

RELEASED MAY 2020

niversity  
AUSTRALIA



# MIND waves

---

**PURPOSE: To develop a mental health strategy that promotes student and staff mental health and wellbeing, and provides a positive educational and workplace experience via a healthy, resilient, inclusive, compassionate and connected University community.**

## **CONTENTS**

Executive Summary	1
Introduction	3
The Strategy: Mindwaves	4
Strategic Focus Areas	6
Guiding Principles	15
Acknowledgements	16
References	17
Appendices	18
Appendix 1: Background and Literature Review	18
Appendix 2: Strategic Focus Areas – Opportunities and Gap Analysis	20
Appendix 3: Strategic Focus Areas – Current Initiatives and Recommendations	25
Appendix 4: Consultant List	33

# EXECUTIVE SUMMARY

Australia currently lacks an overarching mental health 'architecture' and the extent of mental health conditions in the community is extensive. CQUniversity plays a central role in all aspects of the development of individuals, communities, societies and cultures, locally and globally.

In Australia, one in four Australians is currently experiencing depression or anxiety (or both). When compared to the general public, university students are five times more likely to be diagnosed with a mental health difficulty, with seventy-five per cent of mental ill health developing before the age of 25. The Australian Institute of Health and Welfare (2012) reported that university students affected by mental ill health had been shown to have:

- » Lower educational achievement
- » Increased impairment
- » Increased chance of enrolment cancellation
- » Decreased employment
- » Negative learning and teaching experience
- » Higher absenteeism

For international and Indigenous students there are additional factors that exacerbate their risk of developing mental ill health. These factors include being away from home and their usual support network, missing family culture, foods, language and religious practices, as well as work, study and financial pressure.

There is a lack of research on the mental health of mature age students which presents a research opportunity that aligns to CQUniversity's aim to become one of Australia's most engaged universities, undertaking globally-relevant research that benefits regions and communities.

CQUniversity is proudly Australia's most inclusive university, with the highest ratio of mature-age students, those with Aboriginal and Torres Strait Islander background, first-in-family and low socio-economic backgrounds. Vulnerable groups are at a higher risk of experiencing mental health difficulties, including ethnic minority and Indigenous students, international students, single-parent students, or students who identify as lesbian, gay, bisexual, transgender or intersex (LGBTI) people and other sexuality and gender diverse people and communities.

Women are at a higher risk than men for depression, anxiety and eating disorders yet more men commit suicide than women. LGBTI are at an increased risk of experiencing psychological distress, self harm and suicide compared to the general population (Leonard et al., 2015). This demonstrates a critical need to support such groups, as CQUniversity continues to expand student diversity through its inclusion agenda (see Appendix 1: Background and Literature Review). Attrition is an issue in the Australian education sector and is both student—and institutionally—driven. Recommendations for addressing attrition have focused consistently on increasing support and services for students. CQUniversity already invests strongly in providing student support services, however there is an innovative opportunity to address attrition through directional

change. It is recommended that the University adopts the Mental Health Strategy known as Mind Waves. Through the implementation of the Mind Waves framework, CQUniversity will move beyond traditional educational and work place views of health, and instead place an emphasis on recognising the symbiotic relationship between health, education and the workplace.

It is recommended that the University draws on Positive Psychology, which is the scientific study of wellbeing and resilience, and has a focus on the conditions that enable individuals and communities to thrive. Positive Education draws from Positive Psychology which has been defined as 'education for both traditional skills and for happiness'. We broaden this definition as 'applied positive psychology in education and the university community'. Mind Waves, as the University's Mental Health Strategy, will act to support and help to build on, promote and develop University-wide initiatives to be embedded throughout our curricula and community. CQUniversity will be one of Australia's leading Positive Educational institutions.

**KEY STATISTICS: THE AUSTRALIAN PICTURE**



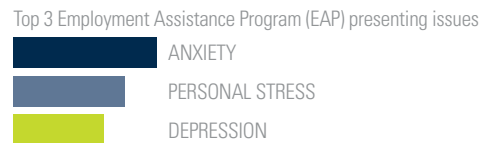
**UNIVERSITY STUDENT STATISTICS**



**UNIVERSITY STAFF STATISTICS**



**CLOSER TO HOME: CQUNI STAFF**



**CLOSER TO HOME: CQUNI STUDENTS**



41% OF STUDENTS REGISTERED FOR INCLUSION AND ACCESSIBILITY INDICATE THEY HAVE A MENTAL HEALTH CONDITION

## INTRODUCTION

CQUniversity strives to be a Positive Education University. The University will promote a holistic view of health and wellness, and draw on the following health recommendations and blueprints to do so:

- » The Wicked Problem of University Student Mental Health (Veness, 2016).
- » Okanagan Charter: An International Charter for Health-Promoting Universities and Colleges (Okanagan Charter, 2015).
- » A Framework for Promoting Student Mental Wellbeing in Universities (Baik & Larcombe, 2016).

Mind Waves is an internally-developed, evidence-based, Mental Health Strategy influenced by positive psychology theory and practice. This strategy highlights the importance of a stepped care approach that involves mental health promotion, early intervention, targeted intervention and the provision of treatment and support services.

It recognises that for cultural shift to occur, change is required at the institutional and individual level. The proposed activities will build upon the existing services and initiatives provided by the University with the aim of creating a sustainable, coordinated and collaborative response to student and staff mental health needs (See Appendix 1: Background and Literature Review).

## CONSULTATION

The Occupational Health and Safety Unit of People and the Culture Directorate partnered with the Student Experience and Governance Directorate to develop and drive this strategy with collegial expertise, support, contribution, and commitment from schools, professional peak bodies, community and other key stakeholders. (See Appendix 2: Consultation List).

## PURPOSE

To develop a mental health strategy that promotes student and staff mental health and wellbeing, and provides a positive educational and workplace experience via a healthy, resilient, compassionate and connected University community.

## SCALE AND SCOPE

This strategy will be implemented over the next three years via a whole-of-university approach. The implementation of both short term and longer-term initiatives will be monitored and evaluated for effectiveness. A formal review will be conducted annually to determine what longer-term initiatives are required based on the University's needs.

## APPROVAL AUTHORITY

The approval authority for this document is the Vice-Chancellor and President.

# THE STRATEGY: MINDWAVES

## VISION

CQUniversity is actively supporting the mental health and social and emotional wellbeing of our students and staff, while also engaging with the broader community to advocate and promote an inclusive, resilient and supportive society.

## PURPOSE

To develop a mental health strategy that promotes student and staff mental health and wellbeing, and provides a positive educational and workplace experience via a healthy, resilient, inclusive, compassionate and connected University community.

## POSITIVE EDUCATION: A STRENGTH BASED APPROACH

Mind Waves is strength-based strategy drawing on a Positive Education model that promotes student and staff wellbeing by:

- i. Understanding, recognising and developing individual's strengths and abilities. To build and maintain resiliency through self-care.
- ii. Empowering individuals to be decision makers in their academic learning and personal development.
- iii. Building upon individual's life skills to help them to better cope with adversity and to flourish (Seldon & Martin, 2017).

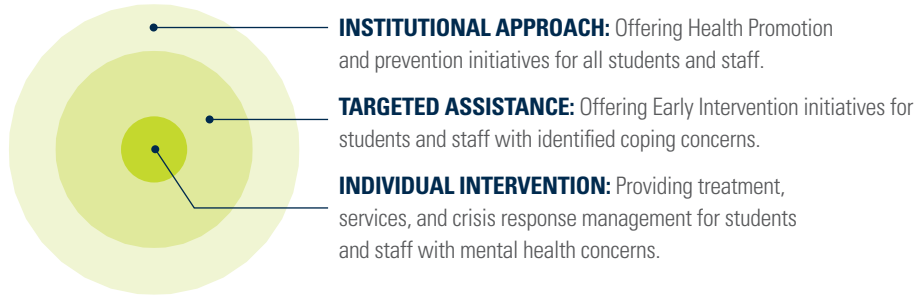
## HEALTH PROMOTION

CQUniversity takes a positive approach with a focus on the interconnectedness between an individual and their environment, recognising that:

