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**Date of Adoption: August 28, 2020**

**Date of Expiry: August 28, 2023**

## **KSA Mental Health Policy**

### **1.0 Preamble**

- 1.1 Kwantlen Polytechnic University Student Association seeks to support a culturally safe, humble, and holistic approach to mental health and wellness for both students and staff. KSA seeks to build skills and confidence in response to mental health and wellness. KSA further seeks to share resources and information that will ensure that students and staff have the information they need to maintain mental health and wellness.
- 1.2 KSA takes a holistic approach to understanding mental health and wellness. This means that we encourage all staff and volunteers to be educated on how to use a multifaceted understanding of mental health and wellness. KSA approaches mental health and wellness with dignity and fairness. When supporting both staff and students, KSA commits to a respectful, compassionate and trauma informed approach. Further, KSA commits to creating student lead resources whenever possible.
- 1.3 Mental health affects everyone in our society differently, and many of these differences are unevenly distributed. We recognize that the conditions for good mental health, including access to services and support, but also the necessities of life, are harder for disabled, indigenous, queer, and female students. In many cases, unique challenges arise at the intersections of these identities that require special attention. We must continuously learn and reflect on how we can improve.
- 1.4 These complex circumstances challenge us to be creative, and always look to how we can improve internally and to review the effectiveness and sustainability of our services. Because the issues are so broad, we must support the development and advocacy of other student groups on campus (e.g. the Indigenous Student Council and Gathering Place).
- 1.5 This policy seeks to educate students and staff on available resources and the ways in which we support one another to achieve optimum health. Further, KSA is dedicated to building our skills to support staff and students during times when mental health is not optimal.

### **2.0 Definitions**

**Inclusivity:** “the practice or policy of including people who might otherwise be excluded or marginalized, such as those who have physical or mental disabilities and members of minority groups.” (oxford dictionary)

**Trauma Informed Practice:** “Trauma is often closely tied to substance use, mental illness, stigma, health care access barriers, and other challenges. Trauma-informed practice means recognizing this link, making sure that people feel safe and are not re-traumatized by their care.”

(<http://www.bcmhsus.ca/health-professionals/clinical-professional-resources/trauma-informed-practice>)



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**Intersectionality:** “the different ways that persons interact with their environments and the multiple and intersecting forms of marginalization and discrimination faced by persons” (<https://laws-lois.justice.gc.ca/eng/acts/A-0.6/page-1.html>)

**Cultural Competency:** “A set of behaviors, policies, and attitudes which form a system or agency which allows cross-cultural groups to effectively work professionally in situations. This includes human behaviors, languages, communications, actions, values, religious beliefs, social groups, and ethic perceptions. Individuals are competent to function on their own and within an organization where multi-cultural situations will be present.” <http://www.businessdictionary.com/definition/cultural-competency.html>

**Cultural Safety:** “Cultural safety means [health care] professionals adopt a humble, self-reflective [clinical] practice that positions them as respectful and curious partners when providing care, rather than as a figure of higher knowledge and authority.” <http://www.fnha.ca/documents/fnha-policy-statement-cultural-safety-and-humility.pdf>

**Cultural Humility:** “Cultural Humility is a process of self-reflection to understand personal and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another’s experience.” <http://www.fnha.ca/documents/fnha-creating-a-climate-for-change-cultural-humility-resource-booklet.pdf>

**Indigenization** “On a very practical level, Indigenization is the process of creating a supportive and comfortable space inside our institutions within which Indigenous people can succeed. But “success” is a very big word here. It’s not just success in students completing coursework or programs. It is also “success” in reframing knowledge production and transmission within the academy from an Indigenous perspective.”  
[http://www.fourworlds.ca/pdf\\_downloads/Reconciliation\\_within\\_the\\_Academy\\_Final.pdf](http://www.fourworlds.ca/pdf_downloads/Reconciliation_within_the_Academy_Final.pdf)

**Stigma:** Negative attitudes and behaviors that make people with mental health issues feel judged and ashamed. [https://www.mentalhealthcommission.ca/sites/default/files/2016-07/Youth\\_Strategy\\_Eng\\_2016.pdf](https://www.mentalhealthcommission.ca/sites/default/files/2016-07/Youth_Strategy_Eng_2016.pdf)

**Mental Health & Wellness:** “Mental health is the state of your psychological and emotional well-being. It is a necessary resource for living a healthy life and a main factor in overall health. It does not mean the same thing as mental illness. However, poor mental health can lead to mental and physical illness.” <https://www.canada.ca/en/public-health/services/about-mental-health.html>

**Mental Illness:** “...the reduced ability for a person to function effectively over a prolonged period of time because of: significant levels of distress, changes in thinking, mood or behavior, feelings of isolation, loneliness and sadness, the feeling of being disconnected from people and activities.”

<https://www.canada.ca/en/public-health/services/about-mental-illness.html>



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**Suicide:** Ending one's own life. When someone ends their own life, they "died by suicide."

