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Submission to the UWA Health Services Review 2019

UWA Student Guild

September 2019

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The Guild wishes to acknowledge that this submission, and much for the University's Health Service Delivery takes place on Whadjuk Noongar land. The Whadjuk Noongar people remain the spiritual and cultural custodians of this place, and we wish to pay our respects to their Elders, past, present and emerging.

Executive Summary

UWA's health services are extremely important and are valued by students. Particular commendations go to the Medical Centre, UniAccess, and Student Assist, who provide high quality services which are free and easy to access.

There are also some capacity issues that need to be addressed, especially within CAPS. Putting together this review has made it clear that the health services at the university need to function together better to have the optimal impact and be more efficient. They also need to work closely with external partners to provide high quality support to students.

This submission identifies that the major area for change is in the provision of mental health services. Student mental health is a growing area of concern at UWA and across the sector. This problem is multifaceted, and it is important to consider the stressors that students face at university, where they will turn to for support, and the services offered to help them. The University should adopt a whole-of-institution approach to student wellbeing, backed by considered strategy and strong leadership to best position itself to respond to this challenge.

The university's health services currently largely cater two ends of a spectrum – education to attempt to prevent illness from arising, and services that respond to crises. There are few mental health services at the University which engage students between the two ends of this spectrum, and more services and investment are required to prevent students from reaching a state of crisis.

Our submission identifies 7 primary thematic recommendations.

1. Health services need to be **properly funded** to meet student demand.
2. Health services need to remain **free to access**.
3. Health services need to be **inclusive** for all students.
4. Health services need **to work better with each other**.
5. Health services provided need to serve a **broader range of needs**, especially focusing on preventing students' health and wellbeing from becoming high-risk.
6. UWA should form **partnerships and collaborations** with external organisations to optimise student support.
7. UWA should adopt a **whole-of-institution approach** to student wellbeing, which should be supported by an evidenced-based and best practice strategy and championed by the senior leadership of the University.

These themes are broken down into 68 detailed recommendations. Some call for major change, while others are simple adaptations which will improve our health services. Recommendations are embedded throughout the document and collated in Appendix A.

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Foreword

The UWA Student Guild welcomes the Health Services Review. Every student deserves to be happy and healthy, yet every day there are students who struggle with their health and wellbeing. Being physically, mentally and sexually healthy is key to being successful at university. Ill health acts as a barrier, stopping students from accessing education to the fullest extent. Our health services need to help students to overcome these barriers and lead full, healthy lives.

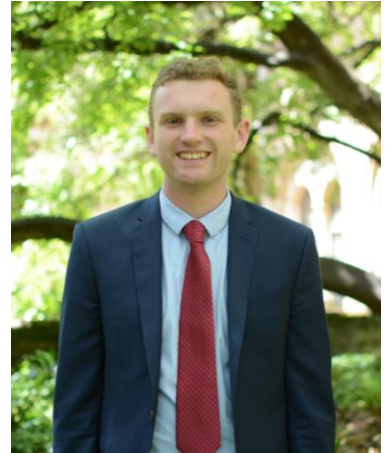
The provision of health services at UWA signify an ongoing commitment to students' health and wellbeing from the university. It is important to ensure that these resources can provide effective support to students. There are currently many pain points with the services, as identified in this submission, and this review is an opportunity to reform the model of service provision to one which is more sensitive and student centric.

Equally, in the wider community there is an increasing focus on health and wellbeing, particularly in the higher education sector. This Review gives the University the opportunity to forge new partnerships and collaborations, and work with others to support our students, and help them to live healthy lives. I am hopeful that by harnessing the recommendations of this Review with strong and committed leadership, UWA can place itself as a trailblazer in student health and wellbeing.

Best Wishes



Conrad Hogg
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The Landscape

Student Health and Wellbeing

Student health and wellbeing is a topic of rising interest and concern in the higher education sector in Australia, and internationally. This submission proposes that while the physical health of UWA students is reasonably well catered for, student mental health is a significant and growing concern for the University and impacts on students' ability to participate and succeed at university. In any given year, one in four Australian university students will experience mental ill health (Browne et al., 2017). Furthermore, in the United Kingdom, where this is better studied, Thorley (2017) demonstrated that this is an increasing trend:

- Young people today are more likely to experience mental illness than previous generations (19% in 2017, as compared to 15% in 2003)
- Students experience lower wellbeing than young people as a whole
- The number of student deaths by suicide has increased by 74% between 2007 and 2015.

Mental health and wellbeing is a continuing and increasing challenge for universities, and it is important that this area receives adequate attention, resourcing and leadership. Leading universities in this area have developed an all-of-institution approach to mental health and wellbeing to put a focus on this issue, and UWA ought to do the same with great urgency.

Key Student Stressors

Universities expose students to a range of stressors which may impact their health and wellbeing. Broadly speaking, these include changing relationships (with family, peers, teachers, significant others), lack of resources (time, money, etc.), expectations (from themselves and others), academic stressors (demands of classes, exams, assessments), and being in a new and unfamiliar environment (Hurst et al., 2013). The headspace and The National Union of Students (2016) survey into student wellbeing identified that the key academic stressors for Australian students are exams, group assignments and oral presentations. It is key for universities to recognise the stressors which affect students and mitigate against them where possible.

Students at UWA often lead busy lives, and experience stress in both their academic, and non-academic life at university. Surveying of 535 students revealed that the most stressful aspects of university life for students include exams (7.97/10), not having enough time to get everything done (7.38/10), and assignments (7.19/10). Comparatively, activities like making new friends, and home circumstances were not perceived as stressful.

Table 1: Relative intensity of stressors in the student lifecycle.

Field	Min	Max	Mean	Std Deviation	Variance	Count
Exams	0.00	10.00	7.97	1.77	3.13	499
Tests	0.00	10.00	6.67	2.10	4.43	496
Assignments	0.00	10.00	7.19	2.10	4.39	497
Concerns about finding a job	0.00	10.00	6.36	3.10	9.61	488
Financial pressures	0.00	10.00	6.14	3.00	8.98	493
Circumstances at home	0.00	10.00	4.52	3.24	10.53	471
Making new friends	0.00	10.00	4.16	2.77	7.68	476
Not enough time to get everything done	0.00	10.00	7.38	2.49	6.21	496

It is also important to note diversity amongst the student body here. Although factors like financial pressures, and circumstances at home are not rated as significant stressors, for a small and significant group of students, these factors are extremely important to their health and wellbeing, as well as their success as university – this is explored further later in the submission.

In regard to being short of time, some students also commented on the reduction of semester lengths from 13 weeks to 12, and this has created additional stress for students. The University needs to closely consider the impacts of teaching periods and the placement of study breaks to reduce stress on students.

The Guild Commends:

- Initiatives that currently take place at the University to reduce the impact of these stressors on the student life cycle, (e.g. wellbeing initiatives in the libraries during exams, welfare week, free yoga).
- Institutional leaders who have been receptive to changes in academic policy in a student centric manner (e.g. new assessment policy).

The Guild Recommends:

- Student wellbeing and the student experience becomes a key consideration in academic policy.
- Student Life investigates ways to reduce the impact of these stressors on students' lives.
- The Review on Summer School and Academic Calendar is closely considerate of the impact of teaching periods on student wellbeing.

Connected Cohort

Having a strong support network of friends and family, and feeling a strong sense of belonging is a strong protective factor of people's mental health and wellbeing (Pittman and Richmond, 2008). It is therefore important that the University is a welcoming environment which facilitates the formation of inclusive social groups.

Data collected from 535 students indicates that most UWA students perceive themselves as connected to a community at the University. 34% of students reported that they have a lot of friends at university, and 59% of students reported that they have some friends at university. This is a positive result, finding that most of the student cohort feel connected. Interestingly, students with strong social networks had more positive perceptions of most health services.