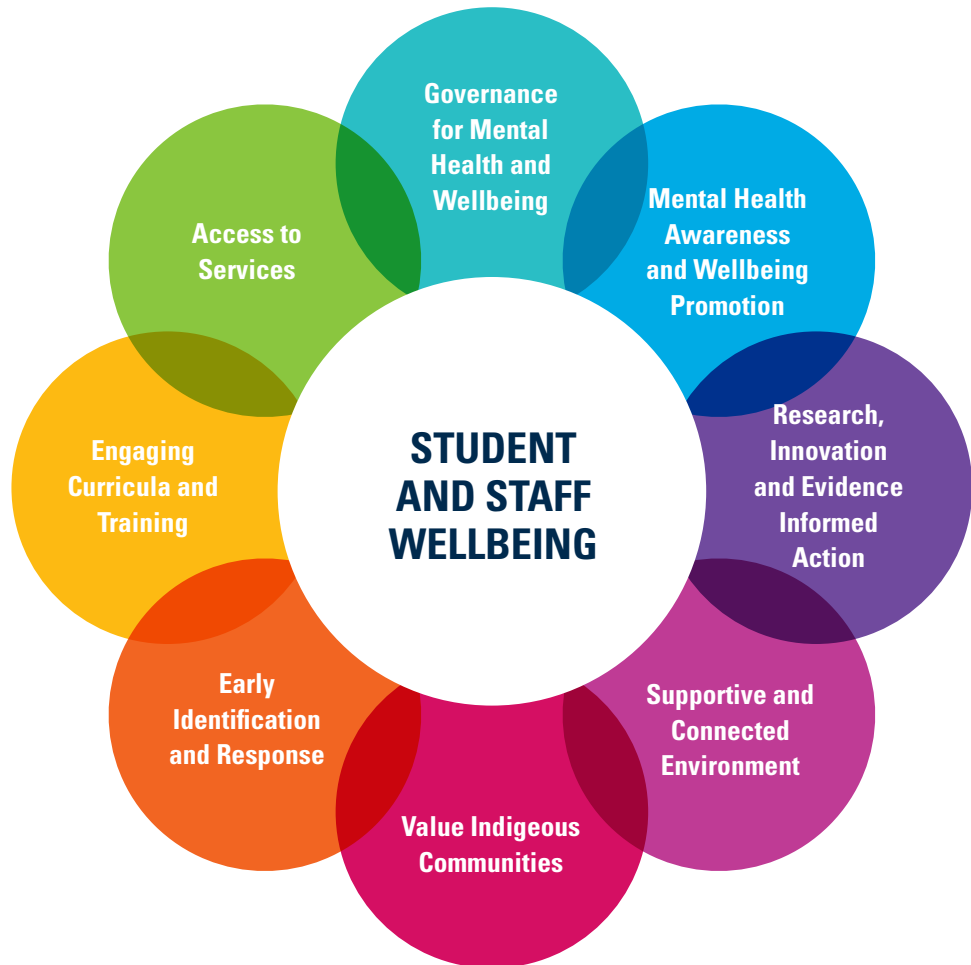
- i. Individuals who have choice and control over their health will have better health outcomes.
- ii. The community a person studies, works and lives in has a direct impact on their health.
- iii. A "whole of University approach" is required.

## STEPPED CARE

MindWaves recognises the importance of a stepped care model to ensure that students and staff receive the support relevant to their needs. The three-tiered model (shown below) demonstrates how the strategy is relevant for the three population groups.



## MINDWAVES FRAMEWORK



**Figure 1. Mindwaves Framework.** Adapted from *A Framework for Promoting Student Mental Wellbeing in Universities* (Baik, C & Larcombe, W, 2016).

# STRATEGIC FOCUS AREAS

The Mind Waves Framework (see page 5) includes eight focus areas designed to promote student and staff wellbeing. The focus areas which progress from an institutional approach through to individual intervention to ensure the mental health needs all population groups are addressed, are expanded upon below;

## 1

### GOVERNANCE FOR MENTAL HEALTH AND WELLBEING

**Objective:** To establish an inclusive and responsive institutional culture that recognises the mental health and wellbeing needs of students and staff through organisational structure, policy development and review. Institutional Governance is to ensure the practice of legislation that protects the rights of students and staff with mental illness and ensure a safe and healthy working environment for all.

**Activities:**

- » 1.1: Undertake policy development and review to ensure that recognition of mental health and wellbeing is included within key policies (over three years).
- » 1.2: Incorporate Mental Health and Wellbeing objectives into Institutional Planning (over three years).
- » 1.3: Include student wellbeing within the terms of reference of relevant university committees (over three years).

**Measures of Success:**

- » University policies incorporate mental health and wellbeing and accommodate the needs of students and staff in reaching their study and work goals.

## 2

### MENTAL HEALTH AWARENESS AND WELLBEING PROMOTION

**Objective:** Develop and implement mental health awareness education, training and resources for all students and staff to enhance mental health literacy, reduce stigma and encourage help-seeking behaviours.

**Activities:**

- » 2.1: Establish an online Mental Health and Wellbeing platform for staff and students providing ready access to resources, e-mental health programs, current University activities, training dates and information (first year).
- » 2.2: Provision of Mental Health First Aid to Students and Staff (in first year and ongoing).
- » 2.3: Professional and academic staff to be provided opportunity to attend Aboriginal and Torres Strait Islander Mental Health First Aid courses (in first year and ongoing).
- » 2.4: Establish Mental Health Literacy guidelines and print and online promotional materials and resources for students and staff to address mental health awareness, resilience building skills, stress management, mindfulness, self-care, managing emotions, help seeking and supporting peers and colleagues who are experiencing mental ill health (over three years).



**Measures of Success:**

- » Development and availability of Online Mental Health and Wellbeing Platform and proportion of students and staff who have actively engaged with the online platform.
- » Availability and take up of Mental Health First Aid training.
- » Development and dissemination of guidelines, promotional materials and resources.

# 3

**RESEARCH, INNOVATION AND EVIDENCE-INFORMED ACTION**

**Objective:** To evolve as an engaged and innovative Research Institution undertaking globally relevant research that benefits students, staff, and the wider community. To continue enhancing CQUniversity's research profile with concentration on healthy behaviours at work, self-care, rest and play, psychology and wellbeing, public health and health promotion.

**Activities:**

- » 3.1: Increase research in mental health, self-care, resilience and wellbeing in the applied tertiary education setting (over three years).
- » 3.2: Establish procedures for responsible data collection and analysis so that action taken is responsive to the needs, circumstances and health of students and staff (over three years).
- » 3.3: Ensure that research and innovation contribute evidence to guide the formulation of mental health, resilience and well-being enhancing policies and practices (over three years).
- » 3.4: Trial and evaluate the effectiveness, acceptability, feasibility, acceptability and sustainability of the Mindful Self-Care and Resiliency Program (MSCR) within the Educational Setting (over three years).
- » 3.5: Provision of an Introduction to MSCR continuing professional development program to be offered to students involving pre and post survey and three month follow-up to measure psychological capacity, confidence, burnout and resilience (over three years).

**Measures of Success:**

- » Evidence of research and publications in the area of mental health, resilience and wellbeing in tertiary education.
- » Future mental health strategy activities designed and implemented based on data collected to meet the needs of students and staff.
- » Policy development and review draws on evidence-based research to enhance outcomes for students, staff and community.
- » MSCR program 5-year license with one train-the-trainer and three trainees to ensure MSCR program is sustainable at CQUniversity.
- » MSCR program data demonstrates medium to large effect changes in resilience, coping, self-care and compassion satisfaction.
- » Provision of Introduction to MSCR program and data that demonstrates improved functioning in students who participate.

## 4

**SUPPORTIVE AND CONNECTED UNIVERSITY ENVIRONMENT**

**Objective:** To create an inclusive and supportive University environment (social, physical and digital) that provides students and staff with opportunities for meaningful participation in activities that build a sense of connection and belonging and improves learning, and professional and personal development. Also, to promote an environment that assists members to accept diversity, adapt to change and embrace challenges more effectively.

**Activities**

- » 4.1: Provide cohesive, engaging and inclusive activities and events on physical campuses and online that foster a sense of belonging for students from diverse backgrounds (e.g. 'Pop Up Cultural Lunches', University Mental Health Day, Harmony Day, NAIDOC Week, R U OK Day, Green Ribbon Day, Yoga and Mindfulness sessions) (in first year).
- » 4.2: Audit and enhance physical 'health spaces' (health spaces defined as physical spaces where students feel safe for private study; collaborative learning, privately accessing health and wellbeing resources; social interaction and relaxation activities) across campuses and establish new 'health spaces' as required (in first year).
- » 4.3: Build connections and partnerships with student societies e.g. Student Representative Council, and student groups at risk of isolation or discrimination, e.g. Indigenous students; international students; students with a disability; LGBTI students; 'mature age' students and online learning students (over first two years).
- » 4.4: Audit and enhance student facilities to ensure access to healthy food options and food preparation equipment; bicycle storage; and sporting facilities (over three years).
- » 4.5: Establish a virtual campus with its own infrastructure to detect, acknowledge and assist online students (over three years).
- » 4.6: Establish a peer-to-peer program for students and staff to provide options for a safe and accessible first point of contact person when seeking connection or support (second and third year).

**Measures of Success:**

- » Proportion of students who report a sense of belonging to the university community.
- » Number of events held, offering of activities and the proportion of students and staff who attend.
- » Ratio of 'health spaces', bicycle storage, food preparation equipment and sporting facilities to on campus student population.
- » Evidence of established partnerships with student groups and the proportion of students and staff involved.
- » Proportion of students who have actively engaged with the virtual campus.
- » Evidence of established peer-to-peer program, number of trained peers and proportion of students and staff who have sought support from the program.

