between departments and with students. For example, UBC's Health Promotion

and Education team, Counseling Services and Health Services have fostered strong relationships to ensure that their programming is consistent, supplementary to one another and accessible to students through multiple pathways (e.g. in the health clinic, through counseling services, and/or through the Wellness Centre). Notably, a mental health nurse from the Student Health Clinic holds regular visiting hours at the Wellness Center where educational support around stress, anxiety, resilience building is provided to anyone that stops by. Other institutions leverage their existing relationships with students to co-develop resources or receive feedback before launching. Interviewees suggest that this is essential to creating relevant tools that will be used by students.

Several institutional factors such as ***funding, senior leadership support*** and having ***passionate staff***, also came up frequently in interviews. In addition to this, several institutions mentioned the utility of leveraging ***community resources*** in providing education to students. For example, Douglas College hosts an annual Beyond the Blues event where the Canadian Mental Health Association provides free merchandise, marketing support, mental health screening coaching and information about mental health that can be distributed to students. See Appendix 3 for a list of other community resources PSI's are currently taking advantage of.

Interest in Open Education Resources

100% 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. Lastly, the importance of receiving student feedback before dissemination—or even co-developing the resource alongside students—was echoed as crucial to student uptake.

Aside from this feedback, a few suggestions arose about what the open education resource might be. One interviewee is in need of a reporting form that faculty fill out to flag concerning student behaviours with their institution. Another reported a need for suicide intervention training, and others expressed openness for receiving information packages, workshops and/or curriculums that require no additional human or financial resources from the PSI.

Discussion

Trends

Online Delivery Method

Nearly half of the educational opportunities available to students are delivered online and are engaged with independently. Although this allows students to access information whenever and wherever it is convenient for them, some interviewees believe that this delivery method places the responsibility of mental health training and support inequitably on the shoulders of students—especially when other development opportunities available on campus are slim to none. Moreover, it doesn't offer opportunities for students to connect with one another, which could help reduce the high rates of loneliness on campuses in Canada (American College Health Association, 2019). However, further investigation is required to determine what modes of delivery students prefer.

Peer Programs

As a result of recent government investment, peer programming is becoming a popular method for delivering health promotion education to students. These programs typically require student volunteers to operate wellness centres, where they provide information and informal peer-to-peer support on a variety of wellness topics, as well as run health promotion outreach booths, events and workshops. As such, peer programs are helping to fill a human resource gap by providing services that busy staff would have otherwise been unable to provide.

To ensure that volunteers are able to carry out this work with competence and sensitivity, they undergo extensive training at some PSI's. For example, the University of Victoria has embedded mandatory professional development meetings (bi-weekly) and workshops (monthly) into one of their peer mentor programs. North Island College takes their volunteers on a 2-day mental health retreat that consists of mental health training, community presentations on living well and discussion about wellness on campus. As such, these students are receiving a considerable amount of training that will enhance their resilience and ability to cope with adversity.

Mental Health Initiatives

There are a lot of mental health initiatives being undertaken across the province. Several PSI's are in the process of developing a mental health framework, while others are training staff to become Mental Health First Aid facilitators. Furthermore, a number of new pilot projects are underway. For example, SFU is piloting a weekly discussion group this fall called Mindful Medicine for Women of Colour, and Thompson Rivers University has launched a full day of training for students called Health and Wellness 411. This signals an increasing interest and willingness in supporting student mental health.

Redundancies

A number of great websites were listed frequently as educational resources for students to consult. Notable sites include:

[American Association of Suicidology](#)

[Depression Hurts](#)

[Half of Us](#)

[Heads Up Guys](#)

[Informed Choices about Depression](#)

[Centre for Suicide Prevention](#)

[Anxiety Canada](#)

[Canadian Mental Health Association](#)

Gaps

Audience

A shockingly small number of resources address the unique educational needs of **graduate**, **Indigenous** and **international students**. Although the vast majority of resources are available for all students to use, these 3 groups have unique postsecondary experiences and personal histories that are highly implicated in the learning and application of resilience training. For example, the conceptualization of wellness and methods of achieving it differs between cultures, yet most training conveys a western/Eurocentric ideology. Similarly, the problems that graduate students face differ from those experienced by undergraduates (e.g. relationship with supervisor, research funding, thesis writing), but current development opportunities are heavily curated with undergraduates in mind.

