



THE UNIVERSITY OF
SYDNEY

Student Mental Wellbeing Strategy

August 2020

DVC Education Portfolio

Student Life

Student Mental Wellbeing Strategy

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Acknowledgement of Country

We acknowledge and pay respect to the traditional owners of the land upon which the University of Sydney is built, the Gadigal people of the Eora nation.

As we share our own knowledge, teaching, learning, and research practices within this University may we also pay respect to the knowledge embedded forever within the Aboriginal Custodianship of country.

Introduction

Mental wellbeing refers to a state of fulfilling one's own potential, coping with stressful situations to maintain an overall sense of personal happiness and satisfaction, and engaging meaningfully with the community.¹ It refers to a sense of optimal personal experience and functioning² and encompasses more than just the absence of mental ill health.^{3,4,5} For university students, productive academic engagement is an additional key component of mental wellbeing.⁶ Promoting student mental wellbeing requires a determined and collaborative commitment to creating a university community environment where students can flourish and thrive, with whole-of-institution support systems that are proactive and integrated.

The University of Sydney has developed the Student Mental Wellbeing Strategy to provide a comprehensive and sustainable approach to furthering mental wellbeing for all students. In 2018, the Australian Government endorsed the Higher Education Standards Panel's recommendations, which confirmed that every institution should have a comprehensive mental health strategy and implementation plan (Department of Education, 2018).⁷ This strategy is in alignment with the staff-facing Mentally Healthy Workplace Framework. The two strategies will provide complementary and comprehensive direction for the University in the area of mental wellbeing for students and staff.

Prioritising mental wellbeing puts the onus on the University to take a holistic stance to mental wellbeing that enables students from all backgrounds and levels of study to participate fully and meaningfully throughout their student life. This approach necessitates a radical re-think of existing systems and a departure from reactive and siloed solutions that rely primarily on self-identification to resolve issues and access support. The argument for an integrated, 'whole-of-curriculum,' and context-informed approach draws upon principles of best practice and a growing body of research.⁸ This approach will be achieved through commitment from the University's leadership and from the active engagement and collaboration with students and staff across the University community to co-design, evaluate, and iteratively develop innovative solutions.

The Student Mental Wellbeing Strategy acknowledges that students entering post-secondary education face multifaceted challenges.⁹ In Australia, and globally, young people aged between 16-24 years of age are at increased risk of mental health difficulties, with over 75% of adult mental illnesses emerging before the age of 25 years;¹⁰ the majority of University students are in this high risk age group. A compounding challenge for students is the limited access to high quality and evidence-based services due to high demand. When young people do seek help, timely and triaged treatment is only delivered to a minority of individuals.¹¹ While there has been extensive focus on the identification and treatment of mental illnesses, a growing body of evidence has highlighted the importance of prevention and early intervention in cultivating a whole-of-person approach to mental wellbeing. This preventative approach has been shown to result in improved academic outcomes and lowered rates of mental health concerns. It does not supersede support in crisis, but rather uses triaging and individual progress planning to ensure timely, targeted, bespoke care for students in need.

The approach in this strategy is informed by the self-determination theory¹² (SDT). Research in this area consistently identifies four wellbeing essentials that learning environments should target to strengthen student mental wellbeing and academic achievement.¹³ These are:

- experiences of belonging;
- positive relationships;
- a sense of autonomy;
- competence.

The University's sustained effort to enhance these wellbeing essentials will allow students to sustain and develop the autonomous motivation that is crucial for their academic success.

Mental wellbeing is a collective responsibility that is underpinned by a cohesive environment and culture to support the whole University community. With this strategy, we establish the vision, key principles, and enablers for embedding evidence-based practice at every level of the organisation.

Background and Context

The University's commitment to student mental wellbeing is demonstrated through ongoing provision of student support and innovations in services related to student mental wellbeing. A suite of health, wellbeing and support services are currently provided to the University community. Over the past 10 years, there have been a range of initiatives to enhance the wellbeing of students and staff in the University community which have contributed to a collective desire to take next steps into a more cohesive strategy in the area of mental wellbeing.

In 2012, a university-wide initiative called Healthy Sydney University was endorsed by the Vice-Chancellor and Senior Executive Group to promote the health and wellbeing of our community at the University of Sydney. Healthy Sydney University works across the university to develop healthy policies and implement healthy practices, embracing the principles and perspectives of a Health Promoting University, as defined by the World Health Organisation¹⁴, and the Okanagan Charter of Health Promoting Universities and Colleges¹⁵. In 2014 and 2015, the Healthy Sydney University synthesized and analysed published evidence on settings-based approaches to mental health promotion in universities. The paper highlighted a concerning lack of good quality evidence for population-based interventions that promote the mental health and wellbeing in university settings. Overall, based on the available evidence underpinning the literature review, Healthy Sydney University concluded that mental wellbeing can be promoted through the development of supportive university environments for staff and students, and proposed four key recommendations. These recommendations include trialing alternative academic strategies, developing and promoting the use of eHealth technologies, building and evaluating healthy physical environments, and infusing mental health knowledge and skills in university curricula. The research and insights through the Healthy Sydney University is an important foundational framework for the new Student Mental Wellbeing Strategy.

In the same time period, *University's Strategic Plan 2011-2015 Green Paper*¹⁶ identified the student experience as an integral component of the provision of higher education. A Working Group focused on student wellbeing was formed to review provision of student support at the University, including relationships and communication between these services. This review culminated in the *2014 Student Wellbeing Report*¹⁷, which included a set of 65 recommendations for the delivery of services to students. These recommendations are underpinned by best practice models of student support and input from students and staff; these best practice models include the following principles:

- a single point of entry (online or physical) for student access to support;
- clear and accessible policies and processes to staff and students;
- training and development for student-facing professional and academic staff;

- links between the University health and psychological services and the health system;
- specific support for at-risk cohorts, such as international students.

These same principles underpin the present strategy, which aims to contribute to the implementation of the *2018 Student Experience Strategy*¹⁸ by taking further steps in improving student support for students.

In the intervening period, Counselling and Psychological Services (CAPS) and the University Health Service (UHS) have developed new approaches to support the University community. Building on the 2013 CAPS Mental Health & Wellbeing Strategy, CAPS has extended their services beyond one-to-one consultations to deliver self-help information and workshops, including outreach sessions in faculties. The University Mental Health and Wellbeing Support Line, which includes an SMS chat option and provides 24/7 support reporting to CAPS, was piloted in 2019 and has been incorporated as business as usual since early 2020. CAPS has adapted well to tele- and video conferencing (Zoom) consultations during COVID-19 in order to provide ongoing support to students during this difficult and uncertain time. These additional modes of service delivery will continue as part of business as usual to enhance the care and support provided for students. In 2018, UHS underwent a review to ensure the sustainability of this essential service. Measures implemented as a result of this review include improved space utilization, extended operating hours, and more efficient internal staffing and resource allocation. UHS has also employed a Health Promotion Officer to improve overall access to health care by international students. Throughout the COVID-19 situation, the service has adapted quickly to the provision of remote appointments in order to continue supporting the University community through provision of medical care.

In 2019, through the Student Experience Program, a number of initiatives were implemented to consult the student population and develop a collaborative understanding of how we can work together to improve student wellbeing at the University of Sydney. Students were engaged through a multi-faceted approach, using private online discussion, online interactive presentation and polling, postcard questionnaire, and a mental health survey that was student-led and supported by nine cross-faculty student bodies. Interactive activities were conducted on *R U OK? Day* and during *Wellness Week* to engage students and staff in assessing their wellbeing and raising awareness of techniques and resources to enhance mental wellbeing. Finally, online discussion forums, conducted on the C-Sight® platform, invited a random sample of 10,025 students by email to share their experience and views about dealing with mental health and wellbeing at the University of Sydney. A total of 347 students registered in the forum, and 64 students actively participated in the discussions. The exercise generated some insightful qualitative data on our student population, allowed students to share their experiences navigating their mental wellbeing in University, and suggested ideas that could be explored further in future strategies striving to improve mental wellbeing.

The new Student Mental Wellbeing Strategy builds on this work by proposing a new university-wide approach to the provision of student mental wellbeing support which aims to meet the needs of an ever-growing and diverse University student community.

Our Vision

We aim to create an inclusive and open University community that embraces a holistic, proactive, and student-centric focus on student mental wellbeing. Through an institution-wide approach, the University of Sydney is committed to delivering learning environments and organisational cultures that support student mental wellbeing. As an academic institution, the strategy and its implementation are based on evidence-based approaches wherever possible and the University will support initiatives to address gaps in the evidence base.

The Student Mental Wellbeing Strategy is intricately linked with the University's values,¹⁹ which promote a University-wide culture where our community can flourish and thrive. These are:

Courage and creativity: Challenging the status quo; adapting to change without fear of failure; imagining a better world.

Respect and integrity: Valuing contributions from every member of the University community; ensuring academic freedom and respectful debate.

Diversity and inclusion: Valuing different and unique perspectives; advocating for all to realise their full potential; ensuring equitable access to opportunities.

Openness and engagement: Seeking and being open to new ideas; listening to and understanding the needs and aspirations of others; looking for what we can learn and how we can contribute to the wellbeing of the communities we serve.

Informed by these values, we envision an approach to mental wellbeing that is proactive, evidence-based, and grounded in participant co-design, recognizing the intersectional nature of experiences and identities. This approach meets the needs of the diverse student cohort through a staged, triaged approach to care provision across the student population.

Definitions

In the University of Sydney's Student Mental Wellbeing Strategy, we have elected to use the term mental wellbeing instead of mental health.^{13,20} A focus on mental wellbeing aligns with our vision to take a holistic, pro-active and student-centric approach, and avoids taking a deficit and crisis-reactive focus to mental health.

