



KAMLOOPS • NANAIMO DUANE@DKSCONSULT.COM DKSCONSULT.COM

FINAL REPORT November 15, 2020

Evaluation Team

Duane K. Seibel, MA - Principal Consultant
Angela Katsamakis, MA, CCC - Consulting Associate
Alexis Stuart, BSW, RSW, MEd - Consulting Associate
Tara Mochizuki, BSW, MSW - Consulting Associate
Meaghan Hagerty, BHSc, MSc - Consulting Associate
L. Michelle Seibel, RN, BSN, PID, MA - Consulting Associate

Suggested Citation:

Seibel, D. K., Katsamakis, A., Stuart, A., Mochizuiki, T., Hagerty, M., & Seibel, L.M. (2020). *Final report: Evaluation of resources for mental health and wellness training in the post-secondary context (students, staff, and faculty) phase one.* Vancouver, BC: BCcampus.



This work is licensed under a Creative Commons Attribution-Non Commercial 4.0 International License (https://creativecommons.org/licenses/by-nc/4.0/), except where otherwise noted.



Table of Contents

SUMMARY	5
INTRODUCTION	5
BACKGROUND	.
Post-Secondary Students' Mental Health and Well-Being	
METHOD	
Scope	
Exclusion Criteria	
Review and Evaluation of Resources	_
Resources Identified in the First Environmental Scan	
Resources from B.C. Post-Secondary Institutions	11
Resources from Community Organizations	
Resources from Universities in Other Provinces	14
FINDINGS	14
Gaps in Mental Health and Wellness Education and Training	14
Gap 1: Mental Health Literacy and Foundational Knowledge	14
Faculty and Staff Resources	
Student Resources	15
Gap 2: Suicide Awareness	15
Gap 3: Resources for Indigenous Students	15
Gap 4: Resources for International Learners	17
RECOMMENDATIONS	17
Recommendation 1: Faculty and Staff Training Resource	18
Recommendation 2: Student Training Resource	
Recommendation 3: Complementary Training in Suicide Awareness	18
LIMITATIONS	19
CONCLUSION	19
Appendix 1: Summaries of Recommended Resources	2 1
Appendix 2: Evaluation Rubric	24
Appendix 3: Community Organizations that Offer Mental Health Training Resources	25
Appendix 4: Resources Considered from Universities Outside of B.C	
Glossary	27
References	29

Acknowledgements

Our team is dispersed across British Columbia, and we wish to acknowledge that we are honoured and privileged to conduct this work as visitors in:

Kamloops, which is situated on the lands of the Tk'emlúps te Secwépemc within Secwépemc'ulucw, the traditional, ancestoral, and unceded territory of the Secwépemc people.

Ladysmith, which is situated in the traditional, ancestoral, and unceded territory of the Coast Salish Peoples, on the lands of the Stz'uminus people.

Nanaimo, which is situated in the traditional, ancestoral, and unceded territory of the Coast Salish Peoples, on the lands of the Snuneymuxw people.

Vancouver, which is located in the traditional, ancestoral, and unceded territory of the Coast Salish Peoples, on the lands of the xwməθkwəẏəm (Musqueam), Skwxwú7mesh (Squamish), Stó:lō and Səlílwəta?/Selilwitulh (Tsleil-Waututh) Nations.

We would also like to acknowledge our colleagues throughout the B.C. public post-secondary system for their work in developing mental health and wellness education and training for their campus communities and their willingness to share these resources with our team.

This project was undertaken at the most challenging of times, when post-secondary institutions were reconsidering and adapting the way in which they provide education and student services during a global pandemic. These institutions and their employees were stretched and struggling to support their students while also considering the well-being of their employees and faculty. We thank the many individuals who enthusiastically and promptly identified and shared their unique educational and training resources in spite of these challenges. By sharing their work, they have demonstrated the importance they place not only on enhancing the well-being of their campus communities, but also in disseminating programming that could support students and staff in the broader provincial system.

Our team is also appreciative of the Ministry of Advanced Education and Skills Training and BCcampus for initiating this project, which will ensure students at post-secondary institutions have the tools they need to support their mental health and wellness. In almost every meeting, mental health and wellness contacts expressed their appreciation for the opportunity to share their training and have the opportunity to later access additional resources to support their campus communities.

SUMMARY

This report highlights the research approach undertaken to gather and evaluate mental health and wellness resources at public post-secondary institutions in B.C., select universities outside of B.C., and community organizations that provide mental health and wellness programming. It presents the evaluation team's findings, including identified gaps in training and education within the provincial post-secondary system, recommendations on training resources that may be adapted for broad use as an open education resource, and considerations for future work and development.

The report recommends open education resources be developed and adapted in three areas:

- A mental health and wellness training resource for faculty and staff (based on Vancouver Island University Capacity to Connect training, with consideration of University of Victoria's Mental Health Literacy program, levels one and two)
- A mental health literacy resource for students (based University of British Columbia's Mental Health Literacy Workshop for students)
- A complementary resource on Suicide Awareness (based on University of Victoria's Suicide Awareness workshop)

INTRODUCTION

DKS Consulting was contracted to assess mental health and wellness education and training and identify resources that could be used to develop open education resources (OERs) for broad delivery at all post-secondary institutions in B.C.

This review identified a vast array of training resources that are available within post-secondary environments. The training resources range from brief, topic-specific workshops to fully developed programming of varying lengths that are delivered synchronously (in-person or online through webinars) and asynchronously. We were provided with parameters to ensure our collection and review was focused on broad topics and avoided resources that were too specific to certain mental health disorders. In addition, we only considered resources that were developed to a standard that could easily be adapted for an OER. Our contract provided guidance on curriculum components sought in identified training and education and where to scan for materials. The deliverables were to:

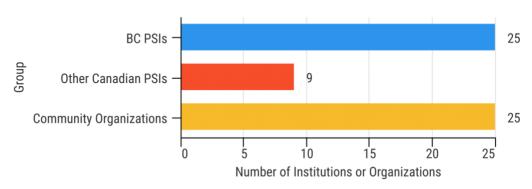
- Review and analyze existing mental health and wellness resources identified in the first BCcampus environmental scan (Moore, 2019), using the document Framework for Evaluating Mental Health and Wellness Education and Training Resources (Evaluation Framework)
- Include a scan and analysis of additional education and training resources at B.C. post-secondary institutions, community organizations, and other post-secondary institutions outside of B.C. using the Evaluation Framework
- Identify gaps in education and training resources to inform the resource development phase
- Recommend appropriate training resources that can be adapted for OERs

The BCcampus Advisory Group asked that this project also identify synchronous training that could be delivered in-person or through online webinars/workshops, as well as asynchronous, self-paced formats.

