



# **MENTAL HEALTH REPORT**

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**2019**



# PREFACE

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It is fundamentally irresponsible to think that the mental health crisis at the University of Toronto (UofT) can be solved without addressing the systemic issues that influence mental wellness and students' day-to-day lives.

While it is true that mental health is influenced by chemical imbalances in the brain, it is also informed by trauma, systems of oppression, poverty and power.

We cannot eradicate mental illness or suicide without discussing and challenging racism, transphobia, colonialism, islamophobia and sexual violence. Furthermore, we cannot discuss how to eradicate mental illness or suicide on campus without acknowledging sky rocketing tuition fees and the anxieties and financial burdens that students experience.

The University of Toronto Mississauga Students Union (UTMSU) serves over 14,500 full time and part-time undergraduate students. Our members are predominately commuters and come from low to middle class families. Our membership is made of domestic and international students from diverse backgrounds. As a satellite campus, our members needs and concerns are unique and require as much attention and care as those at St.George.

We recognize that criticisms without solutions do little to achieve our common goal. In this report you will find our proposed solutions to achieving a healthier campus for all students,

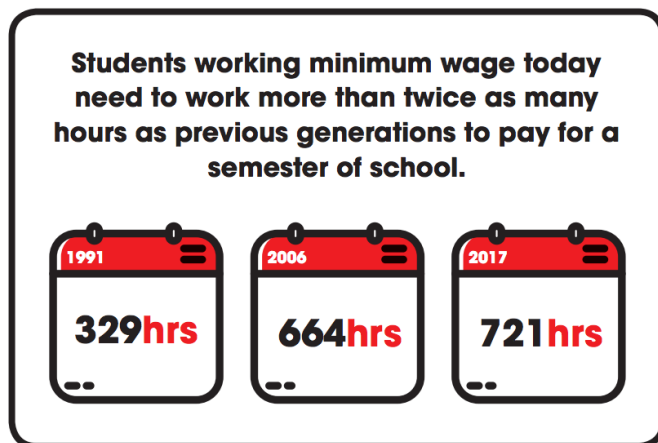
We look forward to hearing your feedback.

# TUITION FEES

Though depression, anxiety and poor mental health are complex conditions and often have multiple causes, there are definitely a plethora of factors that can contribute to someone experiencing poor mental health — including poverty. Poverty is often defined as the lack of sufficient income to provide for the basic necessities of life, consistent with the norms of the society in which one lives. Statistics Canada's Low Income Cut-Off (LICO) is most often used to measure poverty. The Gallup-Healthways Well-Being Index conducted with a random phone-interview sample of U.S. adults looked at the prevalence of chronic illnesses. They found that a variety of **chronic health**

**problems disproportionately affect the poor**, with the incidence of depression showing the strongest disparity: 31 per cent of Americans under the U.S. Census Bureau's poverty threshold in 2011 were diagnosed with the disorder, as opposed to 15.8 per cent of those not in poverty.

**Debt is a leading cause of poverty.** As of last year, Canadian students owe \$36 billion in student debt to all levels of government, \$19 billion of which was owed to the federal government (Loreto, 2019). One 2015 survey of 18,000 graduating students put **average per student debt at \$26,819** (Loreto, 2019). This figure takes into account Quebec and Newfoundland and Labrador, where fees are significantly lower than the national average (Loreto, 2019). Students in Ontario face both the issue of high tuition fees as well as high debtloads. Undergraduate and graduate students pay the highest university tuition fees in the country with UofT ranking most expensive. The average cost of one year's tuition, at the domestic rate, for a general undergraduate program is \$7,868 and \$8,971 for a general graduate program (CFS, 2018).