Topic

A healthy balance of resources are dispersed between topics that have a high need for postsecondary students (i.e. mindfulness, mood/anxiety disorders and general mental health). Yet, a few topics still appear to be underrepresented: **substance use**, **suicide prevention**, and **resilience**.

Youth aged 19-29 are more likely to die from illicit drug use in BC than any other age group (Schqetizer, Kennedy & Eppler, 2016). This coupled with BC's ongoing opioid crisis demonstrates a pressing need to help students develop skills that will support them in using substances responsibly, cope with pressure to use and handle life stressors that may lead to increased drug consumption. There has been an increase in naloxone kit training at several institutions, but they were not captured in this scan due to project scope limitations.

In 2016 suicide was the second leading cause of death for Canadians between ages of 15-34, and men were 3 times more likely to die by suicide than women (Public Health Agency of Canada, 2019). Yet, only 3.5% of the resources identified in this scan aim to educate students how to prevent suicide or respond to suicidal ideation. Moreover, many of these opportunities are heavily framed around helping a peer as opposed to helping oneself. There is clearly a gap around suicide awareness and response training, and an even greater need exists for these

opportunities to address the experience of suicidal ideation (e.g. what is suicidal ideation and does it correlate with attempted or completed suicide? What can lead to suicidal ideation? How to respond to your own suicidal thoughts etc...) as well as how to seek help for oneself. Although peer training is crucial, helping students build the skills to cope with suicidal thoughts is paramount—especially for males.

Many of the resources identified in this scan help build students resilience. For instance, learning to manage one's time, stress and sleep can help students respond to adversity more skillfully than those who lack these skills. Further, helping students understand what resilience is and why it's important can help students conceptualize wellness strategies at a deeper level. However, opportunities related specifically to understanding and developing resilience represent only 1.56% of the resources offered by PSI's.

Opportunities for Improvement

Mental Health Literacy Framework

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 one's understanding of how to seek help, which may entail awareness of when help is needed and what services are available. An opportunity exists for BCcampus to follow a MHL framework when building open access resources for PSI's to ensure comprehensive development opportunities are available to students. Each of these components has received adequate attention with regards to student development opportunities across BC, thus emphasizing any one of these domains is not required. Instead, it is recommended that new resources be created with a MHL framework in mind in order to be consistent with this popular mental health promotion approach, as well as comprehensive.

Audience

Opportunities to build resilience and coping strategies should reflect the increasingly diverse student bodies we're seeing across BC. Given that only 1 resource was identified that conveyed concepts of wellbeing through an **Indigenous** lens, a huge opportunity exists to fill this much-needed gap. Culturally sensitive information about wellness (e.g. through a medicine wheel lens), coupled with appropriate suggestions for maintaining one's wellbeing (e.g. speaking with Elders) could be delivered in traditional formats (e.g. orally transmitted by Elders).

Furthermore, only 2 resources were found that spoke specifically to **international students**. The challenge of moving to a new country is compounded with the struggles of surviving postsecondary education, and students may not understand the support systems available to them when they arrive.

Lastly, learning resources could be developed for **graduate students** to help them develop the skills they need to cope with the unique stressors of graduate life. [Dr. Michael Lee](#) from UBC may be an ideal partner in this work as he has an interest in graduate student resilience and wellbeing. Moreover, UBC has a [Grad Student Wellbeing Network](#) that aims to improve the mental health of graduate students on campus. Unfortunately, since this is a student run group, the resources they offer were not collected in this scan.

Co-creation with Students

Students are the experts of their own postsecondary experiences, and are vital sources of information about how—and what—content should be delivered to them. Interviewees mentioned the importance of creating resources alongside students to increase chances of uptake, thus highlighting an opportunity for BCcampus to engage with students throughout the development process. Furthermore, the relationship between increased uptake and community engagement have been well established in the literature (Collins, Clifasefi & Stanton, 2018; Jagosh et. al., 2012). With this in mind, BCcampus could connect with student clubs and/or societies to create a student advisory committee that will share feedback throughout each stage of resource development. Given the close relationship that the Health Minds | Healthy Campuses initiative has with PSI's across BC; they may be a good resource to leverage when identifying interested students.