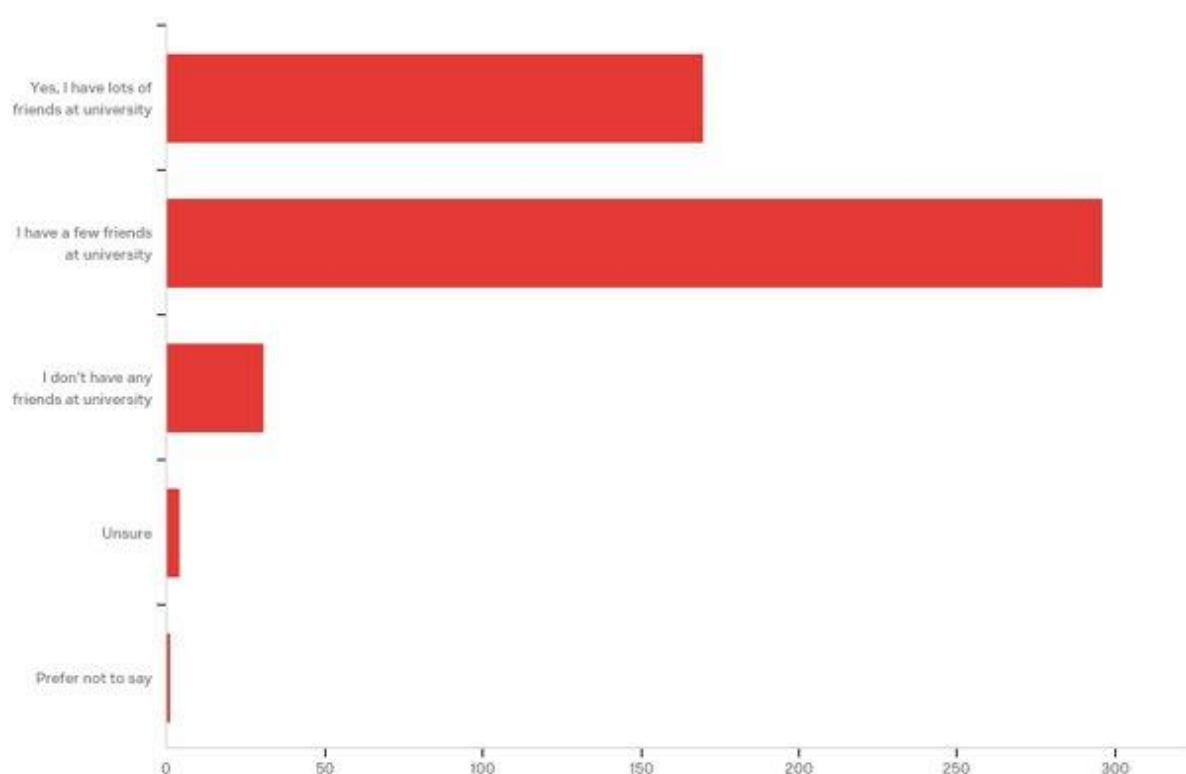


Figure 1: Student Perceptions of the Size of their Friendship Group (n = 502)

Unfortunately, this still leaves a small number of unengaged students who do not have a strong support network at university. 6% of students responded that they have hardly any friends at university. Of these students, 65% say they see friends less than once a month at University. These students rated their physical health (5.40/10 vs. 6.82 for all students) and mental health (4.45/10 vs. 5.97 for all students) more poorly than the average cohort. They are also far more likely to try and deal with an issue on their own (58%), as opposed to with their family, friends, or with support services, as compared to average (27%). Future efforts ought to focus on engaging these students who 'slip through the cracks' to make sure that they are able to connect with their peers, and form support networks at university.

The Guild Commends:

- Clubs and societies, UWA Sport, UniMentor, Guild Volunteering, and other low barrier programs that encourage new students to make friends.

The Guild Recommends:

- Student Life continues to develop strategies to engage every student, in partnership with the Guild.
- Student Life develops capability to identify students experiencing loneliness and inform them of ways to connect with others.

Sleep

As identified by Sepehrmanesh (2016) and many others, there is a strong link between the quality of sleep that university students get, and their physical and mental health. It is therefore important that students get enough high-quality sleep. Data collected from UWA Students indicates that the majority of students (66%) get between six and eight hours of sleep. Concerningly, approximately 26% of students get less than 6 hours of sleep. These students had markedly lower perceived mental health (5.24 vs. 5.97 for all students), and marginally lower perceived physical health (6.37 vs. 6.82 for all students).

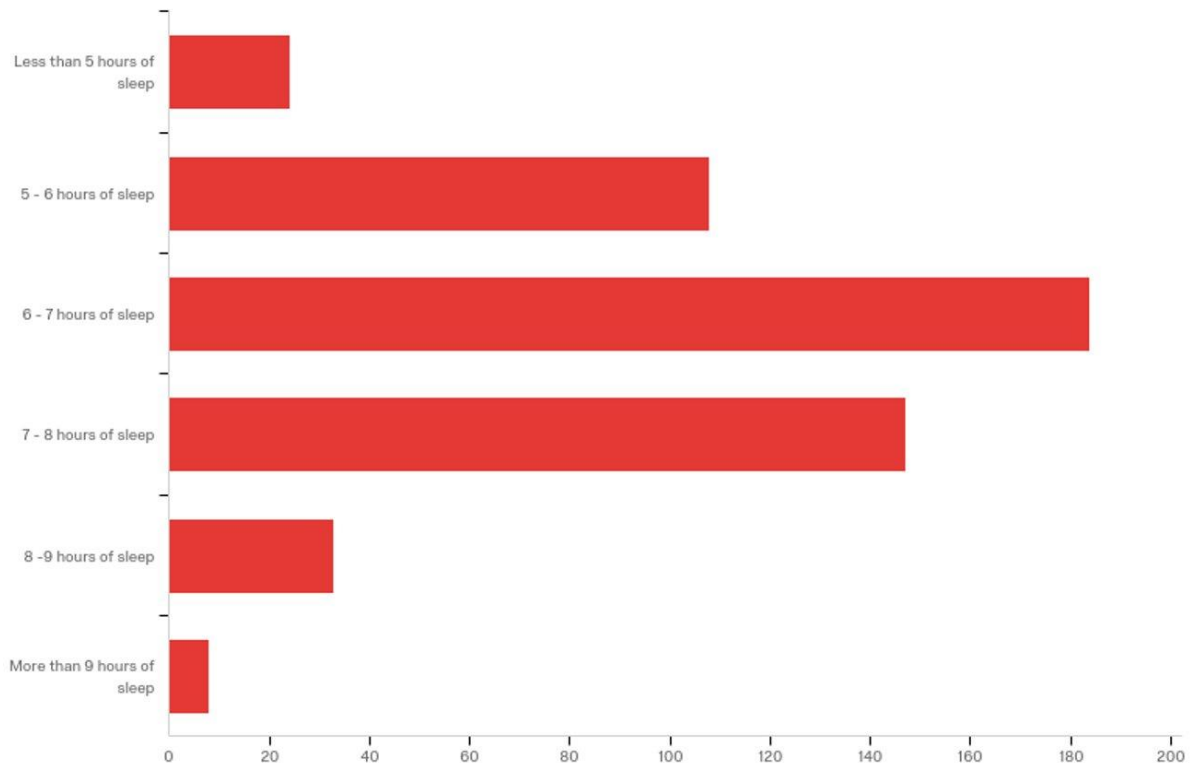


Figure 2: Quantity of Sleep of UWA Students (n = 504)

There is currently little advocacy or support to help students to get good sleep. Given the above findings, this can be considered a gap in UWA's ability to build resilience and good habits in students.

The Guild Recommends:

- Student Life considers encouraging healthy sleep as part of the to-be-developed Mental Health Strategy.

Asking for Help

For people struggling with their health and wellbeing, seeking help is a key step towards wellbeing. Surveying of 502 students identified that the main places that students would seek help are their friends (45%), deal with the issue themselves (27%), and their family (20%). This signifies that the first port of call for most students is not a health service in the University, the Guild or otherwise, but from the people around them or from themselves. Currently, the model of health service provision at UWA is primarily based on services which students must self-refer to, and there may be many students who do not make use of the resources around them. Many universities have service models which include peer-based support, so students can seek help from other students in the first instance. Such approaches are broadly supported in the literature, as they align with the help-seeking tendencies of university students (Browne et al., 2017).

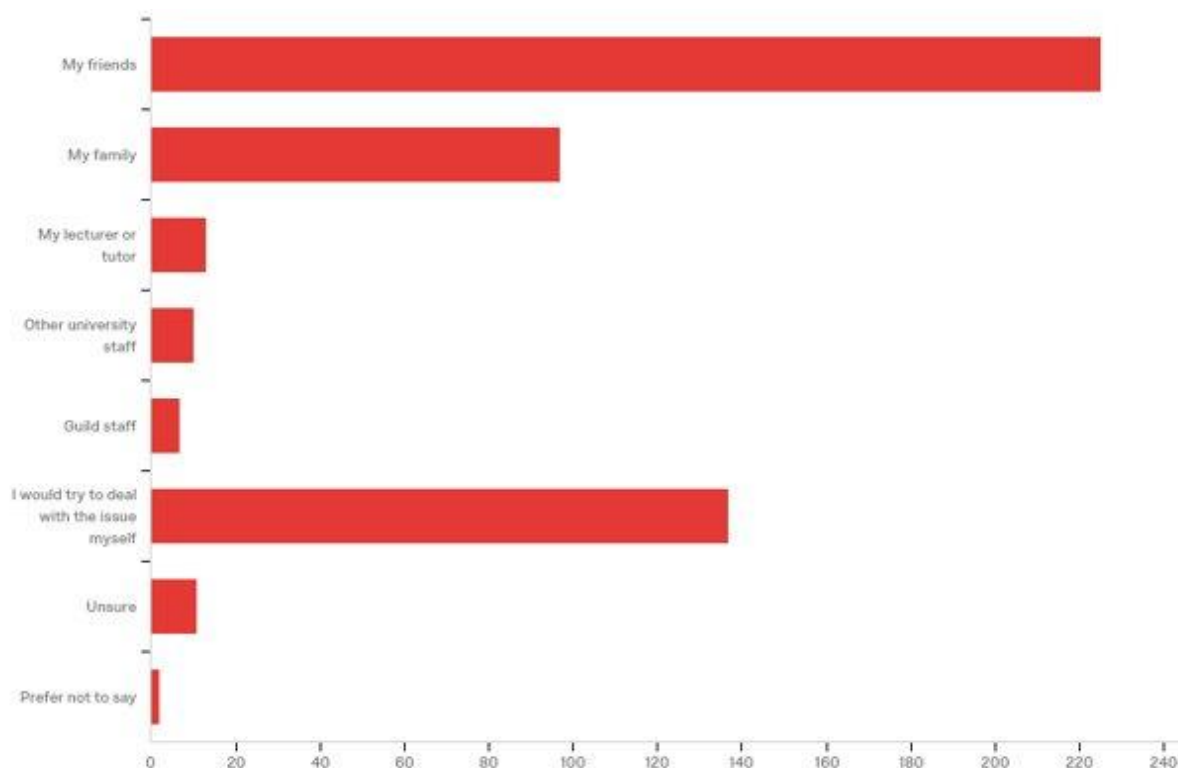


Figure 3: Responses to "If you were struggling, who would you ask for help?" (n = 502)

The Guild Recommends:

- The University and the Guild should investigate peer mentoring schemes to allow students to seek help from their peers.
- The University and the Guild should run more outward-facing campaigns to encourage students to seek help if they are struggling.