Mental wellbeing – Mental wellbeing is defined as the presence of positive and sustainable characteristics that enable individuals and communities to thrive and flourish.^{3,13,21} It can be categorised into five core elements: positive emotions, engagement, relationships, meaning, and accomplishment.¹⁶ Improved or optimal mental wellbeing involves experiences that include: healthy lifestyles, physical health, ability to recover from illness, educational attainment and engagement, productivity, employment and earnings, positive relationships with others, and social cohesion and connectedness. The experience of mental wellbeing does not imply the absence of the negative emotions which are part of the human condition, especially in times of transition, but rather emphasizes resilience in navigating fluctuations in emotions and experiences.¹³

Mental health difficulties – Students affected by mental health difficulties may experience higher than average levels of distress that interferes with their cognitive, emotional and social functioning. The impacts tend to be less severe than with a mental illness and may be affected by life stressors.

Mental illness – Students affected by a mental illness (disorder) can experience levels of emotional and/or psychological distress beyond their current ability to manage effectively. These conditions involve thoughts, feelings, symptoms and/or behaviours which cause distress, reduce functioning and negatively impact day-to-day experiences.

It is common for students with mental health difficulties or a mental illness to also experience problems associated with use of alcohol or drugs.²² It is acknowledged that addressing alcohol and drug use and harms is critical to achieving a holistic approach to student mental wellbeing.

Student Mental Wellbeing Framework

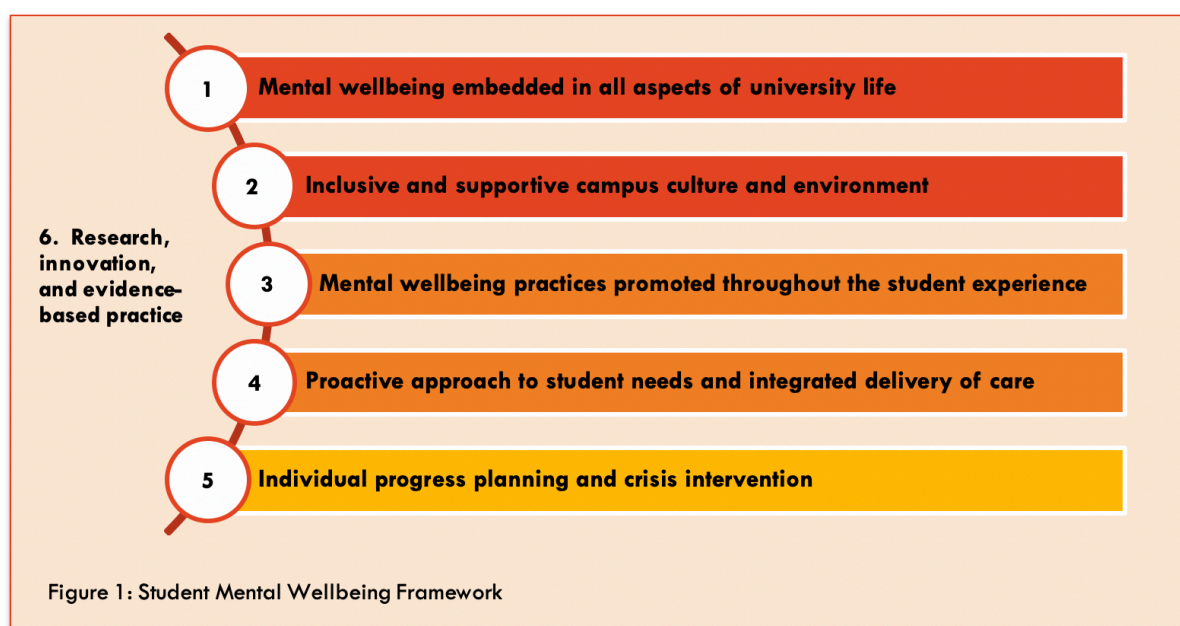
The framework of the University of Sydney's Student Mental Wellbeing Strategy draws on a collection of well-known blueprints for mental health promotion. It is guided by the Australian Framework for Promoting Student Mental Health and Wellbeing (2016)²³, the National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing 2017-2023²⁴, the framework used by the Australian National Mental Health Commission (2017)²⁵, Canadian National Guide Framework for Post-Secondary Student Mental Health (CACUSS & CMHA, 2013)²⁶, and the UK University Mental Health Charter (2019)⁶.

The framework follows a systemic, staged care^{27,28} model that has three levels of interventions. These levels of care are indicated through colour-coding in Figure 1.

Universal interventions (Levels 1-2): provides broad institutional student-focused approaches for promoting mental wellbeing

Secondary prevention (Levels 3-4): offers early intervention initiatives for students with identified mental health difficulties (indicated), or who are in higher risk groups such as, but not limited to, international students, Aboriginal and Torres Strait Islander students, LGBTQIA+ students, postgraduate research (HDR) students, students with disability, students with caring responsibilities and students affected by sexual violence (selected)

Tertiary prevention (Level 5): treats and reduces the impact of ongoing mental illnesses



1. Mental wellbeing embedded in all aspects of university life

We aim to create an organisational culture where student wellbeing is core to our daily practice. Approaches (evidence-based whenever possible) to student wellbeing are embedded across the curriculum and our teaching and learning methods, ensuring that students are empowered to delve deeply and meaningfully into their academic pursuits. Our learning environments are student-centric, promoting experiences of belonging, positive relationships, and a sense of personal autonomy and competence, and our physical environment is conducive to productive academic engagement. Information on student wellbeing is shared across units that provide support, ensuring a cohesive and bespoke student experience that is sustainable and scalable. We work together with student-led and student-facing organisations, such as the

University of Sydney Union (USU) and Sydney Uni Sport and Fitness (SUSF), to provide programs and initiatives to support a holistic approach to mental wellbeing.

This approach to learning and teaching demonstrates our commitment to the University values of courage and creativity, and openness and engagement.

Objectives

- Enable a student-centric environment that proactively embeds mental wellbeing in every part of the student life.
- Develop learning environments and organisational cultures that seek to improve the mental health of the whole community by embedding mental wellbeing in learning, teaching and assessment, offerings of co/extra-curricular activities, governance and policy development.
- Develop platforms in collaboration with students and their support people to enable timely access to mental wellbeing resources and care that is tailored to students' needs (for further detail, see Activity 4.1, p. 12, and 'Innovative and evidence-based use of e-technology', p. 16).

Activities

A strategy and policy environment supportive of mental wellbeing

- 1.1 Continue to undertake policy review and development to ensure that University policies and procedures promote social equity and equality of opportunity for students with mental illnesses and promote mental wellbeing in the university environment. This includes admission, recruitment, and academic or career progression. This may require that student-focused policies, such as the Learning and Teaching Policy, the Coursework Policy, the Academic Honesty Policy and Student Discipline Rule, will articulate how they promote mental wellbeing.
- 1.2 Facilitate reasonable study adjustments (e.g. Special Consideration) and streamline procedures and protocols for students with regard to individual needs, mental health care best practice, academic and work requirements, equity and anti-discrimination legislation, ensuring that adjustments are consistent with any mental health care plans that a student may have in place. This may include a review of timeframes for Special Consideration in cases of mental health difficulties or mental illness.
- 1.3 Develop a "Supporting Students with Complex Needs Policy" aimed at creating a proactive support plan for students who need to suspend or reduce load due to mental illness.
- 1.4 Develop and review guidelines that facilitate return to study after absence relating to mental illnesses or mental health difficulties.
- 1.5 Audit and enhance student facilities, including facilities provided by the USU and SUSF, to ensure access to healthy and well-priced food options, safe and comfortable open and green spaces, bicycle storage, other end of trip facilities, and sporting facilities.
- 1.6 Further coordinate and streamline access to financial assistance based on need.
- 1.7 In alignment with the Accommodation Strategy implementation, provide advice and options for safe and affordable housing.
- 1.8 Ensure that new Student Life strategies, such as the English Language Support Strategy and Residential Life Strategy, align with the key principles of the Student Mental Wellbeing Strategy.

Educational approaches supportive of mental wellbeing

- 1.9 Continue the work of designing and implementing a whole-university approach to transition for undergraduate, postgraduate and higher degree by research (HDR) students by introducing coordinated measures for promoting an inclusive and supportive campus culture throughout all stages

of student life, beginning from pre-application and continuing through application, pre-entry, arrival, induction, transition across year levels, and transition to higher degrees and employment.^{6,29}

- 1.10 Within the ongoing implementation of the transformed curriculum and the introduction of core transition units of study, ensure that curriculum design is informed by a holistic and inclusive view of students and their cultures which enables all students to develop skills, knowledge, academic self-efficacy and confidence at an appropriate pace.^{6,30} This includes:
- the adoption of a combination of diagnostic exercises and early formative assessment tasks in all first-year education programs; targeted learning enrichment interventions for students identified as potentially in need of additional foundational academic skill support; and the scheduling of discipline-specific drop-in tutorials in all core first year units.
 - integration of targeted academic interventions for developing students' sense of social inclusion, personal resilience and self-reflection.
- 1.11 Reduce unnecessary stressors in the curriculum, and work with the Assessment Advisory Committee and the Academic Board to manage volume of assessment. Wellbeing can be promoted in the curriculum by mapping assessment dates to reduce overlap between major tasks, providing more formative and competency-based assessments rather than standards-based grading, increasing space for personal time and other commitments, and equipping students with skills to manage life stresses.^{31,32}
- 1.12 Develop triage and referral systems centrally and within Faculties in collaboration with Deans. Ensure that referral pathways are streamlined and clear, with a single source of truth that is easily accessible to staff.
- 1.13 Ensure that student-facing staff are aware of the impact of mental health difficulties and mental illness on individuals, peers and families, knowledge of support pathways available to students, and that they have confidence in providing advice on where students can go for help.^{6,30} This will be achieved through professional development such as provision of workshops that introduce key information to raise awareness and build knowledge of mental wellbeing, appropriate referrals for students in need of related support, and maintaining boundaries. Staff are not expected to counsel students; instead, training focuses on recognizing signs that an individual or group of people needs further support and in identifying the most appropriate pathways for accessing this support. For academic staff, the time associated with participating in professional development opportunities and advising students on best referral pathways for mental wellbeing support can be incorporated in the 20% allocation for service and referenced in the relevant section of promotion submission. The details of such workload implications will be discussed with relevant Managers, Deans and Heads of Schools, who will work with student-facing staff and monitor development of these skills in staff members through Performance Planning and Development. Collaboration will also take place with Managers, Deans and Heads of Schools to develop an approach to delivering workshops at scale across the University. For student-facing staff whose roles require more advanced skills, additional training will be provided via Mental Health First Aid workshops (see Activity 4.8, p. 13). Through this approach, we will work with unit and faculty leadership to streamline and manage mental wellbeing initiatives, creating central places and people that can be important triage point-persons and clearly communicate with staff.