<https://www.heretohelp.bc.ca/infosheet/what-is-suicide>

\*Note\* In the past, the term "committed suicide" was used to describe someone who has died by suicide. It has since been discontinued for two reasons: The first being that there was a time when dying by suicide or attempting to die by suicide was considered a crime. The term "committed" implicitly implies that the act is of a criminal nature and can thus be damaging and discriminative to those who have lost their battle with mental illness

<https://www.beyondblue.org.au/personal-best/pillar/in-focus/why-you-shouldn-t-say-committed-suicide>

**Peer Support:** Based on the idea that individuals with similar characteristics, backgrounds, or experiences can utilize those commonalities to support each other through the everyday challenges as well as difficult times. At times, simply being able to relate to another person offers comfort and encourages people to open up more about personal matters they may be facing. Moreover, when speaking to a peer that you can relate to, there is greater opportunity to experience authentic empathy and validation

(Mead, S., & MacNeil, C. (2004). Peer Support: What makes it unique? The International Journal of Psychosocial Rehabilitation. 10(2), 29-37.)

**Self-Determination:** In Psychology, self-determination is the ability or power for one to make decisions for oneself, and the freedom to live as one chooses, without the influence of anyone or anything else. Individuals usually feel greater motivation to initiate action when they feel that they will be successful.

<https://www.verywellmind.com/what-is-self-determination-theory-2795387>

**Gatekeeping:** A function or philosophy of controlling access to care. Sometimes this term can be used just to refer to a primary care physician referring to a specialist, but can also be used to put this practice in a broader context, a physician or service provider "selects those who will enter and those who will not[...] restraining people from overusing health care, not on ushering in the under demanding and underserved; also, the military gatekeeper's duty is over once he/she has let the proper people in—he/she has no business guiding them through the system or making sure they leave it when that would be appropriate"

(<https://jme.bmj.com/content/27/1/25#ref-1>)

**Accommodation:**

"The duty to accommodate employees with **mental** disabilities, including depression or anxiety, comes from Human Rights legislation. When **accommodation** is done well, it can help an employee remain a productive and contributing member of the work team."

(<https://www.workplacestrategiesformentalhealth.com/managing-workplace-issues/accommodation>).

Further,

"When talking about mental illness and education, inevitably we come across the term 'reasonable



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adjustments' or 'accommodations.' According to Boston University, these terms refer to any modifications that need to be made for a person or within an environment to minimize the discriminatory effect of a person's physical, emotional, or learning disability. The student is expected to meet the minimum standards such as attendance or examinations.”

(<https://www.heretohelp.bc.ca/visions/supported-education-no17/what-bc-campus-disability-centres-can-offer-students>)

### 3.0 Policy

#### **Overarching concerns**

Whereas KSA recognizes the importance of leadership and compassion in building a safe space to go to school and work, KSA is committed to building a safer environment. In order to achieve this, we are committed to building relationships across [XXX], developing resources, and providing educational opportunities to build respect, confidence and a better response to mental health and well-being.

- Leadership and compassion
- Better and safer environment
- Resources
- Build relationships

#### **Inherent stigma and discrimination re MH in society and specifically in University**

##### **Procedural Fairness:**

All students, but especially students with mental health challenges, deserve fair procedures when their rights or interests are at stake. In the university, this means clear & respectful communication, flexibility, confidentiality and accountability. As well, students and staff need to access appropriate accommodations to ensure that their needs are met and that they understand the information and actions being taken. Both staff and students deserve to know what information is being collected and used about them and how and what decisions are based on. Decisions must come with robust reasons and be subject to a rigorous and independent appeal procedure.

The Association of Canadian College and University Ombudspersons promotes viewing procedural fairness hand in hand with interpersonal and substantive fairness, reminding us that it is possible to make the right decisions through respectful and rigorous processes. (<http://accuo.ca/wp-content/uploads/2017/07/FairnessGuide2015.pdf>)

##### **Representation:**

Representation that reflects meaningful engagement is important to KSA. Therefore, KSA is committed to encouraging lived experience representation of both student and staff wherever possible. Further, KSA is committed to having representation from stakeholders whenever possible. This includes engaging students and staff who represent specific groups on campus (e.g. Indigenous groups, persons with disabilities, international students, racialized groups, LBGQT+).

**Whereas** the KSA is “committed to providing a safe and healthy working and learning environment and to promoting positive attitudes and behaviours towards health and safety”, KSA understands the importance of creating a safe, harassment free work environment. In order to facilitate this, KSA will create and continue training opportunities for staff and students.

Whenever possible, staff will have an opportunity to complete MH training and peer support training



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in order to raise the confidence of all staff within the organization to assess, support and respond to mental health and wellness.

KSA commits to supporting suicide prevention and response training for our staff and management. KSA will consider possible stressors and mental health factors in KSA workplace safety inspections, incident investigations, and return to work plans.

KSA will work to engage students with lived MH experience on committees and with Peer Support.

