

# Campus Suicide Prevention Initiative

2020-2022  
Final Report

June 2022

**HEALTHY  
MINDS**

**HEALTHY  
CAMPUSES**

creating connections. inspiring change.



Canadian Mental  
Health Association  
British Columbia  
*Mental health for all*



University  
of Victoria

Canadian Institute for  
Substance Use Research

# 1. Introduction

In December 2020, the Canadian Mental Health Association's BC Division (CMHA BC), in partnership with BC's Ministry of Mental Health and Addictions (MMHA), invited publicly-funded post-secondary institutions (PSIs) in BC to submit proposals regarding engagement in campus suicide prevention initiatives focused on student populations. The overall goal of this project was to improve the mental health literacy and well-being of campus communities. The Healthy Minds | Healthy Campuses (HM|HC) Support Team at CMHA BC and the Canadian Institute for Substance Use Research (CISUR) provided stewardship and on-demand technical assistance to support post-secondary institutions with their initiatives throughout the duration of the grant project.



# GOALS

## 2. Project Goal

The intent of this project was to enhance the mental health and well-being capacity of PSIs in developing and implementing new or expanded campus suicide prevention frameworks and strategies with assistance from the HM|HC community of practice network. To achieve that, the post-secondary institutions used some or all of the following strategies:

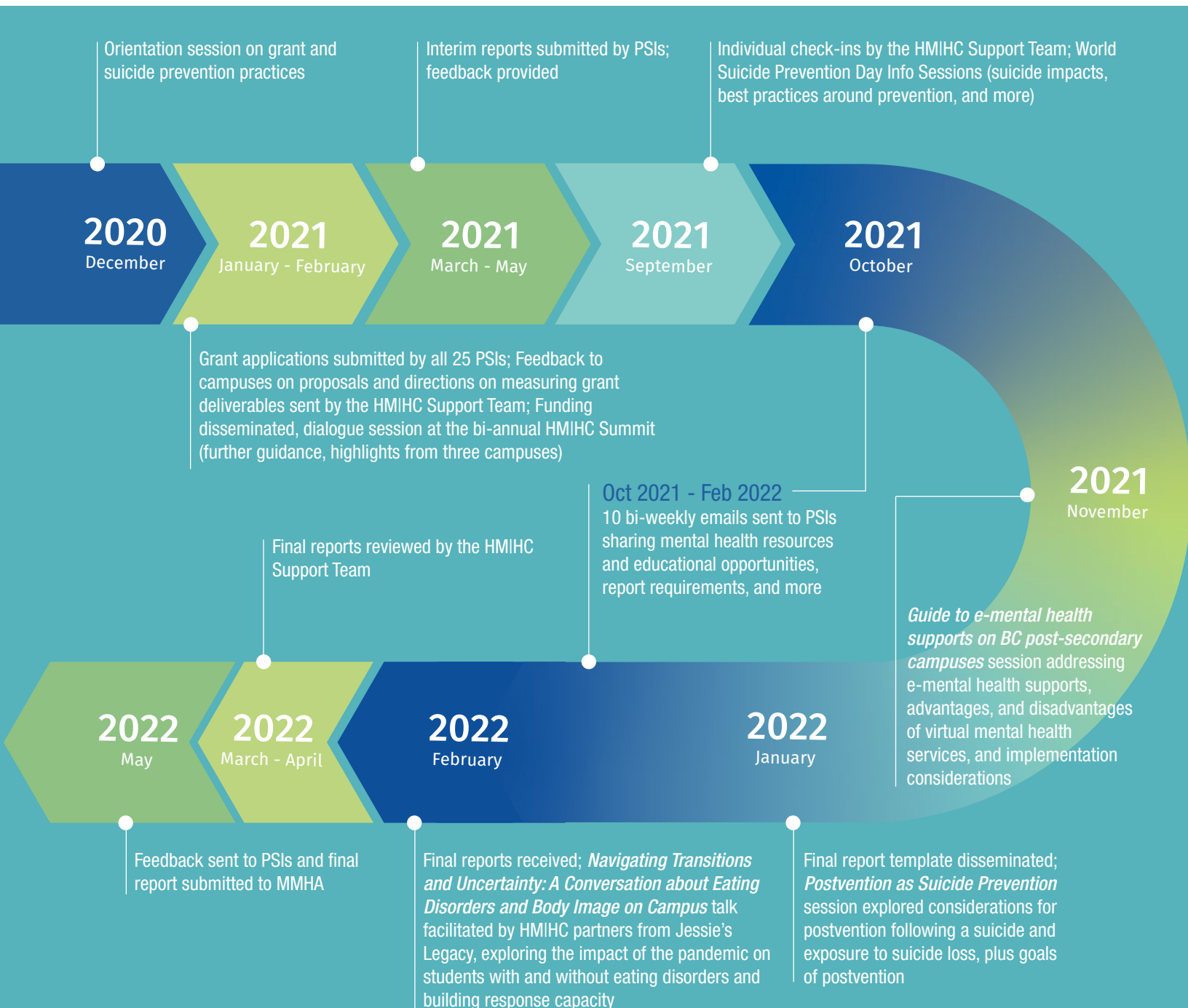
- environmental scans to identify needs and opportunities
- collective campus learning
- increased access to educational opportunities and clinical services
- collaboration across departments, with other campuses, and external partners
- relationship building
- community building
- expanding the network of care around students and community