The work started with an initial review of over 400 educational and training resources from 59 different organizations: 25 B.C. post-secondary institutions (PSIs), 9 PSIs located in other Canadian provinces, and 25 community organizations (national and provincial non-profit organizations).

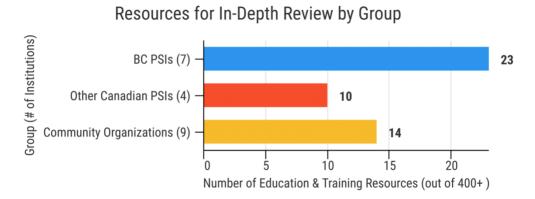
Figure 1

Reviewed Organizations or Institutions by Group



In total 47 education/training resources were gathered for in-depth review. We found a number of the 47 resources fell outside of the scope of this project or were not developed to a level that would allow for consideration as an OER. Their exclusion as listed resources for consideration, does not in any way suggest that they were not considered beneficial or were not meeting the needs of their campus communities.

Figure 2



This work concluded with the identification of the training and educational resources we believed best met the outlined deliverables of the project. In our recommendations our team identified five resources to be considered for adaption into an OER. Summaries of each of these resources are provided in Appendix 1.

BACKGROUND

Post-Secondary Students' Mental Health and Well-Being

For the past two decades, there has been growing interest and focus placed on the mental health and well-being of students across Canada and the need to embed health promotion into our learning environments and campuses (International Conference on Health Promoting Universities and Colleges, 2015; World Health Organization, 2006). This has resulted in multiple collaborations and initiatives to address the need for post-secondary institutions, and their partners, to create and deliver mental health education and services on their campuses. This opportunity has resulted in strengthened relationships with other service providers and community organizations to support their campus communities. Many institutions have developed their own mental health strategies or frameworks, while others are undertaking this process presently in efforts to embed health promotion into all aspects of institutional operations, business practices, and academic mandates.

The very composition of the post-secondary population highlights the need for a thoughtful and targeted effort in supporting students, as 75% of mental illnesses are diagnosed between the ages of 16 and 25 when many individuals undertake post-secondary studies (Mental Health Commission of Canada [MHCC], 2020a, p. 1). The sector has gained much insight into students' challenges as post-secondary institutions across the country have participated in the National College Health Assessment. In the Canadian reference group data, students reported that various mental health challenges were impacting their academic success: stress (41%), anxiety (36%), sleep problems (29%), and depression (24%) (American College Health Association, 2019, p. 5). In May of this year, the Canadian Alliance of Student Associations ([CASA], 2020) conducted research on the impact of COVID-19 on post-secondary students and reported that 70% of students reported that they have felt stress, anxiety, and isolation during the pandemic. As well, the current situation has left 82% concerned for their future beyond the pandemic (CASA, 2020). Students who were already challenged have had additional pressure placed upon them.

Just prior to the commencement of this project, the MHCC (2020b) released the *National Standards of Canada for Mental Health and Well-Being for Post-Secondary Students*. This work aligned with MHCC's previous work that developed standards for the psychological health and safety in the workplace. The post-secondary standards document acknowledges that:

[s]tudent mental health and well-being is a shared responsibility. Post-secondary institutions cannot meet this growing challenge alone. An approach to supporting student mental health and well-being that encompasses all students, faculty, and staff within the post-secondary community, in addition to all stakeholders in the broader community, is vital (p. 9).

Post-secondary institutions are in a position to educate their communities, and with this awareness, the standards were established to provide guidance to Canadian post-secondary institutions to support the following outcomes:

- Raise awareness around mental health and decrease mental illness-related stigma
- Increase levels of relational connections and sense of belonging within the learning community
- Increase access to student supports, on and off campus
- Promote life and resiliency skills students can use at school, work, and in daily life
- Provide healthier and safer institutional environment
- Improve opportunities for student success and flourishing (MHCC, 2020b, p. 1)

These outcomes have probably never been as important as they are today. There was already broad commitment to address student mental well-being and to better educate and support all members of our campus communities. Now we find ourselves adapting during a pandemic to meet the needs of our campus communities, a time when students, faculty, and staff are faced with unanticipated stress and higher levels of uncertainty. Providers of student services across the system are asking for, and require, tools to support their work in meeting the needs of their learners. In spite of the challenges, the current situation is providing the opportunity for unique service delivery and innovation in services that may be sustained post-pandemic.

The COVID-19 pandemic has been a great catalyst for post-secondary institutions to reconsider and change how they are supporting campus community mental health and wellness. Within B.C. this has resulted in the rapid creation of supports including:

- The development and implementation of Here2Talk, a 24/7/365 confidential counselling and community referral service available through app, phone, or web to all B.C. post-secondary students funded by the B.C. Ministry of Advanced Education and Skills Training. While this type of service was available at several B.C. post-secondary institutions, it is now available broadly to all students registered at each of the 25 institutions.
- The delivery of provincial and institutional webinars, workshops, and resources to support students, faculty, and staff including the work done by BCcampus and other organizations.
- Institutional shifts in service deliveries during COVID-19 with enhanced web-based support and virtual student services including counselling.

In many of our discussions with key stakeholders, they acknowledged that workshops that had previously been delivered by one counsellor or support area had been adapted so the workshops could be more easily recorded and replicated. Many also posited that by the time the 2020/2021 academic year concludes, numerous new resources will have been developed that might later be considered for inclusion in any OER(s) that result from this review.

Many of the service providers at post-secondary institutions admitted that they and their teams were stretched beyond what has been experienced in the past, and they were struggling to meet the everchanging needs of students (especially as they attempt to meet these needs at a distance). Anecdotally, our contacts have shared that as each week passed in the fall 2020 semester with the move to virtual classes, services, and engagement, new challenges have been created as students and employees reported the impact and drain this placed on them individually. For some, this has led to the desire to avoid the virtual spaces that are offering support and information.

METHOD

Scope

The environmental scan identified learning and training resources at B.C. post-secondary institutions that enhanced knowledge, mental health literacy, and understanding of:

- Ways to obtain and maintain positive mental health (for students)
- Mental illness and their treatments (for students and staff)
- How to decrease stigma related to mental health disorders (for students and staff)
- Ways to increase help-seeking efficacy (for students)
- How to develop skills and knowledge needed to advocate for change in the environment (for students and staff)

The primary focus was initially on post-secondary institutions in B.C., but the review was expanded to consider resources developed by community organizations. The review was also further broadened to include post-secondary institutions that were identified as leaders in mental health promotion in other Canadian provinces or recommended through interviews.

