



UNIVERSITY OF TORONTO
SCHOOL OF GRADUATE STUDIES

**School of Graduate Studies Mental Health Working Group
Recommendations**

I. CONTEXT

The University of Toronto has articulated commitments to promoting the mental well-being of University of Toronto students in the Report of the Provostial Advisory Committee on Student Mental Health (2014), the Mental Health Framework Update (2016), and President Gertler's letter to students, faculty and staff about commitments to student mental health at U of T (March 28, 2019). These documents assert an urgent need to address student mental health through a comprehensive strategy that promotes mental health, reduces stress and emotional distress, and responds effectively to mental illness.

In response to these needs, the School of Graduate Studies (SGS) convened a working group to develop recommendations for the promotion of graduate student mental health. The working group was co-chaired by the SGS Vice-Dean, Students in collaboration with two graduate student representatives and was comprised of eight graduate students, three staff members, and three faculty members.

The work of this group was a complement to the work of the Presidential and Provostial Task Force on Student Mental Health in recognition of the importance of considering the specific, and sometimes unique needs of graduate students. The graduate student population is diverse in a variety of ways including age, citizenship, family status, ethnicity, culture, ability and disability, economic and social capital, and mental and physical health. Graduate students are also engaged in a range of experiences and dynamics that are specific to graduate education, such as managing supervisory relationships, meeting increasingly demanding academic milestones, working in isolation or in group laboratory environments, and managing a higher level of personal, financial, and academic independence. While the diversity of the graduate student population enhances graduate education, and the unique aspects of graduate education provide the opportunity for world class levels of thought and research, it is critically important to acknowledge and better understand the impact these aspects can have on graduate student mental health.

The working group developed the following recommendations in consideration of the diverse graduate student population and the unique nature of graduate education. These recommendations are grounded in the understanding that the graduate community can:

- do more to proactively acknowledge, address, and respond to mental health challenges.
- better understand the range of needs and identify gaps.

- improve mental health awareness by promoting existing resources and supports.
- design student-focused tools and approaches that are appropriate, inclusive and responsive.

II. FRAMING

The recommendations identified by the SGS Mental Health Working Group were built on the framework developed in the University's Mental Health Strategy to examine components of University experience, beyond mental health services, that have an impact on graduate student mental health. The recommendations were also informed by the discussions and findings of the group regarding opportunities and gaps in the promotion of graduate student mental health at the University of Toronto and a review of existing University of Toronto and peer institution reports relevant to student mental health.

The SGS Mental Health Working Group organized the recommendations into the following categories:

- SGS Policies and Procedures
- Supporting Students Through Periods of Stress
- Resources, Services, and Communication
- Supervision and Mentoring
- Attention to and Monitoring of Graduate Student Mental Health/Well-being

III. RECOMMENDATIONS

A. SGS POLICIES AND PROCEDURES

1. Review all SGS policies with specific attention to policies, or components of policies, that may have a negative impact on student mental health.
 - a. The review of policies should consider whether:
 - i. Timelines and/or requirements create undue stress.
 - ii. Requirements may make students fearful of disclosing mental illness.
 - iii. Existing language attaches negative connotations to the decision to take a leave.
2. Clarify the distinction between SGS, Faculty, and Departmental policies. This should include clear lines of authority and identify key points of contact for faculty, staff, and students.
3. Improve communication to faculty, staff and students about the existence and intended purpose of the Leave of Absence Policy and its role in allowing students, when needed, to address health and personal circumstances that disrupt academic work.
 - a. Communication to students, especially students experiencing mental illness, should:
 - i. Inform students that a Leave of Absence is a viable option and that they have a right to take it.
 - ii. Be clear, comprehensive, and supportive.
 - b. Communication to Faculties, Departments, faculty/supervisors, and administrative staff should:

- i. Reinforce the commitment that faculty/supervisors have a commitment to support academic progress. This should include mapping out a plan for progress, which may include modifying or pivoting research, and identifying ways to protect intellectual property.
 - ii. Clarify students' ongoing entitlements and rights during a Leave of Absence.
4. Research, develop and implement recommendations to improve the transition back to programs of study after a Leave of Absence.
 - a. Recommendations should consider how to support the continued academic progress of students who take a Leave of Absence.

