Rising Demand for
Campus Mental Health Services

Student Wellness Services
December 2019

This slide deck is based on a resource created by the Education Advisory Board, and includes additional sector-based and Queen's-specific data. Sources are identified.
The New Normal
Demand for Campus Mental Health Services Continues to Soar

Growing mental-health needs of students require creative solutions. (2018)

Colleges expand their reach to address mental health issues. (2019)

As more students seek mental health care, they face long waits as universities struggle with demand. (2019)

Is there a mental health crisis on Canadian campuses? (2019)

Demand for Services Outpaces Enrolment Growth (5 years: 2014-15 to 2018-19)

14% ↑ Queen’s enrolment growth

84% ↑ Queen’s mental health appointments
What Is Driving Demand Across The Sector?

**Increased Awareness**
Institutional and national tragedies have spurred more open conversations about students’ mental health needs

**Structured Response Framework**
New teams and protocols streamline how institutions identify and respond to students with mental health needs

**Reduced Stigma to Seeking Care**
Campus and social stigma-reduction campaigns have helped students be more comfortable seeking care
What Is Driving Demand Across The Sector?

- **Widening gap between high school and university educational contexts** (teaching, learning, and assessment methods, in-school supports) leading to greater academic anxiety and stress

- Increase in students who have **more stressors and less supports** (international students, student parents, mature students)

- Increased PSE participation among individuals with **pre-existing mental illness**

- **Decrease in social connections and supports.** Cumulative effect of lack of sleep, time pressure, academic rigor, financial worries, technostress, the socio-political climate, and eroding social support

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Some External Factors Driving Demand

**Substance Abuse**
Students look to drugs and alcohol to relax; use prescription drugs to focus, work late into the night.

**Social Media**
Time spent online amplifies existing stressors and contributes to an overwhelming sense of social isolation on campus.

**Intensified Expectations**
Students face early and persistent pressure to academically excel, fit in socially, and be successful after graduation.

**New Parenting Styles**
Highly involved parenting creates busy, overscheduled, failure-averse students who struggle to adapt to challenges as they arise in post-secondary.

**Political Climate**
Stress from current events and politics exacerbates students’ existing issues with stress, anxiety, and depression.
Canadians with Disabilities

Among youth aged 15-24, 13% report having a disability:

• 10.8% Men
  – Learning disability (52%), mental health (49%), developmental disability (30%), chronic pain (26%), memory (20%), visual impairment (14%), flexibility (13%), dexterity (11%)

• 15.6% Women
  – Mental health (68%), learning disability (34%), chronic pain (38%), visual impairment (21%), memory (18%), flexibility (13%), mobility (13%), developmental disability (11%)

Statistics Canada, 2018: The Canadian Survey on Disability
Student Mental Health Needs on the Rise

31% of first year post-secondary students report experiencing a mental illness in the last 12 months

WHO, 2018

Among Queen’s Students:
• 23% report a diagnosis of anxiety
• 15% report a diagnosis of depression
• 30.4% report being treated for a mental health condition in the last 12 months

Queen’s NCHA 2019

Has hospital use for mental disorders changed?

CIHI, Youth MH in Canada 2018 (does not include Quebec data)
Waitlists Are Just the Tip of the Iceberg

Waitlists Are the Most Visible Metric...

“After the first week, students have to wait weeks for an appointment. I know that there are students on the waitlist that we just won’t get to this semester”

“Our waitlist just won’t go away. We have hired additional staff and increased clinical hours offered to students, but they just keep piling up.”

...But There’s More Below the Surface

- Decayed frequency of therapy appointments to accommodate more clients
- Lack of physical space to accommodate new hires and increased clinical hours
- Limited access to community services for specialized care or intensive treatment, all levels of care stay with campus team
- Student dissatisfaction about service availability
- Staff burnout because of long hours and overwhelming caseloads
- Less time and resources for outreach, early education, and other priorities
- Increasing complexity of needs as more students with psychiatric illnesses, trauma histories, and complex disabilities participate in higher education
- Delayed treatment can lead students’ concerns to escalate

EAB interviews and analysis with university administrators
Impacts of Increased Demand Are Felt Across Campus