Exclusion Criteria

To refine the search, resources were excluded for consideration and outside the project scope if they were:

- Incomplete (no speaking notes, facilitator guide, activity guidance, or ability to replicate with consistency)
- Too narrow in focus on one aspect of mental health and well-being or a mental health disorder
- Not identified by the developer as a resource they were able to share to be considered or adapted into an open educational resource
- Listed on a website but had not been developed by the identified post-secondary institution or community organization

Review and Evaluation of Resources

In 2019, the Collaborative Projects team at BCcampus published *Student Resilience and Coping Training Workshops: Environmental Scan Summary* (Moore, 2019). This first environmental scan explored existing resources for students that were developed, delivered, or incorporated into post-secondary institutions across B.C.

Our consideration of resources began with a review of training resources identified by Moore (2019). If resources, including curriculum, speaking notes, recordings, or supplemental training materials, were accessible on a website, we collected and reviewed them. When access to these materials was not possible, we scheduled follow-up interviews with the training developer(s) to request more information. Then, if the resources were within the project scope, we initiated a request for access to the resource.

We established contact with key stakeholders at each of the 25 B.C. post-secondary institutions to 1) ask for more detail on promising training identified in the initial scan, 2) determine if other resources had been developed that fit within the scope of this project, and 3) request access to learning materials that were within the scope of the project. Interviews were conducted through telephone calls or video conference meetings. This same process was also repeated for resources that were identified within community organizations or other Canadian post-secondary institutions.

All collected resources were then reviewed and evaluated using a structured evaluation tool that was developed in the *Framework for Evaluating Mental Health and Wellness Education and Training Resources*. The six key principles for mental health and wellness training resources are:

- Accessible
- Adaptable
- Culturally located
- Evidence-informed
- Inclusive
- Trauma-informed (MHW Advisory Groups, 2020, p. 6)

The evaluation team developed a rubric to assist in the resource review (see Appendix 2). This rubric allowed evaluators to score each of the materials based on these six key principles and the five components of mental health literacy identified in the Evaluation Framework. If a resource was identified as promising and appropriate for consideration, a second review was conducted by a different team member to guard against individual evaluator bias.

The evaluation team then identified training resources that met the key principles criteria and were considered promising for future development into an OER. These were categorized according to audience and delivery method. In each category, the materials shortlisted were then rank-ordered for consideration. These assessments are broken into three education and training categories based on intended audience: 1) students, 2) staff, or 3) both students and staff. In total, 47 education/training resources from B.C. post-secondary institutions, community organizations, and universities in other Canadian provinces programs underwent review.

Resources Identified in the First Environmental Scan

As previously mentioned, the scan conducted by Moore (2019) during the 2018/19 academic year identified mental health training and support resources on B.C. post-secondary institution websites, followed by qualitative interviews with service providers at each of the post-secondary institutions. The work culminated in the creation of a list containing 260 resources from the 25 public post-secondary institutions in British Columbia. Moore (2019) stated that "this scan found that most learning opportunities are delivered online through various webpages with content that presented information on 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" (p. 5). She also highlighted gaps and limited programming specifically for Indigenous, graduate, and international learners.

Our team conducted a more in-depth review of each of the resources identified by Moore. Of the 260 resources, we narrowed our review to six resources that fit within the scope of the project. Of the six that were identified and reviewed further, we recommend one resource on student mental health and wellness: *Developing Mental Health Literacy*, developed by the University of British Columbia.

Many of the items identified in the initial scan did not fall within the scope of the research and could not easily be adapted for an open educational resource (OER). Rather they were:

- Links to external organizations that provided information on mental health conditions, literature, or supporting documentation
- Links to YouTube videos that counsellors may use during training or that provided specific information for students on topics such as test anxiety, procrastination, or study skills
- Lists of on-campus workshops that were narrow in focus
- Lists or links to registration of on-campus activities or groups that promote mental health and wellness (yoga, mindfulness, meditation)
- Articles promoting knowledge of mental health conditions or guides (developed by other organizations) to assist in developing greater understanding of mental health or mental health challenges
- Links to virtual tools (apps, websites) that were proprietary or free for use but were developed and managed by other organizations
- General information handouts that may or may not have been attached to training

Resources from B.C. Post-Secondary Institutions

Our team contacted each of the 25 B.C. public post-secondary institutions by email, and we received responses from 20 institutions. Of the 20, seven institutions indicated that they did not have resources for consideration so no follow-up interview was scheduled. We organized and conducted follow-up interviews with representatives from 13 post-secondary institutions, and in total 21 interviews were conducted. (For some institutions more than one interview was required as the training and education for employees was delivered by different departments from those who provided these opportunities for students.) The interviews resulted in our team being granted access to 23 training/educational resources for review, which are listed in Table 1.

Table 1: B.C. Post-Secondary Institution Resources Collected for Review

Resource	Source/Owner	Type of Resource	Audience
Self-Care and Resiliency	Douglas College	Synchronous training (60 minutes approx.)	Students, staff, and
		slide deck with some speaker notes	faculty
Burnout and COVID	Douglas College	Synchronous training (60 minutes approx.)	Students, staff, and
		slide deck with some speaker notes	faculty
Various web-based learning	Langara College	Web-based repository of information	Students
resources			
Bouncing Forward: Building	Simon Fraser University	Online asynchronous training (3 hour)	Students
Resilience and Supporting			
Your Well-Being			

Note. * Resources that were ultimately recommended for development into an open educational resource.

Resources from Community Organizations

Our team was also provided with a list of 25 community organizations (provincial and national non-profit organizations) that were identified by the BCcampus Mental Health and Wellness Advisory Group as potentially having mental health educational and training resources. See Appendix 3 for a list of community organizations.

The evaluation team reviewed the websites for these organizations to identify additional resources that could be considered within the scope of this project. We found many of these sites provided excellent information but did not meet the criteria for developing into an OER. In most cases we discovered that the resources on these sites were very specific to particular mental health disorders and did not encompass mental health literacy or were not unique resources developed by the community organization but rather had a list of resources that linked back to other organizations on the same list. Some of the organizations deliver training that is proprietary and a way to financially support the organization.