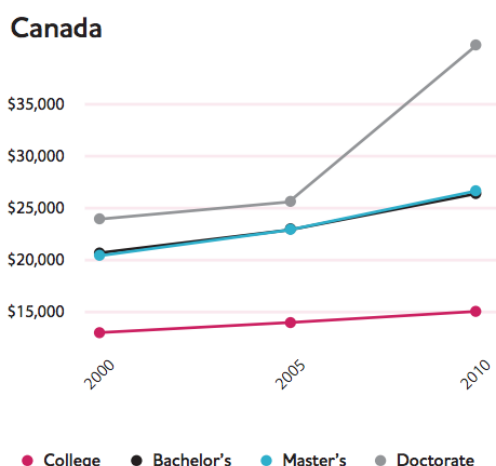


Students are sometimes working multiple jobs to afford post secondary education. Students working minimum wage in Ontario today need to work more than twice as many hours as previous generations to pay for a semester of school, in 1991 the average student would need to work 329 hours to afford tuition, however students in 2017 would need to work as many as 721 hours. The staggering costs of education force students into working multiple jobs. More than

twice as many full-time students aged 20 to 24 in the province work part-time jobs than students did in the 1970s (Serebrin, 2012). The workloads are hurting their educations: **43 per cent of full-time undergraduate students say that their jobs have negatively affected their studies** and 30 per cent say their jobs mean

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they'll take longer to finish (Serebrin, 2012). It's worst for PhD students—six in ten say work forced them to prolong their studies (Serebrin, 2012). According to the 2011 Canadian University Survey Consortium study **56 per cent of undergraduates in Canada work** (Serebrin, 2012). The average number of hours is 18 per week. 18 per cent of students **work more than 30 hours weekly** (Serebrin, 2012). One third of working students report “a negative impact on their academic performance.”(Serebrin, 2012). The cost of tuition is burning students out by forcing them to work full-time on top of studying full time. **Students are unable to reach their full potential due to the sky-rocketting cost of tuition.**

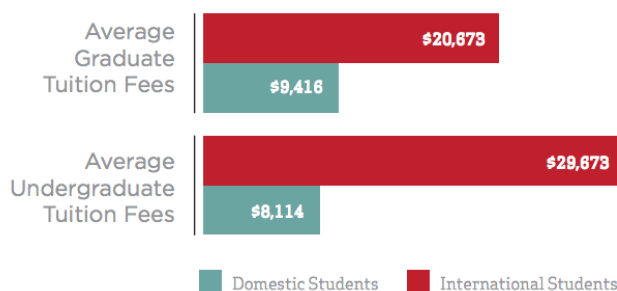


To understand how tuition fees contribute to systemic discrimination, it's necessary to examine how racialised people are positioned within the Canadian economy. On average, racialised people experience significantly greater and disproportionate rates of poverty than people who are not racialised (CFS, 2018). This means that racialised people are more likely to fall below the LICO and have related problems like **poor health, lower education, and fewer job opportunities** than those who are not racialised (CFS, 2018).

**Racialised families are two to four times more likely to fall below the poverty line** than

families that are not racialised and racialised individuals are three times more likely to fall below the poverty line (CFS, 2018). While tuition fees are about 11 per cent of the average incomes of male non-visible minorities, and 17 per cent for female non-visible minorities, they are consistently higher for male and female visible minorities, at about 15 per cent and 21 per cent, respectively (CFS, 2018). These figures reach as high as 19 per cent for males and 26 per cent for females for some visible minority categories. The burden of tuition fees for students who are racialised is substantial and greater than that for non-racialised students. It is also important to identify the significantly lower average incomes of racialised women as there exists a gendered impact of high tuition fees (CFS, 2018). According to a survey conducted by the Canadian Association of University Teachers among undergraduate students surveyed in 2007, **only 19 per cent self-identified as a member of a visible minority group and only three per cent self-identified as indigenous**

(CFS, 2018). It is a simple conclusion to come to, the cost of tuition keeps racialised students out of the classroom. A free education is the only way to move forward.



