

Situating the Post-Secondary Instructor in a Supportive Role for the Mental Health and Well-Being of Students

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Published online: 14 February 2017

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Abstract Despite the increased consideration of student mental health and the ongoing efforts of bettering intervention systems, one aspect remains relatively underexplored: the role of the instructor. The purpose of this paper is to propose and discuss a (re)conceptualized understanding of the postsecondary instructor – as one who not only creates, delivers, and/or facilitates academic curriculum, but who can also support the well-being of students. Instructors can carry a central place in supplementing or facilitating a number of initiatives available in higher education settings to support the mental health of students, whether this entails recognizing a concern, rendering a type of support, or redirecting a student elsewhere for further intervention.

Keywords Student mental health · Higher education · Instructors · Support practices

Canadian colleges and universities have demonstrated considerable efforts in promoting and supporting the mental health and well-being of its students. National mental health frameworks (e.g., *Mental Health: A Guide and Checklist for Presidents*, 2012) and funding initiatives (e.g., *Mental Health Innovation Fund*, 2011) have empowered post-secondary institutions in becoming informed, safe, and proximal environments for students to access mental health interventions (Canadian Association of College and University Student Services (CACUSS) & Canadian Mental Health Association (CMHA) 2014; Canadian Alliance of Student Associations (CASA) 2014; Field et al. 2006; Kadison and DiGeronimo 2004; Ministry of Training, Colleges and Universities 2014). Today, many colleges and universities offer counselling, accessibility/accommodation services, intervention programs, and awareness campaigns to help support the mental health and well-being of students (Canadian Mental Health Association (CMHA) 2014; Hanlon 2012; MacKean 2011; Martin 2010; Ontario College Health

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Association 2009; University of Manitoba Campus Mental Health Strategy (UMCMHS 2014).

The ultimate goal for post-secondary institutions is to address student mental health through whole-school approaches or widely-scoped systems of mental health care. Such approaches or systems entail “multiple strategies that have a unifying purpose and reflect a common set of values... to create a protective environment that promotes mental health and well-being” (MindMatters 2010). Put differently, they place the entire campus (from people to policies) as committed in creating a climate grounded in social equity and positive mental health (CACUSS and CMHA 2014). Despite the increased consideration of student mental health and the ongoing efforts of bettering intervention systems, one aspect remains relatively underexplored: the role of the instructor. The purpose of this paper is to propose and discuss a (re)conceptualized understanding of the post-secondary instructor—as one who not only creates, delivers, and/or facilitates academic curriculum, but who can also promote or supplement support for the mental health and well-being of students.

Shifting Student Needs Demand Shifting Instructor Roles

Discrepancies surround the role of college and university instructors in supporting the mental health of students. Promoting student well-being is not legally or ethically identified as a vital component in the functioning of post-secondary instructors. In this light, it seems that instructor quality is narrowly-defined by subject knowledge, student academic performance, or the ability to promote that which is encouraged by traditional models of schooling—esteemed education and opportunities for economic development—pushing the rest to “the sidelines”. Instructors are not expected to carry expertise in mental health, educational psychology, or student well-being overall. Furthermore, unlike their elementary and secondary school counterparts, post-secondary instructors are not expected to hold a teaching degree or partake in any formal training regarding teaching, education, or student-instructor relationships. With little direction, it is difficult to expect that instructors can or want to undertake responsibility over student well-being, or even know how to for that matter.

The recent escalation in student suicides due to mental health problems, many of which have become legal concerns, have encouraged Canadian higher education settings to modify its overall support structures (CACUSS and CMHA 2014; CASA 2014; Hanlon 2012; Kay 2010; Kitzrow 2003; MacKean 2011; UMCMHS 2014). There has been “a shift in culture that recognizes that the entire post-secondary community is responsible for the mental health of its members” (CACUSS and CMHA 2014, p. 10). This shift seems to call for a redefined understanding of the instructor, or of the educator more broadly. In addition to a deliverer of pedagogical instruction, the instructor can be situated or imagined as a supplemental aide, key person, or “linchpin” in supporting the social and emotional needs of students or promoting positive student well-being overall (Battalio and Stephens 2005; Davidson and Locke 2010; Paternite 2004; Schonert-Reichl and Lawlor 2010; Silverman and Glick 2010). This understanding recognizes that addressing student mental health relies on instructors to help drive such efforts. This suggestion does not imply that “...teachers bear responsibility for providing therapeutic interventions to their students with mental health problems; this is clearly not their role in the school system” (Whitley et al. 2012, p. 66). Rather, it promotes the opportunity for instructors to engage as promoters and supporters of student mental health; the unique or novel initiatives of support they practice can be acknowledged, valued, and utilized.