We collected 14 resources for in-depth review and the following four resources for final consideration:

- Centre for Innovation in Campus Mental Health, Graduate Student Tool Kit
- Centre for Innovation in Campus Mental Health, More Feet On the Ground
- Centre for Suicide Prevention, Safety Plans for Suicide Prevention
- Healthy Campus Alberta, Student Led Toolkit

However, none of the community resources we reviewed in depth were appropriate for developing into an OER.

Community Organization Resources that Post-Secondary Institutions Use

It was clear through the interview process that many of the post-secondary institutions access training from organizations that have developed evidence-based programming rather than develop their own resources, or post-secondary institutions use these resources to expand their institutional offerings. These resources include programming through the Mental Health Commission of Canada (MHCC), which offers a two-day training program called Mental Health First Aid. (Mental Health First Aid has also been adapted for delivery to specific populations including, Northern Peoples, Inuit, and First Nations.) The MHCC has also developed training that was created specifically for students in the post-secondary environment (The Inquiring Mind), which is a three-hour workshop. Training was also developed for the workplace (The Working Mind) with an eight-hour workshop for managers/supervisors and a four-hour workshop for employees/frontline staff.

Other training provided on campuses included those that have been developed to raise awareness regarding depression and suicide prevention such as <u>safeTALK</u> and <u>ASIST</u>. Both of these programs were developed by Living Works and are delivered directly through the organization. Additionally some institutions offer training to those in supervisory or leadership roles through Morneau Shepell's <u>Workplace Mental Health Leadership</u> certificate program.

These training programs, while not available for adaption into an OER, remain options for campuses to supplement their existing offerings. Each of these programs provide well-developed and respected education, but due to cost and length of training could not be delivered broadly at post-secondary institutions.

Resources from Universities in Other Provinces

To ensure we were not overlooking training and educational programming created at post-secondary institutions in other Canadian provinces, we examined programming from nine public post-secondary institutions outside B.C. and then reviewed materials from four institutions: Mount Royal University, Queen's University, Ryerson University, and University of Toronto. See Appendix 4 for a list of resources.

Many of these institutions have been active in developing mental health resources or have shared their resources with other post-secondary institutions. While all of the resources reviewed were strong, only one was identified for consideration as an OER: Queen's University's, *Identifying and Responding to Students in Distress*.

FINDINGS

Gaps in Mental Health and Wellness Education and Training

Our review found many training and educational opportunities related to mental health and well-being within the British Columbia post-secondary system. During discussions, service providers acknowledged that many of these training programs have been developed and delivered by individual members of their teams. Many of the programs had not been developed in a way that others could easily replicate due to the lack of supporting documents, such as facilitator guides, speaking notes, or reference lists. A number of training resources also focused on very specific topics, which is likely due to identified needs and requests for support from specific groups on campus.

Gap 1: Mental Health Literacy and Foundational Knowledge

Most institutions appear to lack developed programs for students, faculty, and staff focusing on mental health foundational information that can be either presented by numerous individuals or be delivered more broadly through asynchronous methods. Most institutional training and education programs have been developed exclusively for synchronous in-person or online delivery in workshop format. We only found one asynchronous training course developed for delivery on campuses, which was at the British Columbia Institute of Technology. This programming was built in their Student Success Hub that provides all students with information and links regarding student health and well-being and links to campus resources.

Faculty and Staff Resources

While most institutions have some learning opportunities for employees on how to support students in distress (including recognizing the varied signs of distress and available supports on campus), most institutions do not have a clearly developed resource on this topic that allows for broad delivery to employees. Only a small minority of institutions have dedicated units to develop and deliver this form of education, and many rely heavily on counsellors or student affairs professionals to deliver the training on an ad hoc basis. This means that consistency in content and guidance may vary depending on who delivers the training and the presenter's understanding of available supports and services. Other institutions have accessed existing programming from external organizations or professionals, but these resources may not tie the programming to campus supports and processes.

There is a need for faculty, staff, and students in leadership roles (e.g., teaching assistants, tutors, ambassadors, mentors, residence life staff/advisers) to gain skills and foundational knowledge in mental health.

Student Resources

Students appear to have access to various services, groups, and/or developed training on campuses—often in specific topic areas such as challenges with anxiety, low mood, and depression. As with training for faculty and staff, the mental health training for students is often difficult to access due to limited workshop offerings. Some institutions also offer web-based information regarding services, mental health supports, and links to detailed information.

We found few institutionally developed and delivered education and training resources that promote mental health literacy and provide foundational knowledge and skills for students to better understand the prevalence of mental illness, signs of distress in themselves or others, and encouragement to access identified campus and community resources when needed. In situations where this training exists, it is likely only available to a small percentage of learners. There is clearly a need for easily accessible training resources that offer foundational mental health information for students.

Gap 2: Suicide Awareness

One area that requires additional attention is development of resources to support campus community members experiencing depression and suicidal ideation. Some institutions have accessed training through the organization Lifeworks to equip participants with the skills to identify and respond to community members at risk. This is an area that deserves more attention and there is a need for the development of resources that post-secondary institutions can access, adapt, and deliver.

Gap 3: Resources for Indigenous Students

Although this project was primarily to identify training that provides broader mental health education for students, faculty, and staff, we also focused on identifying training for specific populations. Linden, Gray & Stuart (2018) note the importance of support for students that face unique challenges:

[n]ot surprisingly, special populations, including military service members, medical students, ethnic minorities, Indigenous students, and international students experience unique mental health needs. The literature suggests these students experience additional stress associated with cultural differences and stigmatization that make adjustment to post-secondary settings particularly difficult. For example, LGBTQ students are often faced with mental health services that are not tailored to their needs and professional students (such as medical students) are faced with overwhelming stigma associated with both experiencing a mental illness, and help seeking (p. 4).

Moore (2019) identified a lack of mental health resources for Indigenous learners. Our team also did not uncover any specific mental health training or education for Indigenous learners, although it is worth noting that our review did not include an in-depth review of the work done specifically by Indigenous student services. Work has been done to create culturally safe and relevant support to this population through the provision of Indigenous or Aboriginal gathering places, Elders in residence programs, peer mentoring programs, Indigenous educational navigators supports, and more. We believe that this area is worthy of a separate focused review by mental health professionals who identify as Indigenous. Traditional models of education and training may not be the medium best suited to assist Indigenous learners, and as Campbell, Hobenshield, & Burke (2020) suggest, based on their own experience at Vancouver Island University, providing holistic support to Indigenous students and prospective services may best be accomplished through a network that includes post-secondary services, students' home communities, high schools, and community organizations. We were able to find a great deal of relevant supplementary information and guidance which is listed in Table 2.