Beyond student wellness services and counselling centres, many units across campuses are feeling the consequences of increased demand. For example, faculty and staff are increasingly involved in helping students with mental health challenges.
Use of Student Wellness Services

Queen's Student Wellness Services Total Appointments (2014-2019)

43% are Mental Health > 18,000 appointments

13,200+ appointments added since 2014-2015; No effect on wait times
Use of Student Wellness Services

GP Appointments

GP Mental Health Appointments (Subset of Above)
Use of Student Wellness Services

Counselling Appointments

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<th>Year</th>
<th>Appointments</th>
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<td>2017-18</td>
<td>9000</td>
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<td>2018-19</td>
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Psychiatry Appointments

<table>
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<th>Appointments</th>
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<tr>
<td>2015-16</td>
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<td>2017-18</td>
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<td>2018-19</td>
<td>300</td>
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- Psychiatry
- GP Psychotherapy
Use of Student Wellness Services

41.3% of Queen’s Student Accessibility Services registrants have a mental health-related disability.
Use of Student Wellness Services

Top mental health presenting problems in Student Wellness Services personal counselling appointments:

1. Anxiety (general, academic, social, etc.)
2. Depressed mood
3. Stress and coping
4. Relationships
5. Adjustment to life events
SWS: Beyond Appointments 2018-19

SWS
> 60,000 incoming calls

Accessibility Services
12,982 email / phone follow-ups by 6 advisors

Health and Counselling
12,100 internal follow up actions

Health Promotion
83 student volunteers worked
3,221 hours
COR and PHE
SWS: Beyond Appointments 2018-19

SWS
46 mental health training sessions for 1,453 students, staff and faculty

Health Promotion
19 staff-led presentations for 6,465 people, 14 peer-led workshops, and 162 peer-led outreach initiatives

SWS
10 weekly counsellor-led groups (support + therapy) resulting in 800 student touchpoints
SWS: Beyond Appointments

- Concerns and questions from faculty / staff / parents / roommates / campus partners
- Student follow up (test results, next steps, instructions, crisis)
- Student inquiries about services / hours / issues
- Community (hospital, AMHS crisis) connections

- Scanning and faxing of reports, results, referrals
- Documentation assessments and reviews
- Arranging specialist referrals and diagnostic imaging
- Writing appeal and support letters
- Verification of Personal Health Condition / Short Term Academic Accommodations

- Meetings with departments, campus or community partners
- Team meetings
- Case consultations
- Clinical supervision
- Case conferences
Staffing

Additional SWS health professional and related staff positions since 2014 include:

Mental Health Professionals

- 10 counsellors (some part-time)
- Mental Health Intake Triage Consultant
- 2 Part-time psychiatrists through the new Division of Student Mental Health in the Department of Psychiatry

Mental Health Supports

- In-house Occupational Therapists
- Intake Coordinator, Accessibility Services
- 2 Accessibility Advisors
- Integrated Care Manager
- Additional physician clinics
SWS Staff to Student Ratios

SWS Counsellor / psychologist to student ratio = **1:1,335**
- Roles include student appointments, running groups and programs, developing workshops and resources, case conferencing, meetings, administrative work
- Shifts in positions to more full time positions and to build expertise in sexual violence, trauma, LGBTQ+, cross-cultural issues, crisis response, and eating disorders

- Recommended ratio, International Association of Counselling Services (2013): 1:1,000-1:1,500
- Average ratio among 33 similar-sized US schools: 1:2,210 (Association of University and College Counselling Center Directors)

SWS mental health professionals* to student ratio = **1:969**

*SWS counsellors, psychiatry, GP psychotherapy, GP Mental Health, Mental Health Nurse, Occupational Therapists*
An Unsustainable Cycle

Hiring More Staff Is Not the Answer

“Demand for mental health support is rapidly growing on Canadian campuses. In response, we have poured more and more resources into clinical support services. Despite the additional investment, both waiting times and student distress are increasing.”

Andre Costopoulos
Vice-Provost and Dean of Students
University of Alberta

“Even those institutions that funded additional counselling staff report that the ongoing demand continues to outpace the availability of providers. In other words, colleges and universities have not been, and likely will not be, able to staff their way out of the problem.”