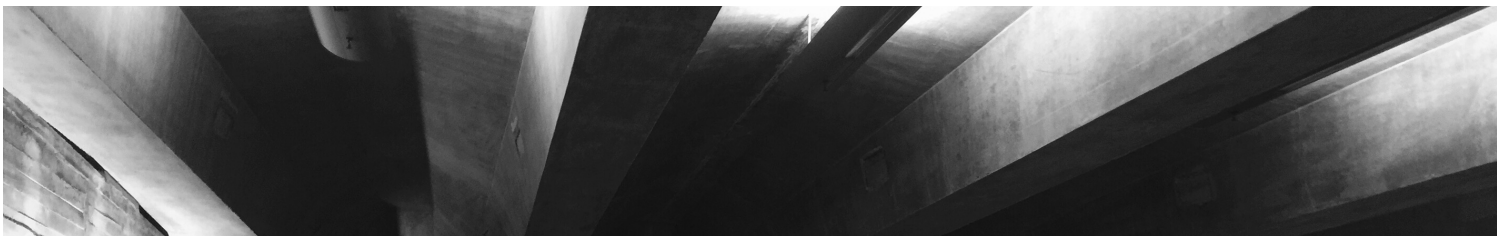
# TUITION FEES

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Access to education should mean access to learn and grow without fear. On Thursday October 31, at a Quality Services to Students Academic Support Meeting, the UTM Office of Student Affairs said that an integral part of learning is sending the message that it is okay to fail and that students can try again. The UTMSU agrees, however when the university sends students into further debt for failing courses (forcing students to retake classes), failure is not an option. When being sick alone costs money (e.g paid sick notes, exam retake fees) **students are forced to ignore their mental health in an effort to afford school**. Students cannot mentally or physically afford the burden and anxiety of going into further student debt.

The UTMSU calls UofT to eliminate fees associated with being sick and to lobby the provincial and federal government for a free and accessible education for all. Free post secondary education is common worldwide and is economically efficient. **It is not an economic issue, but purely a political issue not to provide free education**. UofT should pave the way for the important lobbying work that is needed to challenge these systemic and financial barriers.

**Recommendation:** Eliminate the costs associated with being sick and lobby for free education for all.





# 2SLGBTQ+ STUDENTS

Although two-spirit, lesbian, gay, bisexual, trans and queer identified (2sLGBTQ+) people are as diverse as the general Canadian population in their experiences of mental health and well-being, they face higher risks for some mental health issues due to the effects of discrimination and social determinants of health.

Socio-economic factors (or determinants) play a key role in mental health and well-being for everyone and are particularly important for marginalized populations. Three significant determinants of positive mental health and well-being are: social inclusion; freedom from discrimination and violence; and access to economic resources. Queer and trans people are over-represented among low-income Canadians. An Ontario-based study found that half of trans people were living on less than \$15,000 a year (CAMH, 2018). On top of that 2SLGBTQ+ people experience stigma and discrimination across their lifespans and are targets of sexual and physical assault, harassment and hate crimes. Hate crimes motivated by sexual orientation more than doubled in Canada from 2007 to 2008 and were the most violent of all hate crimes (CAMH, 2018) (StatsCan). A separate Ontario-based study of trans people found that 20 per cent had experienced physical or sexual assault due to their identity and that 34 per cent were subjected to verbal threats or harassment (CAMH, 2018).

***"When I told my councillor at HCC I was gay, I was told I was just confused"***

-Anonymous Queer UTM Student

The discrimination queer and trans students face can often times make it difficult to come to class, participate in extracurriculars or reach out to professors. Students at the UTMSU's Mental Health Town Hall overwhelmingly discussed how homophobia and transphobia negatively impacts their mental health. Some students even stated that the fear of transphobia keeps them out of the classroom.

***"After Jordan Peterson, I'm constantly scared and anxious of telling my profs my pronouns and being out as a trans student on this campus. It makes me anxious to come to class. I feel like my university doesn't care about me."***

-Anonymous trans UTM student

These factors among many others contribute to the higher rates of mental health issues in the 2SLGBTQ+ community. For example, 77 percent of trans respondents in an Ontario-based survey had seriously considered suicide, 45 per cent had attempted suicide and are at double the risk for post-traumatic stress disorder (PTSD) than heterosexual (CAMH, 2018).