Table 2: Supplementary Mental Health Information for Indigenous Students

Organization	Resource	Type of Resource
Canadian Collaborative Mental	Pathways to Healing: A Mental Health Toolkit for	Toolkit
Health Initiative	<u>First Nations People</u>	
First Nations Health Authority	First Nations Virtual Doctor of the Day	Virtual access to primary care
First Nations Health Authority	Mental Health Benefits Program	Counselling services
First Nations Health Authority	Virtual Substance Use and Psychiatric Service	Virtual access to substance use of psychiatric services
Health Canada	First Nations Mental Wellness Continuum Framework	Report
Tsow-Tun Le Lum Society	<u>Cultural-Based Counselling Supports</u>	Culturally based services

While programming tailored specifically to Indigenous learners is urgently needed, all training resources should strive to meaningfully and respectfully include Indigenous knowledge, worldviews, and scholarly work. This supports institutional efforts to decolonize and indigenize by showing that Indigenous knowledge and worldviews are just as valuable as medical or social models of understanding and promoting mental health. This will likely look slightly different depending on location of each post-secondary institution, but space can be built into resources to encourage educators to include this information.

Critical mental health literacy is defined in the Evaluation Framework as "the skills and knowledge needed to advocate for change in an environment" (MHW Advisory Groups, 2020, p. 5). This component of mental health literacy is particularly relevant when considering the lived experience of marginalized populations in post-secondary institutions. "Educational institutions in Canada overwhelmingly reflect Western frameworks in their structures, processes, physical spaces" (Burke, Hobenshield & Campbell, 2020, p. 8). This calls on new training and curriculum to be intentional and inclusive of Indigenous knowledge and ways of understanding how health and wellness are achieved and maintained.

All mental health and wellness training resources developed should respectfully include Indigenous knowledge, worldviews, and scholarly work. There is also a need to research and develop mental health resources for Indigenous post-secondary students.

Gap 4: Resources for International Learners

Moore (2019) also identified a lack of mental health resources for international and graduate students, and our scan also found no specific training resources identified for international learners. As with services for Indigenous learners, international students have access to specialized support services within most, if not all, of post-secondary institutions in B.C. Certainly, workshops are provided for this student population, but we did not identify a developed training program specifically for international students. It may not be possible to develop a specific resource for international learners given the vast diversity of this group, but there is a need for supporting documents for facilitators on how to be culturally sensitive and safe in the delivery of mental health training.

RECOMMENDATIONS

In our initial contact with the BCcampus Advisory Group, and in subsequent interviews with key stakeholders at B.C. post-secondary institutions, many people expressed hope that both synchronous training and asynchronous, self-paced resources would be identified and developed for their access and use.

Most institutions have already developed broad training in other areas as part of their regular employee onboarding or student orientation (e.g., harassment and discrimination, workplace safety/Workplace Hazardous Materials Information System), and mandatory or accessible training in other areas such as diversity and inclusion, academic integrity, and sexual violence and misconduct are also being considered. Additional training in foundational mental health and well-being should be included to provide:

- An understanding of how to identify signs of distress in students
- Fundamental skills in communicating with a student of concern
- Ways to help the student find the necessary services to support them

Three recommendations below focus on developing open educational resources from existing resources in the B.C. post-secondary education system. In all recommendations, the training should be adapted,

licensed, and released to allow each institution to align with their procedure, processes, and services. If possible, the resource should enhance the ability of institutions to build in evaluative components and allow for completion monitoring, so the resource could become part of an orientation requirement if desired. Lastly, if needed, the training should provide a guiding document on key components and how to adapt for each college/institute/university context. See Appendix 1 for summaries of the resources that are highlighted below.

Recommendation 1: Faculty and Staff Training Resource

A synchronous training program for faculty, staff, and student leaders on supporting students in distress should be adapted from the recommended resources. We believe the Vancouver Island University resource best meets the needs of this development, with consideration of how the University of Victoria has also presented the materials. We recommend this resource also be adapted for asynchronous delivery.

Table 3: Recommended Faculty and Staff Training Resources for OER

Resource	Source/Owner	Type of Resource	Audience
Mental Health Literacy (level one)	University of	Synchronous training (90 minutes approx.)	Staff and faculty
	Victoria	with FAQ, instructional plan, and train-the-	
		trainer materials	
Mental Health Literacy (level two)	University of	Synchronous training (90 minutes approx.)	Staff and faculty
	Victoria	with FAQ, instructional plan and train-the-	
		trainer materials	
Capacity to Connect: Supporting	Vancouver	Synchronous training (90 minutes) with slide	Staff and faculty
Students in Distress	Island	deck and facilitator guide, also set up for only	
	University	synchronous delivery	

Recommendation 2: Student Training Resource

A synchronous training program with a focus on mental health literacy should be developed for students from the recommended resources. We believe that the University of British Columbia resource best meets the need of this development. We recommend that this resource be adapted for asynchronous delivery.

Table 4: Recommended Student Training Resources for OER

Resource	Source/Owner	Type of Resource	Audience
Mental Health Literacy Workshop	University of	Synchronous training (60 minutes) workshop	Students
	British Columbia	slide deck with speaker notes	

Recommendation 3: Complementary Training in Suicide Awareness

A complementary synchronous training on suicide awareness should be developed as an OER from the recommended resources. We recommend consideration of the University of Victoria material for development into an OER with a facilitator guide and slide deck.

Table 5: Recommended Suicide Awareness Resources for OER

Resource	Source/Owner	Type of Resource	Audience
Suicide Awareness	University of	Synchronous training (60 minutes approx.)	Students, staff and
	Victoria	with slide deck, facilitator guide	faculty

LIMITATIONS

While this report identifies opportunities to develop OERs based on the recommended resources in this scan, time constraints and access to key individuals limited our ability to ensure all current and relevant resources were collected and evaluated. In some situations, key stakeholders were unable to release resources for review. In others, we were unable to make contact with those responsible for developing materials for their campuses.

We recognize that there were organizations, such as student unions and labour unions, that were not considered in our review. We hope these same organizations can benefit from the outcome of this project to further build on, and enhance, the work and education that others have created.

As previously mentioned, due to COVID-19 and the current situation facing all post-secondary institutions, a push to provide supports in a new and evolving context has occurred. This has led to further development of training and education that will be delivered to campus communities in altered and innovative formats. We anticipate that there will be creative delivery of adapted resources that will surface in the coming months, many that will be considered quality resources that most certainly would be worthy of inclusion as an OER.

