

Student Well-Being:

An examination of
the issue & programming

Exploration around student well-being issues, and an overview of the well-being climate for both the general population, and students.

Authored by: Nicole MacInnis, M.A & Kelvin-Fredua-Agyeman, B.A

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Introduction

Mental Health can be defined as “the capacity of each and all of us to feel, think, and act in ways that enhance our ability to enjoy life and deal with the challenges we face. 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, 2006).

In the following examination of student well-being issues, we will go over an overview of the well-being climate for both the general population, and students. The examination of both is important because this literature shows that the Canadian well-being climate is inadequate, and the student population fairs much worse than the general population.

We will also provide an environmental scan of what other universities in the province do to support student well-being. Program literature to review was based on the availability of literature on each topic. It is important to note that there is not much solid literature on programming provided to students. As a result, ongoing evaluation through intake and outtake surveys of our programming going forward will be needed to determine impact on our students.

Mental Health of Canadians

Overview

In Canada, mood and anxiety disorders are the most common mental health issues we face (Dozis, 2020). As a result, approximately 500,000 people will miss work per week due to such mental illness episodes (Mental Health Commission of Canada, 2015). One large issue faced with people that suffer from mental illness is the risk of relapse. Dozois (2020) found that for people that suffer from depression the relapse reoccurrence rate can be as high as 85% of patients, further this relapse rate increases with each additional relapse. Possible symptoms of anxiety could be fear, sense of impending doom, sense of danger, fear of dying, decreased attention,

feelings of detachment, speeding thoughts, irritability, and insomnia (Mental Health Commission of Canada, 2015). Given the future risk, the importance of treatment options cannot be overstated.

The World Health Organization considers the mental well-being of people to be a central part of overall health (Powell et al, 2019). For a person to be considered in a positive state of mental well-being they must be able to cope with stress and be a productive member of society (Powell et al, 2019). The World Health Organization argues that “health is a state of complete physical, mental, and social well-being, and not merely the absence of disease” (World Health Organization, 2019). For people living with invisible mental health issues this is a difficult task to rectify. But if we can ensure people gain a positive state of mental health society overall would reap the benefits.

The Centre for Addiction and Mental Health is Canada’s (CAMH) largest mental health teaching hospital and one of Canada’s leading research centers on mental health in Canada found that 1 in 5 Canadians experience mental illness in a year. Additionally, they found that the stigma connected to mental illness is still a problem for Canadians (Center for Addiction and Mental Health, 2022). In a 2019 survey, the CAMH found that 75% of respondents said that they would be reluctant or would refuse to disclose a mental illness to an employer or co-worker, and the respondents were nearly 3 times less likely to want to disclose a mental illness like depression or anxiety, than a physical one like cancer (Center for Addiction and Mental Health, 2022). They also found that 76% of respondents stated that they would be completely supportive of a co-worker with a mental illness (Center for Addiction and Mental Health, 2022).

In the same study that Centre for Addiction and Mental Health found that there are major costs to society due to the economic costs of mental illness, particularly when left untreated (Center for Addiction and Mental Health, 2022). On average, mental illness costs Canadians \$50 billion in health care costs, lost productivity, and reductions in health-related quality of life (Center for Addiction and Mental Health, 2022). They have also found that individuals with mental health illnesses are unemployed at a rate of 70% and 90% for people that have severe mental health illness (such as borderline personality disorder) (Center for Addiction and Mental Health, 2022). However, with proper care and a treatment plan 80% of those

suffering from depression can be successfully treated and recover (Mental Health Commission of Canada, 2015). The conference board of Canada found similar results stating that the annual economic costs of anxiety and depression alone are upwards of \$32 Billion (Dozois, 2020).

The Centre for Addiction and Mental Health found that if we invest in mental health, it will produce net costs and benefits for everyone involved. They recommend health promotion programs, scaled up treatment options for depression and anxiety, and workplace mental health programs to support people with mental health illness (Center for Addiction and Mental Health, 2022).

Impact of Covid-19 on Canadian's Mental Well-being

According to statistics Canada data released in 2020 the pandemic resulted in an even greater slide in the mental health of Canadians. Prior to the pandemic 68% of Canadians reported having good mental health; during the pandemic that lowered to 55% of Canadians (Statistics Canada, 2020). Additionally, those people that suffered prior to the pandemic were reported to be impacted greater by the pandemic, particularly those with mood disorders, and the LGBTQ communities (Statistics Canada, 2022).