## 5

**VALUING INDIGENOUS COMMUNITIES' CONTEXT AND PRIORITIES**

**Objective:** Nurture a strong university community that promotes social and emotional wellbeing and a sense of belonging and supports our Indigenous people journeying through education by (i) recognising that a holistic and whole-of-life view of health is essential to achieve positive life outcomes for Indigenous peoples, and (ii) adopting and working within the Social and Emotional Wellbeing framework to understand mental health and mental health disorders from an Aboriginal and Torres Strait Islanders' perspective.

Indigenous communities in Australia have experienced extreme adversities or trauma. SEWB framework recognises the cultural resilience to adapt and positively overcome devastating circumstances. The SEWB framework embraces the cultural, spiritual, physical, psychological and emotional connections to identity through language, dance, song, ceremonies and traditional healing bringing strength to those impacted by history and intergenerational trauma. SEWB recognizes the cultural differences between Aboriginal and Torres Strait Islander people with their connections back to country, land and sea and how it is important to have a sense of belonging (Gee et al. 2014).

**Activities:**

- » 5.1: Establish culturally-safe spaces on our campuses where our Indigenous students are attending (one to two years).
- » 5.2: Deliver social and emotional support programs targeting Indigenous students and promote referrals to relevant support services (first year).
- » 5.3: Utilise current structures within the Indigenous tutorial assistance scheme to ensure Indigenous students are in receipt of mentoring to support better mental health well-being while studying (first year).
- » 5.4: Professional and academic staff to be provided opportunity to attend Aboriginal and Torres Strait Islander Mental health first aid courses and suicide prevention training "Deadly Thinking" (first year and ongoing).
- » 5.5: Provide curriculum opportunities for students and staff to develop an understanding of and respect for Aboriginal and Torres Strait Islander traditional and contemporary cultures (one to three years).

**Measures of Success:**

- » Proportion of Indigenous students who report a sense of belonging to the university community.
- » Ratio of culturally-safe spaces on campuses to Indigenous student population.
- » Number of Indigenous students in receipt of mentoring under the Indigenous tutorial assistance scheme.
- » Proportion of staff attending Aboriginal and Torres Strait Islander Mental health first aid courses and "Deadly Thinking" suicide prevention training.
- » Evidence of curriculum and evidence of increased student and staff understanding and respect for Aboriginal and Torres Strait Islander traditional and contemporary cultures.

# 6

## EARLY IDENTIFICATION AND RESPONSE

**Objective:** To ensure students and staff are equipped with the knowledge and skills to recognise and respond to early signs of distress and mental health difficulties in themselves and others.

**Activities:**

- » 6.1: Disseminate Staff Guidelines: Responding to a Student in Distress and accompanying resources via print and online modes, and development of online and face-to-face training for staff (first year and ongoing).
- » 6.2: Ongoing provision of Accidental Counselling and First Response: Student in Distress training for staff via face-to-face mode (first year and ongoing).
- » 6.3: Develop online and print resources for students and staff and offering of face to face sessions for students on recognising early warning signs, help seeking and supporting peers and colleagues who are experiencing mental ill health (first two years).
- » 6.4: Establish clear internal and external referral pathways to refer students and staff with mental health vulnerabilities and ensure the University response is timely and coordinated (first year).

**Measures of Success:**

- » Staff Guidelines distributed to all staff, availability and take up of online and face to face training.
- » Availability and take up of First Response: Student in Distress training by staff and tracking of feedback via evaluation survey.
- » Evidence of development of print and online resources, take up by students and staff, and provision, and take up of face-to-face sessions for students, monitoring participation and feedback.
- » Evidence of increase and efficiency (timely and coordinated) in referrals and take up by student and staff of University provided services.

## 7

**ENGAGING CURRICULA AND TRAINING**

**Objective:** To build student self-efficacy, academic buoyancy, resilience and employability skills by integrating self-management skills, mindfulness and mental health skills in the curricula and by affording choice and flexibility in learning (Baik & Larcombe, 2016; Veness, 2016). To upskill staff to understand the diverse needs of students and adopt teaching practices that optimise student learning and wellbeing.

**Activities:**

- » 7.1: When undertaking curriculum review during the normal course review process, ensuring course load and assessment design affords flexibility (for example studying a part time load, where possible, and depending on the course accreditation), capacity to offer alternative assessment where possible, and progression pathways (for example supporting students to transition from Vocational Education to Higher Education and obtain exit awards) offered (over three years).
- » 7.2: Promote careers service to enhance student employability (first year).
- » 7.3: During the normal course review process, review assessment policies and practices to ensure students receive regular, informative feedback on their learning and progress (first year).
- » 7.4: During the normal course review process, encourage the incorporation of self-management competency units (teaching topics such as stress management, self-regulation, communication and conflict resolution skills, self-care, problem solving and goal setting) into the curriculum (over three years).
- » 7.5: Provide professional learning for all Senior Executives and teaching staff about the university's obligations under the Disability Discrimination Act (1992) (over three years).
- » 7.6: As access to 'expert' resources are available, (i) develop strategies and resources to equip students with knowledge and skills to cope with curriculum materials that are potentially triggering (due to experience of mental illness or histories of abuse, discrimination or trauma), and (ii) educate teaching staff about appropriate response in the event of this (two to three years).

**Measures of Success:**

- » Portion of courses that offer flexible course loads and exit/interim opportunities.
- » Data on students accessing career service and statistics on students who obtain employment at completion of degree.
- » Development of self-management units.
- » Proportion of students who complete self-management competency units.
- » Proportion of Senior Executives and teaching staff who attend training and demonstrate comprehensive understanding of Disability Discrimination Act, assessed via training evaluation survey.
- » Development and dissemination of Student Guidelines to equip students with knowledge and skills to cope with curriculum materials that are triggering (due to experience of mental illness or histories of abuse, discrimination or trauma), proportion of students accessing online and print resources, and proportion of teaching staff who engage in education about appropriate response to support students in the event of this.

## 8

**ACCESS TO SERVICES AND SUPPORT**

**Objective:** To ensure students and staff who are experiencing mental illness have direct access to relevant services, reasonable academic adjustments and treatment and to ensure that the University response is timely, coordinated, compassionate and culturally sensitive.

**Activities:**

- » 8.1: Enhance access to treatment and support services by reducing barriers (awareness, perception, referral pathways, adequate resourcing) (first year).
- » 8.2: Establish service agreements with external providers of mental health services e.g. headspace and Adult Mental Health (over three years).
- » 8.3: Provide online group mental wellbeing programs, delivered by the Wellness Centre (first year).
- » 8.4: Ensure effective and coordinated response to student critical incidents (specifically mental health crises) via implementation of student critical incident policy and procedure and ongoing review (first year).
- » 8.5: Provide counselling support to students and staff who have been involved in a critical incident (first year and ongoing).
- » 8.6: Foster active student involvement in the development, review and evaluation of student services (first two years).

**Measures of Success:**

- » Proportion of students accessing student support services e.g. Counselling, Careers, Indigenous student support, Inclusion and Accessibility, Student Advocacy and Academic Liaisons.
- » Proportion of students experiencing barriers to treatment access (e.g. part time, online learning, 'mature age', students with a disability, Indigenous students, international students, LGBTI students) who engage with services.
- » Average waiting times for services
- » Ratio of number of counsellors to the student population
- » Proportion of students applying for special consideration related to mental wellbeing.

**SCALE AND SCOPE**

This strategy will be implemented over the next three years via a whole-of-university approach. The application of both short term and longer-term initiatives will be monitored and evaluated for effectiveness. A formal review will be conducted annually to determine what longer-term initiatives are required based on the University's needs.

## KEY DEFINITIONS AND LANGUAGE

The key definitions and language of this strategy include:

### DISABILITY

Disability in relation to a person means:

- a. total or partial loss of the person's bodily or mental functions; or
- b. total or partial loss of a part of the body; or
- c. the presence in the body of organisms causing disease or illness; or
- d. the presence in the body or organisms capable of causing disease or illness; or
- e. the malfunction, malformation or disfigurement of a part of the person's body; or
- f. a disorder or malfunction that results in the person learning differently from a person without the disorder or malfunction; or
- g. a disorder, illness or disease that affects a person's thought processes, perception of reality, emotions or judgement or that results in disturbed behaviour; and includes a disability that:
  - h. presently exists; or
  - i. previously existed by no longer exists; or
  - j. may exist in the future (including because of a genetic predisposition to that disability); or
  - k. is imputed to a person.

To avoid doubt, a disability that is otherwise covered by this definition includes behaviour that is a symptom or manifestation of the disability.

### HOLISTIC

Refers to the recognition that people and their behaviours are complex, and consideration of all aspects of a person's life as a total entity is integral to understanding health and illness. Holistic approaches use the biopsychosocial model which refers to a person's biological system, psychological system and their social systems. These systems are interrelated and each system can affect—and be affected by—any of the other systems (Caltabiano, Sarafino & Byrne, 2008).

### MENTAL HEALTH

An individual state of wellbeing where one can realise their own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to their community (WHO, 2011).