CONCLUSION

Work to enhance the mental health and well-being of students is incremental and ongoing. This project is an early step in providing resources to all British Columbia post-secondary institutions to meet their immediate need to raise awareness of mental health, destigmatize mental illness, and provide guidance on how to receive support at their campuses. Clearly a great deal of work has been done to develop programming at many post-secondary institutions, and some institutions are further ahead in program development than others. This project identified resources that can be used in the development of OER(s) to support this work and to share programming broadly.

In the future, it would be helpful to complete a similar project focused on how staff, faculty, and administrators can support mental health within their collegial circles. There is an understandable focus on students and supporting their mental health, especially in times of crisis. However, in order to do that effectively staff, faculty, and administrators need to have their own unique mental health needs supported. Additionally, employees of an institution generally stay there for longer than students, meaning that they are key to maintaining the institution's culture of and commitment to wellness. Critical mental health literacy can be especially impactful as it provides skills and knowledge to advocate

for change, which can ultimately lead to embedding a culture of mental health and wellness throughout institutions.

During the review process, we were able to view recordings from various institutions of recent workshops/webinars that had been moved online because of COVID-19. The resources from Queen's University are an excellent example of this. Online workshops and webinars provide an interesting opportunity for institutions to share resources. Even when there are no speaking notes or facilitator guides, these recordings provide other institutions with the ability to see training in action and adapt or personalize the training to their campus contexts.

Appendix 1: Summaries of Recommended Resources

Mental Health Literacy (levels one and two) University of Victoria

Summary

Divided into two levels, this comprehensive resource uses the mental health continuum model and takes a strengths-based approach to educate staff and faculty on mental health. The focus of the resource is to explore mental health concerns, learn how to identify signs of distress, and learn how to respond effectively as a staff or faculty member.

This resource was shared with the understanding and agreement that it could be considered for adaption into an open educational resource.

Strengths

This resource provides foundational training that could be adapted for a variety of audiences, and it has facilitator notes with a train-the-trainer guide. The resource is easy to understand, uses language that is non-stigmatizing in nature, and allows space for personal reflection. It normalizes and frames mental health from a positive lens, while also acknowledging stress, anxiety, and sadness as universal feelings. It mentions different considerations for international and graduate students and also includes a version for faculty working with students online.

Limitations

This resource may benefit from enhancing its cultural considerations and trauma-informed practice.

Capacity to Connect: Supporting Students in Distress Vancouver Island University

Summary

The guiding premise of this resource is to help participants connect to their ability to recognize, respond to, and refer students in distress. The resource provides an overview of the continuum of mental health, including risk of suicide, and builds awareness and confidence in participants' ability to respond. The content is grounded in self-care, promotes helping within one's limits, and offers community resources as referral options.

This resource was shared with the understanding and agreement that it could be considered for adaption into an open educational resource.

Strengths

This appears to be a trauma-informed, evidence-based, and inclusive resource that has the potential to be adapted for different audiences. The detailed facilitator guide suggests this would be an interactive and engaging workshop with activity options and opportunities to elaborate on topics as needed. The

DKS Consulting team would like to highlight that the online and in-person delivery, coupled with its brief length (1.5 hrs), may increase the potential reach of the workshop, thereby increasing campus mental health literacy.

Limitations

Through the review, it was identified that this resource may benefit from the addition of citations throughout the presentation, an increase in content on the slides (which may assist visual learners to follow along), and a clear outline of the learning outcomes.

Mental Health Literacy for Students University of British Columbia

Summary

This resource allows for more in-depth discussions about mental health and encourages participants to personally assess their own well-being. It includes activities about stress and emotional intelligence and ends with a discussion of coping strategies and how to increase participants' mood and decrease stress.

This resource was shared with the understanding and agreement that it could be considered for adaption into an open educational resource.

Strengths

The strengths of this resource lie in its focused content and brevity. The speaker notes are well developed and include guidance for activities and debriefs. It also acknowledges different cultural understandings of mental health, appears to be trauma-informed, and it is easily modifiable, which is a valuable asset for a potential OER.

Limitations

The scope of this resource is narrow, which can be seen as a limiting factor. The resource could also benefit from explicit mention of campus resources for further support.

Suicide Awareness and Intervention University of Victoria

Summary

This resource focuses on suicide awareness, prevention, and intervention. It specifically explores stigma, looks at myths and facts about suicide, identifies risk factors, and aims to enhance participant's capacity to support and refer students who are at risk. It also offers an opportunity for skills practice.

This resource was shared with the understanding and agreement that it could be considered for adaption into an open educational resource.

Strengths

It is clear that great care was put into delivering this well-constructed content both sensitively and with directness, while also creating a safe and respectful learning environment. The conversation around assessing and recognizing cues was particularly well done, and there appears to be flexibility in the resource to adapt and share the content with multiple audiences.

Limitations

The team acknowledges that this training is very specific to the topic of suicide, and that could be seen as a limiting factor.

Developing Mental Health Literacy, YouTube Video University of British Columbia

Summary

This 3-minute video shares a definition of mental health literacy and encourages reflection on how to foster and maintain good mental health, understand mental disorders and treatments, decrease stigma, and seek help effectively.

This resource is already an OER, available on

YouTube: https://www.youtube.com/watch?v=6tBKhJzhGWU&t=1s

Strengths

This very short clip succinctly outlines four things people need to know about mental health literacy, which can be seen as an effective starting point for a deeper conversation.

Limitations

This is just a brief introduction, so anyone viewing this video would benefit from more discussion on the topic.

Appendix 2: Evaluation Rubric

This evaluation rubric was developed to score resources based on these six key principles and the five components of mental health literacy identified in the *Framework for Evaluating Mental Health and Wellness Education and Training Resources* (MHW Advisory Groups, 2020).