***"I often times skip class because my depression has gotten so bad, I think being bullied on campus has a lot to do with that"***

-Anonymous trans UTM student

Knowing that 2SLGBTQ+ students are more likely to be impoverished and the effects that poverty have on mental health, it is easy to draw the conclusion that 2SLGBTQ+ students on this campus face enormous barriers. UofT needs to recognize the role that homophobia and transphobia play in 2SLGBTQ+ student's mental health. For example, by failing to condemn the transphobia of Jordan Peterson, the university and its administration furthers the discrimination that 2SLGBTQ+ students face on campus by signifying to their peers that it is okay to challenge their identity and personhood. We cannot talk about mental health without talking about homophobia and transphobia.

**Recommendation:** Implement mandatory equity and anti-oppression training for all faculty and staff.

# INTERNATIONAL STUDENTS

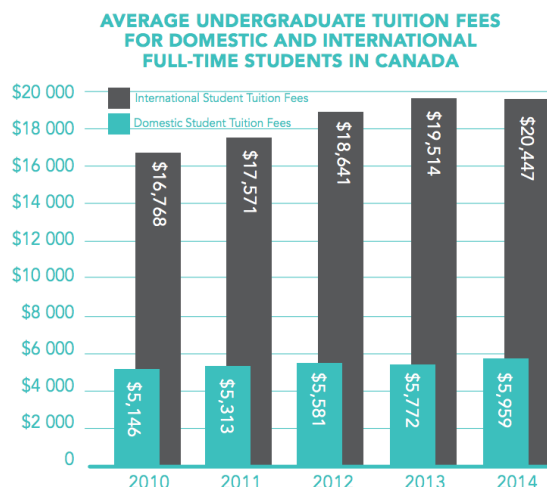
International students are extremely high risk for developing mental health issues during their time in post-secondary. International students also have the least access to affordable mental health services. While it is true that external mental health support and healthcare is available, international students cannot access these services due to their lack of coverage under the Ontario Health Insurance Plan (OHIP). This puts international students in a situation where they have no option other than to wait for a counsellor at the Health and Counselling Centre (HCC). At the UTMSU's Mental Health Town Hall students reported not being able to access counselling on campus due to lengthy waitlists. Many of whom mentioned that they would simply go to the hospital in times of crisis. However, international students do not have this luxury. Due to the fact that the University Health Insurance Plan (UHIP) is not widely accepted, many international students are regularly turned away by pharmacies and simply cannot go to the hospital without incurring exorbitant hospital bills. With International student fees being up to five times more expensive than their domestic counterparts, international students are much more likely to feel financial burden resulting in anxiety and stress. As mentioned previously, the impact of poverty on mental health can be dire. Because of this many students feel like they are unable to take the crucial sick days and mental health days they need.

***"I will never miss a class, even if i'm too sick or anxious to move, because my tuition is so high. Missing one class would be like throwing away 100\$+"***

- Anonymous UTM International Student

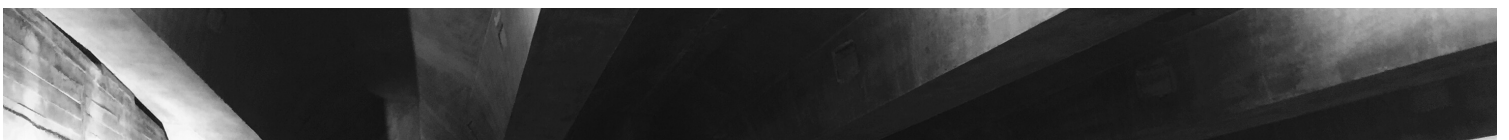
Forcing students to choose between losing out on hundreds of dollars or going to class means students are forced to go to class while ill. This is morally upsetting and creates worry for a public health crisis. Universities and colleges must stop treating international students as cash cows or this mental health crisis will not end. While all students in Canada have faced dramatic fee increases over the last decade, tuition fees for international students have become particularly burdensome in recent years. By fall 2014, average tuition fees for international undergraduate students were \$20,447—more than three times the fees paid by Canadian citizens.

**Recommendation:** Lobby for OHIP for international students and implement free tuition for international students.



***"My follow up had to be a month away because the university is not prioritizing my mental health as an international student"***

- Anonymous UTM International Student



# RACISM ON CAMPUS

Within the academic community, we generally acknowledge and discuss experiences of racism and the detrimental impact it has on equitable access to resources (including education, housing, healthcare, etc.). We less frequently discuss the detrimental impact racism often has on mental health.

