

## Small Group Dialogue

<https://docs.google.com/document/d/1MqcoMEUFJg-wN9GbDabu9F2e838YrmTG11UtVb5jBPc/edit>

*Please feel free to use this document to write notes from your discussion groups.*

Each question: 15 min.

### Group 1

1. How does your institution navigate extensions, academic or financial, to obviously struggling students while trying to maintain “fairness”? In what ways could this process be improved? **(15 min.)**

- Using Early Alarm Retention System, facilitating those struggling students access support
- Referral to counseling centers + tutoring centers

2. One of BCSS Youth’s next steps is to expand the age of our programming to incorporate emerging adults (age 18-25). Do you see a need for more mental health education on your campus, specific to supporting youth who have a loved one with a mental illness and/or substance use challenge? **(15 min.)**

- Educating students re. substance use (increased stigma in smaller areas, e.g. the northern part)
- Having more workshops on reducing risks (esp. after cannabis legalization)
- Starting to create some groups for BIPOC, women, international students, etc.–not trying to categorize them at the same time. Maybe sometimes having less in common helps with participation

## Group 2

1. How does your institution navigate extensions, academic or financial, to obviously struggling students while trying to maintain “fairness”? In what ways could this process be improved? **(15 min.)**

- Case to case basis
- Meet student where they are at with compassion
- Refer to undergrad coordinator, campus resource or dean if instructor is unable to meet need of student
- Point students in the direction of specific resources; check-in with them
  - Early alert
  - EARS
  - First Nation Health Authority Service Providers
  - SSC
  - Community referrals/ outreach

Improvement- transparency of resources available (ex. Folder or centralized location for information for students)

- Siloed across departments- need communication across disciplines/ departments
  - Coordinated effort
- Centralized system needs to be in place, ex. who is taking the lead on case?
- What is the root of the problem?

2. One of BCSS Youth’s next steps is to expand the age of our programming to incorporate emerging adults (age 18-25). Do you see a need for more mental health education on your campus, specific to supporting youth who have a loved one with a mental illness and/or substance use challenge? **(15 min.)**

- Training and education (ie. workshop) for support staff & faculty
- Transition course for students (ex. HEAL 100 at UBCO)
- Integrate long term solutions rather than bandaids solutions
- Consider both people (18-25) on vs off campus- do services change depending on if someone is enrolled on a campus or not
- Cultural competency required