Special Consideration

The special consideration process is used by many students who request alterations to their assessments, examinations, or courses on the basis of special circumstances in their life. Although special consideration is not itself a health service, it has been included in this submission as it is related to the academic achievement and success of many students who need to access health services. Of 504 respondents to the question, 45% had applied for special consideration. Of these people, 61% had only applied for special consideration once in the last 12 months. The most common reasons people had sought special consideration was illness (52%), and personal/family responsibilities (18%).

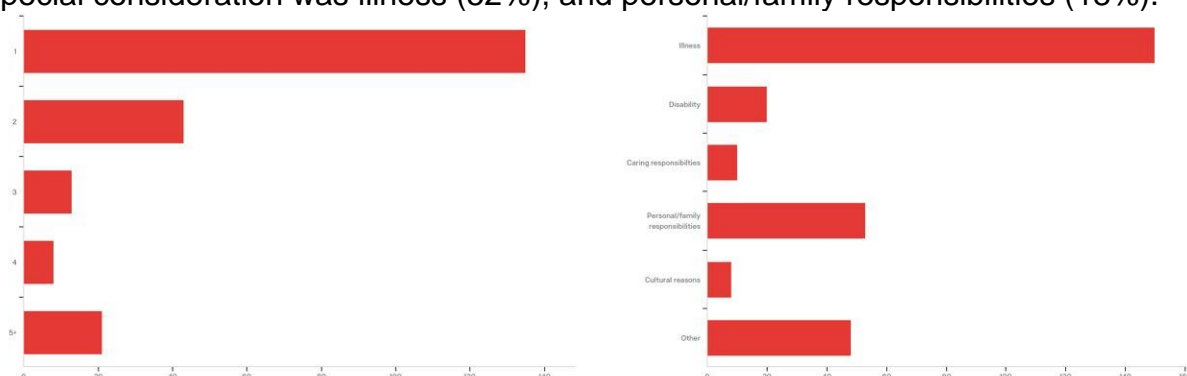


Figure 5: Number of times respondents have applied for special consideration in the last 12 months (left, n = 220) & reasons respondents applied for special consideration (right, n = 220).

From 220 responses, the special consideration process was given a net promoter score of -0.45, signifying that some students find the special consideration process to be a pain point. The main issues with the system were frustration that it is not fully online, a high burden of proof and inflexible timelines for the submission of special consideration applications. There also appears to be inconsistency between how the process is implemented between different faculty offices, the BPhil Office, and UniAccess. These pain points can make it difficult for students who need to access health services to be treated fairly in their academic studies.



Figure 4: Net Promoter Score of the Special Consideration Process (n = 220)

Notably, this process is used heavily by students with a disability – 77% of students with a disability surveyed have applied for special consideration, and 19% have applied five or more times in the last 12 months. Hence, special consideration may act as a barrier for many students with disabilities at the university.

Although special consideration is not in the direct scope the Review, it is not in isolation of health services. We would like the panel to recognise the impact that the process has on student wellbeing, and the health services, and take this into consideration.

The Guild Commends:

- The provision of special consideration to ensure that students with health issues, or other intervening circumstances are not unduly affected in their academic studies.

The Guild Recommends:

- Ensure standards for special consideration are uniform across faculty offices.
- Investigate provision of special consideration with a lower burden of proof (e.g. giving students 'sick days' or accepting certificates from a pharmacy).
- Move the special consideration online in an intuitive and easy to use system.
- Extend the period to apply for special consideration from three days to five days to be in line with other Western Australian universities.

Physical Health

Although this submission focuses primarily on student mental health and wellbeing of students, physical health is an important dimension of the student experience. Most students perceive themselves to be relatively physically healthy, 503 students surveyed rated their physical health 6.82/10 on average. Services for physical health are also readily available with the presence of the comprehensive and bulk-billed Medical Centre on campus. UWA's Perth campuses are also close to QEII Medical Centre, one of the state's largest health campuses, equipped with an emergency department.

Although not raised as a pain point in consultation with students at the Albany Centre, there are no physical health services provided at or by the University in Albany. This should be reviewed, and information about access to bulk billed health services should be provided to students, if this is not already occurring.

A key element of physical health is fitness. There is a lot of variation in the fitness levels of UWA students. Although many students actively engage with sport and fitness activities at University, there are also many who do not interact with these services who may not be able to afford to do so, and whose health may benefit from it.

The Guild Commends:

- Sports and physical wellbeing activities run by UWA Sport, and clubs and societies, encouraging physical activity.
- UWA Sport for entering the FISU Healthy Campus pilot to understand how our university community can become healthier.
- The physical health services provided by the UWA Medical Centre.

The Guild Recommends:

- Continued and expanded health promotion about making healthy life choices, and promotion of fitness activities.
- UWA Sport considers how it might offer sport and fitness activities to students from low-SES backgrounds.

Suicide

Suicide is the leading cause of death for Australians aged 15 – 44 (Health and Welfare, 2019), and is regrettably a topic that UWA must confront. Currently the University has no strategy to prevent student suicides or published procedure to react to them. In the past, this has left staff and students in the lurch after a student death, which has the potential to cause vicarious trauma.

The WA Mental Health Commission has done a lot of work around suicide prevention and has recently released *Suicide Prevention 2020: Together We Can Save Lives*. UWA should align its practice to this strategy and seek help and advice from the Mental Health Commission in this process.

The Guild Recommends:

- UWA aligns its policies, procedures, and activities to the WA Mental Health Commission *Suicide Prevention 2020: Together We Can Save Lives* strategy.
- UWA adopts creates a postvention procedure for student suicides, to ensure that best practice is followed.

Whole-Of-Institution Approach

International best practice recommends that institutions approach student wellbeing as a whole institution, which has been effective at other universities (Thorley, 2017). This means adopting an ethos of shared responsibility for student wellbeing – it is not just a topic for staff employed in health services to be concerned with.

The Children and Young People’s Coalition suggest that the philosophy of a mentally health university should “*permeate every aspect of work and be embedded across all policies, cultures, curricula and practice*”. Importantly, this is not a suggestion that all aspects of the university are governed by such a principle, but they should be *permeated* by it, and decisions should be cognisant of it.

Although this may be challenging for the University, this has the potential to have a profound impact on the University’s approach to student wellbeing. It will require areas of the University outside of the health services to be engaged in student wellbeing; including academics, professional staff, students, the University leadership and key decision-making bodies, creating the required culture shift.

The Guild Recommends:

- UWA adopts a whole-of-institution response to student wellbeing.
- This approach is led by a comprehensive mental health strategy and is backed by the senior leadership of the University.

Student Perceptions of Current Services

Medical Centre

The Medical Centre is a bulk billing health service located in Guild Village, which includes a comprehensive range of health services, including general practitioner appointments, and a mental health nurse.

Students have positive sentiments towards the service. Of the 535 students surveyed, 59% had accessed the Medical Centre in their time at university. Most rate the service highly, with a net promoter score of 27.3. Students find it vitally important to have a bulk-billing health service on campus, particularly for students experiencing financial hardship. The mental health nurse who works in the Centre is also a great support for students in crisis. It is also very beneficial having vaccination and pathology services onsite.

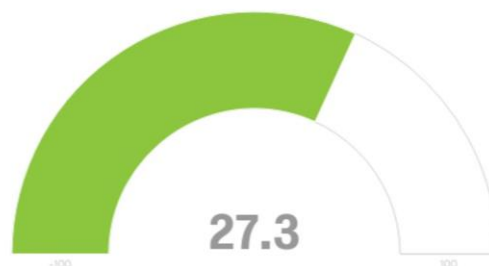


Figure 6: Medical Centre Net Promoter Score (n = 119)

The main pain point for students using the Medical Centre is the waiting times. Many students comment on the long waiting times in the practice, and how this sometimes leads to appointments being rushed.

Unfortunately, there are some students who don't know that the service exists, or where to find it, and several students commented that the Medical Centre could benefit from better advertising and signage.

The Guild Commends:

- The Medical Centre on providing a low-cost and high-quality service to students at the University.
- The comprehensiveness of the services offered in the Medical Centre.
- The Medical Centre on its mental health nurse service to help students in crisis.

The Guild Recommends:

- Continuation of the Medical Centre as a comprehensive health service with bulk billing.
- A plan is put in place to reduce waiting times in the Medical Centre.
- More promotion of the Medical Centre to commencing students.
- More signage to direct people to the Medical Centre, from Saw Promenade and through Guild Village.