Racism can take on many forms including racial macro-aggressions, which are described as more overt racist experiences including being called a racial slur, being physically assaulted due to race, or being denied fair wages due to race. Racial micro aggressions are described as subtle, intentional or unintentional slights that denigrate or degrade individuals of colour due to race. Examples of micro aggressions include racialised people being under represented in work, educational, or governmental contexts, being told that racialised people "talk about race/racism too much" and assumptions of sameness due to race.

Micro-aggressions are what we see most on campus. While it is true that UTM is a heavily racialised campus in the sense that many of the students are non-white, many of the faculty are white. Micro aggressions are still extremely prevalent in the classroom, both at the hands of professors, staff, administration and students. Some researchers have suggested that chronic experiences of racism and micro aggressions result in **"racial battle fatigue"** which includes **anxiety** and worry, hyper-vigilance, **depression**, headaches, increased heart rate and blood pressure, and other physical and psychological symptoms (West 2019). UofT cannot claim to be committed to solving or helping the mental health crisis when it does little to combat racism in the classroom from professors, from students, and in the curriculum.

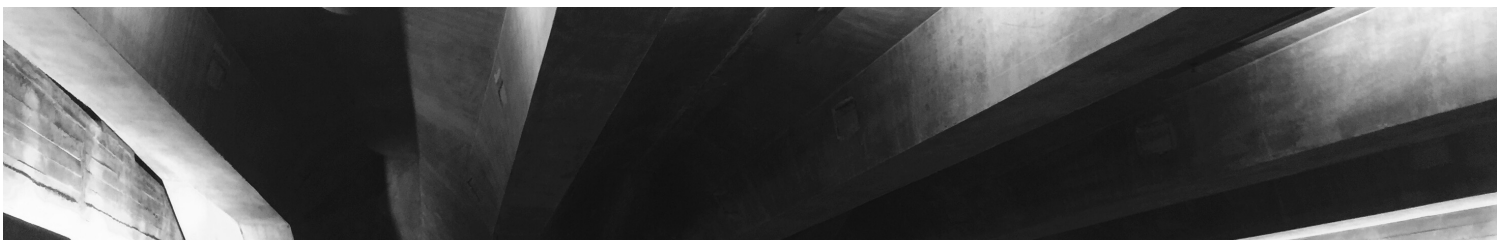
***"Walking into a classroom and being the only indigenous student in the room is anxiety inducing. I never feel comfortable or safe in the classroom and never know when the next offside comment will happen. I've even had a prof say "you're not like other aboriginals" because I studied math"***

- Anonymous UTM Student

***"When I'm in class and I'm the only black student in the classroom, or my professors are continuously white, I begin to wonder if people like me belong at this institution. It makes my anxiety spike and my depression grow because I feel like an outsider at my own school. We need more black and racialized professors. "***

- Anonymous UTM Student

**Recommendation:** Implement mandatory equity trainings for all faculty and staff





# MULTI-FAITH SPACE

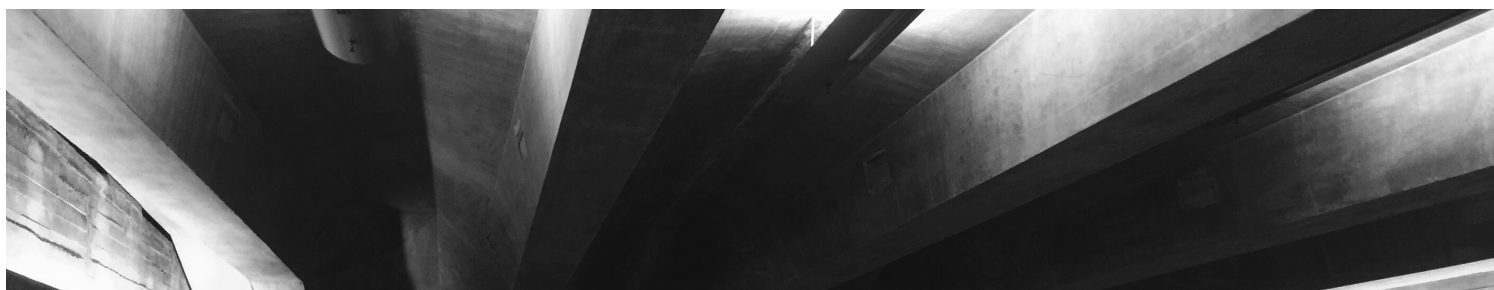
Meditation and multi-faith prayer spaces at UTM are limited and are typically crowded during peak hours of the day. Implementing a dedicated space in the North building specifically for meditation and multi-faith practice will provide a space that is accessible to students and would ease the other crowded prayer spaces on campus. This is crucial for UTM students because a plethora of research proves that meditation and faith actually improves individuals' mental health.