### MENTAL ILLNESS

A clinically-diagnosable disorder that significantly interferes with an individual's cognitive, emotional or social abilities. The diagnosis of mental illness is generally made according to the classification system of the Diagnostic and Statistical Manual of Mental Disorders or the International Classification of Diseases (Muir-Cochrane, Barkway & Nizette, 2014).

### MENTAL ILLNESS PREVENTION

Prevention includes reducing the incidence, prevalence, recurrence of mental disorders, time spent with symptoms, risk factors for mental illness, preventing or delaying recurrences and decreasing the impact of disease on the affected person, their families and society (WHO, 2014).

## **POSITIVE EDUCATION**

Positive Education is a scientific approach to education that blends academic learning with the development of character strengths and the promotion of wellbeing. It focuses on building upon strategies to defend against low self-esteem, depression and anxiety (Seldon & Martin) Positive Education teaches and equips people with life skills, such as: perseverance and passion, optimism, resilience, growth mindset, engagement and mindfulness (Oades et al., 2011).

## **PSYCHOLOGICAL DISTRESS**

Psychological distress is largely defined as a state of emotional suffering with symptoms of depression (e.g., sadness, worthlessness and hopelessness) and anxiety (e.g., feeling unease, tense and restless). These symptoms can also be linked with somatic symptoms, such as insomnia, headaches and lethargy (Drapeau, Marchand & Beaulieu-Prevost, 2010).

## **REASONABLE ADJUSTMENTS**

Also known as accommodations are the tangible and practical considerations and measures made to the learning and/or working environment in order for students and staff with disabilities to fulfil the inherent requirements of academic courses and their professional duties. CQUniversity fulfils its positive duty to provide reasonable adjustments based on consultation. Examples of reasonable adjustment include the provision of materials in alternative formats, specialised equipment or modification of premises.

## **WORK-RELATED STRESS**

Describes the physical, mental and emotional reactions of workers who perceive that their work demands exceed their abilities and available resources (Worksafe NSW, 2018).

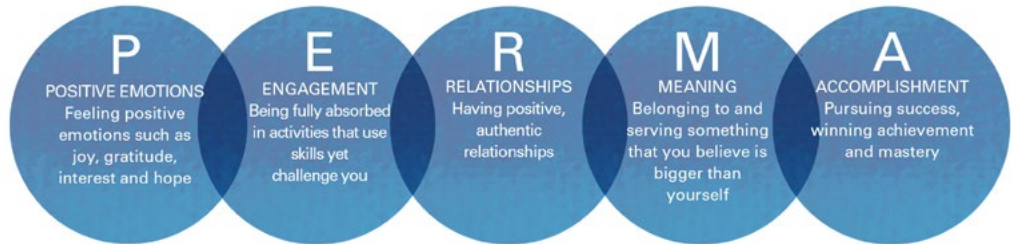


# GUIDING PRINCIPLES

Complementing the Mind Waves framework, CQUniversity’s mental health strategy uses Positive Psychology concepts that support an ‘education for both traditional skills and happiness’. Through adopting and adapting Martin Seligman’s psychological theory of wellbeing, ‘PERMA’ model (Seligman, 2011), our University will be a leading Positive Educational university. PERMA has five core elements that guide the University’s principles:

- P** Positive Emotions: Feeling positive emotions, such as joy, gratitude, interest and hope.
- E** Engagement: Being fully absorbed in activities that use skills yet challenge you.
- R** Relationships: Having positive, authentic relationships.
- M** Meaning: Belonging to and serving something that you believe is bigger than yourself.
- A** Accomplishment: Pursuing success, winning achievement and mastery.

CQUniversity’s Dr Andrew McClelland expands on these principles with GENR-P:



- G** Green space: Creating green space or having access to green space enhances wellbeing and reduces stress.
- E** Exercise: Focusing on physical activity that enhances or maintains physical fitness, and overall health and wellness.
- N** Nutrition: Actively consuming a nutritionally dense, whole food balanced diet.
- R** Rejuvenation: Relates to taking breaks and holidays/weekends.
- P** Play and fun: Benefits learning, happiness, creativity and relaxation.



# ACKNOWLEDGEMENTS

This strategy and the concept of Mind Waves was drafted in 2018 by the primary authors, Mrs Jana Paris Richardson, Project Coordinator, People and Culture Directorate, Mr Sean Peckover, National Occupational Health and Safety Manager, and Dr Bethany Mackay, Coordinator, Counselling, Student Experience Directorate and Ms Leonie Taylor, Coordinator, Mind Waves, Counselling Student Experience Directorate. Special thanks to Ms Joanne Perry, Deputy Vice-Chancellor (Student Experience and Governance).

The authors acknowledge that this strategy has been developed through the collegial expertise, support, contribution and commitment from key stakeholders, schools, professional peak bodies, and communities. The authors acknowledge that the Report to the Winston Churchill Memorial Trust: The Wicked Problem of University Student Mental Health by Dr Benjamin G. Veness has provided invaluable guidance to the development of this strategy.

**Correspondence on this document should be directed to:**

Student Counselling  
Student Experience Directorate  
CQU University Australia

T: 07 4930 9456  
Email: [counselling@cqu.edu.au](mailto:counselling@cqu.edu.au)

# REFERENCES

- Australian Bureau of Statistics. (2008). National Survey of Mental Health and Wellbeing: Summary of Results. Retrieved from: <http://www.ausstats.abs.gov.au>
- Australian Institute of Health and Welfare (AIHW). Australia's Health thirteenth biannual report. Canberra: AIHW;2012.
- Baik, C. & Larcombe, W. (2016). A Framework for Promoting Student Mental Wellbeing in Universities. Retrieved from <https://internationalhealthycampuses>
- Beyond Blue. (2018). Beyond Blue Support Service. Retrieved from: <https://www.beyondblue.org.au/>
- Beyond Blue. (2018). State of Workplace Mental Health in Australia. Retrieved from: <https://www.headsup.org.au>.
- Bradley, D., Noonan, P., Nugent, H., Scales, B. (2008). Review of Australian Higher Education: final report. Retrieved from: <http://hdl.voced.edu.au/10707/44384>
- Central Queensland University. (2017). Annual Report 2017. Retrieved from: [https://www.cqu.edu.au/\\_\\_data/assets/pdf\\_file/0009/247077/CQUniversity-2017-Annual-Report.pdf](https://www.cqu.edu.au/__data/assets/pdf_file/0009/247077/CQUniversity-2017-Annual-Report.pdf)
- Drapeau, A., Marchand, A., Beaulieu-Prevost, D. (2010). Epidemiology of Psychological Distress, Mental Illnesses – Understanding, Prediction and Control. Retrieved from: [http://cdn.intechopen.com/pdfs/25512/InTech-Epidemiology\\_of\\_psychological\\_distress.pdf](http://cdn.intechopen.com/pdfs/25512/InTech-Epidemiology_of_psychological_distress.pdf)
- Eisenberg, D., Hunt, J, Speer, N. & Zivin, K. (2011). Mental health service utilisation among college students in the United States. *The Journal of nervous and Mental Disease*, 199(5), 301-308.
- Eisenberg, D., Hunt, J., & Speer, N. (2012). Mental health in American colleges and universities. *The Journal of Nervous and Mental Disease*. 20(1), 60-67.
- Ganesharajah, C., (2009). Indigenous Health and Wellbeing: The Importance of Country. Native Title Research Report. Report No. 1/2009.
- Gee, G., Dudgeon, P., Schultz, C., Hart, A. & Kelly, K. ed., (2014). Aboriginal and Torres Strait Islander Social and Emotional Wellbeing. In: Working Together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice. Retrieved from: <https://www.telethonkids.org.au/globalassets/media/documents/aboriginal-health/working-together-second-edition/working-together-aboriginal-and-wellbeing-2014.pdf>
- Green, Suzy & Oades, Lindsay & Robinson, P (2011). Positive education: Creating flourishing students, staff and schools. *In Psych*. 33.16-18.
- Ibrahim, A. K., Kelly, S. J., Adams, C. E., & Glazebrook, C. (2013). A systematic review of studies of depression prevalence in university students. *Journal of Psychiatric Research*, 47, 391-400. *illness. Environmental Health Perspectives*, 115, 404-410.
- Keegel, T., & Smith P. M. (2014). Workplace mental health: developing an integrated intervention approach. *BioMed Central Psychiatrist*, 14, 131.
- LaMontagne, A. D., Martin, A., Page, K. M., Reavley, N. J., Noblet, A. J., Milner, A. J., Muir-Cochrane, E., Barkway, P., Nizette, D. (2014). *Mosby's Pocketbook of Mental Health*. Oades, L. G., Robinson, P., Green, S., & Spence, G. B. (2011). Towards a positive university. *The Journal of Positive Psychology*, 6(6), 432-439. <http://dx.doi.org/10.1080/17439760.2011.634828>
- Leonard, Williams & Lyons, Anthony & Bariola, Emily. (2015). A Closer Look at Private Lives 2: Addressing the Mental Health and Well-being of Lesbian, Gay, Bi-sexual and Transgender (LGBT) Australians.
- Okanagan Charter. (2015). Okanagan Charter: An international charter for health-promoting universities and colleges. Retrieved from: [https://www.hepi.ac.uk/wp-content/uploads/2017/09/Hepi-The-Positive-and-Mindful-University-Paper-18-Embargoed-until-21st-Sept-1.pdf](http://web.a.ebscohost.com/ehost/ebookviewer/ebook/Schmidt, C. W., (2007). Environmental connections: A deeper look into mental illness. <i>Environmental Health Perspectives</i>, 115, 404-410.</a></p>
<p>Seldon, A. & Martin, A. (2017). The Positive Mindful University. Retrieved from: <a href=)
- Seligman, M. (2011). *Flourish: A Visionary New Understanding of Happiness and Wellbeing*. New York USA Free Press.
- Seligman, M., Ernst, R. Gillham, K. & Linkins, M. (2009). Positive Education: positive psychology and classroom interventions. *Oxford Review of Education*, 35(3), 293-311.
- Usher, W., & Curran, C. (2017). Predicting Australia's university students mental health status. *Health Promotion International*, 1–11.
- Veness, B. G. (2016). The Wicked Problem of University Student Mental Health. Retrieved from <http://www.churchilltrust.com.au>
- Voice Project. (2018). CQUniversity VOICE Engagement Staff Survey 2018. Worksafe NSW. (2018). Workplace Health and Safety. Retrieved from <http://www.safework.nsw.gov.au>
- World Health Organisation. (2004). Prevention of Mental Disorders. France. World Health Organisation. (2004). Promoting Mental Health: Concepts, emerging evidence and practice. France. Retrieved from: [http://www.who.int/mental\\_health/evidence/en/promoting\\_mhh.pdf](http://www.who.int/mental_health/evidence/en/promoting_mhh.pdf)
- Wynaden, D., McAllister, M., Tohotoa, J., Al Omari, O., Heslop, K., Duggan, R., Murray, S., Happell, B., Byrne, L. (2014). The silence of mental health issues within university environments: A quantitative study. *Archives of Psychiatric Nursing*, 28, 339-344.