Co-curricular support of mental wellbeing

- 1.14 Continue to embed activities in all first-year education (coursework) and research education (HDR) programs that aim to promote mental wellbeing

through social connectedness between students, their peers and academic staff. In education programs, this is achieved through prioritising interactive, collaborative and experiential learning activities. Teacher training that focusses on innovation in delivery and assessment which is effective for large and diverse cohorts will also discuss the relationship between innovations in delivery and mental wellbeing. This would include the awareness and use of teaching methods that can enhance students' sense of belonging and connection to the University via the design of course and assessment activities. In research education (HDR) programs, this will be achieved through a combination of interactive student- and staff-led seminars and initiatives.

- 1.15 Facilitate and increase mental wellbeing literacy for the entire campus community where staff and students are aware of the impact of mental health problems, their relationship with drug and alcohol use and harms, available supports and pathways of recovery, and are open in asking for, or offering, help and targeted support.^{33,34} This will be achieved via a number of university-wide health promotion activities disseminated via the University website, newsletters, and student networks and forums.
- 1.16 Implement interventions to improve physical health and wellbeing across campuses, including exercise, diet, engaging with nature and good sleeping habits.³⁵
- 1.17 Strengthen partnerships with SUSF and other programs to promote sport and physical activities.
- 1.18 Strengthen our partnership with the USU to increase visibility of key programs, services and facilities that enhance the student experience.

Measures of success

- Simplified and standardized policies and administrative practices that reliably improve student mental wellbeing, retention and engagement, ensuring easy centralized access to wellbeing policies, information and resources for students and staff.
- Identification of curriculum-related stressors that are specific to each faculty and implement an intervention.
- Evidence of increased psychological literacy in the campus community.
- Evidence of reduced stress related to curricula design through a pre-post-survey design (three-year measurement).
- Improved results of the University of Sydney in the International Student and Student Barometer. The University's performance as of 2018 was below all benchmarks for both domestic and international cohorts across all measures.
- Established processes and policies to support student transitioning, to be evaluated through cross-sectional survey of students across three years.
- Improved rate of students returning to study following leave or suspension due to mental health issues.
- Reduced proportion of students applying for special consideration related to poor mental wellbeing, and evaluation of effectiveness through pre-post design.
- Improved ratio of student spaces, safe and comfortable open and green spaces, bicycle storage, end of trip and sporting facilities to on-campus student population.
- Improved access to safe and affordable housing options for students.
- Improved take-up of financial assistance bursaries.
- Evidence of alignment of the key principles of the Student Mental Wellbeing Strategy with the English Language Support Strategy and the Residential Life Strategy.

2. Inclusive and supportive campus culture and environment

Student loneliness and isolation have been shown to be the strongest predictors of mental distress in the student population, with research showing that successful social integration from the first year at university has long term health implications that are evident in a student's final

year at university.³⁶ A sense of belonging has been identified as a key protective factor in mental wellbeing. Through implementation of this strategy, we will take considered action to ensure an inclusive, safe community for our diverse student population and provide targeted support for student populations vulnerable to loneliness and isolation.

This approach to campus culture and environment demonstrates our commitment to the University value of diversity and inclusion.

Objective

- Cultivate social connectedness and belonging within the community by embedding diverse opportunities for meaningful social engagement for students from all backgrounds and at all levels of transition through the university.

Activities

A connected and socially cohesive campus

- 2.1 Co-design cohesive, engaging and inclusive co-/extra-curricular activities and events on all campuses and online that support belonging and connection for students from diverse backgrounds. These include evidence-based programs tailored for specific cohorts such as international students^{37,38}, Aboriginal and Torres Strait Islander students, students from low-socioeconomic backgrounds, LGBTQIA+ students, students from regional and remote locations, students who are first in their family to attend university, students with disabilities, and mature age students.
- 2.2 Strengthen partnerships between the Education portfolio and USU, SUSF, Faculties and Schools to facilitate access and support students' meaningful and safe social engagement in club or society activities.
- 2.3 Enhance engagement in activities and events through student partnerships using face to face and online interaction.
- 2.4 Identify student cohorts at higher risk of isolation, racism and discrimination and form student group partnerships to facilitate social connection and belonging in these cohorts.
- 2.5 Enhance and coordinate support for existing peer mentoring and peer-assisted learning programs and establish University-wide peer mentoring and peer-assisted learning programs to support students from diverse backgrounds identified as being at risk. Review and coordinate the provision of appropriate training, supervision and ongoing support for peer mentors.

Inclusive campus spaces

- 2.6 Review and enhance physical student spaces where students feel safe for collaborative learning, accessing mental wellbeing resources, social interaction and relaxation activities.
- 2.7 Ensure all student spaces are accessible and inviting for students with limited mobility.

Measures of success

- Evidence of high rating of attendance and satisfactory engagement in co-/extra-curricular activities by student population.
- Improved measure of the proportion of students who report a sense of belonging to the university community by longitudinal survey design (one-year follow-up).
- Evidence of established partnerships with student groups and the proportion of students and staff involved.
- Evidence of established and well-supported peer-to-peer program, with increases in the number of trained peers and the proportion of students who have accessed program for mental wellbeing support and subjective rating of utility.

- Evidence of increased use of physical spaces for collaborative learning, accessing mental wellbeing resources, social interaction and relaxation activities across all student cohorts.

3. Mental wellbeing practices promoted throughout the student experience

Proactive interventions help promote mental wellbeing in the university environment. Students' understanding of factors that contribute positively or negatively to mental wellbeing builds their capacity to maintain wellness and prevent mental health difficulties. It is important for the University to embed programs throughout the student lifecycle to promote mental health literacy and promote personal resilience.³⁹

Mental health literacy is foundational for mental health promotion, prevention, and care.²⁸ Most university students in the emerging adult age group approach mental wellbeing concerns reactively rather than proactively. Students tend to ignore the majority of mental illness symptoms as warning signs, including problematic use of alcohol or drugs, and regard only the most severe symptoms (e.g. suicidality) as requiring urgent action.⁴⁰ The University, therefore, will proactively encourage practices that enable students to detect and treat signs of poor mental wellbeing early, ensuring that this promotion is accessible to students from a diverse range of backgrounds. This approach will lead to better social, academic, and vocational outcomes.⁴¹

This approach to the student experience demonstrates our commitment to the University values of respect and integrity, and diversity and inclusion.

Objectives

- Increase the University and students' ability to detect early signs of poor coping and provide appropriate response.
- Increase students' knowledge of practices and empower them to maintain good mental wellbeing, ensuring appropriacy and accessibility for our diverse student cohort.
- Facilitate development of skills through the provision of tools and information to allow students to self-manage and maintain well-being.
- Develop peer-based mental health promotion to increase community awareness of mental wellbeing issues, reduce stigma and encourage help-seeking behaviours.

Activities

Resources for promoting mental wellbeing

- 3.1 Provide access to resources that build students' knowledge and skills for mental wellbeing, such as mental health essentials, connecting to community supports, stress-management, mindfulness, self-compassion, autonomous motivation, managing perfectionism, managing emotions, and self-assessment tools in a range of accessible formats (print and online) and languages.
- 3.2 Develop and disseminate guidelines on mental wellbeing with promotional materials and resources.

Programs promoting mental wellbeing

- 3.3 Continue to raise awareness of mental wellbeing to increase focus on behaviours that promote mental wellbeing and reduce stigma and discrimination associated with mental health difficulties and illness and increase the use of youth ambassadors in promotion of initiatives.
- 3.4 Continue to participate actively in National campaigns to promote mental well-being including Mental Health Month, R U OK? Day and programs for Aboriginal and Torres Strait Islander people.
- 3.5 Where appropriate, continue to embed into the curriculum and in co/extracurricular programs activities that provide opportunities to learn conflict resolution and emotional intelligence (e.g. in the curriculum through well-designed group work tasks),

- time management (e.g. in the curriculum through appropriately-paced assessment tasks), and resilience through constructive feedback of formative assessment.
- 3.6 Implement peer-delivered mental wellbeing programs and events to increase mental wellbeing literacy and awareness of mental illness symptoms. Previous research suggests that a peer-based training model is feasible and has significant and substantial positive impact on mental wellbeing knowledge and help-seeking efficacy.⁴²
 - 3.7 Review existing approaches to academic progress with the aim to develop targeted and timely intervention to support students who demonstrate a potential need for additional support, e.g. failing one unit of study or difficulty in reaching research milestones for HDR students.
 - 3.8 Ensure that new and existing programs are tailored for and accessible to students from diverse backgrounds.
 - 3.9 Embed evidence-based interventions into the curricula and review the engagement, uptake and impact as well as new developments over time.