	0	1 - Minimum	2 - Sufficient	3 - Excellent
Accessibility	Does not mention or address	Demonstrates a few considerations to increase access	Demonstrates multiple considerations to increase access	Demonstrates exceptional consideration to make material accessible: space, language (translations, plain), audio (pace, volume), visual (text size, contrast), materials in multiple formats, multiple ways of participating, flexible timing/length, clear outline, opportunity for folks to identify other needs
Adaptable		Editable formats shared	Some variation in target audiences for examples, language used, delivery options	Examples included that could be relevant to multiple lived experiences (eg. rural and urban, 1st year and grad student, new and long-time), various forms of delivery available, includes links to more information or options to build out sections as needed, includes facilitator guide with options
Culturally located		Includes culturally diverse representation in images and examples, but information is mainly Eurocentric and presented as culturally neutral Territory acknowledgements included Includes information about culturally specific support options	Names the cultural lens(es) being used, acknowledges that culture impacts views of mental health, engages in discussion about the role of culture, encourages participants to reflect on their own cultural location, makes connections between colonization and mental health, recognizes diverse identity groups are impacted more by mental health concerns, challenges harmful stereotypes related to culture	Intentionally recognizes and incorporates diverse cultural identities (amplifying not assuming), invites and values knowledge and experience participants bring, encourages participants to reflect on their own cultural identities and assumptions they hold about cultural impacts, nothing presented as culturally neutral,
Evidence- informed		Some statistics or information is consistent with common knowledge, questions regarding some of the content. Not cited or cited from questionable sources	Statistics and information are consistent with common knowledge. Some of the work is cited from reputable sources	Statistics and information are cited from recent, reputable sources, foundational theories identified, incorporates evidence from multiple POV (lived experience, target audience, community-based, academic),
Inclusive		Recognition that mental health and illness impacts people differently, refers to range of support resources	Includes examples and testimonials from a range of lived experience, challenges myths and stereotypes	Provides space for reflection on assumptions, stigma, prejudice and discrimination, recognizes resilience and multi-dimensional nature of people with lived experience
Trauma- informed		Includes a few strategies and resources at beginning/end, facilitators have training on impacts of trauma and responding effectively to activated participants	Embeds multiple forms of predictability, grounding and safety enhancing opportunities throughout (ground rules/community agreement, fidgets, permission to move, clear outlines, breaks, etc), explicitly recognizes inherent resilience, locates causality outside individual control (ie moving away from "what's wrong with you"), shares information about the impacts of trauma	Allows participants to have fully informed choice about when and how to participate, specifically trained support people available throughout
Mental Health Literacy		Includes 1 or more of the 5 MHL competencies, with minimal depth or detail 1. Understanding how to obtain and maintain positive mental health 2. Understanding mental disorders and their treatments 3. Decreasing stigma related to mental disorders 4. Enhancing help-seeking efficacy 5. Critical mental health literacy – the knowledge and skills to advocate for change	Contains 3 or more of the 5 MHL competencies, with adequate depth and detail 1. Understanding how to obtain and maintain positive mental health 2. Understanding mental disorders and their treatments 3. Decreasing stigma related to mental disorders 4. Enhancing help-seeking efficacy 5. Critical mental health literacy – the knowledge and skills to advocate for change	Contains all 5 of the MHL competencies, with adequate depth and detail 1. Understanding how to obtain and maintain positive mental health 2. Understanding mental disorders and their treatments 3. Decreasing stigma related to mental disorders 4. Enhancing help-seeking efficacy 5. Critical mental health literacy – the knowledge and skills to advocate for change

Appendix 3: Community Organizations that Offer Mental Health Training Resources

Organization	Link	Audience
Across Boundaries	https://www.acrossboundaries.ca/#	Students, faculty and staff
Anxiety Canada	https://www.anxietycanada.com/	Students
B.C. Post-secondary Counsellor Association (PSCA)	https://bcpsca.com/	Students, faculty and staff
Be There	https://bethere.org/Home	Students
Best Practices in Canadian Higher Education	https://bp-net.ca/	Students, faculty and staff
Black Health Alliance	https://blackhealthalliance.ca/	Students, faculty and staff
CACUSS Campus Mental Health	http://cacuss-campusmentalhealth.ca/	Students
Canadian Institute for Substance Use Research (CISUR)	https://www.uvic.ca/research/centres/cis ur/index.php	Students, faculty and staff
Centre for Innovation in Campus Mental Health	https://campusmentalhealth.ca/	Students, faculty and staff
CICan Advisory Committee on Student Mental Healthy	https://www.collegesinstitutes.ca/	students
СМНА	https://cmha.ca/	Students, faculty and staff
Foundry BC	https://foundrybc.ca/	Students/support people
Healthy Campus Alberta	https://www.healthycampusalberta.ca/	Students, faculty and staff
Healthy Minds Healthy Campus	https://healthycampuses.ca/	Students, faculty and staff
Here to Help	https://www.heretohelp.bc.ca/	Students
Mental Health Commission of Canada	https://www.mentalhealthcommission.ca /English	Students, faculty and staff
Multicultural Mental Health Resource Centre	http://www.multiculturalmentalhealth.ca/en/	both
South Asian Mental Health Alliance	http://samhaa.org/	students
Thriving in Action	https://www.ryerson.ca/thriveru/tia/	both
Workplace Strategies for Mental Health	https://www.workplacestrategiesforment alhealth.com/	staff/faculty
YMCA	https://www.gv.ymca.ca/mental-wellness	students

Appendix 4: Resources Considered from Universities Outside of B.C.

Canadian Post-Secondary	Resource	Audience
Mount Royal University	Tools for Success: Models for Exemplary Student Mental Health Initiatives at Alberta Post-Secondary Institutions	Faculty and staff
Queen's University	Identifying and Responding to Students in Distress	Students, faculty, and staff
Queen's University	Just as I am: The Practice of Self-Compassion and Care	Students, faculty, and staff
Queen's University	The Best You: Improving Your Mood	Students, faculty, and staff
Ryerson University	Cultivate Your Happiness: A ThriveRU Weekly Workbook and Cultivate Your Happiness: The Four Seasons Workbook	Student edition
Ryerson University	Cultivate Your Happiness: A ThriveRU Weekly Workbook and Cultivate Your Happiness: The Four Seasons Workbook	Faculty and staff edition
Ryerson University	Thrive U Facilitator Guide	Faculty and staff
Ryerson University	Thrive U Workbooks	Students, faculty, and staff
Ryerson University	Thriving in Action	Faculty and staff
University of Toronto	Better Coping Skills	Students

Glossary

Asynchronous learning: Forms of education, training, and learning that occur at a different pace or time. This learning is often supported through digital or online learning platforms.

Education resources: Materials that are used for acquiring knowledge and skills.

Mental health: Mental health is the capacity of every individual to feel, think, and act in ways that enhance their ability to enjoy life and deal with challenges. It is a positive sense of emotional and spiritual well-being that respects the importance of culture, equity, social justice, interconnections, and personal dignity (Public Health Agency of Canada, n.d.).