In a Canadian study, Dozois (2020) found in their review of the literature that experts were warning that the pandemic will result in increases of mental health issues and could create what the medical community call an “echo pandemic” of mental health problems. As a result of covid-19 it was found that anxiety is at an all-time high in Canada because of not only Canadian's fears of catching the virus but about the impact on our health system (Dozois, 2020). Depression is of major concern because often anxiety is a forerunner for depression (Dozois, 2020). Those who suffer from depression tend to spiral downward and end up withdrawing and avoiding daily activity (Dozois, 2020). Of more concern is that mental health resource access is extremely difficult due to Covid-19 restrictions , and the abnormal increase in need for such resources (Dozois, 2020). While Alberta has lifted most of its restrictions, restrictions are still in place in health care environments leading to issues in receiving access to both mental health resources, and healthcare needs.

Student Mental Well-being

There is a wealth of literature available that indicates that there is a link between student academic success, and student mental well-being (Alberta Post-Secondary Mental Health and Addictions Framework, 2015; Cheng et al, 2021; American College Health Association, 2019; Hartey et al, 2017). Equally so, there is an abundance of literature that indicates that universities across Canada were having a “mental health” crisis pre Covid-19, and the Pandemic has Exacerbated that issue (Alberta Post-Secondary Mental Health and Addictions Framework, 2015; American College Health Association, 2019; Bartlett, 2014; Buote et al, 2007; Cheng et al, 2021; Son et al, 2020; BC Partners for Mental Health and Addiction Information, 2008; Canadian Association of College and University Student Services and Canadian Mental Health Association, 2013; Canadian Mental Health Association, 2021; Center for Innovation in Campus Mental Health, 2021; Hartey & Wells, 2017; Hefner, 2009; Lipson, 2009; McMaster University 2021; Mental Health Commission of Canada 2021; Kwakye, 2020; Okanagan Charter, 2015; Raghacan, 2014; Reid, 2015; Rashid, 2020; Riwi, 2020; Shepell, 2021(c); The Jed Foundation, 2017).

According to Chang et al (2021) across Canada it was found that 36.1% of students reported suffering from anxiety, 31.9% suffered from a form of depression, and out of the 400 students surveyed approximately 42% met the criteria for “clinical psychological distress. (p.1008). Further, the Mental Health Commission of Canada reports that 52% of post-secondary students in Canada felt so depressed that they found it difficult to function day to day, and 69% reported feeling overwhelmed by anxiety (2021).

The American College Health Association (2019) reported that students “mental health” is alarmingly low. The study found that 88% of students felt overwhelmed, 87% felt exhausted, 76% felt sad, while 70% of students felt overwhelming anxiety (American College Health Association, 2019). In addition to how many students suffer from mental health issues Hartrey et al (2017) found that these “mental health” issues prevented many students from participating in everyday academic life but also often discouraged students from seeking help through mental health services. Students reported that they were suffering from mental illnesses, fear of disclosure due to issues such as stigma on campus, and a lack of knowledge about what services were available (Hartey et al, 2017).

Further, Cheng et al (2021) reported that while most Canadian institutions have some form of “mental health” supports, the accessibility to the services are inconsistent and problematic across Canada, and often counselling services are understaffed and overwhelmed leading to long wait times for students, and inaccessibility to the services. We need to understand where the Southern Alberta Institute of Technology falls on this continuum so that we can ensure that during these tough times we are not only offering mental health services to students, but also ensuring their accessibility to those services.

The literature shows that post-secondary institutions can help student mental well-being by structuring their institution using a “mental health lens” to ensure a positive impact on their student’s mental health (Alberta Post-Secondary Mental Health and Addictions Framework, 2015, Canadian Association of College & University Student Services and Canadian Mental Health Association, 2013). This can include such initiatives as: peer support lead programs for student waiting for mental health access on their campus’s, mental health wellness kits, and establishing preventative programs for students.

Impact of Covid-19 on Students

Research has shown that student mental health issues have escalated during Covid-19 and that students have consistently had the lowest mental health across the country during this time when compared to others in all industries (Kwakye & Kibort-Crocker, 2020; Cheng et al, 2021; Morneau Shepell, 2021(a); Morneau Shepell, 2021(b). Riwi,2021; McMaster University, 2021) examined pre and post Covid-19 levels of mental health needs and found that there was a 10% rise of students in need for mental health services during the first wave of the pandemic.

Alarmingly, they found that this continued to increase throughout the year once in April (another 10%), and then again in July and rose steadily until October 2020 when they ended data collection (Riwi, 2021). The Centre for Innovation in Campus Mental Health conducted a study in May of 2020 and found that 60% of students were worried about the pandemic, 70% reported feeling stressed, anxious, and isolated, and 82% were worried about their futures (2021).