Measures of success

- Increased options for and engagement with co/extra-curricular activities that promote mental wellbeing knowledge.
- Provision of guidelines are easily accessible for members of the University community to learn more about mental wellbeing and what to do when encountering a mental health crisis or critical incident.
- Evidence of peer-delivered mental wellbeing seminars and evaluation of its impact through pre-post measures of knowledge, attitudes, and help-seeking efficacy.
- Reduced proportion of students failing to achieve academic progress due to mental health difficulties.
- Increased student satisfaction with assessment feedback and group work as evidenced by Unit of Study Surveys.

4. Proactive approach to student needs and integrated delivery of care

Reducing stigma and discrimination and improving knowledge about mental illnesses are key elements of improved help-seeking and will enhance the capacity of the university community to respond effectively to early signs of distress in others.³⁰ Staff and students will be equipped with relevant resources, knowledge, and skills to respond effectively to early signs of distress in themselves and others. Processes will be developed and implemented for alerting and assessing early signs of mental difficulties, with action plans and processes for intervention and follow-up when appropriate.

Information sharing, referral and access pathways will be improved through innovative e-health technologies⁴³ that provide a coordinated campus-wide system for early identification of mental health difficulties and triaged approach to care.

This approach to delivery of care demonstrates our commitment to the University values of openness and engagement.

Objectives

- Use innovative technologies to provide a coordinated campus-wide system that enables early identification of mental health difficulties.
- Equip staff and students with relevant resources, knowledge, and skills to respond effectively to distress in others.
- Enhance collaboration and knowledge sharing within the University support network and develop wider knowledge and information sharing to ensure integration of care across online and face-to-face platforms.
- Ensure that the University and community responses to distress are timely, coordinated, compassionate and culturally sensitive.

Activities

A staged model of care

- 4.1 Establish formal partnerships and collaborate with service providers and research centres to create an integrated system which offers personalized and seamless support to young people that empowers them to seek help by creating customised health profiles and suggested resources/services. The e-health technology will assist in triaging students and providing immediate, relevant resources and referral pathways.
- 4.2 Establish formal partnerships with service providers to provide immediate first response for students with safety concerns.
- 4.3 Provide online mental wellbeing programs and support (group and individual) through partnership with internal University groups as well as external providers to increase access by students with mental health difficulties who require lower intensive treatment programs.
- 4.4 Establish clear internal and external referral pathways to refer students with mental health difficulties and in crisis to appropriate care providers.
- 4.5 Establish collaboration and integrated knowledge-sharing protocols and procedures between professional and teaching staff with the use of e-technology aiming to provide accurate and timely information, access to relevant University support, and resources, ensuring confidentiality and safe handling of data through staff training on confidentiality and privacy.

Enabling the University community for proactive approach

- 4.6 Expand peer-delivered mental wellbeing seminars and events to disseminate information about responding to peers in crisis.
- 4.7 Collaborate with the Matilda Centre for Research in Mental Health and Substance Use Disorders to develop resources to assist students struggling with problems associated with drugs and/or alcohol.
- 4.8 In addition to the initial training in awareness of strategies for monitoring and referrals related to mental wellbeing outlined in Activity 1.13 (p. 8), facilitate and coordinate provision of the 12-hour Standard Mental Health First Aid students and staff of the university and related organisations such as, but not limited to, USU (in first year and ongoing). This program will be offered to a network of students and staff across the University who require Mental Health First Aid skills. Mental Health First Aid is a standardised educational program developed to combat mental health problems and suicide in the general public by increasing mental health literacy, improving attitudes/reducing stigma and stimulating helping behaviours. Consistent findings from multiple high-quality scientific studies demonstrate that Mental Health First Aid significantly improves knowledge and help-seeking behaviours.⁴⁴ Work with Heads of school and unit directors and heads to identify staff and students who are best candidates for training, and develop approaches to monitoring and maintaining Mental Health First Aid skills across the University. Explore options for provision of training through SUSF.
- 4.9 Develop relationships with a range of care providers for international students, Aboriginal and Torres Strait Islander students, LGBTQIA+ students, students with disability, students with caring responsibilities, and students affected by sexual violence.

Measures of success

- Evidence of partnerships with key service providers and research centres.
- Evidence of an established Online Mental Wellbeing e-mental health system that promotes mental wellbeing, streamlines triaging processes and enables improved responsiveness to students with mental health difficulties or mental illness crises.
- Evidence of collaborations with additional service providers supporting safety and mental wellbeing.
- Evidence of protocols and procedures established to facilitate collaboration between University professional and teaching staff.

- Increased availability and take up of training such as Mental Health First Aid training and improvement in self-reported knowledge of mental illnesses and self-efficacy in responding to signs of mental ill-health.
- Evidence of relationships with community organisations to support students from diverse backgrounds.
- Evidence of efficient and timely referrals to appropriate University and external services including reduced waiting time for services.
- Evidence of availability and uptake of online mental wellbeing programs for students.
- Availability and attendance of peer-delivered mental wellbeing seminars on detecting and responding to others in mental distress.

5. Individual progress planning and crisis intervention

A seamless continuum of care will be facilitated through coordinated and collaborative processes across campuses, with a network of community services to support students with acute and complex mental health concerns. The University will take proactive steps to collaborate with external providers to support students with mental health difficulties and mental illness and will work with these providers to support return to study when appropriate.

This approach to delivery of care demonstrates our commitment to the University values of diversity and inclusion, and openness and engagement.

Objectives

- Identify and proactively support students who experience barriers to access treatment.
- Develop coordinated and collaborative processes across campuses and with a network of community services to support students experiencing mental health difficulties and mental illness, including support for students affected by sexual violence.
- Review and coordinate risk management protocols to support students with acute mental health crisis or mental health difficulties.
- Create proactive interventions for specific cohorts of students with identified mental wellbeing concerns.

Activities

An effective and proactive response system

- 5.1 Support a successful individual progress planning approach through the design and implementation of organisational structures and systems that allow for streamlined access to the multi-faceted mental wellbeing activities, programs, support services, policy and procedures available within the University ecosystem.
- 5.2 Review and implement revised student critical incident procedures, including procedures applying to students on mobility programs and/or placements.
- 5.3 Establish service agreements and effective working relationships with external services (e.g. headspace) to create a shared understanding of each other's roles and responsibility, demonstrating commitment to collaborate, and work on a shared plan of care.
- 5.4 Establish guidelines with external service providers to support students to take leave and to return to study after absence relating to mental health difficulties or illness.

Programs supporting effective management

- 5.5 Review and clarify guidelines and programs to support staff and students dealing with critical incidents.
- 5.6 Continue and increase availability of post-intervention support for staff and students who routinely assist individuals experiencing mental health crisis.
- 5.7 Develop evidence-informed support and intervention programs for student cohorts, including HDR students, at higher risk of poor mental wellbeing to increase mental wellbeing awareness and promote resilience skills.
- 5.8 Improve outreach support programs for students located on satellite and rural campuses.

- 5.9 Review and improve current models and levels of service provision at the University counselling service.

Measures of success

- Evidence of working service agreements with external providers.
- Establishment of guidelines to support students return to study from absence relating to mental health difficulties.
- Evidence of increased post-intervention support and outreach support programs, and evaluation of effectiveness through feedback survey.
- Evidence of increased support offered to cohorts with higher risk of poorer mental wellbeing (e.g. international students³², Aboriginal and Torres Strait Islander students, LGBTQIA+ students, postgraduate research (HDR) students⁴⁵, students with disability, students with caring responsibilities and students affected by sexual violence).
- Improved rate of students returning to study following suspension due to mental illness.
- Establishing and maintaining appropriate ratio of mental health professionals to students.

6. Research, innovation and evidence-informed action

Research, innovation and evidence-informed action underpin every element of the framework, ensuring continued monitoring and development of effective and sustainable strategies. We will undertake rigorous and systematic evaluation of interventions and services to guide the formulation of mental wellbeing practices and policies and contribute to the relevant fields of research.

This approach to research and evidence-informed action demonstrates our commitment to the University value of respect and integrity.

Objectives

- Establish the University of Sydney as an engaged and innovative educational and research institution that is committed to delivering evidence-based, effective and sustainable strategies.
- Integrate research and evidence-informed action as business-as-usual in implementation of the Student Mental Wellbeing Strategy.

Activities

A research-informed practice model

- 6.1 Establish a steering committee and an advisory group consisting of world-leading University of Sydney experts to ensure research and innovation contribute evidence to guide formulation of mental wellbeing policies and practices.
- 6.2 Formalize and facilitate collaboration between research and clinical expertise of staff in support services.

A commitment to evaluation and dissemination of learning

- 6.3 Trial and evaluate the effectiveness, acceptability and feasibility of initiatives within the education setting over two and three-years cycle.
- 6.4 Disseminate research on evaluated sector-wide good practice through published literature, knowledge exchange platforms, and conferences on university mental health.
- 6.5 Undertake rigorous and systematic evaluation of interventions and services to continuously guide the formulation of mental wellbeing practices and policies.
- 6.6 Establish evidence-informed criteria to evaluate all University mental wellbeing programs, with a focus on rigorous empirical design in data collection, analysis and dissemination of epidemiological information.³⁴

Measures of success

- Evidence of engagement, evaluation, and research-informed guidance provided by the Student Mental Wellbeing Steering Committee and the Student Mental Wellbeing Advisory Group.
- Design and implementation of future mental wellbeing strategies based on systematic evaluation of strategic activities with baseline and post-intervention measurements.
- Policy development and review draws from data collected from previous activities to enhance outcomes for student experience and the wider university community.
- Evidence of processes that facilitate staff in engaging with and contributing to the mental wellbeing at the University.
- Establishment of an in-built evaluation framework to drive design and approval of new initiatives and programs.
- Recognition of the University as a leader in research and best practice in mental wellbeing.