UniAccess

UniAccess is UWA's disability support team who provide services and coordinate adjustments for students with disabilities, mental illnesses, and chronic illnesses. UniAccess provides a range of services, including statements of reasonable adjustment (SRAs, highly used), access to library resource rooms, and appeals. Most students

reported engaging UniAccess for special consideration (47.77%), followed by access to library resource rooms (32.48%).

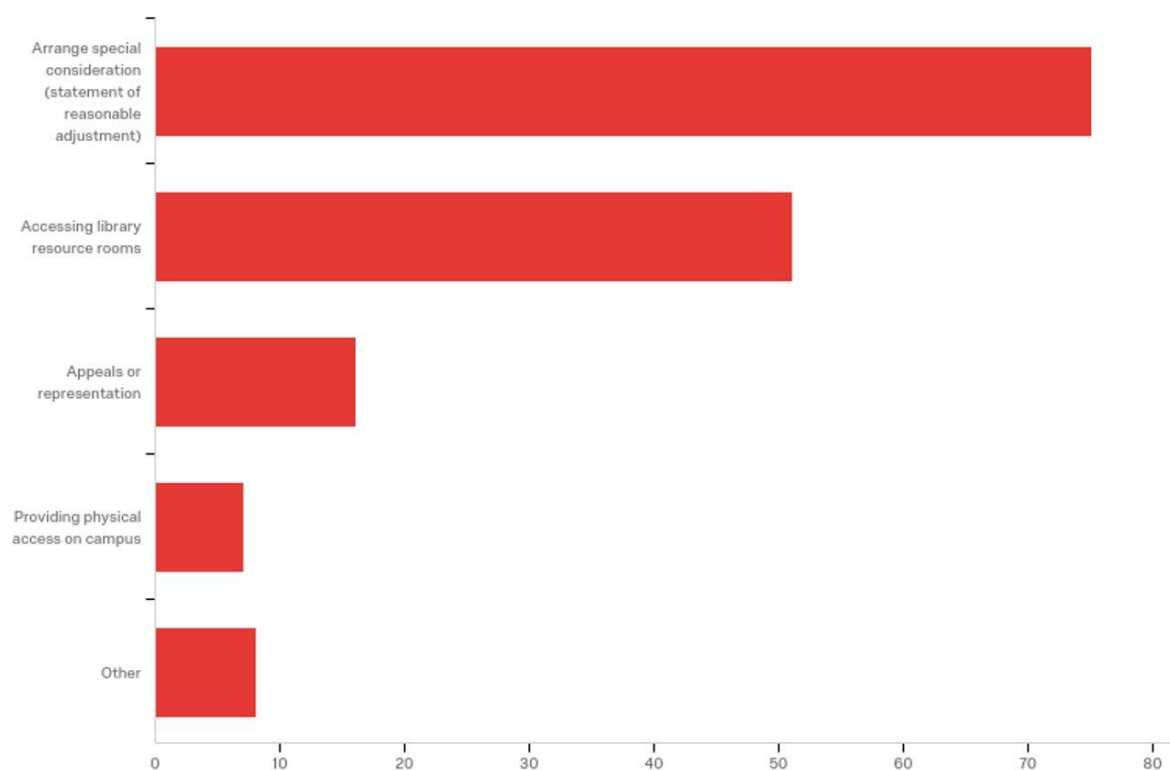


Figure 7: Services accessed at UniAccess, as reported by students (n = 122)

These numbers are much different for students with disabilities, special consideration is reported 12% more by students with disabilities (59.30%) and resource room access 14% less (18.60%). This indicates students with disabilities predominately are engaging UniAccess for setting up SRAs and Alternative Exam Arrangements (AEAs).

Of the 535 students surveyed, 23.69% have used UniAccess. For many students, this service is highly valued, receiving a net promoter score of 22.81. The staff are perceived as helpful, and empathetic to students' concerns. However, many students with chronic conditions are frustrated when they are asked to repeatedly explain and provide evidence of their circumstances each academic year. Further to this, some students commented that when they met with new case workers, the staff member did not seem to understand their requirements from their file.

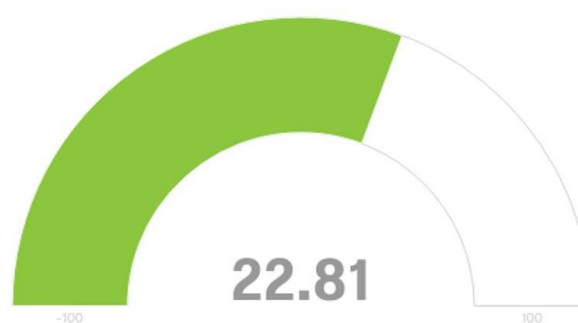


Figure 8: Net Promoter Score for UniAccess (n = 122)

Furthermore, only 57% of students with a disability identified that they had used UniAccess. Through the Guild's Access Department, students have commented that they weren't aware of UniAccess' services initially and were still not entirely sure what services

they could access. This is especially true of students with 'invisible' disabilities, particularly mental health conditions, who may not understand that UniAccess offers services to assist them.

It is also not well understood by students that UniAccess can offer services to student carers, and there is little information available about this.

The Guild Commends:

- UniAccess in being attentive to the needs of students with disabilities and advocating for them to other staff in the University.
- The warm and caring manner of UniAccess disability officers.

The Guild Recommends:

- Implementing more streamlined data management procedures in UniAccess to ensure that all case workers are able to handoff a student's case to another staff member.
- Investigate altering policies to not require repeated confirmation of permanent disabilities.
- UniAccess more proactively offers its services to students who identify having a disability, mental illness, or chronic illness.
- It is made clear at enrolment that students with a disability may register with UniAccess.
- Add an option for *mental ill health* and *chronic illness* when disclosing a disability at enrolment.
- UniAccess more clearly communicates the services that it can offer for students who are carers.

Counselling and Psychological Services (CAPS)

UWA provides Counselling and Psychological Services free of charge to students. This runs year-round, and each student is entitled to six sessions each year. Of the 535 students surveyed, 23% of students had accessed the service, and it received a near-neutral net promoter score or 2.63. Students commented that they thought the service was professional, and many students commented that their counselling sessions were high quality and were effective for them.

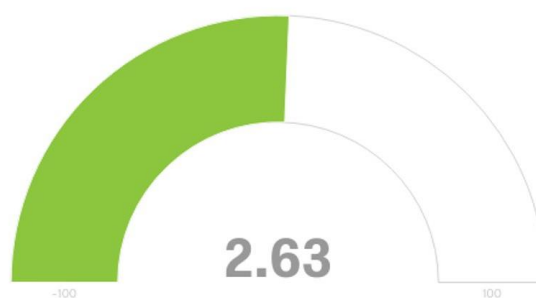


Figure 9: Net Promoter Score for Counselling and Psychological Services (n = 119)

A major roadblock for students accessing this service is the triage process and waiting times. Often, students have to wait a long time for a triage appointment. Of the students surveyed, 46% of those who accessed the service waited over a week from triage for their appointment, and 9% waited over three weeks. For many students this is an inappropriately long time, and some students commented quite emotively that having to wait for so long was detrimental and placed them at high-risk. Furthermore, many students commented that the triage process was robotic and impersonal, and this made

them feel less supported by the service. As those going through triage are often distressed, it is important to ensure that this process minimises stress as much as possible.

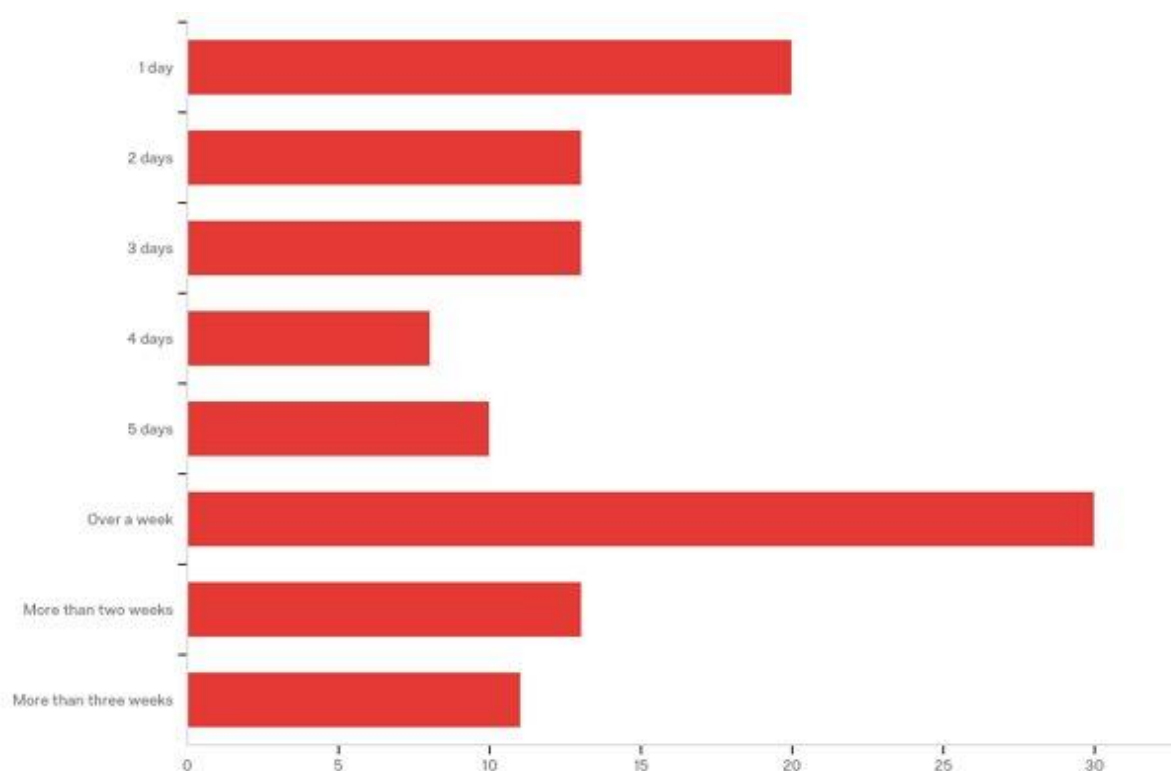


Figure 10: Triage times for Counselling and Psychological Services (n = 118)

The CAPS waiting area is also perceived by some students as open and quite impersonal. The space is quite sterile and is a thoroughfare for staff who work on the first floor of Student Central. Wherever possible, this space should be made more private, and elements should be introduced to the space to make it feel more welcoming and supportive. Additionally, elements could also be introduced to make the space feel more inclusive, particularly for international students, LGBTQIA+ students, and Aboriginal and/or Torres Strait Islander students.