According to McMaster University (2021) they have found that there are generally

three areas in which students' health have been compromised during the Covid-19 pandemic. First, it presents as an ambient stressor, which is all consuming and almost random. It may present itself as you are leaving the house to run an errand, and someone has an anxiety attack as they realize the world is not as it was two years ago. Second, Covid-19 has robbed people of the usual resources they would have to cope in such situations since the world is operating differently. Lastly, the pandemic has exacerbated stressors that were already present in student's life. For example, 70% of students reported that their summer employment plans were affected by the pandemic causing much stress about the new academic year (Centre for Innovation in Campus Mental Health, 2021).

Students continuously struggled with worry, anxiety, depression, and frustration during this time (Morneau Shepell, 2020; Riwi, 2021; Healthy Minds Network, 2020; Rashid et al, 2020; Changwon et al, 2020). In addition to the increase in mental health issues during the Covid-19 pandemic, students are reporting that they are having an even harder time than before accessing mental health services. Healthy Minds Network (2020) reported that 60% of students they surveyed said it was harder for them to access services during Covid-19, than previously. Further, Rashid et al (2020) found that 57% of students reported an increase in anxiety, 81% reported an increase in the feeling of loneliness, and 40% reported an increase in depression compared to the same time the previous year (2019).

Given the extensive research that draws a link between strong social support and mental health in universities (The Jed Foundation, 2017; Buote et al, 2007; Hefner & Eisenberg, 2009). Ensuring that our students have appropriate access to mental health services during the Covid-19 pandemic and beyond will be critical for increasing retention in programs, academic performance, completion rates, and the overall mental health of our students.

Environmental Scan - Current programs in Alberta

Student unions (SU) typically run most programs that are associated with student well-being. Lockers, posters, transit passes, in-house food bank, health, dental,

SafeWalk, hygiene programs grocery cards, and tutoring are services that are generally offered by nearly all student union associations in Alberta. However, student unions have evolved over time to better serve their unique populations. For example, Norther Alberta Institute of Technology, Mount Royal University, University of Calgary, and the Southern Alberta Institute of Technology, all run Good Food box programs. The program is typically run by volunteers and the costs are the same regardless of institution. A small box (20lbs.) will cost \$20, a medium box (30lbs.) will cost \$30, and a large (40lbs.) box will cost \$35 dollars.

With some notable exceptions such as the University of Lethbridge, and Red Deer Polytechnic, most post-secondary institution programs in Alberta also run a free breakfast program for at least one day out of the week. Pet a puppy (PALS) is a program that is run by the University of Alberta, Norther Alberta Institute of Technology, Southern Alberta Institute of Technology, and Mount Royal University during mid-terms or finals to help alleviate stress in students. There are more niche programs offered such the online exam bank service offered by the Student Union at the University of Calgary, which helps students practice for finals or mid-terms and the new fridge program being implemented by the University of Calgary in 2023.

It should also be noted that most of the major institutes in Alberta offer either pharmacies or drug stores where students can access their prescriptions or over the counter medications such as Advil. There is currently no literature on the importance of having access to a pharmacy or a drug store on campus. There is literature regarding the importance of access to a community pharmacy for low socio-economic status people that indicates that having a community pharmacy is important for ongoing healthcare and well-being. However, this is difficult to translate to a university population and would need to be carefully considered.

University Programs

The prospect of acquiring a post-secondary education is an experience that is simultaneously both exciting and nerve wracking for prospective students. The transition from high-school or from the work force into a post-secondary institution is a life altering experience which often presents itself as a radical change in the lives of many students. Finding the correct balance between school and life is a challenge

that many students face. In a study of over 43,000 post-secondary students, the American College health association reported that 18.4% and 14.7% had received diagnoses or treatments for anxiety or depression 12 months prior to completion of the survey (American College Health Association [ACHA], 2015). Furthermore, 86% of university students report feeling overwhelmed by their responsibilities (ACHA, 2015). Within Canada, individuals aged 15 to 24 are reported to be the least likely age group to seek appropriate help for their mental well-being despite being the demographic most affected by mental health issues (Hunt & Eisenberg, 2010).

The hesitancy to find adequate mental health help can be attributed to a wide variety of factors. Stigma surrounding mental health, lengthy wait-times and concerns surrounding privacy are a few factors which have been shown to prevent mental health access (Hunt & Eisenberg, 2010). Considering the issues, post-secondary institutions play an extremely important role in ensuring that students have access to the proper tools to address their well-being. However, how post-secondary institutions have attempted to address the issue of student well-being can vary tremendously depending on the institution. These attempts have been more traditional in their approach such as cognitive behavioral therapy to more creative practices such as animal therapy.