# APPENDICES

## APPENDIX 1: BACKGROUND AND LITERATURE REVIEW

### STUDENTS

From a historical perspective, universities have aimed to develop cultures of excellence. However, attrition and student psychological distress remain a significant concern to universities (Oades et al., 2011). International research on psychological distress in university students confirms that mental health problems are common (Wynaden et al., 2014). Positive Education is 'the development of educational environments that enable the learner to engage in established curricula in addition to knowledge and skills to develop their own and others' wellbeing' (Oades et al., 2011). Positive Education is facilitated through positive universities and aims to increase positive emotions, meaning and engagement, and decrease mental health issues, such as stress, depression and anxiety (Oades et al., 2011). One-in-four Australians is currently experiencing depression, anxiety or both (Beyond Blue, 2018). When compared to the general public, university students are five times more likely to be diagnosed with a mental health difficulty, with seventy-five per cent of mental ill health developing before the age of 25 (Usher & Curran, 2017). The Australian Institute of Health and Welfare (2012) reported that university students affected by mental ill health had been shown to have:

- » lower educational achievement
- » increased chance of enrolment cancellation
- » negative learning and teaching experience
- » increased impairment
- » decreased employment
- » lower income and standard of living; and
- » higher absenteeism.

Research indicated that women are at higher risk than men for depression, anxiety and eating disorders (Eisenberg, Hunt & Speer, 2012). However, more men commit suicide than women (Ibrahim, et al., 2013). International students, single parent students or students who identify as lesbian, gay, bisexual, transgender or queer (LGBTI) have an increased vulnerability to experiencing mental health difficulties. Additionally, ethnic minority or Aboriginal students are at higher risk for mental illnesses than Caucasian students (Eisenberg, Hunt, Speer & Zivin, 2011). While CQUniversity prides itself on being an inclusive University through widening participation, this inclusiveness also raises a heightened need to prioritise health and wellness to support success. Through the Bradley Review of Higher Education (2008), the Australian Government proposed a target that 40 per cent of 25-34-year-olds will have a minimum of a Bachelor-level qualification by 2020. This is a testing target given that current attainment is only 29 per cent. The Bradley Review also stipulated that 20 per cent of undergraduate enrolments in higher education should be students from low socio-economic backgrounds. CQUniversity responded to the Australian Government's call to action and is Australia's most inclusive university, with the highest ratio of mature age students, those with Aboriginal and Torres Strait Islander backgrounds, first-in-family and low socio-economic backgrounds. CQUniversity continues to expand student diversity through its inclusion agenda, however student retention and completion rates remain a challenge and, conversely, inclusivity is one of a number of factors contributing to student attrition and non-completion rates (CQUniversity Annual Report, 2017). This identifies a direct need to contribute to student mental health and wellbeing.

## ACADEMIC AND PROFESSIONAL UNIVERSITY STAFF

Mental illness is a significant issue in Australia. Approximately 45% of Australians aged between 16 and 85 have experienced a mental illness at some point in their life (Australian Bureau of Statistics, 2008). An employee may develop a psychological illness before commencing employment or during employment. A total of 3.2 days per employee are lost each year through work place stress, and stress-related workers' compensation claims are estimated to cost over \$10 billion annually (Beyond Blue, 2018). Despite global interest in workplace mental health, there is a paucity of research focused on the mental health of university staff, particularly in the Australian university educational setting. While some Universities have developed mental health strategies, few have a comprehensive approach to address both staff and student mental health. Research indicates that job stress and other work-related psycho-social hazards are emerging as the leading contributor to the burden of occupational disease and injury (LaMontagne et al., 2014). Psychological safety in the workplace is founded on the capacity to work and express oneself without fear of negative consequences and is paramount to employee wellbeing (WHO, 2014). Research has shown that external work locus of control is a perceived lack of personal control over one's work life and is associated with a poorer sense of workplace psychological safety. Data from the CQUniversity VOICE Engagement Staff Survey 2018 identified wellness as a priority (Voice Project, 2018). Through this strategy, CQUniversity will strongly respond to this urgent public health crisis and will improve psychological safety, health and wellbeing within the University community.

## APPENDIX 2: STRATEGIC FOCUS AREAS – OPPORTUNITIES AND GAP ANALYSIS

# 1

### STRATEGIC FOCUS AREA ONE

#### GOVERNANCE FOR MENTAL HEALTH AND WELLBEING

The University has duties under the Disability Discrimination Act (1992) (DDA) and the Work Health and Safety Act (2011) to protect the rights of staff and students with mental illness, and to ensure a safe and healthy working environment.

##### Opportunities and gap analysis:

- » Develop a University policy on mental health.
- » Develop mental health general support guidelines.
- » The Student Behaviour Misconduct Policy requires revision and upgrade to address misconduct related to sexual harassment and assault (matters of this nature to be dealt with differently to a standard behaviour misconduct, (i.e. sensitive, trauma-informed response, prompt turnaround times).
- » Staff responding to forms of behaviour misconduct involving sexual harassment and/or assault (and/or that causes psychological harm) or where the offender is experiencing psychological disturbances, need to be equipped with the skills to manage the complaints and have a trauma-informed response.

# 2

### STRATEGIC FOCUS AREA TWO

#### MENTAL HEALTH AWARENESS AND WELLBEING PROMOTION

Wellness initiatives enhance understanding and encourage help-seeking behaviours. Raising awareness and promoting health and wellbeing is critical for helping to address the stigma surrounding mental health, and aids in advocating for increased knowledge of self-care and healthy behaviours.

##### Opportunities and gap analysis:

- » There is a lack of health promotion and early intervention services available to students. CQUniversity Student Counselling is a reactive service with service provision focused on treatment services.
- » There is a call for services and initiatives that promote wellness, for example, offering mindfulness groups, stress management groups, and providing psychoeducation information about staying healthy and well.
- » The provision of such services will prevent healthy students and staff moving into an unhealthy range.
- » There are minimal psychoeducation and health promotion initiatives provided to our international students despite the fact that they are at a high risk of developing mental illness due to culture shock, homesickness and loneliness. Providing additional support, education and health promotion activities will help ensure a greater number of international students adjust healthily to studying in Australia, thereby avoiding anxiety and depression.
- » There is a lack of clarity surrounding existing support services available to staff and students. For instance, there is some confusion among staff and students as to the differences between the CQUniversity Wellness Centre, Counselling and Wellbeing services and the Employment Assistance Program.

- » Enhanced normalising and anti-stigma programs for different mental health conditions would help to educate staff and students, and assist in reducing negative assumptions and shame about mental illness.
- » E-health programs are lacking for online students and staff which provide ample opportunity to connect and assist in reducing isolation, and loneliness. Aligning offerings, communication and evaluation would contribute to efficiency, long-term sustainability and the overall impact of implemented programs.

## **3 STRATEGIC FOCUS AREA THREE** **RESEARCH, INNOVATION AND EVIDENCE-INFORMED ACTION**

CQUniversity aims to become one of Australia's most engaged universities, undertaking globally-relevant research that benefits regions and communities. CQUniversity's strengths and corresponding research foci include healthy behaviours at work, rest and play, psychology and wellbeing, public health and health promotion.