The Guild Commends:

- The quality and professionalism of Counselling and Psychological Services, and the CAPS staff.

The Guild Recommends:

- Increasing the capacity of CAPS to open more appointments for students, and reduce the waiting time from triage, with the goal of 80% of students being triaged to an appointment in less than one week.
- Review the triage process to ensure that it is sensitive, patient-centric, and focuses on minimising risk.
- Improvement of the waiting area for CAPS to make it a more inclusive, welcoming and psycho-socially safe environment.
- Increase the number of appointments that students can access each year at CAPS.

Health Promotion Unit

The Health Promotion Unit (HPU) is a SSAF-funded unit located in the Medical Centre which aims to support students to lead healthy lives and succeed at university. The major programs offered by HPU are Fit for Study, Lived Experience Events, Five Ways to Wellbeing, and Mental Health First Aid training. Of these services, the Fit for Study program was the most accessed program by students surveyed.

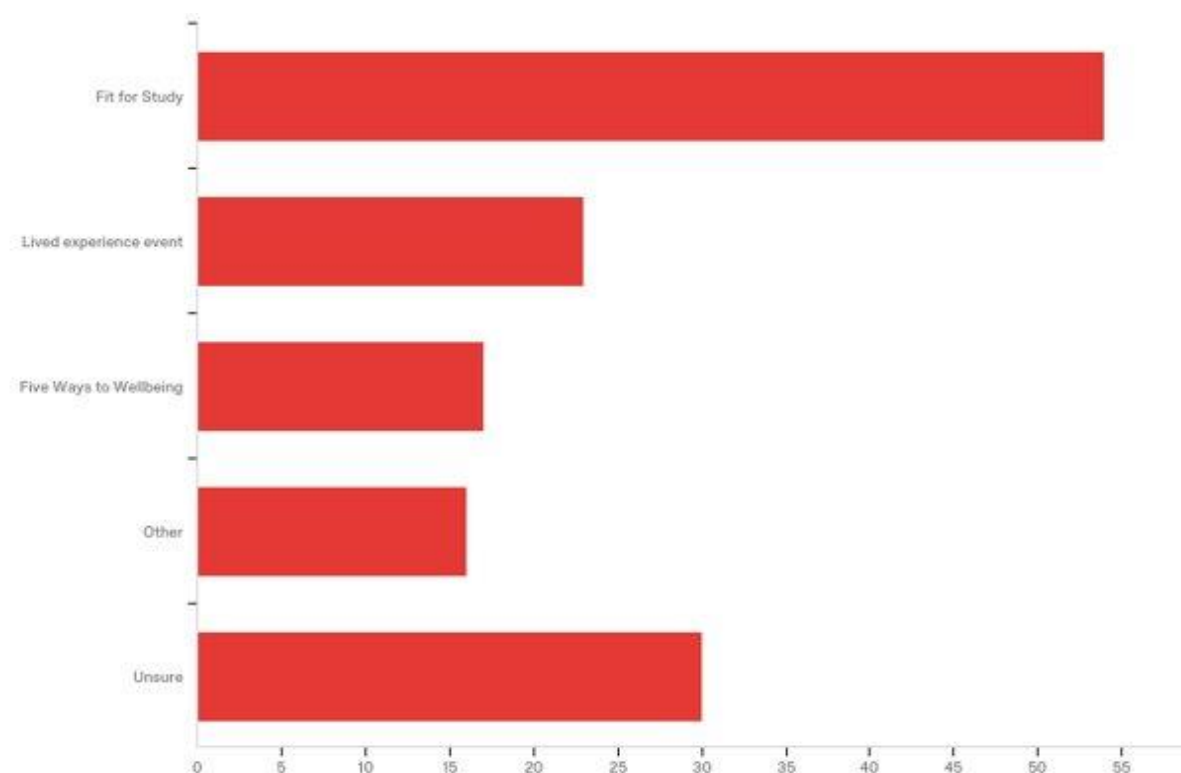


Figure 11: HPU Programs Accessed by students (n = 140)

HPU are moderately accessed by students surveyed, 23% of respondents having accessed HPU during their time at university. 44% of respondents believe that accessing these programs had a positive impact their health and wellbeing, although many said it was difficult to say.

Table 2: Student perceptions of the effect of HPU programs on their wellbeing (n = 113)

	%	Count
HPU improved your health and wellbeing	44.25%	50
HPU did not improve my health and wellbeing	7.96%	9
It's hard to say	30.97%	35
I'm unsure	16.81%	19

Despite the perceived impact of the programs by students, HPU programs received a low net promoter score of -19.64, indicating that students would not recommend that their friends participate in HPU programs. This reveals an incongruity between the perceived efficacy of these programs, and students' perceptions of the programs, which needs to be further investigated for HPU to have maximum impact.



Figure 12: Net promoter score of HPU programs (n = 113)

The mental health first aid (MHFA) course has been completed by many students and staff across the university. We commend this initiative as a mechanism of creating a campus culture which is more aware and able to respond to the mental health needs of its community. Although this program has no demonstrated direct impact on the outcomes for those who receive interventions from MHFA-trained individuals, it has been shown to increase knowledge about mental health, reduce stigma towards mental ill health and encourage supportive behaviours (Hadlaczky et al., 2014). MHFA should not be seen as a silver bullet to improve campus mental health, but as a tool to create a more supportive environment at the University.

The Guild also recognises the important role that HPU has played in developing strategy and interventions at UWA. This expertise will be important for the university moving forward, and the Guild looks forward to a collaborative relationship with HPU.

The Guild Commends:

- The Health Promotion Unit's work supporting the Student Life portfolio in adapting its practice to better support student wellbeing.
- The delivery of mental health first aid training to many staff and students.

The Guild Recommends:

- Identify and address the cause of the poor student perceptions of HPU programs.
- Reevaluate programs offered by HPU in reference to their outcomes, and the needs of students.

Student Assist (Guild Service)

Student Assist is a service offered by the UWA Student Guild, independently from the university, which aims to assist students with academic, financial and welfare issues. Unlike other health services at the University, the Student Assist team consists primarily of social workers, as well as a wellbeing counsellor. The service is free to access for students and does not have a triage process.



Figure 13: Net Promoter Score of Student Assist (n = 129)

Of the 507 students surveyed, 25% had used the service. According to those surveyed, the most used service was academic support, accounting for 57% cases. This service is unique in the university, and assists students in special consideration, appeals and other academic matters. Student Assist also received a high net promoter score of 32.81, indicating that most students would recommend the service to their friends.