# 3. Background

## 3.1. Context and timeline

The Campus Suicide Prevention initiative began formally in December 2020 when CMHA BC sent out a notice of funding to all 25 public PSIs in British Columbia through the HM|HC e-newsletter and the BC Council of Senior Student Affairs Leaders mailing list. CMHA BC created the application form and Granting Guidelines which went out with the funding notice.

HM|HC provided stewardship and on-demand technical assistance to support institutional initiatives throughout the duration of the grant project. The following is a summary of support provided:





### 3.2. Reassessments

Due to unforeseen circumstances, in particular the COVID-19 pandemic, some PSIs had to postpone or cancel their initial plans. They communicated the delay in their timelines to our team and requested extensions. Out of 25 PSIs involved in the project, 13 requested an extension, budget adjustment, or both due to delays in programming and use of funds. Some of the reasons for an extension and budget adjustment included:

- various public health orders
- staff turnover
- climate disasters (e.g., campus closure because of flooding or heavy snow)
- changes in program/salary/benefit costs

For those requesting extensions, addendums were made and signed by both CMHA BC and the PSI for the extended period. New project end dates were provided for the PSIs. The deliverables remained the same as outlined in Schedule A in their initial contract. An addendum or update to the final report was requested for submission 30 days after the extension deadline. The extensions varied from 3 months to 10 months (new due dates: May 31 to December 31, 2022).



## 4. Project Description

### 4.1. Key activities and engagement strategies

All PSIs provided educational opportunities and training activities for students and staff to raise mental health and, in particular, suicide awareness. Some of these activities included the development of their own mental wellness programs, curricula, frameworks or guides, and other supporting materials. Key activities are detailed below:

#### Preliminary activities

- environmental scans
- reviewing mental health/suicide awareness literature
- implementing needs assessments
- reviewing mental health policies
- creating committees and steering groups



#### Educational opportunities/ intervention programs

- workshops, webinars, and educational programs such as Thriving in Action (resilience program), Talk to Me (connection program), The Inquiring Mind, Peer Mentorship Program, Naloxone training, Supporting Survivors, Consent and Sexual Violence
- online or face-to-face courses such as the LivingWorks suite of courses: Start, safeTALK, ASIST, suicide to Hope
- mental health consultations
- health promotion videos
- Wellness Lounge (physical space dedicated to connection and wellness)
- regular self-care sessions
- weekday food/cooking program
- therapy dogs
- peer-led student projects

“As an individual with mental health problems, I am happy to see there are trainings to reduce stigma and assist with knowledge and skills to assist a diverse workforce.”

~Student reflection on Mental Health First Aid training

## Events

- education & screening days such as those supported by Beyond the Blues
- movies/poetry for mental health (for reducing stigma, raising awareness)
- pop-up wellness events
- campaigns to challenge/reduce stigma
- mental health and suicide information tables
- lunch-and-learns, routine therapy, food giveaways, a Mobile Wellness Booth, LaunchPad videos, dinner basket conversations, etc.