The effects of meditation on college students' experience of stress, anxiety, depression and perfectionistic thoughts were investigated using forty-three undergraduate student groups who were trained in Transcendental Meditation and who practiced the technique consistently over a two-semester period (Burns, 2011). After the two-semester period, the students' **levels of anxiety, depression and stress were drastically lower** than the starting levels (Burns, 2011). To measure these levels the Perceived Stress Scale-14, Beck Anxiety Inventory-Trait, The Center for Epidemiological Studies Depression Scale, and the Perfectionistic Cognitions Inventory were used (Burns, 2011). Burns concluded that given the significant rise in mental health issues and demands for services in colleges and universities, **it is important to offer additional methods to address these concerns aside from traditional counselling and psychotherapy** (Burns, 2011). Burns also concluded that these additional methods should include meditation and faith based programming.

In a separate study Ewing, et al. conducted research to test whether a "A Stress Reduction Room (SRR)" where students could practice faith and meditation would aid mental health (Ewing, 2011). The implementation of the SRR was so successful that the university being used for the experiment (Adelphi University, NY), experienced a substantial decrease in drop-out rates and use of counselling services. Students also reported feeling much more at ease on campus knowing that they had a place to decompress.

It is well known amongst students that the month long wait times for counselling at HCC are far to lengthy to be helpful. With multiples studies proving there is a way to decrease these wait times, why not give a permanent, adequate, multi-faith space a chance?

**Recommendations:** Implement a permanent multi-faith space that is respectable, safe, and smudge safe. Do so by consulting with stakeholders in this process (eg. UTMSU, Muslim Students Association, Hindu Student Council, Baptist Student Ministries, various Christian and Catholic fellowships, Sikh Student Association and Indigenous students).



# SEXUAL VIOLENCE

Sexual Violence is rampant on Canadian university campuses. More than **20 per cent of female students, 46.7 per cent of LGBTQ+ students** and 6.9 per cent of male students have been sexually assaulted in their lives, according to a Maclean's survey of more than 23,000 undergraduate students from eighty one schools (Schwartz, 2018). About half those assaults happened during university (Schwartz, 2018). Across Canada, 31 per cent of students said they were given no information on how to report a sexual assault and 25 per cent said they were given no information on services for students who are sexually assaulted (Schwartz, 2018). Even when the information is received, it is unclear whether it makes a difference (Paquette, 2018). Silence is Violence UoT sent out a survey through mailing lists and campus groups across UofT's three campuses and received 544 responses. It found that as many as **20 per cent of students experienced at least one instance of sexual violence** during their time at U of T. About half of that 20 per cent were unsure if what they experienced constituted sexual violence. **30 per cent of participants stated that they knew someone who had experienced sexual violence** during their time at UoT. Marginalized respondents like LGBT students and students with disabilities, experienced disproportionately high rates of sexual violence, including **57.1 per cent for Indigenous students**.