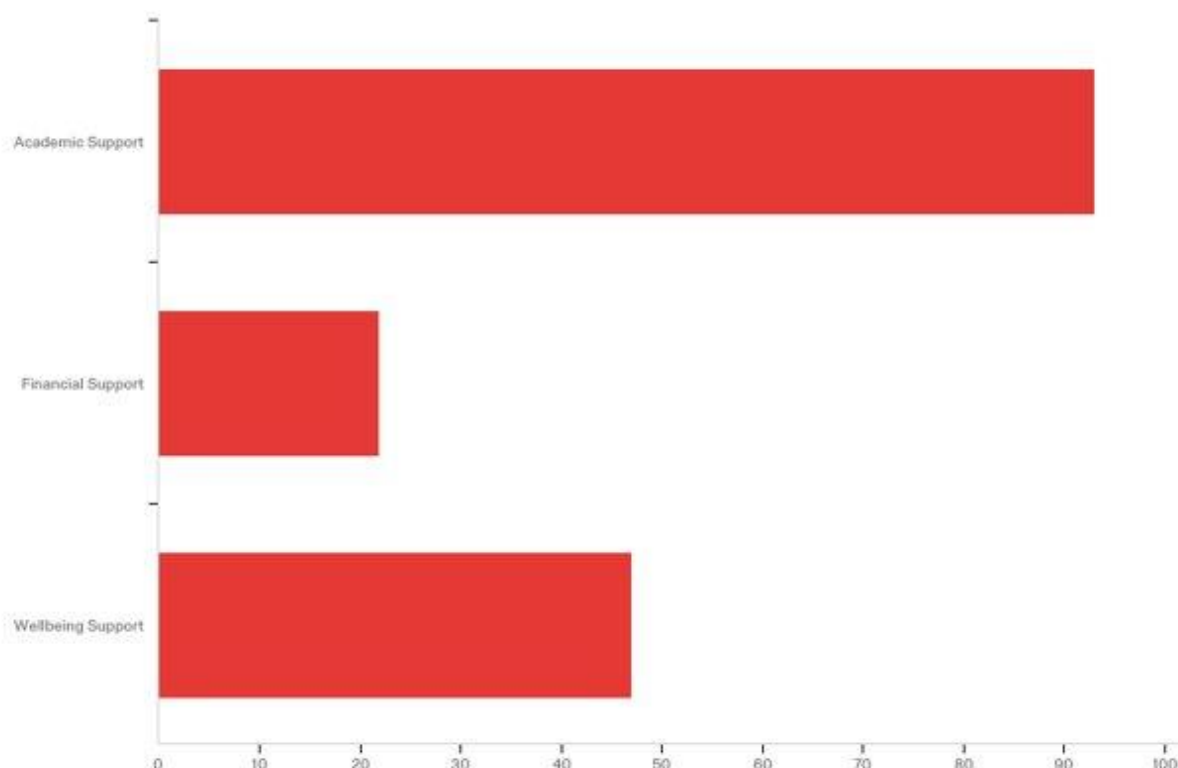


Figure 14: Student Assist Services Accessed (n = 162)

A key limitation encountered by Student Assist is its relationship with other services in the University. Student Assist is often seen as a gap-filler service, especially for those waiting for an appointment with CAPS.

Leading universities and student organisations in the UK, such as the University of Leeds, have reoriented university services and union-run advocacy and support services (similar to Student Assist) to operate in a mutually complementary way. This means that rather

than their services being seen as largely analogous (i.e. a place to go if you are struggling), each service operates using a student-centric and strengths-based approach to ensure that students are able to receive optimal support instead of being seen as a lower barrier counselling service.

It is recommended that Student Assist and CAPS should work together using a strengths-based approach to support students in the best way possible. Further to this, these services should also consider how they can work collaboratively with other services within the University, as well as external services, to create an interconnected safety net to support students in the most effective way possible.

In addition, it is recommended that Student Assist utilise the student wellbeing volunteers to promote the service and encourage students to proactively present to Student Assist for support, as needed.

The Guild Commends:

- Student Assist on running a low-barrier service which is student-centric and responds to the needs of the student at the time.

The Guild Recommends:

- University services and Student Assist further develop collaborative partnerships to work in synergy.
- The University and the Guild consider how Student Assist can be seen as a complementary service to other health services at the University, acknowledging the Guild's resourcing limitations, and Student Assist's unique advantages in its independence from the University and provision of academic and financial support, in addition to welfare support.

Breaking Up the Student Cohort: reflecting on differing experiences of a diverse student cohort

Aboriginal and Torres Strait Islander Students

Eight respondents to the Guild's consultation identified as Aboriginal and/or Torres Strait Islander. Although this is a small sample size, the data is concerning. On average, these students rated their physical health 5.75/10 (compared to 6.82 for all students) and their mental health only 4.50/10 (compared to 5.97 for all students). This represents a major gap in health for Indigenous students at UWA.

The most significant stressors for these students were examinations, tests, and financial pressures, which were all considerably higher than for the whole sample. There is more that needs to be done to mitigate these stressors for Indigenous students, especially in consideration of other barriers that these students face accessing a university education.

Table 3: Key university stressors for Indigenous Students (n= 7) and all students (n = 499)

	Indigenous Students	All Students
Examinations	9	7.97
Tests	8	6.67
Assignments	7.14	7.19
Not enough time to get everything done	7.29	7.38
Financial Pressures	8.14	6.14

Students also commented that the special consideration process is not always culturally appropriate. The process should be revised to ensure that it captures all the necessary circumstances for Aboriginal and Torres Strait Islander students.

Positively, the students surveyed also said they had friends at university and saw their friends often. Most cited that they would seek support from their friends, family or university staff.

The Guild Commends:

- The School of Indigenous studies for creating a supportive environment for Indigenous students.

The Guild Recommends:

- The University urgently investigates how it can mitigate academic and non-academic stressors that Aboriginal and Torres Strait Islander students face at university.

- The special consideration process is revised to be culturally appropriate for the circumstances of Aboriginal and Torres Strait Islander students.
- All staff working in health services complete cultural competency training.

Albany Students

Table 4: Health of Albany Students (n = 6) and All Students (n = 503)

The Albany Centre is often forgotten when considering services offered at UWA. Indeed, most health services offered by the University are absent in Albany, and students usually are referred to local services or access Crawley-based services over phone or email. This creates a higher barrier for students which may stop students from seeking help.

	Albany Students	All Students
Physical Health	6	6.82
Mental Health	5	5.97
Sexual Health	4.75	7.57

Of the approximately 150 students who study at the Albany Centre, six completed the Guild's survey on health services. These students rated their physical, mental, and sexual health more poorly than the entire sample. This is a concerning trend and may be due to by the lack of services provided to the Albany Campus in part. The markedly lower sexual health is potentially explained by the lack of health promotion services on campus.

Further to this point, the Albany Students' Association and staff at the Albany Campus have passed their concern for the mental health of Albany Students to the Guild. They feel that there are inadequate university services provided in Albany. Instead of accessing CAPS, students are referred to one of a small selection of counsellors in Albany. Although this is a good service, as Albany is a small town, students have commented that they are uncomfortable accessing counselling services where they may know the practitioner from their personal life.

Students also report seeing their friends irregularly on campus, and the campus seems to lack community. This is especially true for mature-aged students, who make up a large proportion of the student body. This is another potential cause of low levels of mental wellbeing in the students.

The Guild Commends:

- The staff at the Albany Centre for their approachable and friendly way of working, making students feel more comfortable asking for help.

The Guild Recommends:

- The University and the Guild investigate strategies to connect students in Albany, particularly mature aged students.
- The University investigates how a combination of technology and site visits might be used to improve the delivery of health services to students in Albany.
- The University pursues partnerships with services in Albany to offer health services in a more integrated and lower-barrier manner.
- The University considers implementing sexual health initiatives at the Albany Centre.

- The University considers how it might offer a counselling service at the Albany Centre.

International Students

International students generally report higher levels of physical, mental and sexual health, when compared to the general sample. Notably, international students experience different circumstances and challenges to domestic students.

One of the major differences for international students are the key stressors. Compared to all students, concerns about getting a job were much more prevalent for international students, while not having enough time was perceived as less stressful.

Table 5: Health of International Students (n = 71) and All Students (n = 503)

	International Students	All Students
Physical Health	7.83	6.82
Mental Health	6.98	5.97
Sexual Health	7.89	7.57

Table 6: Key university stressors for international students (n= 63) and all students (n = 499)

	International Students	All Students
Examinations	8.19	7.97
Tests	7.26	6.67
Assignments	7.53	7.19
Not enough time to get everything done	6.81	7.38
Concerns about finding a job	7.57	6.36

Many international students also lack a support network in Perth, being far from their family. This makes connecting with others, and services being perceived as welcoming and low barrier more important. Currently, international students are more likely to try and deal with issues themselves (30%) when compared to all students (27%).

Language barriers are also a problem for international students who speak English as a second language. Even for highly competent speakers, it can be difficult to speak about intimate personal circumstances in another language. Health services also often use jargon, which can be difficult to understand. Currently, all services are provided in English, and there is little information published in other languages. The panel should be mindful of this in the review of UWA's health services.

In addition to the language barriers that international students face, there are also cultural differences. Mental health and sexual health are not often talked about topics in

some cultures. The stigma and shame that is associated with individuals facing mental illness often leads to international students being unwilling to visit the GP or book an appointment with a counsellor. Sex is deemed to be a taboo, thus the reluctance to seek help and attend events or workshops regarding sexual education.

The Guild Commends:

- The Guild Welfare Department for producing multilingual welfare information packs.
- UWA Medical Centre for collating and distributing the International Student Health and Wellbeing Fact Sheets around the Medical Centre.

The Guild Recommends:

- The University provides multilingual health information resources for international students.
- The University aims to employ multilingual health service staff.
- The University to create sexual education programmes that are international student specific to overcome the cultural barriers.

Students with Disabilities

112 (20.93%) respondents indicated they have a disability, including mental ill health or a chronic illness. A large percentage (77.68%) of these respondents identify as being female. Students with disabilities were also less likely to be international students or from culturally and linguistically diverse backgrounds. All (6) non-binary people who responded to the survey indicated they have a disability. The weighting away from men, international, and CaLD students is likely more due to cultural stigma and lack of education on disability than actual figures. Students with disabilities were equally likely to come from each campus and level of study as were reported in general population. Efforts should therefore be made to ensure health services adequately cater to satellite campus's and postgraduates.

Students with disabilities reported mental and physical health being, on average, poorer than non-disabled students. This by a factor of -1.19 on physical health and -1.89 on mental health. Key stressors for students with disabilities are financially based, "concern with finding a job" was reported at 7.05/10 (compared to 6.36/10) and "financial pressures" at 7.06/10 (compared to 6.14/10). Assignments and circumstances at home were also perceived as more stressful for students with disabilities.