Therapy Dog Programs

The University of Ottawa was one of the first post-secondary institutions in Canada to consistently offer animal assisted activities (AAA) and animal-assisted therapy (AAT) throughout multiple academic terms (Dell et al., 2015). Currently about half of universities in Canada offer therapy dog programs throughout examination periods, but some institutions (like the University of Ottawa) offer year-round AAA (Dell et al., 2015).

A pilot study looking at McMaster University, the University of Saskatchewan, and the University of Regina found that 98% (378 out 403) student respondents indicated that they would recommend a therapy dog event to other students as they found the event as both enjoyable and destressing (Dell et al., 2015). There are also other studies to corroborate this claim as studies have found that therapy dogs can be calming as they reduce anxiety and serve as a buffer from anxiety-generating stimuli (Kruger & Serpell, 2010). It is important to note that AAT is not meant to be a

stand-alone treatment for student well-being but is meant to supplement other well-being services (Marcus, 2013; Nepps et al., 2014; Nimer & Lundahl, 2007; Rossetti & King, 2010; Yorke et al., 2013).

The University of British Columbia established the AAT program B.A.R.K (Building Academic Retention through K9s) with the goal of reducing student stress and homesickness. As part of the B.A.R.K program, weekly drop-in sessions are offered to students where they are permitted to spend time with volunteer dog handlers and their certified therapy dogs. This program has been extremely successful as approximately 30% of the UBC student body has utilized the program over the course of the academic year (Binfet et al., 2018). Results from a study of the B.A.R.K program showed that canine therapy intervention reduced stress levels of student participants by a significant degree (Binfet et al., 2018).

Peer Support Programs

Peer support can be defined as “the social and emotional support offered by an individual in equal standing, founded on respect, shared responsibility of what is understandable” (Suresh et al., 2021). In practice, peer support often involves at least two individuals who have a shared experience engaging in a relationship for the mutual development of both parties (Kutcher & McLuckie, 2010). It is well established in literature that university aged young adults will not only first go to their peers, but that support will have an incredible impact on them (Kirsch et al, 2014; Humphreys et al, 2022; Reniers et al, 2017; Davis & Fritze, 2020; Dooley & Fitzgerald, 2012).

Many institutions, such as McGill University, offer peer lead support as part of their overall student-well-being package. The Peer Support Centre (PSC) is a student-led service at McGill that works in tandem with the university’s mental health services. Students who apply to volunteer for the PSC undergo an intense and meticulous training regime to provide peer-to-peer support for students. There is growing evidence to suggest that peer support programs for mental health can increase student access for mental health programs as they help decrease barriers surrounding mental health (Suresh et al., 2021). The literature leans towards the implementation of peer listening programs, over peer counselling program.

However, peer support is important because it can help address societal stigma by validating individual student's experiences as normal and understandable. The Mary Christie Institute conducted a survey in 2022 of counseling center directors in which 95% of respondents agreed some kind of peer support program was necessary (Humphreys et al, 2022). Peer listening (63% support), and peer education programs (78% support) garnered the most support from counselling directors, peer support groups had around 57% of the support from counsellors while peer counselling garnered the least amount of support (Humphreys et al, 2022).

PEER GROUP SUPPORT

Present day literature illustrates that peer support groups on university campuses may be a viable alternative to professional counseling in certain circumstances. Peer support might be appropriate in circumstances where students are facing sub-clinical issues (Humphreys et al, 2022). Students naturally gravitate towards one another when facing challenges, and peer group counselling takes advantage of this fact. Students tend to have more shared life experiences which presents peer group support as an attractive option for student well-being. (Mulvale et al.,2022; Humphreys et al., 2022).

Research also shows that marginalized student groups such as international students, students of color, and first-generation students tend to benefit more from peer group support (Humphreys et al, 2022; Hyun et al, 2007; Lipson et al 2022). This is because these groups of students are reported to have higher levels of stress on average but tend to be hesitant to pursue traditional counseling services offered by universities (Humphreys et al, 2022; Hyun et al, 2007; Lipson et al 2022).

There are limitations with the establishment of peer group support programs. There are obvious concerns with liability as students could potentially be placed into difficult situations without having proper training (Humphreys et al, 2022). Universities administrators also have limited resources and time and offering peer group support can be a challenging ask (Humphreys et al, 2022). Finally, there are concerns around about disclosure of sensitive information, topics, and confidentiality in the groups.

In some situations, peer groups support has been integrated into counselling programs at universities. One such program took place at Texas Christian University

(TCU) where it was used as a preventative strategy, rather than treatment. The program that was instituted was designed to help prevent students from relapsing after attending substance use programs (Humphreys et al, 2022). After the establishment of the program TCU now used the program to focus on issues of homesickness, and loneliness (Humphreys et al, 2022).

