Australian
National
University

MENTAL HEALTH STRATEGY

April 2016

INTRODUCTION

In recognising the increasing need for an institutional approach to mental health, The Australian National University has developed a mental health strategy for students and staff in conjunction with key stakeholders.

Our vision

To create a University community that promotes positive mental health and wellbeing for both students and staff, breaks down stigma associated with mental health and ill-health, is responsive to those who may be experiencing changes in their mental health by providing a range of services and supports to promote wellness.

Values

> Promotion of wellbeing as a 'whole of person' approach including physical and mental health.

> A supportive culture that encourages early identification of changes in mental health status through increasing levels of mental health literacy.

> A normalising approach that recognises changes in mental health status dependent on life stressors and other factors, which can occur along a continuum of mental wellness.

Definitions

In the development of this strategy, the following definitions have been utilised:

Mental health

Mental health is defined as mental and social wellbeing in which individuals can realise their potential, cope with the normal stresses of life, work fruitfully and productively, and make a contribution in their community (WHO, 2005).

Good mental health is not merely the absence of mental illness, but is the capacity of individuals and groups to interact with one another and the environment, in ways that promote subjective wellbeing, optimal development and the use of cognitive, affective and relational abilities (DoHA & AIHW, 1999).

Mental health difficulties

A mental health difficulty interferes with a person's cognitive, emotional and social functioning, but to a lesser extent than a mental illness and is usually temporary. It is often a reaction to life stressors. Mental health difficulties are more common than mental illness.

With effective and appropriate support, mental health difficulties can be resolved. However, at times they may develop into a mental illness.

Mental illness

Mental illness is a term used to describe diagnosable disorders that affect a person's cognitive, emotional and social functioning. There are over 200 recognised mental disorders including depression, anxiety disorders, bipolar disorder, schizophrenia, and substance abuse.

Mental illness is internationally recognised as a major public health concern. In Australia diagnosed mental illnesses are estimated to affect 20 per cent of the population each year (ABS, 2008) and around 45 per cent of people experience a mental health disorder at some stage in their life (ABS, 2008).

STUDENT MENTAL HEALTH & WELLNESS

With the aim of nurturing a campus conducive to good mental health, student initiatives in this strategy are influenced by the overarching 'Framework for Post-Secondary Student Mental Health' as developed by the Canadian Association of College and University Student Services in conjunction with the Canadian Mental Health Association (CACUSS & CMHA, 2013).

The framework as adapted for the current purpose is summarised below, with an emphasis on mental health and wellbeing inclusive of all students, and in recognition of the diverse community and wider contextual environment. For further detail, please refer to the original framework document.

The framework comprises three target populations:

> an all-inclusive institutional student-focused approach;

> tailored assistance for students with identified coping concerns; and

> individual-specific intervention for students with immediate mental health concerns.

The framework (pictured on page 3) is consistent with a stepped-care model for health and wellbeing. The underlying principle is that of a graduated response to mental health, determined by need. This includes a focus on the following seven components, which progress across the three target populations, from institutional to individual intervention:

1. **Institutional structure: organisation, planning, and policy**

To create and enhance an institutional culture supportive of mental health and wellbeing, through the framing of mental health in organisational structure, policy and planning.

2. **Supportive, inclusive campus climate and environment**

To increase student engagement, connectedness, and meaningful participation in the learning environment, with an acknowledgement of the diverse community, and a strong emphasis on stigma reduction and collaborative sharing of resources.

3. **Mental health awareness and literacy**

To increase student knowledge and understanding of mental health issues, especially their nature, determinants, impact, management and prevention.

4. **Community capacity to respond to early indicators of concern**

To improve early recognition of mental health issues and timely access to relevant resources and support, through the provision of related training programs and centralisation of mental health resources.