**EQUITY**  
**DIVERSITY**  
**INCLUSION**

## Operational activities

- wellness webpages
- psychotherapy groups

## 4.2. Sustainability

While PSIs expressed a desire for multi-year funding to allow for a more sustainable support for staff and students, they strived to create sustainability or legacy resources and build capacity and continue momentum of activities through the following strategies:

- ongoing offering of training resources
  - developing a mental health and wellness framework or curriculum that would contribute to culture change
- developing assets that allow for low- or no-cost update and reproduction
  - creating digital resources on suicide prevention and awareness for long-term use
  - incorporating lessons learned and feedback received into their mental health strategy and framework
- operating a train-the-trainer program
  - creating handover documents to make note of planning, strategies, execution, and feedback to assist future planning

## 4.3. Project approaches

The approaches used by the 25 PSIs included holistic, multi-disciplinary, culturally-sensitive, trauma-informed, and evidence-based strategies with attentiveness to different vulnerable subpopulations such as Indigenous peoples, LGBTQ+, BIPOC, international students, and those with lived or living experiences of mental health and substance use challenges. The PSIs also utilized means that would critically implement frameworks and policies that follow Equity, Diversity and Inclusion principles in their programming. Most campuses addressed both mental health and substance use considerations, some with special attention to exploring connections between substance use and suicide risk, addressing/reducing stigma, providing resources around harm reduction and safe substance use, and supporting those in recovery.

## 5. Results

### 5.1. Partnerships

The PSIs involved in the project utilized a collaborative approach and worked with various internal or external stakeholders to inform, develop, and activate various suicide prevention activities. Their collaborations took the following forms:

#### Intra-institutional Partnerships

Within each campus, multiple departments collaborated to support project initiatives and to represent diverse voices. These departments included but were not limited to: Faculty, administrative staff, Student Associations, Counselling Services, medical centers, safety & security, student housing, Human Resources, First Nations Center/Indigenous services, etc.

Some intra-institutional collaboration amongst departments and divisions led to the development or update of their mental health curriculum or framework, and a launch of more inclusive, culturally competent, trauma-informed, and evidence-based initiatives. The goal of such collaborations was to increase awareness of suicide intervention and mental health strategies among faculty, staff, and students, as well as the creation of small grants for multi-disciplinary, cross-departmental initiatives (e.g., CARE grants: Compassion-Accessibility-Resilience-Engagement)

#### Inter-institutional Partnerships

- 12 campus communities partnered in the development of five digital assets
- Three campus communities partnered and offered three training workshops together and will offer more in the future
- One campus recovery training program (RATC: Recovery Ally Training Curriculum) is being recognized both nationally and internationally, with requests from universities and colleges across Canada, the United States, and the United Kingdom

#### External Partnerships

Some campuses reached beyond their internal resources and collaborated with external community or corporate partners (e.g., Mental Health Commission of Canada, CMHA BC, Bell Canada) to deliver educational programs and events such as: safeTALK training, ASIST suicide prevention training, Mental Health First Aid, the Inquiring Mind, Living Life To The Full, Beyond the Blues, End Stigma Campaign, Naloxone trainings, and Bell Let's Talk Day.



## 5.2. Outcomes

The PSIs involved in the project worked diligently to make progress toward the expected project deliverables despite pandemic-related challenges. They reported some or all of the following outcomes:

### Immediate Outcomes

- Increased engagement, collaboration, and knowledge sharing among campus community members within and across different departments, as well as beyond campuses (e.g., offering CARE mini-grants, running workshops together)
- Increased opportunities for reflection on and re-evaluation of mental health programs/curricula for more equitable representation and implementation
- Enhanced opportunities for campus community members to be heard with a strong focus on student voice and leadership, especially marginalized and other often neglected groups (e.g., increased contribution from Indigenous members)
- Increased personnel involvement and meaningful employment (and volunteer) opportunities for students and others

### Intermediate Outcomes

- Strengthened capacity to support conversations related to mental health, and in particular the difficult topic of suicide
- Increased development of trauma-informed, culturally sensitive, and evidence-informed resources
- Broader availability and access to support and resources for campus community members
- Increased awareness of mental health and substance use challenges as well as help-seeking behaviours among campus community members

### Long-term Outcomes

While the project period was too short to see long-term impacts, there are indications that the project laid a foundation for sustained mental health/suicide awareness within campus communities and beyond, including:

- Increased opportunities to advance systematic changes related to improving mental health and well-being, especially among equity deserving student groups
- Reduced risk-taking behaviours associated with mental health challenges among target populations
- Reduced stigma associated with mental health and substance use challenges
- Increased community access and use of trauma-informed, culturally sensitive, and evidence-informed resources

“ I feel privileged to be involved in this conversation and feel it is vitally important to show up for people as a first and foremost in all of the work that we do. I am excited by the opportunity to share the knowledge I gained today with my colleagues and to incorporate my learnings into conversations that I have. Incorporating awareness and allyship as a fundamental building block within our work is key to supporting the type of employer we would hope to be and that I would hope to work for. Thank you.”