***"The truth is, Canada has very high frequencies of campus sexual violence," says Geneviève Paquette, a professor at the Université de Sherbrooke. "We aren't doing nearly enough to protect students."***

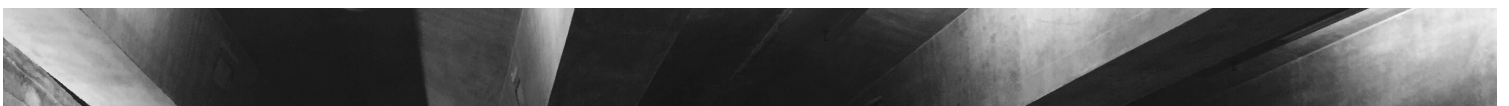
We know that Sexual Violence is prevalent on campus but how does that play into Mental Health? Almost one-third (31 per cent) of all sexual violence survivors developed Post Traumatic Stress Disorder sometime during their lifetime; and more than 11 per cent of sexual violence survivors still have PTSD today (Kilpatrick, 2017). Sexual violence survivors were 6.2 times more likely to develop PTSD (Kilpatrick, 2017). Sexual violence survivors were 3 times more likely than non-victims of crime to have ever had a major depressive episode (30 per cent Vs 10 per cent) (Kilpatrick, 2017). Also, they were 3.5 times more likely to be

currently experiencing a major depressive episode (21 per cent Vs 6 per cent) (Kilpatrick, 2017). Sexual violence survivors were 13 times more likely than non-victims to attempt suicide (Kilpatrick, 2017).

While we know sexual violence impacts one's mental health, what does that mean for students? According to Dr. Shirin Hassan, who studies the impact of PTSD, students who suffer from PTSD are likely to miss class due to overwhelming feelings of anxiety, need extra time on tests and assignments and find it difficult to study in class. Depression can also cause a lack of ambition causing a decline in academic performance and anxiety makes the act of even getting to campus seem like climbing a mountain.

The above figures prove that sexual violence is a large determinant of mental health for Canadian university students. If 1 in every 3 female identifying students and just under half of queer students are facing sexual violence, it is evident that their mental health will be in dire situations because of the violence they have faced. UofT's Sexual Violence Policy, while not technically legally outdated, is politically outdated.

**Recommendation:** Adopt the UTMSU's sexual violence policy review changes and include a mandatory consent seminar for ALL first year students.



# RECOMMENDATIONS

## **Equity:**

- Lobby for free education for domestic and international students
- Implement equity trainings for professors, teaching assistants, staff and administration
- Provide Mental Health Sensitivity & Active Listening training for professors, teaching assistants, staff, and administration
- Implement affordable housing on campus
- Implement a permanent multi-faith space that is respectable, safe and smudge safe. Consult with stakeholders for this process (eg. UTMSU, Muslim Students Association, Hindu Student Council, Baptist Student Ministries, various Christian and Catholic fellowships, Sikh Student Association and Indigenous students.
- Remove fees for medical notes
- Mandatory sexual violence and consent seminar for all first year students similar to Ryerson University
- Create a more survivor centric sexual violence policy
- Remove exam retake fees
- Stop hosting exams at irregular times to avoid retakes in their entirety
- Mental health sensitivity and awareness training for campus police

## **Pedagogy:**

- Split full year courses so students have the opportunity to drop without loss of grade
- Decrease class sizes in first year to ensure more academic support and success
- Remove culling policies

## **Leaves:**

- Follow recommendations from ombudsperson regarding having a voluntary leave with access to campus services
- Publicly address the culture of fear created by Mandatory Leave of Absence Policy
- Increase public transparency around the Mandatory Leave of Absence Policies use and perimeters

## **Governance:**

- Restructure Governing Council to include more independent student representatives
- Include student's union representatives on Governing Council, (1) representative for each recognized students' union (UTMSU, UTSU, APUS, GSU, SCSU)
- Re-evaluate said policy that allows for students to be handcuffed for expressing suicidality





# CONCLUSION

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After exemplifying various causes for heightened anxiety and depression, its important to highlight that for some individuals it is very much biological.

There needs to be space at the University of Toronto everyone. Just because somebody is struggling with their mental health does not mean they are any less intelligent, capable and deserving of an accessible and high quality post secondary education.

These recommendations are integral to achieving a healthier and accessible campus for all students,

Its time The University of Toronto prioritize students and wellbeing, We hope that you take the necessary time to read through this document and implement our recommendations. Students are in dangerous and dire situations and UofT needs to act now,

Sincerely,



The University of Toronto Mississauga Students Union

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