Net promoter scores for health services at UWA were almost across the board more positive for students with disabilities. UniAccess and Student Assist standing out as the most positively perceived services available to students with disabilities. The medical centre scored lower by -2.91, this may be due to reports that the service is not particularly helpful for complex needs which students with disabilities have. Students with disabilities overall were more likely to have accessed UWA health services than general population had. This may be due to both the need for students with disabilities to access health services more often and due to the low to no cost of UWA health services, especially when compared to external circumstances.

UniAccess and CAPS are two UWA run health services that most directly relate to the needs of students with disabilities. Dissatisfaction with the triage process was highly reported, with students being unable to book in or having to repeat it each year. Students also reported CAPS as not providing support in the medium to long term due to the limited sessions and the perceived need to “ration” those 6 sessions. Students were highly positive towards UniAccess, praising the warmth and understanding of the UniAccess staff. Students reported SRAs and AEAs reduced feelings of shame with applying for special consideration and reducing stress with assignments and exams. Students did however note it being a problem they had to arrange their exam arrangements themselves with their unit coordinators for Mid-Semester Exams and in class tests.

Health services at UWA are critical to supporting students with disabilities. It is recommended that better funding be placed towards UniAccess and CAPS. An overhaul of the CAPS triage process and an increase in available sessions is needed. Medical Centre staff need to be trained in disability support and catering to complex needs. It is highly important that education and support in reducing stigma around disability are encouraged and practiced by the university. Overall the low to no cost services at UWA are highly beneficial to students with disabilities and supporting better free or low-cost services is highly important to support students with disabilities.

The Guild Commends:

- The staff at the medical centre that students with disabilities reported as being highly supportive of their needs.
- The Health Promotion Unit for providing lived experience programs to support education around disability and reduce stigma.
- The broad range of services offered by Student Assist and the supportiveness of the staff.
- The warm and supportive staff of UniAccess and the tireless effort they put in advocating for students with disabilities.
- The SRA and AEA system that provides students with disabilities flexibility and better support for their conditions to allow them to access their education.

The Guild Recommends:

- Greater support for students with disabilities in accessing financial support, scholarships, and other financial aid and increased efforts in helping students with disabilities find work to mitigate stressors impacting students with disabilities.
- Providing disability support services directly to satellite campuses.
- Disability training for staff at the Medical Centre, highlighting a need for greater understanding of the complex needs of students with disabilities.
- Waiving triage for return clients or students with already pre-existing diagnoses.
- Finding better ways of supporting students with long-term mental illnesses so students do not feel a need to “ration” their CAPS sessions.
- Allowing for UniAccess registration to roll-over if the condition is reported as “ongoing”.
- Earlier communication to students with disabilities what services are offered by UniAccess.

- Applying Alternate Exam Arrangements directly to mid-semester exams via UniAccess rather than through the Unit Coordinator.
- Investigating means to reduce the mental distress experienced by students with disabilities during the time before special consideration is approved.

Students from Culturally and Linguistically Diverse Backgrounds

There is research to show that the stigma of mental illness has a particularly strong impact in some cultures and is a significant barrier to effective access to services. While stigmatisation of mental illness is universal, the importance of privacy related to such matters is stronger in some cultural groups than others (McDonald and Steele, 1997). This can be a significant factor as to why many people from CaLD backgrounds do not access health services, particularly in relation to mental health. It is also universally understood that there is patient confidentiality when accessing all physical and mental health services, however it may not be as widely acknowledged by the health professionals themselves, and the lack of this communication means that students wouldn't have that knowledge in the front of their minds (McDonald and Steele, 1997). Therefore, the Guild recommends that the Health services make students aware of the privacy and confidentiality associated with their use to reduce the barriers for CaLD students to access them as and when required.

Out of the 277 students who identified with a CaLD background, 79.08% (219) were domestic students. A common accessibility issue that is faced by CaLD people is language barrier and trouble with translation, however the feedback received illustrates that there has been no major issue in relation to that. Therefore, the Guild commends the University's health services for working hard to ensure there's minimal language barriers and recommends that they continue to do so.

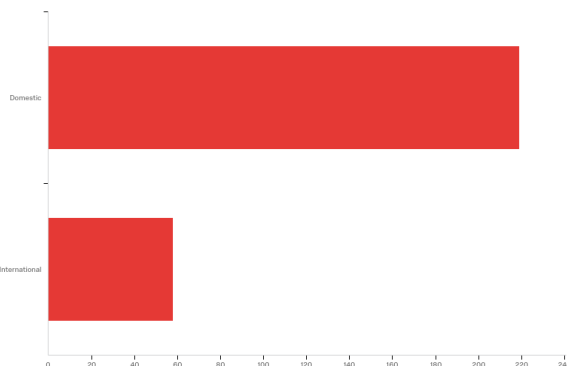


Figure 15: Domestic and International student mix of culturally and linguistic diverse students (n = 227)

Overall, data has shown that there is a general lack of visibility of the physical location of services such as the Medical Centre, and the Psychological Services or even the knowledge of such services existing. This can be a barrier specifically for CaLD people who might be struggling with seeking help in the first place, to be pushed away from it due to the lack of knowledge or visibility. Taking this into account, the Guild recommends more communication surrounding location, the services offered and how to access them. A possibility to consider is to have signage and communication available in multiple languages for not only accessibility purposes but also to encourage CaLD students to seek help and access the services when required. This will potentially aid in reducing the stigma of mental illness and will serve as a subtle reminder that it is okay to ask for help.

The Guild Commends:

- The University's hard work in ensuring there are minimal language barriers CaLD students face when accessing health services.

The Guild Recommends:

- The University works towards helping decrease mental illness stigmas faced in predominately CaLD communities.
- Health services make students aware of the privacy and confidentiality associated with their use to reduce the barriers for CaLD students to access them.

Students Identifying as LGBTQIA+

It is commonly recognised that students who identify as LGBTQIA+ are likely to have poorer wellbeing, compared to the general population (Waling and Roffee, 2018). Although the Guild has no data on the wellbeing of LGBTQIA+ students, it is reasonable to assume the same trend applies at UWA. As such, it is important that the Review takes a focus on how UWA's health services can be more inclusive of LGBTQIA+ people and support them.

The Ally program is a network of staff and students at UWA who have completed training on being a good 'ally' to the LGBTQIA+ community. It teaches participants about LGBTQIA+ issues, history, communities, and culture, and helps people to become more inclusive. One student surveyed commented that when accessing CAPS, the counsellor was not understanding of LGBTQIA+ issues. We recommend that all health service staff complete this training and undertake further training to ensure that their practice as a health worker is inclusive of LGBTQIA+ people.

LGBTQIA+ visibility is an important affirmation for LGBTQIA+ people, especially when they are struggling with their wellbeing (Waling and Roffee, 2018). Many health services in Australia have begun to make an active effort to make their spaces feel inclusive, often by including paraphernalia such as the pride flag. Such symbols of inclusion act to mark the space as safe and inclusive for LGBTQIA+ people and help them to feel more comfortable. It would be beneficial to make such a change to waiting spaces for UWA's services, especially for CAPS and the medical centre.

The Guild Commends:

- The Ally program for its work promoting allyship at UWA, and the staff members working in health services who have completed this training.

The Guild Recommends:

- Student Life liaises with the UWA LGBTQIA+ Working Group and the Guild Pride Department to create strategies for health services to be more inclusive of LGBTQIA+ students.
- All staff members working in health services complete Ally training, and other relevant training for their practice.
- Health service spaces incorporate elements (e.g. ally stickers, pronoun badges, pride flags) to mark their spaces as inclusive of LGBTQIA+ people.

Postgraduate Students

Postgraduate students seem to have slightly higher perceived levels of wellbeing, as compared to all students.

Table 7: Health of postgraduate students (coursework & research, n = 131), research students (n = 18) and all students (n = 503)

	Postgraduate Students	Postgraduate Students (Research Only)	All Students
Physical Health	7.08	7.28	6.82
Mental Health	6.31	6.72	5.97
Sexual Health	7.69	7.29	7.57

Postgraduate students (coursework and research) also seem to be more satisfied with health services at the University, giving higher net promoter scores for most services when compared to the whole sample. It is unclear if this is because of different experiences of these students, or if this is due to different expectations.

The biggest stressor reported for research students (n =18) is concerns about finding a job for research students. Although not captured in this survey, the Postgraduate Students Association has reported that the Graduate Research School also plays a key role in supporting research students and may have a function in making research students feel more supported.

The Guild Commends:

- The Graduate Research School for the support it provides to research students.

Additional Comments

Resourcing and Cost Structures

It is essential that services provided at the university are free or low cost for students. It has been demonstrated that students from low-SES background struggle significantly more with their health, particularly mental health, and cost barriers will stop them from seeking help.

Furthermore, some parts of the health service need additional resources, particularly in Counselling and Psychological Services where approximately half of students have to wait over a week to get an appointment. The University should also explore alternative sources of funding for health services, which may be used to enrich the service offering.

The Guild Commends:

- The current free and low-cost structure of services at UWA.

The Guild Recommends:

- Maintaining a highly resourced health service at the university.
- Committing resources to the services that improve the wellbeing of students.
- Investigating alternative sources of funding (government, philanthropic, etc.) to resource services at UWA.