### **Opportunities and gap analysis:**

- » Aim to increase research in mental health and wellbeing in the applied tertiary education setting.
- » Aim to assist with mental health outcomes for rural and regional Australia
- » Ensure that research and innovation contribute evidence to guide the formulation of health enhancing policies and practices.

## **4 STRATEGIC FOCUS AREA FOUR** **SUPPORTIVE AND CONNECTED UNIVERSITY ENVIRONMENT**

A welcoming supportive university environment that supports student and employee engagement has a positive impact on benefiting mental health. Universities that create opportunities for meaningful participation help members feel connected and to have a sense of belonging which improves learning, and professional and personal development. Supportive environments assist members to adapt to change and embrace challenges more effectively.

### **Opportunities and gap analysis:**

- » A majority of CQUniversity's students study via online, hence it is recommended that a form of virtual campus, with its own infrastructure to detect, acknowledge and assist online students, is developed.
- » There is ample opportunity for cross-collaboration within academic communities to implement and evaluate initiatives to support University mental health initiatives.
- » There are opportunities to build facilities and provide equipment for 'health spaces' across all campuses (physical and virtual – where students and staff feel safe) to support mental health and wellbeing.
- » Providing physical structures and amenities that are inclusive of LGBTI communities, such as the inclusion of gender-neutral bathrooms across campuses.
- » Ensuring that all campuses are inclusive of people with a disability.  
Ensuring that all campuses are inclusive of minority groups, including International Students, LSES, Indigenous and LGBTI.

# 5

## STRATEGIC FOCUS AREA FIVE

### VALUING INDIGENOUS COMMUNITIES' CONTEXT AND PRIORITIES

Aboriginal and Torres Strait Islander students comprise 1.7% of all domestic on-shore students. This is an increase of 8.3% compared to 2016 in the first half of the year (Australian Government, Department of Education and Training, 2017). With our University being part of the increased participation of Aboriginal and Torres Strait Islander, we are responsible for ensuring and supporting the mental health needs of our students journeying through education.

Drawing from the Indigenous Health and Wellbeing: The Importance of Country Report (Ganesharajah, 2009), a key aspect of improving Indigenous wellbeing is exploring the relationship between land and wellbeing. Aboriginal definitions of health recognise that a holistic and whole-of-life view of health is essential to achieve positive life outcomes for Indigenous peoples. Dadirri is a concept that describes inner, deep listening, quiet, still awareness and waiting. Miriam Rose Ungunmerr-Baumann (2003) posits that:

“Ngangikurungkurr means ‘Deep Water Sounds’. Ngangikurungkurr is the name of my tribe. The word can be broken up into three parts: Ngangi means word or sound, Kuri means water, and kurr means deep. So the name of my people means ‘the Deep Water Sounds’ or ‘Sounds of the Deep’. This talk is about tapping into that deep spring that is within us.

Many Australians understand that Aboriginal people have a special respect for nature. The identity we have with the land is sacred and unique. Also, there are many Australians who appreciate that Aboriginal people have a very strong sense of community. All persons matter. All of us belong.”

The significance of having culturally-safe spaces within our campuses is important. The Indigenous people of Australia have a depth of spirituality that can enrich non-Indigenous people. With this knowledge, short-and long-term strategies to establish these safe spaces are taking place. By understanding

and providing these spaces, campus-by-campus will contribute to the health and wellbeing of our Indigenous cohort of students.



## 6 STRATEGIC FOCUS AREA SIX EARLY IDENTIFICATION AND RESPONSE

It is critical that staff and students can recognise and respond to early signs of distress and mental health difficulties. Academic and professional staff with front line access to fellow staff and students are well placed to notice and react to an early indication for concern.

### Opportunities and gap analysis:

- » Pre-screening or self-screening for mental health concerns to promote help-seeking are currently not available. Such self-screens can alert and support early identification of mental health concerns for staff and students and should be investigated further.
- » There are a lack of resources to ensure consistent whole-of-university training to equip staff and students to effectively respond to early indicators of distress.

## 7 STRATEGIC FOCUS AREA SEVEN ENGAGING CURRICULA AND TRAINING

Mental health and wellbeing is supported through curricula, and learning experiences foster intrinsic interests and communicate the value of knowledge and skills being developed. Mental wellbeing is also supported when the curricula design and learning experiences build self-efficacy and resilience, afford choice and flexibility in choice, and create social connections. There is a growing body of research showing the benefits of integrating mental health skills education in the university curricula, in particular, helping students develop self-management skills, mindfulness and resilience (Veness, 2016). These skills are linked to employability, and a focus on upskilling staff within universities is an important component of supporting staff health and wellbeing.

### Opportunities and gap analysis:

- » Develop opportunities to provide consistency within the curriculum and develop instructional designs which can influence student and staff health and wellbeing.
- » Develop opportunities to promote a broad range of strategies to support resilience and enhance mental health on and off campus, and consult with community partners.
- » Utilise existing campus training and initiatives that can improve interpersonal and intrapersonal competencies, and personal resilience.
- » Transitional points for schools and divisions can strain coping strategies and diminish mental health. With support, transitions may provide opportunities to build awareness and personal management skills. Integrating family support during the transition to university can be strengthened.

## 8

## STRATEGIC FOCUS AREA EIGHT

### DIRECT SERVICE AND SUPPORT

Internal and external mental health services and support assist students and staff with issues that may negatively impact their study and working capacity. A range of services and training is provided to meet the needs of the campus community population.

#### Opportunities and gap analysis:

- » There is a critical need to resource more counsellors to i) reduce student wait times for accessing the student counselling service, ii) ensure adequate response times in the event of urgent student needs and critical incidents, to iii) meet ethical responsibilities and mitigate risk, and to iv) prevent staff burnout.
- » There is a lack of clarity surrounding existing support services available to staff and students. A more universal approach to promoting wellbeing is needed.
- » While the Employee Assistance Program is available to staff and their immediate families, waiting times for appointments are exceptionally long and can exacerbate difficulties with mental health or personal issues.
- » There are opportunities to provide more online services for all students and staff, in particular those studying or working via online mode, with a specific focus on loneliness and isolation.
- » There are subgroups of students and staff who would benefit from targeted initiatives, like peer support, and health / mental health and wellbeing programs (for example early intervention programs to build coping strategies for managing anxiety, depression and stress).
- » These programs could be accessed while students and staff are waiting for individualised treatment services.
- » Barriers to accessing internal and external services include stigma, service locations, working hours, staff resources, wait times and cost.
- » Crisis management protocol and training for the campus community are critical.

## APPENDIX 3: STRATEGIC FOCUS AREAS - CURRENT INITIATIVES AND RECOMMENDATIONS

### 1. GOVERNANCE FOR MENTAL HEALTH AND WELLBEING

KEY FOCUS AREA ELEMENTS	CURRENT UNIVERSITY INITIATIVES	
GUIDELINES	<ul style="list-style-type: none"> <li>» Staff guidelines: responding to a student who makes a disclosure of sexual violence</li> <li>» Staff guidelines: responding to a student in distress</li> </ul>	<ul style="list-style-type: none"> <li>» Respect. Now. Always.</li> <li>» Mental Health World Day</li> </ul>
POLICY AND PROCEDURES	<ul style="list-style-type: none"> <li>» Required Leave of Absence Policy</li> <li>» Student Critical Incident Policy</li> <li>» Student Behaviour Misconduct Policy and Procedures</li> </ul>	

### RECOMMENDATIONS

#### Expand what we offer

- » Increase training opportunities for students and staff to build personal resilience, self-care and well-being, and to promote academic and professional success.
- » Expand available resources for parents/families.
- » Increase holistic health-promoting activities and events.
- » Undertake review of Student Behaviour Misconduct Policy and Procedure.

#### Enhance what we do and develop new initiatives for the campus community

- » Focus on resilience training and wellness courses.
- » Develop a University Mental Health Policy.
- » Increase support during critical transition times for all members of the campus community.
- » Establish a Safer Communities Coordinator/Unit as a central receiving entity to manage student related matters where involving sexual harassment and/or assault and/or misconduct that causes psychological harm.

## 2. MENTAL HEALTH AWARENESS AND WELLBEING PROMOTION

KEY FOCUS AREA ELEMENTS	CURRENT UNIVERSITY INITIATIVES	
MENTAL HEALTH AWARENESS AND STIGMA REDUCTION	<ul style="list-style-type: none"> <li>» R U Ok Day</li> <li>» University Mental Health Week</li> <li>» Employee and Family Assistance Programs</li> <li>» Australia Mental Health Week</li> <li>» Employee and Family Assistance Programs</li> <li>» Lectures targeting stress management and resilience provided by student counselling</li> </ul>	<ul style="list-style-type: none"> <li>» Respect. Now. Always.</li> <li>» Orientation presentation: Top Ten Tips to Thrive at University</li> <li>» Mental Health World Day</li> </ul>
MENTAL HEALTH LITERACY	<ul style="list-style-type: none"> <li>» Employee and Family Assistance Programs</li> <li>» First Response Training (staff)</li> </ul>	<ul style="list-style-type: none"> <li>» Mental Health First Aid Training</li> </ul>
PERSONAL WELLBEING	<ul style="list-style-type: none"> <li>» Faith and spiritual centres</li> <li>» Ally Program (LGBTI)</li> </ul>	
CULTURE	<ul style="list-style-type: none"> <li>» Campus Life - social and physical activities</li> </ul>	

### RECOMMENDATIONS

#### Expand what we offer

- » Health promotion initiatives to be increased and target the whole University population.
- » Provision of mental health literacy should be expanded to include and selectively target diverse, vulnerable and at-risk students and staff.