5. **Self-management competencies and coping skills**

To strengthen resilience and coping skills in the context of academic demands, for those with identified coping concerns, to decrease vulnerability to mental illness.
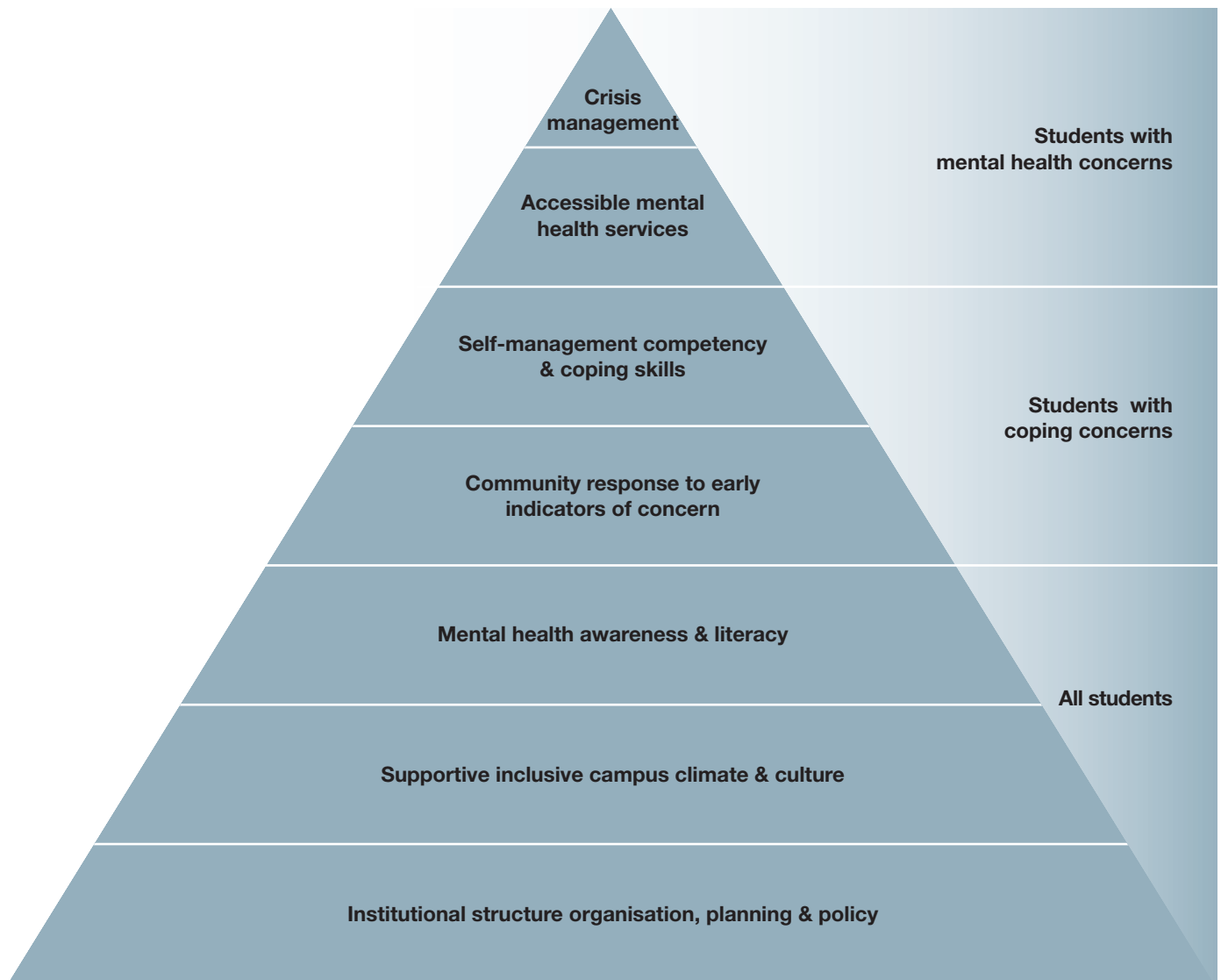
6. **Accessible mental health services**

To improve timely and coordinated access to relevant University mental health services and referral to community services for students with identified mental health needs, with a service focus on building strengths and recovery.

7. **Crisis management**

To ensure a well-communicated, coordinated, and timely campus response to mental health crises (situations of acute distress and imminent risk of harm to self or others), including the clarification of student role expectations and channels of emergency support.

Mental health framework – supporting students

Crisis management

Accessible mental health services

Students with mental health concerns

Self-management competency & coping skills

Community response to early indicators of concern

Students with coping concerns

Mental health awareness & literacy

Supportive inclusive campus climate & culture

All students

Institutional structure organisation, planning & policy

(Adapted from Framework for Post-Secondary Student Mental Health, CACUSS & CMHA, 2013)

STAFF MENTAL HEALTH & WELLNESS

Creating a mentally healthy workplace environment for ANU staff is an essential component of this strategy, to foster the health and wellness of professional and academic staff, but also promote a community approach for staff to support the mental wellbeing of students.

Creating a healthy workplace culture and managing potential sources of harm will benefit both students and staff within the ANU community. Critical to the successful implementation of this strategy are operational activities to provide skills and confidence for staff to recognise when those around us are unwell, and then to proactively offer assistance and support.