Enablers of Mental Wellbeing

A whole-of-University approach to mental wellbeing requires commitment to ongoing review and improvement, embedded across the whole institution and evident in practice, processes, behaviours and culture.³⁴ The following enablers will underpin the successful implementation of the Strategy.

Innovative and evidence-based use of e-technology

Project Synergy (being delivered by InnoWell Pty Ltd, a joint venture between the University of Sydney and PwC [Australia]) provide an e-mental health system that harnesses new technologies to provide an integrated mental health care system.⁹ Recent research indicates that the e-technology offers personalized and seamless support to young people, empowering them to seek help by creating customised health profiles and facilitating referral to relevant resources and services.⁹ The e-health technology assists in forming a coordinated campus-wide system that enables early identification of changes in mental wellbeing, alerting support services and providing assistance with case-management. The online mental health platform also assists mental health professionals by fast-tracking assessment and providing immediate and relevant referral pathways and resources. To continue establishing the University of Sydney as a leading research and educational institution that undertakes globally relevant and beneficial research, we will partner with the Matilda Centre for Research in Mental Health and Substance Use, the Brain and Mind Centre, InnoWell and Project Synergy and other services providers such as Sonder Australia to provide coordinated and evidence-based care for our students. Insights gained through analysis of the data that is provided through these platforms will inform further initiatives and enable adjustments to the provision of care tailored to student needs.

The University of Sydney will also encourage collaboration and dissemination of learning between research and practice and embed rigorous and systematic evaluation of services and interventions. This will allow research and innovation to shape the formulation of wellbeing enhancing policies and practices across the organisation.

Student voice and student engagement through partnership

One of four key components of empowering students with mental health difficulties, as identified by the World Health Organisation (WHO), is the autonomy agency in decision-making. Student-institutional partnerships are essential to creating a meaningful and impactful change on student mental wellbeing. Hence, forming such a partnership optimizes four psychosocial constructs of self-efficacy, belonging, emotional regulation and wellbeing.⁴⁶

Empowering students to participate in shaping the University approach to mental wellbeing means that we must seek to understand the beliefs, insights, needs and experiences of our

students. The student voice is a vital element in the evidence base, alongside other research, and by synthesizing and triangulating available evidence, interventions and strategies can be more targeted, relevant and effective.

To date, through the Student Experience Program, the University has consulted 9,954 students through range of methods. Partnering with students also involves strengthening relationships with student-led and student-facing organisations who enhance the student experience through co-/extra-curricular activities, facilities, training and resources and can provide insights into student needs for mental wellbeing. For example, USU's orientation events and transitional support can enhance commencing students' sense of belonging through socialization and acculturation, and clubs and societies provide important forums for peer engagement in the university. SUSF's provision of sport facilities and activities are crucial in supporting a holistic approach to mental wellbeing. Their capacity for delivering first-aid training and potential delivery of Mental Health First Aid is a key component of enhancing physical safety and mental wellbeing resources at the University. The SRC and SUPRA provide essential advice directly to students through caseworker support; the SRC supports the student voice and sense of community through their collectives and the weekly student newspaper. These organisations contribute to a vibrant campus community that contributes to student mental wellbeing.

In future, the process of student engagement through partnership, where students and the institution form joint decision-making on both process and outcomes, will be facilitated through effective partnerships with student groups and will be coordinated by the Pro-Vice Chancellor (Student Life) in the Deputy Vice-Chancellor (Education) Portfolio. The approach will be informed by the Advance Higher Education Framework on "Student Engagement through Partnerships", which although mainly concerned with curriculum design and pedagogy, is recognised across the higher education sector as best evidenced-informed approach.⁴⁷

New operating model to deliver cohesive, integrated, and inclusive support services

Ensuring a cohesive and holistic approach to mental wellbeing across the organisation is essential to avoid misunderstanding between support services teams and inconsistencies in the design and delivery of interventions. Improved digital infrastructure and a re-envisioned student-centric support services model will focus on clear and effective communication that result in students receiving consistent messages, a cohesive vision, and timely treatment. This includes improved access to direct support within the faculties and schools. Additionally, a re-envisioned support services model, underpinned by e-technology and fit-for-purpose digital infrastructure, will provide a coordinated response and an effective triage system to ensure students reach the most appropriate services. The cohesive model must be then supported across the university to bridge the gaps between support service teams, academic teams and other professional services.

Building effective relationships with external service providers (e.g. headspace) is also an important enabler for a university community focused on promoting mental wellbeing. Collaboration between organisations is necessary to ensure that individuals receive consistent, safe, effective, integrated care and support. Good practice, particularly in the case of acute and complex mental illnesses, is to mobilize all the support available to an individual. This practice will be built into the re-envisioned support services model and will be facilitated through e-technology and an effective digital infrastructure.

Students may face additional barriers to mental wellbeing due to their background, aspects of identity, mode and level of study, or relationship to their campus and university. A student's unequal experience of challenges can exhaust even higher levels of resources, resilience and self-management skills. This means that we need greater understanding of the needs of specific student cohorts so that targeted support, evidence-based where possible, can be provided. This will involve training and education for staff and students provided by University support services to develop cultural literacy, including cultural safety, and the delivery of additional interventions specific to the inequality individual students might face.

In addition to culturally safe university support services, it is important for students to experience an inclusive and safe environment. We aim to promote a welcoming and safe culture that can assist students in building meaningful relationships and feel a genuine sense of belonging at the University. Built into the new operating model for staff training and student support services is a commitment to understanding a range of needs and experiences of student populations, aiming to develop specific interventions that enable meaningful connections and the promotion of mental wellbeing for specific student groups, including international students, Aboriginal and Torres Strait Islander students, LGBTQIA+ students, students with disability, and students with caring responsibilities.

The University of Sydney is also committed to ensuring that curriculum design takes a holistic and inclusive view of learners, using evidence-informed practice and scaffolding to enable all students to develop knowledge, skills and academic self-efficacy. Similarly, the University is also committed to ensuring staff are well-equipped to promote and support inclusive learning environments for all students where diversity of identity and experience is welcomed and valued. This follows from our vision to frame each part of the student life to support the mental wellbeing of all students and enable them to thrive and flourish.

Implementation and Evaluation

The Student Mental Wellbeing Advisory Group will have the responsibility for monitoring implementation and the periodic evaluation of this strategy. The Advisory Group will consist of University students, staff, world-leading experts in mental wellbeing, and key University stakeholders. This process will be led by the Pro Vice-Chancellor (Student Life) and overseen by the Deputy Vice-Chancellor (Education).

For detail of the implementation plan, see Appendix 2.

Acknowledgement of Expert Advice

The Office of the Deputy Vice-Chancellor (Education) would like to recognise and thank the following individuals and organisations who contributed to the development of this strategy:

Tracey Davenport, Director of Research, Project Synergy Research & Development Group
Professor Ian Hickie, Co-Director, Health and Policy
Brain and Mind Centre

Professor Nick Glozier
Central Clinical School | Brain and Mind Centre
Faculty of Medicine and Health

Professor Caroline Hunt
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Professor Maree Teesson, Centre Director
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Matilda Centre for Research in Mental Health and Substance Use

Associate Professor Megan Williams (Wiradjuri), Research Lead and Assistant Director
Associate Professor Christine Evans (Wiradjuri)
National Centre for Cultural Competence

Associate Professor Peter McCallum
Registrar and Academic Director, Education Policy and Quality

Professor Tim Soutphommasane, Director
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Ms Julia Cohen, Director
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Mark Try, Director
Student Support Services

University of Sydney Union (USU)

Students' Representative Council (SRC)

Sydney University Postgraduate Representative Association (SUPRA)

Sydney Uni Sport & Fitness (SUSF)

We would also like to thank the following individuals for their contributions:

Janice Tang (Research Assistant, Student Experience Program), Lydia Dutcher (Program Manager, Student Life), Karen Allen (Stream Lead, Access to Essential Support Services, Student Experience Program), Amber Colhoun (Program Manager, Access to essential Support Stream, Student Experience Program), Kim Burdett (Stream Lead, Experience Design & QI, Student Experience Program), and Tristan Enright (Stream Lead, Learning Experiences, Student Experience Program).

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CRICOS 00026A

¹ World Health Organization. (2001 a). *Strengthening mental health promotion*. Geneva: World Health Organization. (Fact sheet, No. 220).

² Huppert, F.A., & So, T.T.C. (2013). Flourishing across Europe: application of a new conceptual framework for defining well-Being. *Social Indicators Research 110*, 837–861. DOI: 10.1007/s11205-011-9966-7