#### Enhance what we do and develop new initiatives for the campus community

- » Create collective long-term strategies that measure long-term outcomes and impact on the University campus community.
- » Develop a central website to provide efficient and effective access to mental health information, apps and online programs for students, faculty, and staff. Involve on campus champions in developing, planning and marketing initiatives.

- » Recruit student and staff 'Mind Waves Champions' with lived experience to act as first point of contact, referral, stigma reduction and be empowered by sharing their stories.
- » Establish a peer-to-peer program, recruiting both staff and students as 'Mind Wave Connectors' trained and supervised to provide first point of contact and referral options for colleagues and peers respectively.

### 3. RESEARCH, INNOVATION AND EVIDENCE-INFORMED ACTION

KEY FOCUS AREA ELEMENTS	CURRENT UNIVERSITY INITIATIVES
RESEARCH	<ul style="list-style-type: none"> <li>» International Consortium for Occupational Resilience</li> <li>» Appleton Institute</li> <li>» Queensland Centre for Domestic and Family Violence Research</li> </ul>
RESEARCH HIGHER DEGREES SUPERVISORS	<ul style="list-style-type: none"> <li>» Communities of Practice session – managing Research Higher Degree student wellness from the supervisor perspective</li> </ul>

#### RECOMMENDATIONS

##### Expand what we offer

- » Programs for sleep and circadian physiology.
- » Implement the International Consortium for Occupational Resilience ‘Mindful Self-Care and Resiliency Program’ (MSCR) for Executives and Leaders.

##### Enhance what we do and develop new initiatives for the campus community

- » Develop evidence-based programs to support healthy sleep.
- » Develop programs to support drug and/or alcohol addictions.
- » Research the efficacy of the Mindful Self-Care and Resiliency Program for CQUni and within the Educational setting (via International Consortium for Occupational Resilience).
- » Ongoing evaluation of student services to improve service effectiveness and delivery.

## 4. SUPPORTIVE AND CONNECTED UNIVERSITY ENVIRONMENT

KEY FOCUS AREA ELEMENTS	CURRENT UNIVERSITY INITIATIVES	
FACILITIES AND CAMPUS DESIGN, INCLUDING PHYSICAL SPACES AND BUILT ENVIRONMENT	<ul style="list-style-type: none"> <li>» Work locations with formal considerations for healthy building design</li> <li>» Sporting facilities</li> </ul>	<ul style="list-style-type: none"> <li>» Recreational and social areas like the Birdcage Bar</li> <li>» Green space</li> <li>» Visual creative art displays on and in buildings</li> </ul>
PROVIDE SOCIAL OPPORTUNITIES FOR THE CAMPUS COMMUNITY TO CONNECT	<ul style="list-style-type: none"> <li>» Campus Life committees</li> <li>» Student clubs and societies</li> <li>» Chancellor's Cup</li> </ul>	<ul style="list-style-type: none"> <li>» Australian University Games</li> <li>» Social activities</li> </ul>
RECOGNITION AND REWARD SCHEMES	<ul style="list-style-type: none"> <li>» Vice-Chancellor's Award for Excellence</li> <li>» Vice-Chancellor's Award for Exemplary Practice in Learning and Teaching</li> <li>» Vice-Chancellor's Awards for Outstanding</li> <li>» Contributions to Learning and Teaching</li> </ul>	<ul style="list-style-type: none"> <li>» Student Voice Awards</li> <li>» University medals for first-class Honours degree</li> </ul>
EMERGING AND CURRENT LEADERS	<ul style="list-style-type: none"> <li>» Student Leadership Conference</li> <li>» Staff Conference and Expo</li> </ul>	<ul style="list-style-type: none"> <li>» Senior Leadership Conference</li> </ul>
WORKPLACE ENVIRONMENT	<ul style="list-style-type: none"> <li>» Optional workspace ergonomic modifications</li> <li>» A policy that bans smoking on all work grounds</li> </ul>	<ul style="list-style-type: none"> <li>» Student Clubs and Societies</li> </ul>

### RECOMMENDATIONS

#### Expand what we offer

- » Student Residences (Rockhampton) have a pet dog that lives at the student residences and is the responsibility of the students. Expand this initiative to each campus that provides accommodation.
- » Increased internal divisional/school awards.
- » Foster a sense of belonging through clubs and societies
- » Recognise professional and academic emerging leaders.

#### Enhance what we do and develop new initiatives for the campus community

- » Policy or guidelines for healthy nutrition and catering.
- » Onsite bicycle storage facilities.
- » Safe area for students at each campus, where students can access information about mental health services in privacy.
- » Establishment of a virtual campus infrastructure.
- » Peer to peer program.

## 5. VALUING INDIGENOUS COMMUNITIES' CONTEXT AND PRIORITIES

KEY FOCUS AREA ELEMENTS	CURRENT UNIVERSITY INITIATIVES	
INDIGENOUS SUPPORT SERVICES	<ul style="list-style-type: none"> <li>» Indigenous Student Support Team</li> <li>» Indigenous Tutorial Assistance</li> <li>» Tertiary Entry Program</li> </ul>	
RECONCILIATION ACTION PLAN	<ul style="list-style-type: none"> <li>» Equality</li> <li>» Integration</li> <li>» Greater study</li> </ul>	<ul style="list-style-type: none"> <li>» Employment</li> <li>» Sustainable opportunities</li> </ul>
WELLBEING	<ul style="list-style-type: none"> <li>» Exploring culturally safe spaces on campus.</li> </ul>	
EVENTS AND ACTIVITIES	<ul style="list-style-type: none"> <li>» National Reconciliation Week</li> </ul>	<ul style="list-style-type: none"> <li>» NAIDOC Week</li> </ul>

### RECOMMENDATIONS

#### Expand what we offer

- » Advance health promotion through engagement and an informed understanding of local and Indigenous communities' contexts and priorities, and consideration of vulnerable and transitioning populations.
- » Utilise current structures within the Indigenous tutorial assistance scheme to ensure Indigenous students are in receipt of mentoring to support better mental health well-being while studying.
- » Indigenous support team to deliver social and emotional support programs to through the terms.

#### Enhance what we do and develop new initiatives for the campus community

- » Develop initiative that supports all Australian students with an understanding of and respect for Aboriginal and Torres Strait Islander traditional and contemporary cultures.
- » Develop curriculum that supports all Australian students with an understanding of and respect for Aboriginal and Torres Strait Islander traditional and contemporary cultures.

- » Explore professional and academic staff to attend Aboriginal and Torres Strait Islander Mental health first aid courses.
- » Creation of culturally safe spaces on most CQUniversity campuses where our Indigenous students are attending.
- » Providing practical and lived experience of success is important, an Australian government website <https://www.thinkyourway.edu.au> provides our University with opportunities to advance and enhance our abilities working with Aboriginal and Torres Strait Islander students, families and the community.

## 6. EARLY IDENTIFICATION AND RESPONSE

KEY FOCUS AREA ELEMENTS	CURRENT UNIVERSITY INITIATIVES	
PROVIDE ACCESS TO EARLY IDENTIFICATION TOOLS AND RESOURCES THAT ACT AS A FIRST INDICATOR FOR POSSIBLE DISTRESS	<ul style="list-style-type: none"> <li>» Staff Guidelines: Responding to a student in distress (in draft).</li> <li>» Staff Pocket Size Guide: Responding to a student in distress.</li> </ul>	<ul style="list-style-type: none"> <li>» First Response: Student in Distress, Training for staff.</li> </ul>
BUILD PEER-TO-PEER SUPPORT SYSTEMS AND STRUCTURES FOR STUDENTS AND STAFF TO BE ABLE TO CONNECT WITH OTHERS AND APPROPRIATE RESOURCES	<ul style="list-style-type: none"> <li>» Occasional lectures provided to students addressing stress management, study skills and resilience</li> <li>» Student Mentor Program</li> </ul>	<ul style="list-style-type: none"> <li>» Occasional lectures provided to staff by counselling team on how to support students to manage workload and stress and engage in self care.</li> </ul>
PROVIDE SCREENING FOR EARLY IDENTIFICATION, SELF-MANAGEMENT AND REFERRAL	<ul style="list-style-type: none"> <li>» Employee and Family Assistance Program</li> </ul>	<ul style="list-style-type: none"> <li>» Student Readiness Questionnaire (students self report if they are seeking support services)</li> </ul>
SUPPORT STUDENTS IDENTIFIED AS BEING AT ACADEMIC RISK	<ul style="list-style-type: none"> <li>» Academic liaisons</li> </ul>	<ul style="list-style-type: none"> <li>» Monitoring Academic Progress (MAP) process</li> </ul>

### RECOMMENDATIONS

#### Expand what we offer

- » Adequately resource staff to deliver First Response: Student in Distress Training to all staff and student leaders.
- » Expand on educational apps to enable students and staff to identify mental distress in both self and others.
- » Enhance and promote student case management strategies to provide a sense of belonging for students and help those students at academic risk.