Creating mentally healthy workplaces

There are five main elements to creating a mentally healthy workplace for staff:

Raising mental health awareness

Assessing risks

Managing risks

Supporting ability to work

Providing rehabilitation

STUDENT KEY PRINCIPLES

Mental health difficulties can significantly reduce the capacity of students to meet the requirements of their course of study. They can also restrict academic performance, affect relationships and self-confidence, increase isolation, impair problem-solving skills and impair help-seeking.

Mental illnesses are prevalent among young people. One quarter of 16–34-year-olds are estimated to experience mental illness each year (ABS, 2008). In Australia, three quarters (76 per cent) of people who experience mental illness have first onset before the age of 25 years (ABS, 2010). Preliminary studies suggest that the rate of distress and vulnerability to mental health difficulties among university students may be significantly higher than the general population (ABS, 2008; Stallman, 2010; Said, Kypri, & Bowman, 2012). Furthermore, there is increasing evidence that university students report a high level of mental health difficulties but a low level of accessing formal support services (Eisenberg, Golberstein & Gollust, 2007; Rickwood, Deane, Wilson, & Ciarrochi, 2005).

The ANU Mental Health Strategy aims to develop and promote an inclusive and respectful community that fosters mental health and wellbeing, provides support, and reduces barriers to access for students experiencing mental illness and mental health difficulties. It reflects the University's commitment to protect the rights of students and to support all students to reach their academic potential. This involves three key principles of focus.

Key Principle 1: Improve the institutional and campus climate to promote wellbeing

Goal

To foster a university community that promotes mental health and wellbeing, encourages mental health literacy, and which recognises the need for a mental health approach that is reflective of the diverse ANU population.

Activities

1.1. Provide access to published information that promotes mental health and wellbeing, wherever possible in a range of accessible formats and languages.

1.2. Utilise student health and wellbeing programs as a mechanism for reducing the risk factors relating to mental illness.

1.3. Provide training and resources for students to improve mental health literacy. Training will include the recognition, management and prevention of mental illness and mental health difficulties and their impact on study, work, relationships and social connectedness.

1.4. Provide training on discrimination and harassment, appropriate behaviours by University staff and students, and relevant complaints processes.

Measures of success

> A training calendar readily available and promoted in University publications.

> Provision of mental health training and resources to students.

> Evaluation of mental health training programs by participants.

Key Principle 2: Support students experiencing mental health difficulties and mental illness

Goal

To ensure that students of the University community who are experiencing a coping difficulty or a mental illness are supported by the University in accordance with the principles of equity, fairness and diversity.

Activities

2.1. Review, develop and implement University policies and procedures that promote social equity and equality of opportunity by incorporating the needs of students and staff with mental illness or mental health difficulties – including admission, recruitment, and academic or career progression.

2.2. Provide services that support students who experience mental illness and mental health difficulties to undertake study and work, including an Access and Inclusion area and the University Counselling Centre.

2.3. Monitor demand for University support services to ensure a timely response to students requiring support.

2.4. Facilitate reasonable study adjustments for students with mental illness registered with the Access and Inclusion area in cooperation with academic colleges.

2.5. Develop, promote and distribute information about support available for people experiencing mental illness or mental health difficulties.

2.6. Develop guidelines that facilitate return to study after an approved absence that relates to mental illness or mental health difficulties.

2.7. Review and update the University's Disability Action Plan at the end of each cycle and lodge with the Australian Human Rights Commission.

Measures of success

> Students have access to appropriate on-campus and specialist support services and information that assists them in the management of their mental health.

> Timely access to University support services.

> University policies and procedures which accommodate the needs of students who experience mental illness or mental health difficulties.

> Reasonable adjustments are provided for students with regard to individual needs, academic and work requirements, equity and anti-discrimination legislation.

Key Principle 3: Support students assisting others with mental health difficulties

Goal

To resource and equip students who assist others affected by mental health difficulties to provide appropriate, safe, and effective intervention and support.

Activities

3.1. Develop and distribute guidelines and information about how to assist people who are experiencing a mental illness or mental health difficulties, including referral options and crisis services.

3.2. Develop guidelines and provide training on responding to a critical incident involving a mental health crisis.

3.3. Delivery of advice, support and educational material for those who are supporting a student experiencing mental health difficulties or mental illness.

3.4. Provision of support services and debriefing for students following critical incidents.

3.5. Review and update the Memorandum of Understanding between ANU and Mental Health ACT services to facilitate integrated and timely responses to mental health crises.

Measures of success

> Students receive access to information, support and referral options that assist them in supporting someone experiencing mental illness or mental health difficulties.