A survey of the literature does not yield consistent outcomes with regards to the effectiveness of peer group support programs. This ‘[can largely be attributed to the variability to the application of peer support group programs in universities (Humphrey et al, 2022). These inconsistencies make it difficult to compare various peer group support programs.

PEER EDUCATION

Peer education programs are widely considered the easiest, and less costly peer program to institute. Peer education can be defined as:

“Trained peers providing education and information to student son mental health topics and responding to students seeking help for their mental health with resources and referrals” (Humphreys et al, 2022:13).

Such programs in this category could include information sessions with specific groups of students, informational material distribution, or gatekeeper programming. It is important to recognize that such approaches are designed because it is well documented that students will be more likely to listen to their peers over those that fall outside their immediate peer groups (Humphreys et al, 2022; Kirsch et al, 2014; Reniers et al, 2017; Whitt et al, 1999).

PEER LISTENERS

Peer listening is a “one-to one interaction were training peers practice empathetic, active listening” (Humphrey et al., 2022). Peer listeners do not offer counseling nor give advice, but they can help in directing and referring students to various resources or services. The type of support offered in peer listening programs is the least risk of all peer programming and seen as easier to implement and support student volunteers (Humphreys et al, 2022).

Peer listeners act as an outlet and confidant for students. As a result, peer listeners

typically receive training on listening, crisis intervention, boundary setting, etc (Humphreys et al, 2022). The use of a peer listening service during an emergency is heavily discouraged and peer listeners are expected to refer individuals to an emergency service instead.

Review of literature establishes that peer listening is relatively easy to implement and a study from the Mary Christie Institute of counseling center directors showed peer listening as a viable program option for most post-secondary institutions (Humphrey et al., 2022). Peer listening can also help universities identify gap areas of need as reoccurring themes in conversations may require larger intervention from universities.

As with any service involving students, there are potential risks associated with being a peer listener. For instance, it is possible that peer listeners may feel either overwhelmed or triggered because of a conversation had with students.

PEER COUNSELLING

A peer counsellor is a trained peer who “helps students work through mental and emotional concerns” which can include depression, anxiety, suicidal thoughts, and mental health conditions (Humphrey et al., 2022:22).

The literature indicates that peer support programs provided by those who have specific lived experiences have shown to improve outcomes for program implementation. For example, project RISE was established by a group of black students at the University of Virginia (UVA) as a response to gaps within the services offered at UVA (Humphrey et al., 2022). The counselling service helped reduced stigma surrounding mental health as it tripled the number of black students who accessed mental health resources on that campus (Humphrey et al., 2022). Although there are valid concerns surrounding peer support, these concerns can be appropriately addressed. Improving training, providing appropriate supervision, and the establishment of built-in support networks can help mitigate such risks.

It should be noted that peer counseling programs are highly controversial due to a combination of factors. Namely peer counsellors are not licensed nor trained in the same way which professional counselors are which leads to concerns surrounding liability (Humphrey et al, 2022). Other concerns include training protocols, resources

constraints, lack of research, and lack of consistency in guidelines for peer supporters (Humphreys et al, 2022). More importantly the top two concerns (98% and 93% of respondents) being regarding the personal risk of the student councilor, and the liability to the institutions or student association in charge of implementing the programs (Humphreys et al, 2022).

Furthermore, there are few established peer counselling programs because it is both monetary costly and time-intensive to establish and maintain (Humphrey et al, 2022). The literature indicates that as a possible solution to this universities should instead implement peer listening programs to fill any gaps, and service students, where in crisis students can then be referred to professional services. One last issue brought up in the literature is space. Many peer listening, and peer counselling programs lack an entirely private space for such activities to take place (Canadian Mental Health Association, 2017). The lack of a private space makes it easy for other students to overhear private conversations and exposes the issue of confidentiality (Canadian Mental Health Association, 2017).

Fall Reading Week

The fall reading week break was originally introduced by McMaster University in 2015 and was introduced to “[provide] students with meaningful reprieve during a strategic moment in the course of their studies to improve academic performance and mental health and well-being.” (McMaster University, 2015). Following its implementation at McMaster, most post-secondary institutions in Canada have also adopted a full week break during the fall semester (Agnew et al. 2019) with only NAIT, and SAIT not participating in Alberta.

However, the effectiveness of the break is still the subject of debate as research to determine its effectiveness in reducing student stress is sparse. In an article written in the journal for Student Success, it stated that although “Students appreciated the fall break as an opportunity to reduce their stress, yet they frequently reported negative impacts of the break on the timing of academic assessments and their ability to effectively manage study time” (Agnew et al. 2019). The study also reported that students would prefer the fall reading break to be pushed to late October or early November (Agnew et al. 2019). Although there is an expectation that having a weeklong break would generally reduce student stress, current literature does not

establish a clear benefit for a weeklong break.