~ A participant in a training program





“ I just wanted to remind all you ambassadors how appreciated you are and loved you are. [PSI name] is so lucky to have such individuals who care about the community so much. Keep doing all you do. It’s amazing to see you all shine and being here has really helped me. I am so blessed to be part of this team. A team that cares for others and wants to build great connections! ”

~ A student ambassador’s note left for fellow team members

## Unintended Outcomes

- Varied COVID-19 restrictions including limited engagement and in-person participation, difficulty navigating the changing landscape of Public Health Orders, unanticipated changes and delays in implementing programs and activities, limited human resources, increased personnel transitions, significant staff turnover, Zoom fatigue, a sense of exhaustion and hesitation to participate in emotionally heavy online training programs and/or providing feedback, low capacity to reach groups equitably, particularly distance or virtual learners
- One-time nature of this funding and finite budget resulted in limited collaboration (e.g., on videos) and reduced capacity to bring in consultants and keep the well-being specialist contractors continually occupied
- Limited time to get projects fully operational
- Encountering stigma about suicide and self-harm, mental health conversations, and help-seeking behaviours
- Limited capacity to evaluate the effectiveness of programming and to support more robust assessment of initiatives

### 5.3. Insights

**\$1,250,000**

in campus suicide prevention funding dispersed

**25** post-secondary institutions engaged

**37** temporary and **20** ongoing jobs created/ supported on BC campuses

**12** campuses worked collaboratively and created **5** videos together

**7,000+** PSI members participated in workshops and events

**500+** workshops and events were held – some ongoing

All services and supports **free of charge**

#### Resources

Various materials were created to support the mental health of students and staff, including: mental health frameworks, digital assets, literature reviews on mental health and suicidality, curriculum maps, promotional materials, workshops and training resources with supporting materials (t, facilitator guide, workbooks, slides, handouts), support guides, videos, peer mentor handbooks, suicide prevention resource booklets, and newsletter content.

“The training helped me realize that it can be harmful to ask someone to drink alcohol or consume weed. It made me realize how some actions that might seem ‘nice’ can actually be harmful to a person in recovery and something to be mindful of whenever engaging in such activity.”

~ A participant in RATC training

## Digital assets

With the receipt of this grant, 12 PSIs pooled funds together and collectively engaged in creating digital assets. A steering committee and working group were formed with a commitment to use a culturally-grounded, accessible, intersectional, and trauma-informed approach. Terms of reference were created to formalize this commitment and to ensure that the resources created would invite critical reflection, encourage collective conversation, and inspire intentionality around social responsibility.

Three Public Service Announcements (PSAs) and two shorter versions were created.

[These five videos](#) are intended to promote: a) awareness of mental health and substance use challenges and b) help-seeking behaviours. Longer videos (about five minutes) are meant to be used for mental health/suicide prevention training sessions, workshops, or meetings. Shorter versions (under a minute) are meant for web or social media. The videos are generic versions where each campus can customize them to their PSI, at their own cost. Videos are made more accessible through captioning.

“Collaborating with the post-secondary representatives around our Digital Media Initiative has been both fascinating and rewarding. While each of us works within a unique and distinct post-secondary organization - the shared commitment and passion for supporting student wellness, mental health, and suicide prevention was refreshing and meaningful to experience. I look forward to sharing the resources created in order to continue to sustain and support student health, safety, and wellness for our learners, faculty, and staff.”

~Manager, Student Learning Support and Disability Resources

## Workshops, events, and webinars

The workshops, webinars, and events held by the campuses included diverse offerings such as: Employee Training Workshops on student wellness, EDI and cultural exchange events, End Stigma Campaigns, Men’s Circle, Forest Therapy Walk, Snacks and Chats, Dinner and Dialogue, Dinner Basket Conversations, and Wellness Kitchen in which hot meals and snacks were made with and handed out to students. The workshops and events used a hybrid option of online and in-person that covered the topics of mental health, substance use, suicide prevention and awareness, academic supports, Indigenous cultural supports, and health and wellness.