Aaron Krasnow
Associate Vice-President
Health and Counselling Services
Arizona State University

Time for a New Approach

Today’s Stark Reality Requires a New Path Forward

"The biggest shift for our profession—and university counseling centers on the whole—is that we have to think differently about how people can be helped. We can’t keep saying that the 50-minute hour is the best answer because we just don’t have the resources."

*Director of Counseling Services*

*Private Research University*

"Counseling centers have become a place where people expect solutions. There is a huge amount of expectation from students, parents, and faculty in the community that we will whisk in and fix people that are somehow broken. We can’t live up to that mission."

*Vice Provost for Student Life*

*Canadian Research University*
Addressing the Demand

EAB’s Recommendations
To meet the rising demand for mental health services, EAB identified three recommendations to improve how institutions support student well-being:

1. Set and Communicate a Sustainable Scope of Service
2. Design a Network of Scalable, Personalized Supports
3. Proactively Integrate Support Across the Student Experience
Addressing the Demand

Research and Resources to Target Interventions to Key Student Segments

<table>
<thead>
<tr>
<th>HIGH-NEED STUDENTS</th>
<th>STUDENTS WITH SHORT-TERM NEEDS</th>
<th>LOW-RISK STUDENTS</th>
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<tbody>
<tr>
<td>Promoting Successful Off-Campus Care</td>
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<td>Kingston: limited capacity for off-campus services</td>
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<td>Restructuring Individual Appointments</td>
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<td>Reinvigorating Group Therapy</td>
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<td>Exploring Dynamic Staffing Models</td>
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<td>Virtual Solutions – Health Care and Online Counselling</td>
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<td>Driving Utilization of Self-Serve Resources</td>
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<td>Fostering Non-Clinical Connections</td>
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<td>Skill and Strategy Building</td>
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<td>Self-expression, Peer Support</td>
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EAB interviews and analysis.
Addressing Demand Across the Mental Health Spectrum at Queen’s

Building your base
- Self-care
- Wellness Plans
- Healthy Living
- Sleep
- Exercise
- Nutrition
- Lifestyle
- Appointments
- Biofeedback

Skill building – Coping with everyday life
- Study Skills
- Coping Skills
- Mindfulness
- Conflict Resolution
- Reframing Stress

Someone to listen
- Family+ Friends
- Peer Support Centres
- Spiritual and cultural supports
- Campus partners
- Good2Talk
- Support and Therapy Groups
- Empower Me

Professional Help
- Support Groups
- Therapy Groups
- Health Staff
- Counsellors
- Accessibility Staff
- Good2Talk
- Community Supports
- Therapy Assistance Online (TAO)
- Triage Case Management
- Empower Me

Crisis
- AMHS KFLA Walk-In
- Empower Me
- Good2Talk
- KGH
- 9-1-1
- Student at Risk Teams
Recent Initiatives in Student Wellness Services

• Increased same-day counselling appointments to expand access and reduce wait times
• Expanded access to 24/7 care through external online (Therapy Assistance Online (TAO), and phone-based (Empower Me) support services
• Expanded group programming (support and therapy groups, skill building groups, psychoeducational groups)
• Exploring new technologies
• Increasing visibility of health promotion and prevention activities
• UFlourish research project to understand the factors that determine different undergraduate student mental health and academic outcomes.
• Developing and monitoring policies and procedures to support students in extenuating circumstances
• Monthly SWS user experience surveys helps inform service provision
• Optimizing new SWS space in Mitchell Hall
A Campus Community Approach

• Embed wellness in the academic culture and context
• Develop curriculum and course content with accessible teaching and learning in mind
• Promote program supports (academic advising, wellness centres, faculty-based student services etc.)
• Embed wellness into academic rules, regulations, and processes (timetabling, policies, exam schedules, etc.)

• Enhance opportunities for social connections
• Encourage help-seeking
• Cultivate a campus culture that is inclusive and welcoming
• Broaden vision of supports - everyone has a role in promoting and /or supporting health and well-being

• Engage in health promoting activities to maintain personal health
• Build skills to manage challenge of everyday life
• Seek out supports and services as needed
Student Wellness Services welcomes your input and ideas. Please email wellness.services@queensu.ca

To learn more about the Campus Wellness Project visit https://www.queensu.ca/campuswellnessproject/home