Delivery Method

Some universities, such as UBC, are taking workshop content and creating online courses that can be completed on demand. What's unique about their approach is that these courses will be made available through their central learning management system (i.e. Canvas), which is used daily by students to submit assignments, download readings, review marks etc... The majority of PSI's use Moodle as their learning management system, and several use Blackboard or Brightspace. Given that all of these systems are capable of embedding videos into courses, it's possible that this mode of delivery could be used at other institutions as well.

Limitations

The findings of this scan are limited insofar as they did not collect data on educational opportunities that may be provided by student clubs and student health insurance companies. Furthermore, students were not interviewed and therefore their perspectives on this topic were not captured.

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

Conclusion

This scan found that most learning opportunities are delivered online through various webpages about meditation and mindfulness, mood and anxiety disorders, or mental health in general. In addition to this, a large number of in-person workshops are available on similar topics. Although these resources are offered to all students, targeted training for Indigenous, graduate and international students are sparse. Furthermore, crucial training regarding suicide awareness, substance use and resilience represented an alarmingly small portion of resources identified in this research.

Postsecondary professionals believe that group programming and culturally diverse resources are a pressing need, but are challenged with low human resources, busy student schedules and educational models comprised of weekly or bi-monthly academic calendars. However, strong collaborations between passionate and allied professionals have contributed to their success. These professionals are enthusiastic about receiving an open access resource from BCcampus, but caution that it must be highly adaptable to fit their institutions unique needs and context.

An opportunity exists for BCcampus to co-create an educational open access resource alongside students that discusses suicide awareness, substance use and/or resilience, in a way that addresses the unique needs and perspectives of Indigenous, graduate and international students.

References

- American College Health Association (2019). *American College Health Association-National College Health Assessment II: Canadian Consortium Executive Summary Spring 2019*. Silver Spring, MD: American College Health Association.
- BCcampus. (2019). Environment Scan for the Mental Health Projects in B.C. Retrieved on Aug 23, 2019 from: <https://bccampus.ca/environment-scan-for-the-mental-health-projects-in-b-c/>
- Boyzatis, R. (1998). *Transforming qualitative information*. Thousand Oaks, CA: Sage Publications.
- Braun, V & Clarke, V. (2006). Using thematic analysis in psychology. *Qual Res Psychol*, 3(2):77-101. doi:10.1191/1478088706qp063oa.
- Collins, S., Clifasefi, S. & Stanton J. (2018). Community-based participatory research (CBPR): Towards equitable involvement of community in psychology research. *Am Psychol*, 73(7):884-898. doi:10.1037/amp0000167.
- Jagosh, J., Macaulay, A. C., Pluye, P., Salsberg, J., Bush, P. L., Henderson, J., . . . Greenhalgh, T. (2012). Uncovering the benefits of participatory research: Implications of a realist review for health research and practice. *The Milbank Quarterly*, 90, 311–346. <http://dx.doi.org/10.1111/j.1468-0009.2012.00665.x>
- Hartley, T. M. (2010). Increasing resilience: Strategies for reducing dropout rates for college students with psychiatric disabilities. *American Journal of Psychiatric Rehabilitation*, 13:4, 295-315, DOI: [10.1080/15487768.2010.523372](https://doi.org/10.1080/15487768.2010.523372)
- Pearson, Janz & Ali (2013). *Health at a glance: Mental and substance use disorders in Canada*. Statistics Canada Catalogue no. 82-624-X.
- Public Health Agency of Canada. (2019). *Suicide in Canada: Key Statistics*. Retrieved September 15, 2019 from: <https://www.canada.ca/en/public-health/services/publications/healthy-living/suicide-canada-key-statistics-infographic.html>
- Rutter, M. (2006). Implications of resilience concepts for scientific understanding. *Annals of the New York Academy of Sciences*, 1094, 1–12. <http://dx.doi.org/10.1196/annals.1376.002>
- Schweitzer, C., Gill, S., Kennedy, A., & Eppler, K. (2016). Youth and the opioid crisis: Strategies for intervention and the British Columbian experience. *Population*, 2017.