> Guidelines are available for members of the University community encountering a mental health crisis or critical incident.

> Advice, support and debriefing are available to members of the University community who have assisted someone experiencing mental illness or mental health difficulties.

STAFF KEY PRINCIPLES

Within ANU there are a number of programs and activities in place which address the management of mental wellness for staff. This strategy document provides a summary of principles and activities to ensure a best practice co-ordinated approach.

The focus of strategies to address mental wellness in the workplace at ANU will address poor systems of work, working environments and organisational practices that are or can create stressors. The effective management of occupational stress is a key component in improving the efficiency and health of staff within the University. This involves five keys principles of focus.

Key Principle 1: Demonstrated management commitment to managing psychological injury

Goal

To ensure there is clear executive commitment to address mental health issues for staff at ANU, by providing regular reporting of issues and activities to the executive group.

Activities

1.1. Dedicated Work Environment resources to direct the development, implementation and evaluation of the mental health strategy within ANU.

1.2. Ensure officers under the WHS Act are aware of their duty of care obligations for psychosocial risk.

1.3. Progress report on ANU mental health and wellness operational activities to be tabled for ANU executive review on an annual basis.

1.4. Evaluation criteria for ANU mental health and wellness operational activities to be benchmarked against the Group of Eight universities as an identified priority area for ANU executive.

1.5. Ongoing funding for an Employee Assistance Program to be maintained for employees and their families, including a staff counsellor position located on campus.

Measures of success

> Policy, procedures and practices that are benchmarked against external organisations and the Group of Eight universities.

Key Principle 2: Understand the causes of psychological injury in the workplace

Goal

To ensure that detailed analysis of HR data and other relevant information occurs on an annual basis, so that accurate trending of issues can drive operational actions for improving psychological wellness of staff at ANU.

Activities

2.1. Identify and implement comprehensive management tools for assessing psychosocial risk profile across campus.

2.2. Provision of additional HR metrics to key stakeholders of identified 'hot spot' work areas, to assist with identifying issues and actions.

2.3. Review and report on HR metrics annually – unscheduled personal leave, workers compensation leave, employee assistance program usage, ANU health service usage, employee turnover and exit survey results, engagement survey results.

2.4. Monitor personal leave case management (non-compensable conditions) numbers and issues quarterly.

2.5. Review psychometric testing data provided at recruitment to identify trending issues for new employees.

Measures of success

> Number of workers compensation claims numbers and costs per claim.

> Unscheduled personal leave rates.

> Workplace relations number of issues and costs.

> Employee assistance program usage rates.

> Effective implementation of change management plans.

> Number of workplace incidents related to stress related causes.

> Staff engagement survey results.

> Exit survey results.

Key Principle 3: Destigmatise psychological injury in the workplace

Goal

To develop and deliver services at ANU which increase mental health literacy, increase understanding and reduce stigma for mental health issues.

Activities

3.1. Provide information sessions on psychological risk assessment process to key stakeholders – Work Environment Group, HR Division Managers and practitioners, College / HR Managers, Managers and Supervisors, WHS Officers and Committees.

3.2. Conduct Mental Health First Aid in-house.

3.3. Establish a network of Mental Health contacts from employees who have attended Mental Health First Aid training.

3.4. Promote national campaigns such as RUOK? Day, and Mental Health Awareness Month.

3.5. Provide quarterly information packs to the Mental Health Network.

3.6. Provide information sessions across all Colleges and divisions on request.

3.7. Facilitate promotional opportunities through ANU health and wellness community events.

3.8. Develop intranet pages and links to resources and psychological self-assessment tools.

Measures of success

> Number of employees who attend Mental Health First Aid courses delivered per year.

> Number of Mental Health Network information packs developed and distributed.

> Number of internal campaigns conducted each year to promote mental health literacy.

Key Principle 4: Clearly define policies and procedures and ensure that they are consistently applied

Goal

To ensure that policies and procedures at ANU drive operational activities that are compliant with legislative changes and promote best practice management of mental health issues for our staff.

Activities

4.1. Review ANU procedures relevant to mental health and wellness of staff – performance management, grievance procedures, responding to critical incidents, early intervention, incident notification, injury management, workplace investigation.

4.2. Develop a resource package (policy and procedures) for supervisors and HR Managers, to establish a clear process for supporting mental health and wellness.

Measures of success

> Comparison of in-house process benchmarked against external organisations.

> Review and audit of outcomes post-criticial incident.

Key Principle 5: Improve training and awareness of mental health and psychological injury management

Goal

To ensure training is developed and delivered to increase the knowledge and competency of staff at ANU to identify mental health issues, and assist in supporting other staff and students who require assistance.