The benefits of including instructors as individuals in higher education settings who can support the mental health and well-being of students are certainly recognizable. Firstly, compared to a clinical setting, support within academic institutions is often most successful when practiced in authentic settings, such as in the classroom by an instructor (Han and Weiss 2005; Klem and Connell 2004; Roeser and Midgley 1997). Secondly, mental health problems are likely to first appear in the classroom (Quinn et al. 2009; Whitley et al. 2012). As Whitley and colleagues (2012) proposed, “teachers and other school personnel are often the first to observe behaviours that indicate either the development or worsening of mental health problems” (p. 58). Thirdly, “... fewer than half of college students in need of mental health services actually seek them out” (Sharp et al. 2006, p. 419), but if and when they do, students prefer seeking support from a non-professional in classroom settings, such as a peer or instructor (Anderson-Butcher 2006; Frado 1993; Klem and Connell 2004; Sharp et al. 2006; Silverman and Glick 2010). That said, post-secondary instructors can be called to action. Ideally, then, the want is for post-secondary instructors to become a kind of “first-line responder” when supporting the mental health and well-being of students (CACUSS and CMHA 2014; Eichler and Schwartz 2010; Kitzrow 2003; Quinn et al. 2009; Schonert-Reichl and Lawlor 2010; Sharp et al. 2006; Silverman and Glick 2010; UCMCHS 2014).

Student mental health in Canadian colleges and universities has been widely-researched and is well-represented in relevant literature. However, not much scholarly work that specifically addresses the role of teaching faculty in supporting student mental health has been generated. MacKean’s (2011) literature and environmental scan of mental health and well-being in Canadian post-secondary settings is one research study that offered some insight into the role of instructors as supporters and promoters of student mental health. Other Canadian-specific resources that include components of the post-secondary instructor’s role draw from government and organization policy/strategy documents or general media releases (CACUSS and CMHA 2014; CMHA 2014; Cavalheiro et al. 2012; Hanlon 2012; Lunau 2012; UCMCHS 2014). For example, CMHA’s (2014) recent publication, *A Guide to College and University for Students with Psychiatric Disabilities*, is a policy document that briefly highlights instructors. In sum, explicit and comprehensive consideration of the instructor’s role in relation to student mental health has not been taken up in many Canadian works to date.

(Re)defining the Instructor’s Role in Relation to Student Mental Health

Considering the push to include instructors in Canadian college and university mental health policies and practices, it appears necessary to propose a (re)defined understanding of the instructor—as one who can help drive or supplement support efforts for student mental health. In proposing this understanding, it is important to outline what the instructor’s role would entail, or rather, how their role in supporting student mental health can be imagined. As supporters or promoters of student mental health, instructors can undertake particular actions; actions that this researcher has summarized and designated as *Recognize*, *Render*, and/or *Redirect* (RRR). Through their interactions with students, instructors may *recognize* when students are experiencing a challenge or stressful situation, especially in cases where students’ academic engagement or performance is affected as a result of a mental health problem (CACUSS and CMHA 2014; Schonert-Reichl and Lawlor 2010; UCMCHS 2014). Of note, recognizing a potential mental health concern is not the same as “diagnosing” (Eichler and Schwartz 2010). Rather, the process of recognizing is more synonymous to “screening”;

identifying the possibility that a student's well-being is of concern in some way (Eichler and Schwartz 2010).

As “first-line responders”, instructors can also *render* preliminary initiatives of support in their classrooms (CACUSS and CMHA 2014; Han and Weiss 2005; Quinn et al. 2009; Silverman and Glick 2010; UCMCHS 2014). Academic accommodations are noteworthy initiatives of support rendered by instructors. Although often prompted and determined by an institution's disability services department, accommodations rely heavily on the negotiation of expectations, actions, and commitments set out in the classroom (Frado 1993; Quinn et al. 2009). As such, instructors will render a number of strategies to accommodate student learning; in some cases, even if an “official document” has not been issued. Looking more closely at the role of instructors in relation to accommodations, instructors can compartmentalize excessive assignments/projects into more accommodating and feasible tasks, allow greater time for task completion in general, offer isolated testing environments, or recognize if or when entire class schedules need to be negotiated to better suit the personal and academic needs of some students (CMHA 2014). Along with altering deadlines or course workloads, instructors can also provide students with materials, such as textbooks and reading lists, ahead of time, in attempt to relieve the pressures associated with the beginning of academic semesters (Frado 1993; Quinn et al. 2009). Academic accommodations can also help students without a defined mental health problem or illness (i.e., in some cases, preventing the onset of mental health problems).