Tempksi, P., Santos, I. S., Mayer, F. B., Enns, S. C., Perotta, B., Paro, H. B., ... & Guimaraes, K. B. (2015). Relationship among medical student resilience, educational environment and quality of life. *PLoS One*, 10(6), e0131535.

Strauss, A. (1987). *Qualitative Analysis for Social Scientists*. Cambridge, UK: Cambridge University Press.

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: Challenges (Qualitative Data Analysis)

Funding models	Human resources	Lack of senior leadership support	Physical space limitation
Low funding	Rural campuses	Student population growth	Connecting with students
Boundaries around provision of care	Student diversity	Consistent language around mental health	Education models

Appendix 3: Enablers (Qualitative Data Analysis)

Targeting student leaders	Mental health strategy (implemented)	Senior leadership support	Funding
Small campuses	Passionate staff	Community partnerships	Collaborations
PSI resource sharing	Mental health committee	Healthy campus culture	Accessible research on mental health
Providing online resources	Providing classroom presentations	Government prioritizing mental health	

Appendix 4: Community Resources

This is a list of community resources leveraged by PSI's to help students build skills to support their mental health.

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.
- See here for more information about facilitator training outside the US: https://courses.qprinstitute.com/index.php?option=com_zoo&task=item&item_id=15&Itemid=739

Psychological Health and Safety

- Dr. Merv Gilbert and Dr. Dan Bilsker created the Psychological Health and Safety website (psychhealthandsafety.org), which contains a number of workbooks, manuals and other resources to help teens, employees and the general public deal with psychological distress. Popular resources include the [Antidepressant Skills Workbook](#).
- These resources are available for free on their website, but cannot be adapted. The authors must be contacted to discuss printing and distributing content.

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 [Applied Suicide Intervention Skills Training](#) (ASSIST) and [safeTALK](#). The Centre for Suicide Prevention works with [LivingWorks](#) 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.

[Here to Help](#)

- This organization provides many opportunities for the public to educate themselves about various psychological concerns by reading online educational content. They also run [Beyond the Blues: Education and Screening Days](#), which is a popular event to hold on campus. With regards to the latter, Here to Help provides training for event planners, information about mental health that can be distributed to students, merchandise, marketing support and coaching to conduct mental health screening—all for free.

Appendix 5: Promising Practices

There were a number of resources discovered in this scan that held promise for helping students build resilience and coping skills, but were either already available as an open access resource, or weren't compatible as one.

Promising Practices

Dinner Basket Conversations

- This is an open access resource provided by the Healthy Minds | Healthy Campuses Initiative. It encourages students to cook a meal together while discussing difficult topics such as substance use and mental health. The institution advertises the initiative and provides interested students with a basket of food that they can use for their meal.
- They provide a [toolkit](#) for implementation support. This has been used with [success](#) by Selkirk College

Thrive week

- This is a week where wellbeing is promoted across campuses through various events including free yoga and meditation classes, social gatherings, information booths and workshops. The purpose of Thrive is to raise awareness about existing services that promote wellbeing (e.g. fitness classes), and offer opportunities for people to engage with activities that support their wellbeing. Although Thrive week isn't exclusively focused on building skills that will help students support their mental health, it is a good medium to achieve this goal on an annual basis. Thus, it is very likely that educational/skill building initiatives are included in Thrive, but were not captured in this scan. A number of PSI's (e.g. UBC, Vancouver Island University) have Thrive events, or something similar to it.

[Y Mind](#)

- This program was developed by the YMCA and has received an incredible amount of success since inception. It is a psychoeducational group program where students get together once a week for seven weeks to discuss anxiety and build skills to cope with it.
- The YMCA provides free facilitator training across the province. At this point, they do not have capacity to expand to other postsecondary institutions. However, they will be seeking additional funding from the government in 2020 to support future expansion.
- They have recently developed, and are currently in the process of piloting, an Indigenous version of this program called Mind Medicine.