Most institutions have recognized that Thanksgiving is far too early to hold reading week and impacts students adjustment to the new school year, as indicated in the literature, to have a reading break so they have moved reading break to November. The lit is clear here that there is some discrepancy on whether reading break helps students well-being, but upon further digging into the lit it is easy to see how this can be addressed. The University of Alberta, University of Calgary, and MacEwan University have all moved their fall breaks to November (pairing it with Remembrance Day), while Mount Royal University, and Red Deer Polytechnic have opted to keep it paired with the Thanksgiving long weekend.

Much of the research has examined student stress levels before and after reading week to see how effective that fall break is. While the literature has overwhelming reported that fall reading break seems to increase stress on students more the literature is in agreement (Agnew et al, 2019; Poole et al, 2019; Poole et al, 2018; Poole et al, 2017; Pilato et al, 2022; Pilato et al, 2022; Hulls et al, 2018; Medula, 2017)

To get appropriate use out of reading week Poole et al (2017) recommends that universities make it clear why reading break was implemented and recommends training staff and students on the importance of the break. However, the same article also recommends that workshops on time management strategies are implemented to help students cope with heavier workloads when they come back from reading break (fall or winter) (Poole et al, 2017). Pilato et al found that fall reading break is causing stress issues because the timing has been poorly designed and the labelling during the policy stage was not well thought out (2022). Their findings suggest that because of this issue the break that is intended to support students misses the mark and creates more academic pressure than if there had been no break at all (Pilato et al, 2022). The authors suggest that if a fall reading break is going to be implemented coordination must happen between faculty on due dates, course structure, and testing (Pilato et al, 2022). A policy could be adopted institution wide to not have any evaluations the week after fall break to account for this issue.

However, Pool et al (2018) notes that many institutions have also come up with coping programs to help students with their mental well-being year round for

example, McMaster has created the COPE program which is a program designed to educate students on mental health as well as create dialogue on the issue designed to destigmatize mental health. They further note that the University of British Columbias program “healthy minds project” has been a success. The program creates well-being initiatives throughout the school year designed to educate students, faculty, and staff on the issues (Poole et al, 2018). The University of British Columbia also designed an undergraduate course “Introduction and Principals of Health and Well-being) which explores the topic of well-being in depth (Poole et al, 2018).

Poole et al also notes that many universities across the country have started training staff on well-being issues including how to respond to students in crisis (2018). This includes the University of Guelph who requires staff to finish training modules on the subject and the University of Manitoba who provides a two-day workshop to help faculty and staff identify and respond to students in crisis (Poole et al, 2018).

While a fall break would help students cope with stressors and their well-being, the literature is clear that unless it is implemented in a very specific way it may be doing more harm to the overall well-being of students.

Food Programming

It is important to understand just what food insecurity means to understand the scope of the issue and what programing can help students. For our purposes we will adapt the definition from Maynard (2018) which describes food insecurity as “uncertain or inadequate access to food due to financial constraints” (p.131).

According to the Canada Food Price Report (2022) the average cost of food per person was \$200.50 per month. With an average inflation rate of 7% in Alberta, that would have increased our food to approximately \$214.50 per month by August 2022. The Canada Food Price Report also breaks down food costs per year for different age categories. In 2021, men between the ages of 19-30 years old could expect to spend approximately \$3,711.36 per year on food (Canada Food Price Report, 2022). Women on the other hand between the ages of 19-30 would spend \$3,231.53 (Canada Food Price Report, 2022). Compared to the average Canadian this is significantly more when we look at the Canadian Food Price Report when we look at

other demographics (2022). We know most of our students are under the age of 24 years. According to Statistics Canada in 2020, the average income of those aged 16-24 was just \$18,600 per year (Statistics Canada, 2021).

According to the index food inflation has outpaced general inflation over the last 20 years, increasing 70% between 2000-2020 (Canada Food Price Index, 2022). Further, inflation in 2021 was 4.4% on average, this was an 18 year high. The rise of inflation (which was 7% in Alberta at the time of writing this report) does not equally impact all groups of people.

People who are in lower income brackets, such as students, typically spend a much higher proportion of their income on basic needs such as food (Canada Food Price Index, 2022).

For students there is often this problematic notion that food insecurity is normal and should be simply expected while attending post-secondary school and can lead to students not wanting to reach out for help (Maynard et al, 2018; Hattangadi et al, 2019). Further, many students will compromise their food intake by simply skipping meals to save money (Maynard et al, 2018). This undoubtedly impacts overall well-being, and likely impacts post-secondary performance and outcomes.