-
- ³ Keyes, C.L.M. (2005). Mental illness and/or mental health? Investigating axioms of the complete state model of health. *Journal of Consulting and Clinical Psychology* 73(3), 539–548. DOI: 10.1037/0022-006X.73.3.539
- ⁴ Ryan, R.M., & Deci, E. L. (2001). On happiness and human potentials: a review of research on hedonic and eudaimonic well-being. *Annual Review of Psychology*, 52(1), 141-166. DOI: 10.1146/annurev.psych.52.1.141
- ⁵ World Health Organisation. (2001b). *Mental health: New understanding, new hope. The World Health Report*. Geneva, Switzerland: World Health Organization. Retrieved from <https://www.who.int/whr/2001/en/>
- ⁶ Hughes, G. & Spanner, L. (2019). *The University Mental Health Charter* [pdf file]. Retrieved from the Student Minds website: <https://www.studentminds.org.uk/charter.html>.
- ⁷ Australian Government, Department of Education and Training (2018). Release of the Final Report – Improving retention, completion and success in higher education. Retrieved from <https://www.education.gov.au/news/release-finalreport-improving-retention-completion-and-success-higher-education>
- ⁸ Brooker, A., McKague, M., & Phillips, L. (2019). Implementing a whole-of-curriculum approach to student wellbeing. *Student Success* 10(3), 55-63. DOI: <https://doi.org/10.5204/ssj.v10i3.1417>
- ⁹ Hickie, I.B., Davenport, T.A., & Burns, J.M. (2019). Project Synergy: co-designing technology-enabled solutions for Australian mental health services reform. *Medical Journal of Australia* 211(7 Supp).
- ¹⁰ Gore, F.M., Bloem, P.J.N., Patton, G.C., Ferguson, J., Joseph, V., Coffey, C., Sawyer, S.M., & Mathers, C.D. (2011). Global burden of disease in young people aged 10–24 years: a systematic analysis. *The Lancet*, 377(9783), 2093-2102. DOI: 10.1016/s0140- 6736(11)60512-6
- ¹¹ Mission Australia & Black Dog Institute. (2017). *Youth Mental health report: Youth survey 2012-2016*. Retrieved from https://blackdoginstitute.org.au/docs/default-source/research/evidence-and-policy-section/2017-youth-mental-health-report_mission-australia-and-black-dog-institute.pdf?sfvrsn=6
- ¹² Ryan, R.M., & Deci, E.L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American Psychologist* 55(1), 68-78. DOI: 10.1037/10003-066X.55.1.68
- ¹³ Kraut, R. (2009). *What is good and why: The ethics of well-being*. London: Harvard University Press.
- ¹⁴ Tsouros, A., G. Dowding, J. Thompson and M. Dooris (1998). "Health Promoting Universities: Concept, experience and framework for action."
- ¹⁵ University of British Columbia (2015). *Okanagan Charter: An International Charter for Health Promoting Universities and Colleges*. Vancouver, Canada, University of British Columbia.
- ¹⁶ The University of Sydney. (2011). *University's Strategic Plan 2011-2015 Green Paper*.
- ¹⁷ The University of Sydney. (2014). *Student Wellbeing Report*. Student Wellbeing Working Group.
- ¹⁸ The University of Sydney. (2018). *A Strategy for the Student Experience at the University of Sydney*. DVC Education.
- ¹⁹ The University of Sydney. (2019). Vision and values. Retrieved 13 December 2019, from <https://sydney.edu.au/about-us/vision-and-values.html>
- ²⁰ Prevention United. (2019). Mental health versus mental illness. Retrieved from <https://preventionunited.org.au/prevention-basics/mental-health-versus-mental-illness/>.
- ²¹ Seligman, M. (2018). PERMA and the building blocks of well-being. *The Journal of Positive Psychology* 13(4), 333-335. DOI: 10.1080/17439760.2018.1437466
- ²² Teesson, M., Slade, T., & Mills, K. (2009). Comorbidity in Australia: findings from the 2007 National Survey of Mental Health and Wellbeing. *Australian and New Zealand Journal of Psychiatry* 43(7), 606-614. DOI: <https://doi.org/10.1080/00048670902970908>
- ²³ Baik, C., Larcombe, W., Brooker, A., Syn, J., Allen, L., Brett, M., & James, R. (2016). *Enhancing Student Wellbeing: A framework for promoting student mental wellbeing in universities* [pdf document]. Retrieved from www.unistudentwellbeing.edu.au.
- ²⁴ Commonwealth of Australia. (2017). *National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing*. Canberra: Department of the Prime Minister and Cabinet.
- ²⁵ Petrie, K., Joyce, S., Tan, L., Henderson, M., Johnson, A., & Nguyen, H., Modini, M., Groth, M., Glozier, N., & Harvey, S.B. (2017). A framework to create more mentally healthy workplaces: A viewpoint. *Australian & New Zealand Journal of Psychiatry* 52(1), 15-23. DOI: 10.1177/0004867417726174

- ²⁶ Canadian Association of College and University Student Services and Canadian Mental Health Association. (2013). *Post-Secondary Student Mental Health: Guide to a Systemic Approach*. Retrieved from https://www.cacuss.ca/files/Resources/P4_PSSMH.pdf.
- ²⁷ Hickie, I.B. (2019). Moving beyond stepped care to staged care using a novel, technology-enabled care model for youth mental health. *The Medical Journal of Australia* 211(9), 404-405. DOI: 10.5694/mja2.50379
- ²⁸ Hickie, I.B., Scott, E.B., Cross, S.P., Iorfino, F., Davenport, T.A., Guastella, A.J., Naismith, S.L., Carpenter, J.S., Rohleder, C., Crouse, J.J., & Hermens, D.F. (2019). Right care, first time: a highly personalized and measurement-based care model to manage youth mental health. *Medical Journal of Australia* 211(9 Supp).
- ²⁹ Maymon, R., Hall, N.C., & Harley, J.M. (2019). Supporting first-year students during the transition to higher education: the importance of quality and source of received support for student well-being. *Student Success* 10(3), 64-75. <https://doi.org/10.5204/ssj.v10i3.1407>
- ³⁰ Agnew, M., Poole, H., & Khan, A. (2019). Fall break fallout: exploring student perceptions of the impact of an autumn break on stress. *Student Success* 10(3), 45-54. DOI: <https://doi.org/10.5204/ssj.v10i3.1412>
- ³¹ Slavin, S.J., Schindler, D.L., & Chibnall, J.T. (2014). Medical student mental health 3.0: improving student wellness through curricular changes. *Academic Medicine* 89(4), 573-577. DOI: 10.1097/ACM.0000000000000166
- ³² Tang, S., & Ferguson, A. (2014). The possibility of wellbeing: preliminary results from surveys of Australian professional legal education students. *QUT Law Review* 14(1), 27-51.
- ³³ Brooker, A., & Woodyatt, L. (2019). 2019 special issue: Psychological wellbeing and distress in higher education. *Student Success* 10(3), i-vi. DOI: <https://doi.org/10.5204/ssj.v10i3.1403>
- ³⁴ Chadwick, M. (2019). A reflection on harnessing learned optimism, resilience and team growth behaviour in order to support student groups. *Student Success* 10(3), 104-111. DOI: <https://doi.org/10.5204/ssj.v10i3.1410>
- ³⁵ João, K. A. D. R., Jesus, S. N. de, Carmo, C., & Pinto, P. (2018). The impact of sleep quality on the mental health of a non-clinical population. *Sleep Medicine* 46, 69-73. DOI: <https://doi.org/10.1016/j.sleep.2018.02.010>
- ³⁶ Newton, J., Dooris, M. & Wills, J. (2016). Healthy universities: an example of a whole-system health promoting setting. *Global Health Promotion*, 23(1), 57-65. DOI: <https://doi.org/10.1177/1757975915601037>
- ³⁷ Xing, D., & Bolden, B. (2019). Treading on a foreign land: a multiple case study of Chinese international students' academic acculturation experiences. *Student Success*, 10(3), 25-35. DOI: <https://doi.org/10.5204/ssj.v10i3.1406>
- ³⁸ Grüttner, M. (2019). Belonging as a resource of resilience: psychological wellbeing of international and refugee students in study preparation at German higher education institutions. *Student Success*, 10(3), 36-44. DOI: <https://doi.org/10.5204/ssj.v10i3.1275>
- ³⁹ van Agteren, J., Woodyatt, L., Iasiello, M., Rayner, J., & Kyrios, M. (2019). Make it measurable: Assessing psychological distress, wellbeing and resilience at scale in higher education. *Student Success* 10(3), 1-13. DOI: <https://doi.org/10.5204/ssj.v10i3.1411>
- ⁴⁰ Gagnon, M.M., Gelinias, B.L., & Friesen, L.N. (2017). Mental health literacy in emerging adults in a university setting: distinctions between symptom awareness and appraisal. *Journal of Adolescent Research* 32(5), 642-664. DOI: 10.1177/0743558415605383
- ⁴¹ Larsen, T. K., Melle, I., Auestad, B., Haahr, U., Joa, I., Johannessen, J. O., Opjordsmoen, S., Rund, B.R., Rossberg, J.I., Simonsen, E., Vaglum, P., Friis, S., & McGlashan, T. (2011). Early detection of psychosis: positive effects on 5-year outcome. *Psychological Medicine* 41, 1461-1469. DOI:10.1017/S0033291710002023
- ⁴² Gilham, C., Austen, E.L., Wei, Y., and Kutcher, S. (2018). Improving mental health literacy in post-secondary students: field testing the feasibility and potential outcomes of a peer-led approach. *Canadian Journal of Community Mental Health* 37(1), 1-12. DOI: 10.7870/cjcmh-2018-002
- ⁴³ National Mental Health Commission. (2014). *Contributing lives, thriving communities: Report of the National Review of Mental Health Programmes and Services*. Retrieved from <https://www.mentalhealthcommission.gov.au/monitoring-and-reporting/national-reports>
- ⁴⁴ Glozier, N. (2017). *Review of Evidence of interventions to reduce mental ill-health in the workplace*. Gosford, NSW: SafeWork NSW. Retrieved from

https://www.safework.nsw.gov.au/data/assets/pdf_file/0008/360449/SW09006-0518-418530-Review-of-Evidence-of-Interventions-to-Reduce-Mental....pdf.

- ⁴⁵ Scott, H., & Takarangi, M.K.T. (2019). Measuring PhD students' well-being: are we seeing the whole picture? *Student Success* 10(3), 14-24. DOI: <https://doi.org/10.5204/ssj.v10i3.1294>
- ⁴⁶ Kahu, E. R., & Nelson, K. (2018). Student engagement in the educational interface: understanding the mechanisms of student success. *Higher Education Research & Development* 37(1), 58-71. DOI: <https://doi.org/10.1080/07294360.2017.1344197>
- ⁴⁷ Healey M., & Healey, R. L. (2019). Students as partners guide: student engagement through partnership. A guide to the Advance HE Framework. *AdvanceHE*, 1-19. Retrieved from <https://www.advance-he.ac.uk/news-and-views/student-staff-partnership-comes-age>

Appendix 1 Case study – supporting student mental wellbeing during COVID-19

The COVID-19 situation has brought the urgent need for mental wellbeing support into sharp relief across the University and wider community. In response to student needs resulting from the evolving COVID-19 situation, the DVC Education has developed and delivered targeted additional support for impacted students. These initiatives aim to provide targeted support to assist impacted students in overcoming the disruption associated with studying and living off-campus in addition to the usual support services. Initiatives include:

- Drop-in peer support for impacted students throughout the year
- Additional financial support for students through bursaries
- Additional health and wellbeing services. Access to a program of additional wellbeing services, additional remote and on campus counselling support.
- Additional online academic support services (Learning and Mathematics Learning Centres)
- Emergency grant to SRC and SUPRA for any additional legal support needed to resolve student visa and tenancy issues arising as a result of the travel restrictions.