B. SUPPORTING STUDENTS THROUGH PERIOD OF STRESS

1. Promote best practices that enable students who are experiencing a heightened state of stress and/or mental health issues to feel safe speaking openly and to readily identify and access supports.
 - a. Enhance and improve communications about mental health resources, workshops, training, and best practices (through the SGS website, e-news, calendar, departmental communications).
 - b. Encourage Faculties and departments to promote mental health and support students with mental health issues by facilitating opportunities for Faculty/TA/staff/students to attend mental health awareness trainings.
 - c. Encourage Faculties and Departments to identify key people who can serve as a resource for students and others seeking information about University mental health resources.
 - d. Provide readily accessible information to supervisors, faculty, and staff about ways to support students with mental health issues and connect students to resources.
 - i. The content should be audience specific (faculty, staff, TA, student) and differentiated based on levels of concern/crisis.
2. Support transitions in the academic lifecycle (entry, candidacy, defense, internships/practica, completion/career search) by acknowledging that these can be stressful times, identifying primary stressors, and implementing responsive solutions to decrease stress where possible.
 - a. Potential initiatives include:
 - i. Proactively providing connections to the information, resources and supports that are commonly needed during each transition or common periods of stress.
 - ii. Creating a standard information "package" and checklist that every graduate student receives once they have accepted their offer of admission. (e.g. as a link embedded in the admission letter)
 - iii. Informing all incoming students of resources and encourage incoming students with mental or physical health conditions to connect with appropriate services.

C. RESOURCES, SERVICES, AND COMMUNICATION

1. Integrate mental health awareness content into SGS initiatives.

2. Identify, support, promote, and collaborate with existing groups at U of T, and within the community, that support mental health/wellness.
3. Develop or promote resources and supports that consider the specific cultures, backgrounds, and experiences of underrepresented groups, such as racialized, Indigenous, and first in family graduate students. These resources should address the specific needs of each group and provide connections to relevant supports and resources.
4. Improve or develop audience specific communications that provide clear direction about where to find and access pertinent mental health information and resources.
 - a. Communications should:
 - i. Direct the messaging and content to specific groups, including:
 - graduate students with mental health issues or concerns.
 - Staff, faculty, TAs who want/need to support someone with mental health issues.
 - Students from under-represented groups such as racialized, Indigenous, and first-in-family graduate students.
 - ii. Clearly identify the steps to take when there is concern about a student's mental health.
5. Work with Health and Wellness to develop standardized statements about mental health and graduate studies for orientation, course syllabi and SGS communications.
6. Leverage the content on the SGS website to more easily find and utilize content.
 - a. Changes should include:
 - i. Decreasing the amount of text.
 - ii. Creating one point of contact for information.
 - iii. Consolidating information about resources into one place and organizing information based on user (e.g., citizenship, degree type, stage of study).
 - iv. Using email links or the e-news to direct students to relevant information (based on user).
7. Utilize and communicate qualitative and quantitative graduate student survey data to better understand graduate student experiences and promote data informed decision making at the Provostial, Faculty, and Departmental levels.

D. SUPERVISION AND MENTORING

1. Promote supervision practices that support mental health awareness and supporting graduate student mental health.
2. Develop, support, and promote resources that help students navigate supervisor/student relationships with attention to the mental health implications of the power differential.
3. Integrate attention to graduate student mental health in the consultation process and development of the Centre for Graduate Mentorship and Supervision.
4. Advance and implement recommendations identified through the Healthy Labs Initiative that promote and support mental health and foster healthy laboratory environments.

E. ATTENTION TO AND MONITORING OF GRADUATE STUDENT MENTAL HEALTH/WELL-BEING

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1. Establish a Graduate Student Mental Health Advisory Group, (advisory to the Vice-Dean, Students) School of Graduate Studies. The composition of the group should prioritize representation of diverse student experiences and the range of contexts in which graduate students pursue their academic work (e.g., consideration of the three campuses, students in hospital sites, etc.).
2. Collaborate with existing student groups to support and promote mental health initiatives for graduate students.
3. Support, and where possible, contribute to interdisciplinary research collaborations among Faculties and academics on mental health. Advocate for the active inclusion of graduate students in these research collaborations.
4. Explore options to better understand graduate students' needs, identify gaps, and evaluate historical data.
 - a. Improve awareness and participation in current surveys such as CGPSS or gradSERU and explore opportunities to enhance data collected re: mental health.
 - b. Consider developing or supporting other surveys to better understand the graduate student experience from beginning to end.