Scope of Provision

The University currently provides comprehensive physical health services through the Medical Centre. These services are important for students at the university, and a great resource for students to access when they are unwell.

At present, much of the University's mental health services focus on student education about wellbeing, such as the programs provided by the Health Promotion Unit, or on helping students at high-risk. These activities, especially the latter, are important to ensure that the University is a safe environment.

In the future, the University should develop initiatives to help students whose wellbeing may be starting to worsen but have not yet reached a medium- or high- risk state. This should improve the wellbeing of these students, and hopefully stop their wellbeing from deteriorating and the need for 'crisis' support.

The Guild Commends:

- The comprehensive range of physical health services.

The Guild Recommends:

- The retention of comprehensive physical health services.
- The University develops initiatives to engage with students with poor wellbeing, who have not yet progressed to a medium- or high-risk state.
- The retention and enhancement of services for students in crisis.

Research Driven Practice

As a research-intensive university, and the place of some world-class work, particularly in health, medicine, and mental health, it would be foolish for UWA not to harness this opportunity in the delivery of its health services.

Equally, there is also a lot of research internationally about student wellbeing and health service delivery from universities and policy institutes. UWA should harness this information in the reformation of its health services to ensure that they are informed by leading research.

The Guild Commends:

- The School of Psychology and UniAccess for their collaborative effort to provide support for students with disabilities.

The Guild Recommends:

- The University aligns itself with international best practice in its approach to Student Mental Health, and the running of its health services.
- Exploring how UWA health services can collaborate with the Young Lives Matter Foundation, to be leading university in their approach to suicide prevention.

Collaboration and Partnerships with External Agencies

Moving forward, collaboration and partnerships with external agencies is crucial to ensure sustainable delivery of high-quality services at the University. Mental health has been a focus for both the State and Federal Governments of late, and as such there is considerable opportunity for partnership. There are also many organisations with names which are instantly recognisable to students, and associated with less stigma, such as headspace. Partnerships with such services can be advantageous as it increases the chance that students will engage with the service and seek help.

Importantly, these partnerships need to be student centric. It is pointless having a partnership and referring students to an external service, only for them to be bounced around. Therefore, it is important that the experience of students utilising these collaborations and partnerships are considered, and that any referral processes are sensitive to the needs and circumstances of the student.

The Guild Commends:

- UniAccess and UWA Careers for the development of a partnership with Maxima to deliver career opportunities to students with disabilities.
- Health Promotion Unit for their partnership with the Local Drug Action Group, providing grants for student initiatives.

The Guild Recommends:

- Student Life forms partnerships with external agencies to enrich the offering of health services at the University.

- The development of partnerships and collaborations with external agencies is student-centric and closely considers the experience of students accessing the service.



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Appendix A – Recommendations

Resourcing and Cost Structures

- Maintaining a highly resourced health service at the university.
- Committing resources to the services that improve the wellbeing of students.
- Investigating alternative sources of funding (government, philanthropic, etc.) to resource services at UWA.

Effectiveness of Delivery

Medical Centre

- Continuation of the Medical Centre as a comprehensive health service with bulk billing.
- A plan is put in place to reduce waiting times in the Medical Centre.
- More promotion of the Medical Centre to commencing students.
- More signage to direct people to the Medical Centre, from Saw Promenade, and through Guild Village.

UniAccess

- Implementing more streamlined data management procedures in UniAccess to ensure that all case workers are able handoff a students' case to another staff member.
- Investigate altering policies to not require repeated confirmation of permanent disabilities.
- UniAccess more proactively offers its services to students who identify having a disability, mental illness, or chronic illness.
- It is made clear at enrolment that students with a disability may register with UniAccess.
- Add an option for *mental ill health* and *chronic illness* when disclosing a disability at enrolment.
- UniAccess more clearly communicates the services that it can offer for students who are carers.
- Providing disability support services directly to satellite campuses.
- Applying Alternate Exam Arrangements directly to mid-semester exams via UniAccess rather than through the Unit Coordinator.

Counselling and Psychological Services

- Increasing the capacity of CAPS to open more appointments for students, and reduce the waiting time from triage, with the goal of 80% of students being triaged to an appointment in less than one week.
- Review the triage process to ensure that it is sensitive, patient-centric, and focuses on minimising risk.
- Improvement of the waiting area for CAPS to make it a more inclusive, welcoming and psycho-socially safe environment.
- Finding better ways of supporting students with long-term mental illnesses so students do not feel a need to “ration” their CAPS sessions.

- Waiving triage for return clients or students with already pre-existing diagnoses.
- Increase the number of appointments that students can access each year at CAPS.

Health Promotion Unit

- Identify and address the cause of the poor student perceptions of HPU programs.
- Reevaluate programs offered by HPU in reference to their outcomes, and the needs of students.

Inclusiveness of Services

- All staff working in health services complete cultural competency training.
- The University provides multilingual health information resources for international students.
- The University aims to employ multilingual health service staff.
- Student Life liaises with the UWA LGBTQIA+ Working Group and the Guild Pride Department to create strategies for health services to be more inclusive of LGBTQIA+ students.
- All staff members working in health services complete Ally training, and other relevant training for their practice.
- Health service spaces incorporate elements (e.g. ally stickers, pronoun badges, pride flags) to mark their spaces as inclusive of LGBTQIA+ people.
- Disability training for staff at the Medical Centre, highlighting a need for greater understanding of the complex needs of students with disabilities.
- Health services make students aware of the privacy and confidentiality associated with their use to reduce the barriers for CaLD students to access them.

Albany

- The University considers how it might offer a counselling service at the Albany Centre.
- The University investigates how a combination of technology and site visits might be used to improve the delivery of health services to students in Albany.

Scope of Provision

- The retention of comprehensive physical health services
- The University develops initiatives to engage with students with poor wellbeing, who have not yet progressed to a medium- or high-risk state.
- The retention and enhancement of services for students in crisis.
- The University and the Guild should investigate peer mentoring schemes to allow students to seek help from their peers.

Preventative education and Measures

Social Connection

- Student Life continues to develop strategies to engage every student, in partnership with the Guild.

- Student Life develops capability to identify students experiencing loneliness, and inform them of ways to connect with others.

Asking for Help

- The University and the Guild should run more outward-facing campaigns to encourage students to seek help if they are struggling.

Sleep

- Student Life considers encouraging healthy sleep as part of the to-be-developed Mental Health Strategy.

Physical Health

- Continued and expanded health promotion about making healthy life choices, and promotion of fitness activities.
- UWA Sport considers how it might offer sport and fitness activities to students from low-SES backgrounds.

Stressors on Students

- Student wellbeing and the student experience becomes a key consideration in academic policy.
- Student Life investigates ways to reduce the impact of these stressors on students' lives.
- The Review on Summer School and Academic Calendar is closely considerate of the impact of teaching periods on student wellbeing.

Suicide

- UWA aligns its policies, procedures, and activities to the WA Mental Health Commission *Suicide Prevention 2020: Together We Can Save Lives* strategy.
- UWA adopts creates a postvention procedure for student suicides, to ensure that best practice is followed.

Special Consideration

- Ensure standards for special consideration are uniform across faculty offices.
- Investigate provision of special consideration with a lower burden of proof (e.g. giving students 'sick days' or accepting certificates from a pharmacy).
- Move the special consideration online in an intuitive and easy to use system.
- Extend the period to apply for special consideration from three days to five days to be in line with other Western Australian universities.
- Investigating means to reduce the mental distress experienced by students with disabilities during the time before special consideration is approved.

Inclusion

- The University urgently investigates how it can mitigate academic and non-academic stressors that Aboriginal and Torres Strait Islander students face at university.
- The special consideration process is revised to be culturally appropriate for the circumstances of Aboriginal and Torres Strait Islander students.

- Greater support for students with disabilities in accessing financial support, scholarships, and other financial aid and increased efforts in helping students with disabilities find work to mitigate stressors impacting students with disabilities.
- The University works towards helping decrease mental illness stigmas faced in predominately CaLD communities.
- The University to create sexual education programmes that are international student specific to overcome the cultural barriers.

Albany

- The University and the Guild investigate strategies to connect students in Albany, particularly mature aged students.
- The University considers implementing sexual health initiatives at the Albany Centre.

Research-driven Practice

Whole-of-institution Approach

- In line with best practice, UWA adopts a whole-of-institution response to student wellbeing.
- This approach is led by a comprehensive mental health strategy and is backed by the senior leadership of the University.

Deriving Excellence from Research

- The University aligns itself with international best practice in its approach to Student Mental Health, and the running of its health services.
- Exploring how UWA health services can collaborate with the Young Lives Matter Foundation to be leading in its approach to suicide prevention.

Collaboration and Partnership with External Agencies

Partnerships

- Student Life forms partnerships with external agencies to enrich the offering of health services at the University.
- The development of partnerships and collaborations with external agencies is student-centric and closely considers the experience of students accessing the service.

Student Assist

- University services and Student Assist further develop collaborative partnerships to work in synergy.
- The University and the Guild consider how Student Assist can be seen as a complementary service to other health services at the University, acknowledging the Guild's resourcing limitations, and Student Assist's unique advantages in its independence from the University and provision of academic and financial support, in addition to welfare support.

Albany

- The University pursues partnerships with services in Albany to offer health services in a more integrated and lower-barrier manner.