To help alleviate the problem most post-secondary student associations provide some form of good food box to help students cope. Food insecurity is a major issue that faces students today and the issues that surround it is complex. As such, Saitsa will publish an extensive food insecurity literature review in summer 2023 to explore this issue further.

As a response to food insecurity there are several programs that Universities tend to run to address the problem. Such programs include food boxes, emergency funding, grocery cards, free breakfasts, and pantry programs. There is not a wide range of research on most of these programs as it is widely acknowledged in the food insecurity literature that food programs are treating a symptom in the much larger issues of the affordability crisis that students are faced with post Covid.

There was one study published in the spring of 2022 that specifically looked at how, or if, those boxes reduced food insecurity on the University of South Carolina's

campus. This research found two major themes that indicated well these boxes do make an impact on food insecurity they need to ensure that no cook boxes are an option so that meal preparation is easier for students on the go (Crosby, 2022). Secondly the research found that more pickup points were needed around campus that had easy access to vehicles for pickup (Crosby, 2022).

The effectiveness of free breakfasts for university students is also not well known. However, there is an abundance of research on the free breakfast programs for schools in the United States. The research, which dates back to 1995, widely indicates that such free breakfast programs not only put a dent in food insecurity faced by school aged children, such programs also improve academic outcomes for kids (Hill et al, 2022; Frisvold 2013; Fletcher & Frisvold, 2017; Gordanier et al, 2020; Cohen et al, 2021; Schwartz, 2017; Mhurchu et al, 2010; Pollitt & Matthews, 1998; Bartfeld & Ahn, 2010; Bartfeld et al, 2019; Soldavini & Ammerman, 2019; Turner & Chaloupka, 2015; Smith & Cunningham-Sabo, 2013; Mhurchu et al, 2013; Dotter, 2013). As with other food security programming it is important to note that free breakfast research also acknowledges that these programs are treating an underlying symptom rather than the problem. However, it is well documented that such programs do work to alleviate immediate food insecurity issues and have peer reviewed studies that show they improve academic outcomes.

One area that is highly researched regarding university and food insecurity is the use of pantry programs on university campuses. In Alberta, the University of Calgary, Mount Royal University, and the University of Alberta all have variations of the pantry program. Pantry programs are usually programs run by student associations where student can access non-perishable food items free of charge.

The biggest barriers to this program are the lack of fresh fruits and vegetables, and the reluctance of students in need to use the programming due to stigma attached, or the belief that they are not as in need as another student (Zein et al, 2018; Hanbazaz et al, 2016; Mitchell & Prescott, 2022; Weaver et al, 2021; Miller et al, 2019; Daugherty et al, 2019; Yanniello, 2018; Zein et al, 2022). To address the stigma literature recommends that universities should run education and destigmatization programming to ensure that this becomes less of an issue. This means ensuring that terms such as “in need” are dropped from advertisements on campus and instead refer to it as a community resource connected to wellness (Zein

et al, 2018; Hanbazaz et al, 2016; Weaver et al, 2021; Miller et al, 2019; Daugherty et al, 2019; Yanniello, 2018). Zein et al (2018) notes that this approach would give universities the opportunity to also expand such a program to include cooking classes, budgeting, and food resource management skills. While Price et al (2019) recommends including recipe cards in with food boxes and making such cards available for pickup with the pantry programs. Such programs could be valuable to international students that are unfamiliar with Canadian produce, and foods in general.

Esaryk et al (2021) studied the use of food pantries on universities, as well as looked at what gaps such pantry programs fill. The most reported reason for visiting the food pantry by students was that they were running out of food and were worried about spending more money on food (Esaryk et al, 2021). The study found that pantry programs filled a gap in finances as students spend last on food. They further noted that food insecurity is “compounded” by lacking basic needs (housing being the top need not being met). The study indicated that there is a direct link between those who lack housing insecurity and food insecurity, it should be noted that this is consistent with other literature (Esaryk et al, 2021 Martinez et al, 2021). The study concludes that by providing free food to students it may allow students to prioritize other basic needs without going hungry (Esaryk et al, 2021). The author notes that students in their study visited the food pantry on average 3 times per month (Esaryk et al, 2021). The study, although not designed for examining hygiene programs, can be pointed to as one that outlines the needs of including hygiene programming on campuses for students.

One study out of the University of Alberta found that international students were much more likely to use the pantry than other populations on campus, which is also echoed in other studies (Zein et al, 2018; Hanbazaz et al, 2016).