Like academic accommodations, including topics of mental health and well-being in course curricula appears as an accessible and practical avenue for instructors to play a role in rendering support for the mental health of students. Considering student mental health and well-being within the content and tasks of courses can occur in several ways: Facilitating lectures that speak to a variety of topics related to mental health and well-being; assigning tasks that encourage critique, reflection, problem-solving, and collectivity; promoting organization, routine, and structure; and ensuring open channels of communication between instructors and students (CACUSS and CMHA 2014; Kadison and DiGeronimo 2004; Kitzrow 2003; Martin 2010; Patton et al. 2000; Quinn et al. 2009; Sharp et al. 2006).

Finally, a first-line response can also entail that instructors *redirect* identified students to known alternative/additional means of support within the institution (CACUSS and CMHA 2014; Frado 1993; Quinn et al. 2009; Silverman and Glick 2010; UCMCHS 2014). As outlined in the *Introduction*, many colleges and universities currently offer counselling, accessibility/accommodation services, intervention programs, and awareness campaigns to help support the mental health and well-being of students (CMHA 2014; Hanlon 2012; MacKean 2011; Martin 2010; Ontario College Health Association 2009; UCMCHS 2014). With respect to counselling, for example, a classroom instructor is noted as a popular referral source (Frado 1993; Froese-Germain and Riel 2012; Quinn et al., 2009; Silverman and Glick 2010). It has often been suggested that instructors' initial response is to redirect a student to counselling services upon recognizing a potential mental health concern (Quinn et al. 2009; Silverman and Glick 2010). To offer another example, instructors can redirect students who may be experiencing a mental health problem or illness to campus support programs, as in many cases, students are not aware of, nor do they often seek, more unique, specialized, or sometimes discreet types of support (Sharp et al. 2006). Moreover, considering the frequent use of course web-based learning

management systems in higher education settings, such as Blackboard®, WebCT®, or Moodle®, it seems feasible for instructors to upload links for students to easily access information on campus program or campaign initiatives.

As first-line responders, it appears that instructors can carry a central place in supplementing or facilitating a number of initiatives available in higher education settings to support the mental health of students, whether this entails *recognizing* a concern, *rendering* a type of support, or *redirecting* a student elsewhere for further intervention. Along with individual interventions, instructors can carry an equally important role when looking at support through a whole-school approach or system of mental health care (CACUSS and CMHA 2014; UCMCHS 2014). Many whole-school approaches towards student mental health rely on the execution of certain strategies in the classroom. For example, in Davidson and Locke's (2010) *Thinking and Planning Strategically*, an important step of their recommended whole-school approach is to implement mental health interventions in the classroom; thus, necessitating participation from instructors. Likewise, several components of the University of Manitoba's whole-school approach relies upon the efforts of instructors, or more specifically, instructors creating a campus climate that promotes positive mental health ("A Caring Community"); instructors responding to early signs of mental health issues ("A Responsive Community"); and instructors providing accessibility to support services ("A Supportive Community") (UCMCHS 2014). In sum, whole school approaches rely on *all* parties to function properly; thus, calling upon the instructor's presence.

Concluding Thoughts

Faculty and staff, including instructors, are being called upon to undertake a more assertive and supplementary role in supporting student mental health in Canadian colleges and universities. As MacKean (2011) put it, "if student mental health...remains viewed as the responsibility solely of student service professionals, a tremendous opportunity will have been missed to integrate mental health and well-being into academic structures, policies, and processes" (p. 8). The opportunity for instructors to engage as promoters and supporters of student mental health can be seized. Mobilizing instructor knowledge, efforts, and responsibility becomes imperative if they are to assume the role of supplemental aide, key person, or "linchpin" in supporting the social and emotional needs of college and university students. Delineating where and how exactly they can contribute to student mental health and well-being can help achieve an overall school milieu that supports the mental health of students.

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