

# Report of the Mental Health Working Group

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Written by:

Marilyn Fitzpatrick, MHWG Chair  
Professor  
Program Director, Counselling Psychology

Lina Di Genova  
Manager  
Student Assessment, Student Services

Contact:

Marilyn Fitzpatrick  
Lina Di Genova

T: (514) 398-3476  
T: (514) 398-7072

E: [marilyn.fitzpatrick@mcgill.ca](mailto:marilyn.fitzpatrick@mcgill.ca)  
E: [lina.digenova@mcgill.ca](mailto:lina.digenova@mcgill.ca)

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Nicole Allard	Director, Advising Services, Faculty of Science
Lorraine Bush	Administrative Coordinator, Counselling & Tutorial Services <sup>1</sup>
Lina Di Genova	Manager, Student Assessment
Elizabeth Cawley	Graduate student, Member Services Officer PGSS
Jack DeStefano	Director, Psychoeducational & Counselling Clinic
Karine Goddard	Staff, Mental Health Service
Marilyn Fitzpatrick	Chair, Director Counselling Psychology Program
Clare Foa	Graduate student, Service provider: Counselling Services
Robert Franck	Director, Mental Health
Heather McCombie	Advisor, Desautels Faculty of Management
Vera Romano	Director, Counselling & Tutorial Services
Max Rossiter	Graduate Student
Catherine Thompson	Counselling Service
Pierre Tellier	Director, Student Health Service
Joey Shea	Undergraduate student, VP University Affairs, SSMU

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Andre Costopoulos	Dean of Students
Heather McCombie	Advisor, Desautels Faculty of Management
Lesley Morin	Student Affairs Officers Records
Chidinma Offoh-Robert	Director, Faculty of Engineering
Ria Rombough	Associate Director, Residence Life
Susie Vodopivec	Student Affairs Administrator

#### Students

Melissa Dick	Graduate student
Avik Ghoshdastidar	Graduate student
Samara Perez	Graduate student
Emily Yung	Graduate student

#### Student Services Staff

Frederic Fovet	Office for Students with Disabilities
Robert Franck	Mental Health Service
Darlene Hnatchuk	Career Planning Service
Paige Isaac	First People's House
Pauline L'Écuyer	International Student Services
Sara Parks	Office of Religious and Spiritual Life
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Vera Romano	Counselling & Tutorial Services
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Copeland & Mitchell Miller	Campus Life & Engagement
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The Mental Health Working Group has consulted a number of resources including the following:

- 1- Boudreau, S. (2014). Twenty-Six Annual Report, (June 1, 2012 – May 31, 2013). Office of the Ombudsperson, McGill University:  
<http://www.mcgill.ca/ombudsperson/sites/mcgill.ca/ombudsperson/files/annualreport20122013pdf.pdf>
- 2- Canadian Association of College & University Student Services and Canadian Mental Health Association (2013). *Post-Secondary Student Mental Health: Guide to Systemic Approach*. Vancouver, BC: Author.
- 3- Canadian Graduate and Professional Student Survey (2013). McGill University Results:  
<http://www.mcgill.ca/pia/surveys/survey-results/cgps>.
- 4- Cooper, N.J., & Fuller, R. (2012). McGill University Counselling and Tutoring Services: Review of Service Spring 2012.
- 5- Di Genova, L. (2011). McGill University Counselling Service Survey Results Summary.
- 6- Di Genova, L. (2011). McGill University Mental Health Service 2011 Satisfaction Survey Executive Summary.
- 7- Di Genova, L. (2013). McGill University Post-Orientation Week Survey Results Summary.
- 8- Di Genova, L., & Romano, V. (2013). Student Psychological Wellbeing at McGill University: A report from the Counselling and Mental Health Benchmark Study.  
[http://www.mcgill.ca/senate/sites/mcgill.ca.senate/files/student\\_psychological\\_well-being\\_at\\_mcgill\\_october\\_2013.pdf](http://www.mcgill.ca/senate/sites/mcgill.ca.senate/files/student_psychological_well-being_at_mcgill_october_2013.pdf)
- 9- Harassment, Sexual Harassment and Discrimination: <http://www.mcgill.ca/harass/forms>
- 10- *National Survey of Student Engagement (2011)*. McGill University Results:  
<http://www.mcgill.ca/pia/surveys/survey-results/nsse>
- 11- Office of the Dean of Students, Helping Students in Difficulty:  
<http://www.mcgill.ca/deanofstudents/helpingstudents>
- 12- Office of the Deputy Provost Student Life and Learning, McGill University (2014). Summary notes from the Joint-Board Senate meeting on mental health (held on November 12, 2013).
- 13- *Principal's Commission on Mental Health (2012) Queen's University*,  
<http://www.queensu.ca/cmh/index.html>
- 14- Students' Society of McGill University (2014). SSMU Policy on Mental Health: <http://ssmu.mcgill.ca/wp-content/uploads/2013/09/Addenda-SSMU-Mental-Health-Policy-2014-02-20.pdf>
- 15- Tellier, P.P., & Di Genova, L. (2014). National College Health Assessment II: Preliminary McGill / Canadian Benchmark Report (*Mental Health Section Only*).
- 16- University of Manitoba (2014). *Success through Wellness: Enhancing the Campus Community to Promote and Support Mental Health and Wellbeing*. University of Manitoba's Campus Mental Health Strategy.