#### Enhance what we do and develop new initiatives for the campus community

- » Routinely offer Mental Health First Aid Training and Accidental Counselling Training to staff.
- » Adapt First Response: Student in Distress Training to cater to students and ensure adequate staff resourcing to provide training to students.
- » Online mental illness support groups.
- » Online group mental wellbeing programs through the Wellness Centre.
- » Develop bystander intervention programs.
- » Offer Mental Health Triage.



## 7. ENGAGING CURRICULA AND TRAINING

KEY FOCUS AREA ELEMENTS	CURRENT UNIVERSITY INITIATIVES	
PROGRESSION PATHWAYS	<ul style="list-style-type: none"> <li>» Skills for Tertiary Education Preparatory Studies</li> <li>» Skills for Education and Employment</li> </ul>	<ul style="list-style-type: none"> <li>» Start Uni Now</li> </ul>
FLEXIBILITY IN STUDY	<ul style="list-style-type: none"> <li>» Flexible, mixed-mode study</li> </ul>	<ul style="list-style-type: none"> <li>» Residential schools</li> </ul>
UNIVERSITY COURSES	<ul style="list-style-type: none"> <li>» Graduate Diploma of Positive Psychology</li> <li>» Graduate Certificate in Positive Psychology</li> <li>» Graduate Certificate Mental Health</li> <li>» Graduate Diploma Mental Health Nursing</li> <li>» Master of Mental Health Nursing</li> <li>» Diploma of Work Health and Safety</li> <li>» Assisting Clients with Self-Medication</li> <li>» Bachelor of Psychological Science (Honours)</li> <li>» Bachelor of Psychological Science</li> <li>» Master of Domestic and Family Violence Practice</li> <li>» Graduate Diploma of Domestic and Family Violence Practice</li> </ul>	<ul style="list-style-type: none"> <li>» Master of Clinical Psychology</li> <li>» Graduate Diploma in Health Ageing</li> <li>» Graduate Certificate in Healthy Ageing</li> <li>» Health Care Work in the Community</li> <li>» Bachelor of Social Work (Honours)</li> <li>» Certificate II in Health Support Services</li> <li>» Certificate IV in Work Health and Safety</li> <li>» Certificate IV in Disability</li> <li>» Sexual Decision Making – Positive Youth Development</li> </ul>
INTERPERSONAL COMPETENCE INTRAPERSONAL COMPETENCE PERSONAL SKILL DEVELOPMENT	<ul style="list-style-type: none"> <li>» Mindfulness Programs</li> <li>» 10,000 Steps program</li> <li>» Student Orientation</li> </ul>	<ul style="list-style-type: none"> <li>» Career counselling/advising</li> <li>» Self-management programs</li> <li>» Zero tolerance programs</li> </ul>

### RECOMMENDATIONS

#### Expand what we offer

- » Promote assessment design that affords flexibility.
- » Increase availability of programming and training for students, schools and staff to build personal resilience and wellness, and to promote academic and professional success.

#### Enhance what we do and develop new initiatives for the campus community

- » Micro credentials.
- » Curriculum mapping by diverse students' interest, capabilities and prior learning to support.
- » First Response Mental Health Officers.

- » Resilience programs.
- » Develop a staff training matrix.
- » Increase support during critical transition times.
- » Incorporate self-management competency units into pedagogy. Teaching topics such as stress management, emotional awareness and emotion regulation, social communications skills, problem solving, self-care and teach soft skills. Completion of unit to be included on student transcript.

## 8. ACCESS TO SERVICES AND SUPPORT

KEY FOCUS AREA ELEMENTS	CURRENT UNIVERSITY INITIATIVES	
CONFIDENTIAL, ACCESSIBLE CLINICAL CARE, INCLUDING COUNSELLING, MEDICAL AND PSYCHOLOGICAL SERVICES	<ul style="list-style-type: none"> <li>» Wellness Centre is a psychology clinic that provides low cost, high-quality assessment and therapy services</li> </ul>	<ul style="list-style-type: none"> <li>» Student counselling service provides free and confidential counselling to all students.</li> </ul>
CRISIS INTERVENTION AND MANAGEMENT SERVICES	<ul style="list-style-type: none"> <li>» Well defined emergency response structure including a Crisis Management Team.</li> <li>» Critical Incident Policy, and Student Critical Incident Response Team</li> </ul>	
SUPPORT SERVICES AND STUDENT LIAISONS	<ul style="list-style-type: none"> <li>» Studiosity</li> <li>» Accessibility</li> <li>» Student Mentors</li> <li>» Indigenous Student Support</li> <li>» Student Advocacy</li> <li>» Counselling</li> <li>» Academic Learning Support</li> <li>» Financial Assistance</li> </ul>	<ul style="list-style-type: none"> <li>» Health and Welfare services, such as physiotherapy, podiatry and chiropractic services which are also available to the public</li> <li>» Ally program that provides LGBTI Support with zero tolerance approach to bullying and discrimination</li> <li>» Multi-faith chaplaincy</li> <li>» Academic Learning Centre</li> <li>» Academic Liaisons</li> </ul>
EFFECTIVE REFERRAL PROTOCOLS	<ul style="list-style-type: none"> <li>» Wellness Centre develops integrated health services in consultation with other treating health professionals including GP's, specialist doctors</li> </ul>	<ul style="list-style-type: none"> <li>» Employee Assistance Program</li> <li>» Personal and community-based support</li> <li>» Student Counselling service utilises a triage referral process when a student is referred to the service</li> </ul>

### RECOMMENDATIONS

#### Expand what we offer

- » Work with external organisations to increase capacity in schools, alternate locations and through various modalities and hours of services including the provision of 24-hour access to mental health resources and services.
- » Strengthen targeted mental health support for at-risk, vulnerable populations
- » Ensure adequate resourcing to meet demand of student counselling service and employ a senior counsellor to assist with managing critical incident response.
- » Ensure adequate resources of student support services that target high-risk groups, Inclusion and Accessibility and Indigenous Student Support,

International Student Support and Careers, student advocacy and Academic Liaisons.

#### Enhance what we do and develop new initiatives for the campus community

- » Improve referral protocols in counselling and case management to improve access to service timeframe.
- » Develop further training for crisis management.
- » Develop intercultural competence in mental health.

## APPENDIX 4: CONSULTANT LIST

NAME	POSITION
PROFESSOR NICK KLOMP	Vice-Chancellor and President
MR ALASTAIR DAWSON	Senior Deputy Vice-Chancellor (International and Services)
MS JOANNE PERRY	Deputy Vice-Chancellor (Student Experience and Governance)
PROFESSOR PIERRE VILJOEN	Deputy Vice-Chancellor (Engagement, Campuses and Mackay-Whitsunday Region)
PROFESSOR GRANT STANLEY	Deputy Vice-Chancellor (Research)
PROFESSOR SUSAN KINNEAR	Dean of Graduate Studies
PROFESSOR JULIE BRADSHAW	Deputy Dean, Learning and Teaching
MS KARI ARBOUIN	Associate Vice-Chancellor (Townsville and North West QLD region)
MS BARBARA MILLER	Director, People and Culture
MR CHRIS VERA	Director, Student Experience
MS MELINDA MANN	Deputy Director, Student Life and Wellbeing
MR MARK WILLIAMS	Manager, Student Residences
MS DEBORAH FRIEL	Manager for Professional Development
DR GEMMA MANN	Lecturer, Access Coordinator Rockhampton (LGBTI Consultancy)
DR SHARLEEN KELEHER	Academic Casual, School of Human, Medical and Applied Sciences
PROFESSOR MARGARET MCALLISTER	Professor, Nursing, School of Nursing, Midwifery and Social Sciences
PROFESSOR ANDREW MCCLELLAND	Senior Lecturer, Head of Course, Positive Psychology
MS CAROLE DAWES	Executive Officer, Engagement and Campuses Division
MR MARK TARANTO	Deputy Chair, Student Representative Council
MS LEONIE TAYLOR	Coordinator, Indigenous Student Support
MS CATE ROONEY	Coordinator, Inclusion and Accessibility
PROFESSOR DESLEY HEGNEY	Professional Research Fellow, Research Division
PROFESSOR HELEN HUNTLY	Provost, Tertiary Education Division



## CONNECT

[www.cqu.edu.au/connect](http://www.cqu.edu.au/connect)



@CQUniversityAustralia



@CQUni



@CQUniversity



@CQUniversity



@CQUni



cqunilife.com