Mental health literacy: Mental health literacy involves understanding how to obtain and maintain positive mental health, understanding mental disorders and their treatments, decreasing stigma related to mental disorders, and enhancing help-seeking efficacy (Kutcher et al., 2016; Whitley et al., 2013; Whitley & Gooderham, 2016).

Mental illness: Mental illnesses are characterized by alterations in thinking, mood, or behaviour associated with significant distress and impaired functioning. They result from complex interactions of biological, psychosocial, economic, and genetic factors. Mental illnesses affect individuals of any age; however, they often appear by adolescence or early adulthood. The many different types of mental illnesses range from single, short-lived episodes to chronic disorders (Public Health Agency of Canada, n.d.).

Open education: Open education addresses barriers to learning by engaging open education practices in the classroom and the development and use of open educational resources.

Open educational resources (OERs): Teaching, learning, and research materials that are either in the public domain or licensed in a manner that provides everyone with free and perpetual permission to engage in the 5R activities—retaining, remixing, revising, reusing, and redistributing the resources.

Resilience: The ability to return to a normal emotional state after experiencing a difficult or stressful time (MentalHelp.net, n.d.). The concept of resilience must be considered within a cultural context. Seccombe (2002) argues for understanding resilience as a quality of the environment as much as the individual, cultural traditions and upbringing play an important role in individual resilience.

For example, "Resilience from an Indigenous perspective is varied and diverse, just like the Aboriginal Peoples of Canada. Narratives of resilience are rooted in culturally distinctive concepts of the person, the importance of collective history, the richness of Aboriginal languages and traditions, and the importance of individual and collective agency and activism" (Hollinshead, 2019).

Synchronous learning: Forms of education, training, and learning that occur at the same time. This learning can occur in the same place or be scheduled and supported through digital or online learning platforms.

Training resources: Materials that are used to facilitate the learning process, such as through programs, workshops, or activities.

Well-being: The experience of health, happiness, and prosperity. It includes having good mental health, high life satisfaction, a sense of meaning or purpose, and the ability to manage stress. More generally, well-being is just feeling well (Davis, 2019).

Wellness: Wellness goes beyond physical health to include an individual's ability to identify and achieve goals, satisfy needs, and change or cope with the demands of their environment. Wellness encompasses many elements, including physical, intellectual, emotional, relational, vocational, cultural, spiritual, financial, and environmental. It is a dynamic concept that represents the conditions that allow humans to flourish (University of Waterloo, n.d.).

References

- American College Health Association. (2019). American college health assessment National College Health Assessment II: Canadian reference group data report executive summary. Silver Spring, MD: American College Health Association.
- Burke, H., Hobenshield, S., & Campbell, A. (2020). Decolonizing post-secondary institutions takes a community. *Policy Options*. Retrieved from: https://policyoptions.irpp.org/magazines/october-2020/decolonizing-postsecondary institutions-takes-a-community/
- Campbell, A., Hobenshield, S., & Burke, H. (2020). *Lessons for decolonizing post-secondary institutions*. Retrieved from: https://wordpress.viu.ca/rippleeffect/2020/09/02/lessons-for-decolonizing-post-secondary-institutions/
- CASA (Canadian Alliance of Student Associations). (2020) Students are still worried: COVID-19 and post-secondary education. Retrieved from www.casaacae.com/students_are_still_worried_covid19
- Davis, T. (2019). What is well-being? Definition, types, and well-being skills. *Psychology Today*. Retrieved from https://www.psychologytoday.com/us/blog/click-here-happiness/201901/what-is-well-being-definition-types-and-well-being-skills
- Hollinshead, J. (2019). *Peak resilience*. Retrieved from: https://peakresilience.com/blog/2017/6/18/resilience from-an-indigenous-perspective
- International Conference on Health Promoting Universities and Colleges. (2015). Okanagan charter: An international charter for health promoting universities and colleges. Retrieved from https://open.library.ubc.ca/cIRcle/collections/53926/items/1.0132754
- Kutcher, S., Wei, Y., Costa, S., Gusmão, R., Skokauskas, N., & Sourander, A. (2016). Enhancing mental health literacy in young people. *European Child & Adolescent Psychiatry*, 25(6), 567–569. Retrieved from https://doi.org/10.1007/s00787-016-0867-9
- Linden, B., Gray, S., & Stuart, H. (2018). *National standard for the psychological health and safety of post-secondary students Phase I: Scoping literature review*. Ottawa, ON: Mental Health Commission of Canada.
- MHCC (Mental Health Commission of Canada). (2020a). Starter kit: For the national standard of Canada for mental health and well-being for post-secondary students. Ottawa, ON: CSA Group.
- MHCC (Mental Health Commission of Canada). (2020b). *National standards of Canada for mental health and well-being for post-secondary students*. Ottawa, ON: CSA Group.
- MHW Advisory Groups. (2020). Framework for evaluating mental health and wellness education and training resources. Victoria, B.C.: BCcampus. Retrieved from https://opentextbc.ca/mhwframework/

- Moore, K. (2019). *Mental health collaborative project, student resilience and coping training workshops: Environmental scan.* Vancouver, B.C.: BCcampus.
- Public Health Agency of Canada. (n.d.). *Mental health and wellness*. Retrieved from https://cbpp pcpe.phac-aspc.gc.ca/public-health-topics/mental-health-and-wellness
- Seccombe, K. (2002). "Beating the odds" versus "changing the odds": Poverty, resilience, and family policy. *Journal of Marriage and Family, 64*(2), 384–394. Retrieved from https://doi.org/10.1111/j.1741-3737.2002.00384.x
- Whitley, J., & Gooderham, S. (2016). Exploring and promoting mental health literacy and outcomes: Introduction to the special issue. *Exceptionality Education International, 26*(2), 1–4. Retrieved from http://search.proquest.com/docview/2083800913
- Whitley, J., Smith, J. D., Vaillancourt, T., Leschied, A. D. W., Flett, G. L., & Saklofske, D. H. (2013). Promoting mental health literacy among educators: Critical in school-based prevention and intervention. *Canadian Journal of School Psychology, 28*(1), 56–70. Retrieved from https://doi.org/10.1177/0829573512468852
- World Health Organization. (2006). The Edmonton charter for health promoting universities and institutions of higher education. Retrieved from https://healthycampuses.ca/
- University of Waterloo. (n.d.). *Nine dimensions of wellness*. Retrieved from https://uwaterloo.ca/engineering-wellness-program/nine-dimensions-wellness