Below, student support initiatives delivered through Student Life are discussed in more detail, including successes, challenges and learnings. These initiatives contribute to the vision set out in the wider Student Mental Wellbeing Strategy.

1. Peer support advising program

Background

The Peer support advising program has been established and delivered for the duration of 2020. Trained Peer Support Advisors have been hired as casual staff members to provide tier 1 support via online consultation to University students through email and Zoom. The team of peer support advisors are students trained in referring students to relevant information, University units and support services and can help students with a range of questions to know where to go to find the right answers, in this time of distress and uncertainty. The peer support advisors can also help students remotely via Zoom sessions. This support is open to all students and the peer support advisors are also fluent Mandarin speakers. University students can contact peer support advisors during the hours of 12noon-7pm (AEST). Peer support advisors are supervised by University staff who can escalate issues of concern to the relevant units.

Enquiries are monitored to identify students potentially at risk. Such instances are referred to the Associate Deans (Student Life) and/or relevant central support units for further, bespoke support. The program is also staffed to include the provision of a clinical psychologist who is fluent in Mandarin to provide counselling and mental wellbeing support to students and Peer Support Advisors as required, a coordinator who oversees day to day delivery and escalation of issues arising, and a supervisor who, as a registered psychologist, supports PSAs in program delivery and training.

Semester 1

Since 19 March 2020:

- 430 enquiries have been received with a turn around time of 24-48 hours
- The team have conducted approximately 280 1:1 zoom calls

In the second half of Semester 1, the PSA team began collaborating with Marketing & Communications to engage with students who have suspended or deferred due to changes to study related to COVID-19. On 19 May, a WeChat group was launched for suspended and deferred students from the Faculty of Science (400 students were invited); 5 PSAs were assigned to monitor this group on a daily basis. The WeChat groups have now expanded to 11 groups with approximately 2550 students. From 28 May short zoom sessions in faculty groups

commenced. Uptake has been extremely positive, for example on 26th June approximately 200 students took part across two sessions.

2. General hardship bursaries – uplift in fund and managerial support in response to increased demand

Background

Students have experienced heightened financial distress due to the bushfires in late 2019-early 2020, followed by the effects of COVID-19. This has resulted in an increase in bursary applications from domestic students, as well as the inclusion of international students in the general bursary scheme. Other financial support schemes provided as a result of COVID-19 such as the travel ban hardship support fund have raised students' awareness of the bursary scheme, thus resulting in a further increase in applications. The general bursaries fund itself has been uplifted through the wider funding supported by FAC. Due to the increased application rate overall, the bursaries area has required additional funding and bolstering to ensure successful delivery and reporting, as well as fair and efficient allocation of funding to students.

Semester 1

Bursaries awarded: 1175 students (up from 821 in the same period last year)

- 634 International students assisted
- 541 Domestic students assisted
- Over 2,500 email enquiries processed

Travel Ban Hardship applications:

- Over 5,000 applications
- Over 2,000 awarded in main round
- Further 2,000 to be reviewed in the current round

In addition to the financial assistance provided to students, ongoing and one-off provision of Coles vouchers has been added to supplement the financial needs of students in meeting essential living expenses. 239 students have received additional assistance through this program.

3. Provision of remote counselling and medical care

Background

In response to COVID-19, Counselling and Psychological Services (CAPS) were required to quickly transition to operating a telehealth approach to service delivery. This required the addition of new contact pathways for students into the service for ease of access to appointments, changes to the administration approach for managing appointments and student contact and changes to the clinical approach and risk management to support students via a new mode of online delivery.

CAPS, the Safer Communities Office, and the University Health Service (UHS) have all provided remote consultations to students located in Australia who are in need of support. CAPS has also provided a Mandarin-language consolidated list of resources and services located in China so that staff can refer international students located in China to local services.

Semester 1

From the beginning of March to end June 2020, 2,865 clinical sessions were held, a 20% increase from the same period in 2019, and the 'show' rate also increased by 8%. The Mental Wellbeing Support Line (MWSL) commenced on 1 February 2020 (formerly known as the University Crisis Line (UCL)) and has now been extended to provide 24/7 support to students experiencing emotional distress. The number of calls received from 26th June 2020 was 552.

4. Partnership with BATYR (Coronavirus Response Initiative) June to December 2020

Background

Batyr (<https://www.batyr.com.au/>) is a youth organisation with a focus on preventative mental health education, delivered in secondary schools and universities. Batyr run programs designed to break down misconceptions and stigma surrounding mental health and help seeking, leading to positive behavioural and attitudinal changes. To date Batyr have reached over 230,000 young people with stories of hope, recovery and resilience.

Programs for the University of Sydney during COVID-19 involve the following:

- digital peer-to-peer stories of hope and resilience to create empathy and empower students to take charge of their mental health;
- provision of engaging, structured content streamed to provide practical tips and education on how students can look out for changes in themselves and each other, increase mental health literacy and inform students on pathways which connect them to services available at a time they need it most;
- focus on increasing help-seeking behaviour and decreasing stigma in the context of mental health;
- provision of engaging content streamed to provide expert advice and guidance for university staff;
- interactive platform to equip staff with skills and confidence on how to support students experiencing mental ill health, and how to look after themselves, particularly through COVID-19;
- digital peer-to-peer events to continue to create community and connection amongst students;
- campaigns targeted to USYD community (e.g. tips on how students can take charge of their wellbeing during exam time);
- Video blogs used to engage with overseas and local students around issues faced by all students during this time;
- Development and facilitation of a safe, secure online student community hub that houses resources (ex. tips for online study), supports student engagement and provides opportunities for connection led by batyr staff.

The engagement with Batyr in 2020 will serve as a pilot that will be evaluated for potential continuation into 2021-2022.

Semester 1/2

Partnership with Batyr commenced in May 2020; planning and engagement work has been undertaken to develop a program of activities, timeline and a communications strategy. The full program (see above) will kick off in Semester 2 during orientation week and continue throughout the semester.

5. Additional online academic support services (Academic Enrichment & Centre for English Teaching) and social support (STAR)

Background

Regular programming of academic support workshops and consultations have been extended and converted to online delivery.

Semester 1

As a result of Covid-19 restrictions both the Learning Centre and Maths Learning schedule pivoted to online delivery for workshops and 1:1 consultations. The total hours of Zoom delivery between 16 March and 1 July 2020 was 1019, with 2608 students reached. Speak and Connect, a series of peer-facilitated workshops designed to help commencing international students meet new friends, practice and develop English language and communication skills, and give useful tips and strategies for connecting at university, was delivered online with extended programming. The STAR Team collaborated with the University Health Service and the Library to deliver sessions for group study, mindfulness and meditation, and other practical skills such as

home cooking and budget management. A calendar of events provided from these units, together with the Library, will be delivered during the semester break to enhance student engagement in this period.

6. SRC & SUPRA Funding

SRC & SUPRA have each been provided with an emergency grant to provide additional legal support needed to resolve student visa and tenancy issues arising as a result of the travel restrictions.

7. Design and pilot: Mental wellbeing app for Chinese students

An app focussing on supporting the mental wellbeing of Chinese students is currently in development by Dr Isabella Choi, a Postdoctoral Research Associate at the Brain and Mind Centre. The personalised mental health risk screening and feedback app aims to support Chinese international students with challenges faced in seeking help for mental health (including stigma, low mental health literacy, and not knowing where to seek help). The app is designed to improve mental health awareness and help-seeking among this group of international students. Given the current uncertain situation and heightened threat to students' mental wellbeing – particularly international students who are separated from family – the timing is opportune to pilot this app as part of the COVID-19 related support for students. The one-year project involves two stages:

- 1) Co-design of the app with international students and building the app (with the view of potentially being compatible with myuni in the future);
- 2) Pilot testing the app to test whether it improves help-seeking attitudes and intentions for international students.

The design and pilot involve a collaboration with the Peer support advisors; this group is primarily made up of international students from China who are well placed for recruitment to participate in voluntary co-design workshops.

Semester 1/2

The app has been in the planning and development phases throughout Semester 1, with a pilot program planned for Semester 2.

8. Other activities

The Student Life team has provided training and professional development for staff working across the initiatives in this document as well as staff working in related initiatives in other units. This training covers topics such as maintaining appropriate boundaries, risk mitigation, communicating with empathy, and appropriate escalation procedures in cases of critical incidents.

Key outcomes and learnings

COVID-19 has presented ongoing challenges due to the uncertainty and stress associated with this difficult situation. The situation has required near-constant innovation and greater precision in program delivery, reporting, evaluation, and iterative development. Key challenges include coordination of communication to students across teams in an environment of information overload, adapting existing systems quickly and effectively, and meeting the ever-changing and emergent needs of students.

Through delivery of the above programs and initiatives, the Student Life team has used resulting data to evaluate these new and adapted programs to determine optimal next steps for Semester 2, including identifying support needs for specific cohorts through the transition to Semester 2 and beyond. Student Life has developed new collaborative relationships across delivery units to use resources more effectively and draw upon the strengths in different teams. From the beginning, new programs are designed to be adaptable to new direction in the spirit of a proactive response to student needs. Now more than ever, we can see the importance of new approaches that are built on collaboration and ease of navigation for students. We intend for the challenges of the COVID-19 period and formal evaluation of approaches taken to inform implementation of the Student Mental Wellbeing Strategy.