**Whereas** in Canada, suicide is the second leading cause of death among 15 to 24 year olds, and account for almost 25% of deaths among this population (Statistics Canada, 2017), the KSA commits to supporting KPU in a better response to students in crisis and to make this response student centered. <http://collegequarterly.ca/2019-vol22-num01-winter/descriptive-study-of-post-secondary-student-mental-health-crises.html>

**Whereas** the KSA does have a relationship with KPU, the KSA commits to bettering and strengthening this relationship by making the appropriate connections with specific KPU employees and departments for the overall benefit of the students.

#### **Off Campus**

**Whereas** there are provincial resources and community supports available to students, KSA will work to maintain a list of resources available to students.

#### **Education**

**Whereas** Just 50% of Canadians would tell friends or co-workers that they have a family member with a mental illness, compared to 72% who would discuss a diagnosis of cancer and 68% who would talk about a family member having diabetes, KSA commits to addressing the stigma about MH on campus and educating students further. <https://www.camh.ca/en/driving-change/the-crisis-is-real/mental-health-statistics>

**Whereas** in any given year, 1 in 5 people in Canada will personally experience a mental health problem or illness, the KSA commits to providing services to students to support them with their wellness. (CMHA)

**Whereas** suicide is among the leading causes of death in 15-24-year-old Canadians, second only to accidents; 4,000 people die prematurely each year by suicide, The KSA commits to ensure that all staff are provided with suicide awareness training (CMHA)

**Whereas**, 76% of Canadian adults report some form of trauma exposure in their lifetime, and 9.2% meet the criteria for PTSD, the KSA commits to ensure that students and staff feel safe and supported when experiencing mental health challenges. [http://bccewh.bc.ca/wp-content/uploads/2012/05/2013\\_TIP-Guide.pdf](http://bccewh.bc.ca/wp-content/uploads/2012/05/2013_TIP-Guide.pdf)

**Whereas** despite affirmation that students with disabilities should have equal access to education, individuals with disabilities are still not participating to the same degree as individuals without disabilities, particularly within postsecondary institutions. The KSA commits supporting self-determination for students with disabilities.

**Whereas** gatekeeping can prevent people from accessing care, especially if they are less equipped to self-advocate or are otherwise marginalized in society, and create a combative environment, burden people with the extra work of re-proving their experiences and needs, and delay or prevent positive outcomes and human flourishing, the KSA commits to a student-centered approach that supports people choosing what is right for them.

#### **Students**



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Whereas, the KSA provides and organizes workshops and training pertaining to mental health, the KSA commits to continuing hosting these events for students to take part in.

Whereas, the KSA hosts and organizes Stress Relief Week and offers support to students through the Peer Support Resource Centre, the KSA commits to persevering with these events and programs for students to take part in and access.

Whereas, the Peer Support Resource Centre has worked with the ASD students at KPU giving classroom presentations, the KSA commits to working on building a stronger relationship and ensuring that staff and volunteers are properly informed about ASD (Autism Spectrum Disorder).

#### **Annual review of policy**

Whereas the KSA has committed to meeting the objectives of this policy, an annual review of the policy will be conducted. A minimum of two students, and three staff will be on the annual review subcommittee.

## **4.0 Resolution**

**Therefore Be it resolved that** KSA commits to having all student volunteers, council, executive members and staff have access to and complete mental health training. (e.g. Mental Health First Aid, SafeTalk followed by ASSIST training, Peer Support training).

**Be it further resolved that** KSA also ensures that all staff are aware of resources available to both students and staff.

**Be it further resolved that** KSA support staff who are struggling, including through Employee Family Assistance Plan

#### **KSA STAFF:**

**BIRT** the KSA commits to having strong leaders and managers willing to make change happen and to play their part in stopping bullying and harassment.

[https://www.mentalhealthcommission.ca/sites/default/files/2016-07/Youth\\_Strategy\\_Eng\\_2016.pdf](https://www.mentalhealthcommission.ca/sites/default/files/2016-07/Youth_Strategy_Eng_2016.pdf)

#### **STUDENTS:**

**BIRT** the KSA commits to continue training students to become wellness ambassadors on campus as the Peer Support Volunteers on an annual basis.

**BIRT** the KSA commits to developing student leadership

**BIRT** the KSA commits to increasing the offering of wellness-based workshops and events to KPU students.

**BIRT** the KSA supports and strives toward creating a safe work and educational space for everyone. Including individuals who struggle with or experience mental health challenges.

**BIRT** the KSA commits to developing and building relationships within the organization, with KPU, and with students.

**BIRT** the KSA will continue to maintain a list of MH resources and services available both on and off campus.

**Be It Further Resolved That** The annual report will be shared with KSA management, the Social Justice and Equity Committee, and KSA Student Council.

#### **ANNUAL REVIEW:**

**BIRT** the annual review committee have at least two students from the following:

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A student from the Social Justice and Equity Committee, a student who demonstrates an interest in mental health and wellness, and/or one executive member;  
And at least three representatives from staff:  
Peer support staff, Student Advocacy Coordinator, and the Policy and Political Affairs Coordinator.