## EXECUTIVE SUMMARY

**Constitution and mandate.** The Mental Health Working Group (MHWG) was constituted by Jana Luker, the Executive Director, Services for Students in October 2013. The mandate of the committee was to review the current state of counselling, mental health and wellness services for students at McGill and to make recommendations to Jana Luker and Ollivier Dyens, Deputy Provost, Student Life and Learning, concerning opportunities for change. The group was chaired by Professor Fitzpatrick, the Director of the Counselling Psychology Program. It included the Directors of the Counselling, the Mental Health and the Student Health Services, the Director of the Psychoeducational and Counselling Clinic, the Manager of Student Assessment, academic advising representatives, undergraduate and graduate student representatives, an administrative coordinator and a recording secretary.

**Process.** The MHWG met weekly between October 2013 and February 2014. Data from multiple surveys and reports were consulted. The group conducted a consultation process in two phases. First, a survey of selected stakeholders was conducted to provide information on student needs and existing services for mental health and wellness. The results indicated richness in the range of services offered and a diversity of groups offering help.

The second phase included interviews with 16 stakeholder individuals and groups. Respondents were asked four questions about counselling, mental health and wellness services: what is working well, what is missing, what changes they would recommend, and what barriers exist to making suggested changes. Categorization of the interview data and the input from the rich MHWG discussions were used to develop recommendations in three categories:

**Create a more supportive campus environment.** Reports from stakeholders indicated that awareness and support for mental health is increasing momentum at McGill. Initiatives that would help to sustain the momentum include the following:

- Increase the focus on wellness in graduate and undergraduate student orientations.
- Expand and offer more professional support for student-to-student initiatives that are easier to access for students for whom professional services are stigmatizing.
- Provide students with wellness information throughout the academic year closer to their needs for it.
- Offer a wellness course for credit.
- Offer training in mental health to faculty members and TAs.
- Provide mental health training for advisors and program coordinators who are the first line of intervention for many students.
- Match first-line staff with counselling or mental health staff to facilitate referrals.
- Develop an integrated case-management approach across services.
- Make mental health awareness part of the new mandatory training of faculty in supervision. Improve faculty awareness of student mental health. Offer training for experienced faculty who have supervision difficulties.
- Increase communication among the licensed professionals, the front line staff working with students, and the students involved in student-led initiatives.
- Task a Senate group to monitor wellness initiatives including those recommended here.

**Optimize and better coordinate the use of existing resources.** McGill has a broad array of excellent University-offered and student-offered services across the campus. However many

respondents highlighted how difficult it is to keep track of McGill mental health and wellness resources and initiatives. The professional services Counselling Services (CS) and (Mental Health Services (MH) have been regularly overwhelmed and wait times have been long. Recommendations that could improve the communication about existing resources and help to optimize their use include the following:

- Develop and distribute (to students & staff) a McGill Student Services app. The app should include services offered by the licensed professionals, services delivered by front-line staff working with students, and student initiatives. The MHWG data from first phase of consultation can be used to assist in the development of the initial contents.
- Extend the online graduate orientation program currently in development to undergraduate students.
- Further investigate and pilot options to reduce the blockages in professional services created by requests for medical notes.
- Extend the use of validated progress tracking methods to better manage session limits.
- Further develop the McGill Nightline with input from licensed professionals as an after-hours helpline for students in distress.
- Examine the feasibility of weekend services for crisis situations.

***Review and harmonize service delivery.*** Currently, reviews of service delivery could be conducted on a more regular basis and services could have more consistent policies. For example, the Counselling Service (CS) and the Mental Health Service (MH) have some different policies in important areas that create inequities and gaps in how students are served. Recommendations for reviewing service delivery include the following:

- Conduct an external review of the Mental Health Service.
- Harmonize the administrative processes and clinical offerings of the Counselling and Mental Health Services and give them a single public face.
- Conduct and publish regular evaluations of services with valid indices of service effectiveness.
- Use licensed professionals as consultants for services delivered by front-line staff.
- Develop and implement a robust case management approach for difficult cases.