Appendix 2 Implementation plan and priority activities

Short-term (commencing and/or completed 2020)

What (activities)	How	Who	Status/timing
<p><i>Project management</i> Establish the project management and governance infrastructure for the strategy implementation (see Activities 6.1, 6.2)</p>	<ul style="list-style-type: none"> Develop a PMP, including risk management plan, implementation plan, dependencies, governance, change management and communications plans, financial planning and review process Establish a steering committee and advisory group consisting of experts from internal research centres and student support staff 	Program Manager (Student Life)	Complete by end 2020
<p><i>Student financial support</i> Further coordinate and streamline access to financial assistance based on need (see Activity 1.6)</p>	<ul style="list-style-type: none"> Update bursary website with clearer criteria Set up protocol for emergency financial assistance Review and streamline existing reporting and administrative processes 	PVC (Student Life)	Complete by end of 2020
<p><i>Student engagement and mental wellbeing literacy</i> Provide resources and programs to build students' knowledge and skills for mental wellbeing, including peer-facilitated programs (Activities 1.16, 2.3, 3.1, 3.2, 3.3, 3.4, 3.6)</p>	<ul style="list-style-type: none"> Create partnerships with student organisations and support units to develop and promote student engagement opportunities related to mental wellbeing and health Use learnings from COVID19 to strategically deliver in f2f and online modes Continue to participate actively in Mental Health Month, R U OK? Day and other events 	PVC (Student Life)	In progress Complete by end of 2021
<p><i>Enhance the student transition experience</i> Continue the work of designing and implementing a whole-university approach to transition for undergraduate, postgraduate and higher degree by research (HDR) students (Activities 1.9, 1.10, 1.14, 3.5, 3.9)</p>	<ul style="list-style-type: none"> Piloted transition units for first year UG students Commence pilot for PG/HDR Embed activities in all first-year education (coursework) and research education (HDR) programs that aim to promote mental wellbeing Identify further opportunities for transition support across the student journey 	PVC (Educational Innovation) Student Experience Program	In progress Complete by end of 2021

<p><i>Implementation of operating model (Health & Wellbeing)</i> Review and improve current models and levels of service provision at the University counselling service (see Activity 5.9)</p>	<ul style="list-style-type: none"> Implement new operating model (Health & Wellbeing), including enabling technology for appointment booking and referral 	<p>Student Experience Program</p>	<p>In progress Completed by end 2021</p>
<p><i>Promote co-curricular activities for students</i> Promote opportunities for student engagement in co-curricular activities, including social interaction, sport, and other (see Activities 1.16, 1.17, 1.18, 2.2)</p>	<ul style="list-style-type: none"> Strengthen partnerships with SUSF, USU, faculties and schools to facilitate access and support student participation in clubs, societies, and physical activities 	<p>PVC (Student Life)</p>	<p>In progress Completed by end of 2022; monitor ongoing progress</p>
<p><i>Policy development</i> Continue to undertake review and development of policies relevant to mental wellbeing (see Activities 1.1, 1.2, 1.8, 5.2)</p>	<ul style="list-style-type: none"> Conduct audit of relevant policies, including special consideration, progression, communication to students, and critical incidents Undertake policy review and revision 	<p>Registrar and Academic Director (Education) PVC (Student Life)</p>	<p>In progress Complete by end 2022</p>
<p><i>Meet the needs of students from diverse backgrounds</i> Ensure that the needs of students from diverse backgrounds and student cohorts at higher risk are addressed and incorporated in evidence-based design and implementation of interventions and programs (See Activities 2.1, 2.4, 3.8, 4.9, 5.7)</p>	<ul style="list-style-type: none"> Consult with the advisory group on the needs of students from diverse backgrounds and at-risk cohorts Collaborate with WPO and Educational Innovation to design, pilot and deliver a suite of programs to support participation of students from low SES backgrounds Identify and implement priority actions 	<p>PVC (Student Life)</p>	<p>Commencing planning in 2020 Complete by end of 2022</p>
<p><i>Establish a centrally-coordinated mentoring program</i> Enhance and coordinate support for existing peer mentoring and peer-assisted learning programs and establish University-wide peer mentoring and peer-assisted learning programs to support students from diverse backgrounds identified as being at risk (see Activity 2.5)</p>	<ul style="list-style-type: none"> Work with ICT to identify and pilot suitable peer mentoring software platform Create central administration structure for logistics Integrate delivery in programs for specific cohorts (e.g. Dalyell, students from low SES backgrounds) 	<p>PVC (Student Life) Student Experience Program</p>	<p>**funding contingent Commencing 2020 Complete by end 2022</p>

Medium-term (completed end of 2022)

What (activities)	How	Who	Status/timing
<p><i>Design and implementation of e-health technology</i> Establish formal partnership to create an integrated e-health system that provides relevant resources and assists with individual progress planning (see Activities 4.1, 4.5)</p>	<ul style="list-style-type: none"> • Co-design of an e-health technology platform in partnership with a third-party provider 	<p>PVC (Student Life)</p> <p>Student Experience Program</p>	<p>**funding contingent</p> <p>End of 2022</p>
<p><i>Staff and student engagement and mental wellbeing literacy</i> Build staff capability in understanding their role in student mental wellbeing and appropriate referrals. Establish a single 'source of truth' for staff and students and provide training on these processes (see Activities 1.12, 1.13, 1.15, 4.4, 4.6, 4.8, 5.5, 5.6)</p>	<ul style="list-style-type: none"> • Professional development to build knowledge of mental wellbeing and appropriate referrals • Provision of Mental Health First Aid training to staff and students, as relevant to their roles • Development of clear protocols, procedures and referrals • Expand peer-delivered mental wellbeing seminars to provide information about responding to peers in crisis 	<p>PVC (Student Life)</p>	<p>**funding contingent</p> <p>End of 2022</p>
<p><i>Support student wellbeing via assessment and academic progression</i> Review assessment and academic progression procedures to identify opportunities to support the wellbeing of students and staff (see Activities 1.11, 3.7)</p>	<ul style="list-style-type: none"> • Evaluate opportunities to reduce stress via adjustments to assessment procedures and timeframes • Review approaches to academic progression and support for students at risk 	<p>PVC (Educational Innovation)</p> <p>Registrar & Academic Director (Education)</p> <p>Student Experience Program</p>	<p>Commencing 2021</p> <p>Completed end of 2022</p>
<p><i>Lower-intensive online treatment programs</i> Provide online mental wellbeing support for students with mental health difficulties who require lower intensive treatment programs (see Activities 4.3, 4.7)</p>	<ul style="list-style-type: none"> • Identify appropriate partners (internal and external) and programs for these students • Consult with the Matilda Centre via the advisory group 	<p>PVC (Student Life)</p>	<p>Completed by end of 2022</p>

Long-term (completed end of 2023 and beyond)

What (activities)	How	Who	Status/timing
<p><i>Support students via physical space and infrastructure</i> Enhance student facilities to ensure access to green space, end-of-trip facilities, healthy food options, collaborative learning space. Ensure accessibility for SWD. Provide advice and options for safe and affordable housing (see Activities 1.5, 1.7, 2.6, 2.7)</p>	<ul style="list-style-type: none"> • Complete walking tour and audit of campus facilities with the UI/COS St Exp Working Group • Identify priority areas for upgrade • Allocate projects to relevant units 	<p>PVC (Student Life)</p> <p>UI/COS & Student Experience Strategy Working Group</p>	<p>**funding contingent</p> <p>Completed in phases by end of 2023</p>
<p><i>Provide first-response software platform</i> Establish formal partnerships with service providers to provide immediate first response for students with safety concerns (see Activity 4.2)</p>	<ul style="list-style-type: none"> • Review current provider (Sonder) for international students with Allianz as health insurance provider • assess whether to scale up service provision to a larger cohort 	<p>PVC (Student Life)</p> <p>Student Experience Program</p>	<p>**funding contingent</p> <p>End of 2023</p>
<p><i>Implement an individual progress plan approach</i> Support a successful individual progress plan approach through the design and implementation of organisational structures and systems that allow for streamlined access to the multi-faceted mental wellbeing activities, programs, support services, policy and procedures available within the University ecosystem (see Activities 5.1, 5.4)</p>	<ul style="list-style-type: none"> • Develop a protocol for an individual progress plan approach, including associated policy revisions; consolidation of support in the University ecosystem that is visible to students and staff; implementation of e-health technology 	<p>PVC (Student Life)</p>	<p>Completed by end of 2023</p>
<p><i>Improve mental wellbeing support on satellite and rural campuses</i> Improve outreach support programs for students located on satellite and rural campuses (see Activity 5.8)</p>	<ul style="list-style-type: none"> • Analyse needs of students on satellite & rural campuses with the advisory group; identify and implement priority projects 	<p>PVC (Student Life)</p>	<p>End of 2023</p>
<p><i>Evaluate and develop activities in the strategy</i> Undertake rigorous and systematic evaluation of interventions and services to continuously guide the formulation and implementation of mental wellbeing practices and</p>	<ul style="list-style-type: none"> • With the advisory group, establish evidence-informed criteria to evaluate all University mental wellbeing programs, with a focus on rigorous empirical design in data collection, analysis and dissemination of epidemiological information. 	<p>PVC (Student Life)</p>	<p>End of 2023 and beyond</p>

<p>policies. Disseminate research on evaluated sector-wide good practice (see Activities 6.3, 6.5, 6.6)</p>	<ul style="list-style-type: none"> • Develop best-practice procedures for design and implementation of new programs and interventions. 		
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