**Total number of workshops and events: 500+, with some ongoing**

**Total number of participants: 7,000+**

## Participants and groups that benefited from the initiative

Campuses reported implementing their educational programs and events without specifically tailoring them to a population subgroup. Most did not collect specific demographic data in order to create safe and accessible spaces, other than attendance numbers, for privacy and human rights reasons. However, all campuses had opportunities open for all various subgroups and sought to have specific consultations with these groups, ensuring their representation on various committees.

## Honoraria

Several PSIs offered more than 80 honoraria to the following groups for the services they provided:

Students as ambassadors; Wellness Peer Volunteers; Thriving in Action student leads; Student Wellness Promoters; youth from the Shq’aphut Summer Camp; training guest speakers; contracted consultants and technology experts; those in contracted services, student advisory members; Elders; knowledge keepers

## Other deliverables

Other deliverables include the development of a protective factors research proposal; a literature review on Indigenous approaches toward (mental) health; a new “Restorative Relations & Student Supports” department in development; creation of a ‘tree’ with Messages of Hope (ongoing); handing out 500 Suicide Prevention ribbons & tealights for World Suicide Prevention Day; project assistants and practicum students attending conferences and webinars related to suicide.



## 6. Reflections and Lessons Learned

The funding provided to the 25 PSIs by MMHA created an important opportunity to raise awareness about suicide/mental health and education for students and staff. Depending on the size of the PSIs and/or their locations, their demographics, and their needs and concerns, the campuses used the funding to review and revise their existing resources, develop new ones, and build capacity to provide support for their community members.

While the campuses struggled with complications from the pandemic, experienced staff turnover, and at times lack of in-person and online student engagement, they found the timing of the funding critical. Some participating campuses shared that the funding impacted their institution’s capacity to hire health promotion specialists or contractors for the duration of the project or permanently.

Smaller institutions were grateful for the non-competitive process in the grant application as they questioned their ability to compete with projects from larger institutions. Connecting students with community resources was also appreciated by institutions with smaller levels of student life (in comparison with larger institutions with residences).

The HM|HC Support Team recognized that campus communities, much like their members, all come with their own unique contexts, needs, and dynamics (especially with the pandemic), and that there is no one way to carry out implementation. Such recognition allowed CMHA BC to give freedom to campuses to spend their funds and implement their programs in ways that worked for their settings and populations as long as they were within the principles of health promotion and completed their deliverables. Campuses appreciated flexible responses to their sometimes multiplicative requests for changes as well as opportunities to administer funds in ways that supported their approach to implementation.

The funding facilitated intra- and inter-institutional collaborations as well as opportunities for external partnerships. Some campuses recommended more communication and collaboration with each other and their surrounding communities, and hope to share resources, offer educational opportunities together, and learn about their common challenges or strengths.

A few campuses found the expectations in CMHA BC administration of the grant (recording and reporting required information) to not reflect the information initially requested in the grant application. CMHA BC acknowledges the need from the outset to respectfully negotiate with participating campuses an embedded evaluation approach to services and educational programs. This would increase the likelihood of collecting more experiential information/knowledge and so would better assess the impact of the initiatives and their value for campus members.

“More than ever, people are struggling with the current events in the world. It’s imperative people feel heard so they don’t mistakenly believe they are alone or lack a support system. Communication is critical & we can’t shy away from discussing suicide with our peers, families, colleagues & students to let them know we will assist them to access the care required.”

~ Staff response after a QPR 1-hour course



CMHA BC also recognizes that campuses involved in this project have experienced other challenges; however, campuses likely prefer to report more positive outcomes to the funder. Those challenges have been recorded by a CMHA BC postdoctoral research fellow, who has worked on an evaluation of the overall format and structure of the project. Her interviews with several campuses involved in this project will shed more light on campuses’ struggles and serve to help strengthen and improve future initiatives.

A majority of the campuses recognized the importance of consistent funding to support ongoing mental health initiatives, especially those focused on equitably and effectively supporting the populations whose mental health is adversely impacted by unjust social and structural factors. Having access to long-term, sustainable funding was a concern for many campuses. CMHA BC welcomes new opportunities to support PSIs’ initiatives and to provide stewardship and technical assistance to BC PSIs in the future.

# Thank You

The HM|HC Support Team would like to thank our campus partners across BC's 25 post-secondary institutions for their participation in this grant project.

**HEALTHY MINDS** | **HEALTHY CAMPUSES**  
creating connections. inspiring change.

The HM|HC Support Team is comprised of representatives from:



The HM|HC Support Team gratefully acknowledges funding provided by the Ministry of Mental Health and Addictions.