Given that this is such a complex issue. Saitsa will be releasing an updated affordability literature review in late spring or early summer for consideration.

Conclusion & Recommendations

Many post-secondary institutions in Canada have established policy addressing mental health. However, many of these policies are outdated and reflect antiquated beliefs about mental health and well-being (Diplacito-Derango et al, 2016). These shortcomings within policy have led to many shortcomings and gaps within mental programming with academic institutions.

Currently most institutions follow the Okanagan Charter (2015) which is an international based charter which is used for best practices in health promotion at colleges and universities. The Charter calls on post-secondary institutions to embed health into every aspect of campus culture which leads to health promotion, collaboration, and de-stigmatization (Lethbridge College, 2015).

The purpose of instituting such a charter was for three major reasons:

- “Guide and inspire action by providing a framework that reflects the latest concepts, processes and principles relevant to the Health Promoting Universities and Colleges movement, building upon advances since the 2005 Edmonton Charter”
- “Generate dialogue and research that expands local, regional, national and international networks and accelerates action on, off and between campuses.”
- “Mobilize international, cross-sector action for the integration of health in all policies and practices, thus advancing the continued development of health promoting universities and colleges.” (Okanagan Charter, 2015).

Through the above points the Charter aims to promote health, enhance the success of institutions and their students, create a campus of compassion, well-being, equity, and social justice (Lethbridge College, 2015). Such an incorporation would improve the health and well-being of everyone within the campus community. This approach incorporates a holistic view of health that incorporates Alberta’s dimensions of well-being focusing on physical, mental, social, financial, environmental, spiritual, and academic. In other words, the Charter indicates that health and well-being promotion is not just the responsibility of the health sector but must be engaged in by all sectors and levels of institutions.

Further the Charter has two major calls to action that Saitsa should reflect upon for future campaigns

- “Embed health into all aspects of campus culture, across the administration, operations, and academic mandates.
- “Lead health promotion action and collaboration locally and globally” (Okanagan Charter, 2015).

Furthermore, literature shows that mental health policies within academic institutions are “under-developed” and “under-communicated” being (Diplacito-Derango et al, 2016). Therefore, the following policy options and programming changes are recommended:

- Saitsa should abide by the Okanagan Charter framework when instituting mental health promotion. Such a policy would:
 - Embed health in all policies
 - Create a supportive environment that identifies opportunities to study and support well-being.
 - Generate a campus community of well-being (Okanagan Charter, 2015).
 - Saitsa’s Board of Directors should consider advocating for a mental health lens being applied to at Southern Alberta Institute of Technology.
- Teaching and administrative staff will need comprehensive training by mental health professionals to be better prepared in not only recognizing mental health issues within students, but also providing support.
- Utilizing current mental health literature, clarified, streamlined, and actively enforced by academic institutions.
- Employ initiative with the objective of decreasing the stigma surrounding mental health and improving the mental health literacy of both the student population and institutional staff.
- A comprehensive de-stigmatization movement around food insecurity programming. An overhaul of the language used when referencing the food insecurity programming needs to also take place. The focus should be on removing any reference to “in need” and instead focus on community resourcing for students.
- Saitsa should continue offering the good food box programming to students.
- Food education programming should take place such as ‘carding’ where we

ensure that students have access to recipe cards, and that they are included with their good food boxes. As indicated in the literature, this is especially important for international students who might not be as familiar with Canadian produce.

- The implementation of workshops for student to build skills such as time management, budgeting and food resourcing.
- Saitsa should consider either expanding the free breakfast to multiple days, or establishing a extremely low cost program for the rest of the week.
- Continue offering hygiene and other basic needs programming to fill gaps.
- Saitsa should consider establishing a food pantry to fill in gaps for students. The literature indicates that food pantry programing allows students to prioritize their money on other basic needs, such as housing.
- Saitsa should have volunteers trained each year in well-being to ensure:
 - The programs abilities to help students consistently
 - The ability to reach students who would otherwise not seek help
 - Ease the costs of implementation
 - Ensure the leak amount of risk for adverse outcomes for Saitsa, student, and student support worker.
- Peer listening programs should be set up to fill in any gaps for students seeking help.
- Fall reading week advocacy should be further discussed by the Board of Directors.
- Advocacy initiatives considered by the Board of Directors to advocate that reading breaks be renamed, well-being break, to better reflect the purpose of the break to both staff and students.
- Ongoing program evaluations based on best practices should be implemented in fall 2023 and consist of intake and outtake surveys.
- Release an updated literature review on affordability.
- Approach all policy, campaigns, and education with a mental health lens.
- Saitsa should study the need for a community drugstore on campus. Not only would this provide students access to some medications on campus it would also be an additional revenue stream.

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