Activities

5.1. Conduct psychosocial training needs analysis for key stakeholder groups and develop training plan.

5.2. Ensure Rehabilitation Case Managers have the competencies and experience required to manage psychological injury cases. Address gaps in capability.

5.3. Facilitate the development and delivery of leadership coaching skills.

5.4. Provide targeted training and development for identified hot-spot work teams and issues (on request) and in response to identified need.

Measures of success

> Training program completion rates.

> Leadership program completion rates.

> Leadership program satisfaction ratings.

> Employee engagement levels as a direct measure of leadership capability.

IMPLEMENTATION & EVALUATION

The responsibility for implementation and evaluation of this strategy rests with the Mental Health Working Group, compromising of students, staff and key University stakeholders, and chaired by Professor Richard Baker (Pro-Vice Chancellor, Student Experience).

An evaluation and review of the strategy will occur every three years, with the next review due in 2017. The working group will meet four times annually to discuss the progress achieved in the associated Operational Plan.

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> University of Melbourne Mental Health Strategy (2008)

> University of Canberra Mental Health Strategy (2011-2013)

> Guidelines for Tertiary Education Institutions: To facilitate improved educational outcomes for students with a mental illness (The University of Melbourne, Orygen Youth Health Research Centre, and Australian Rotary Health)

> University of Oxford – Mental Health Policy

> World Health Organisation – Mental Health

> ACT Health – *Building a Strong Foundation: A framework for promoting mental health and wellbeing in the ACT* (2009-2014)

> The National Mental Health Strategy Australia (1992, revised 2008)

> The University of Western Sydney Mental Health and Wellbeing Strategy 2012 – 2015

> Working together: Promoting mental health and wellbeing at work. Comcare publication 2014.

References

Australian Bureau of Statistics, National survey of mental health and well-being: summary of results, 2007. (ABS 2008) Cat. No. 4326.0. ABS: Canberra.

Australian Bureau of Statistics. (2012). Measures of Australia's Progress 2010 (cat. no 1370.0), <www.abs.gov.au> reference: 4125.0 – Gender Indicators, Australia.

Canadian Association of College & University Student Services and Canadian Mental Health Association. (2013). Post-Secondary Student Mental Health: Guide to a Systemic Approach. Vancouver, BC: http://www.cacuss.ca/_Library/documents/PSSMH_Guide_To_Systemic_Approach_-_CACUSS-CMHA_-_2013.pdf

Commonwealth Department of Health and Aged Care and Australian Institute of Health and Welfare (1999). National Health Priority Areas Report: Mental health 1998 . AIHW Cat. No. PHE 13. DoHA and AIHW, Canberra.

Eisenberg, D., Golberstein, E., & Gollust, S.E. (2007). Help-seeking and access to health care in a university student population. Medical Care, 45:7, 594-601.

Said, D., Kypri, K., & Bowman, J. (2012). Risk factors for mental disorder among university students in Australia: findings from a web-based cross sectional survey, *Social Psychiatry & Psychiatric Epidemiology*, 48(6), 935-44.

Stallman, H. (2010). Psychological distress in university students: A comparison with general population data, *Australian Psychologist*, 45(4), 249-257.

Reavley, N.J., Ross, A.M., Killackey, E., Jorm, A.F. (2013) Development of guidelines for tertiary education institutions to assist them in supporting students with a mental illness: a Delphi consensus study with Australian professionals and consumers. *PeerJ 1*: e43 http://dx.doi.org/10.7717/peerj.43 .

Rickwood, D., Deane, F. P., Wilson, C. J. & Ciarrochi, J. V. (2005). Young people's help-seeking for mental health problems. *Australian e-Journal for the Advancement of Mental Health*, 4 (3), 1-34.

World Health Organization (2005). Promoting mental health: concepts, emerging evidence, practice: Report of the World Health Organization, Department of Mental Health and Substance Abuse in collaboration with the Victorian Health Promotion Foundation and the University of Melbourne. WHO Press: Switzerland.

CONTACT US

Staff

Human Resources Division
Chancelry Building, 10A
The Australian National University
ACT 2601 Australia

T + 61 2 6125 3346

Students

ANU Student Association (ANUSA)
ANU Union, Student Facilities Building, 17A
The Australian National University
ACT 2601 Australia

T + 61 2 6125 2444

Postgraduate Students

Postgraduate and Research
Student Association (PARSA)
Student Facilities Building, 17A
The Australian National University
ACT 2601 Australia

T + 61 2 6125 4187