

**A Mental Health Strategy
for the Students
of NUI Galway**

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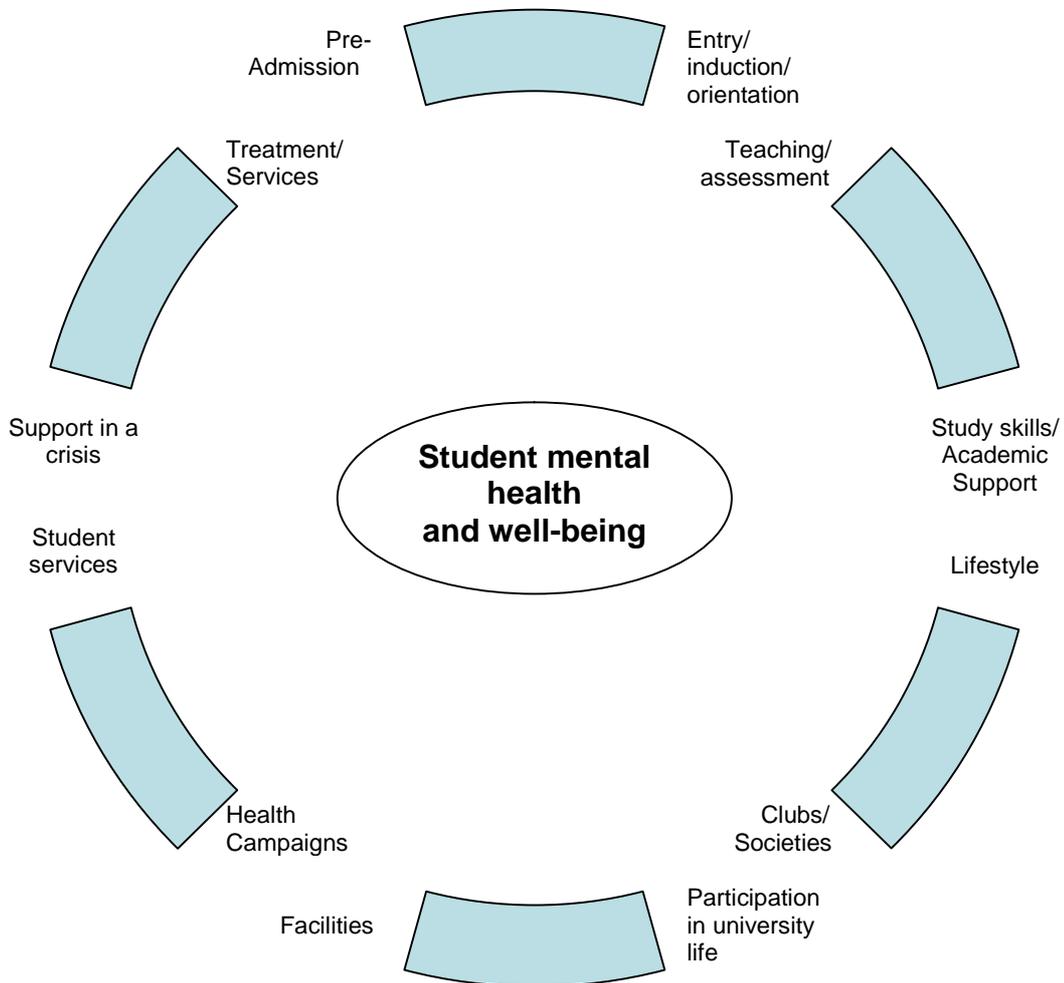


Figure 1: The circle of student mental health and well-being at NUI, Galway

1. Introduction

The National University of Ireland, Galway is committed to being an inclusive, student-centred environment for achieving academic excellence. In addition to providing a high quality academic education, the University places great emphasis on the health and well-being of students. There is robust evidence that mental health is a crucial element of overall health and well-being and that a University-wide commitment to promoting mental health will produce a wide range of benefits. There are strong links between mental health, well-being, student retention and academic success.

Research in Ireland and in the UK suggests that the proportion of students with mental health problems has increased and that higher numbers of students find the stresses associated with higher education difficult to manage (Kracen 2003; Royal College of Psychiatrists 2003). The CLAN (College Lifestyle Attitudinal National Survey), the first national lifestyle study undertaken in third level colleges highlighted the importance of addressing mental health issues among students and raised related concerns about alcohol misuse and sexual health (Hope et al 2005). These issues are not unique to young people in Universities and are likely to reflect broader psycho-social and economic trends. However, there are steps that can be taken to address those aspects of University life and the student experience that detract from general mental health, creating unnecessary barriers to learning. All students will benefit from an ethos and culture that promotes mental well-being:

“By acknowledging mental and emotional health issues within a college's ethos, in formal and informal aspects of college life, a greater number of students will move on to working life with a positive and open attitude to mental health problems.” (Department of Health and Children 2005)

2. Developing the Strategy

The strategy has been developed on the basis of desk research on policies, best practice and strategies, including strategies in place in third level educational settings, as well as extensive consultation with staff, students of the University and relevant personnel from HSE Western Area services. Students consulted were drawn from all faculties and the Students Union, and the members of staff consulted included members of University Senior Management, Student Services Personnel and Academic staff including academic management. Consultation was through focus group, individual face to face interview and telephone interview. The desk research and consultation was carried out by Dr Lynne Friedli and Mr Gary Ward, internationally recognised experts in the field of mental health promotion. Dr Friedli and Mr Ward presented their report to a Steering Group consisting of the personnel that had input into the strategy consultation process in November 2007.

The consultation process demonstrated considerable support for a mental health strategy as a way of:

- Showing the commitment of the University to the well-being of its students
- Raising awareness of mental well-being and mental health problems
- Addressing aspects of University life that impact on mental health
- Providing a safe, supportive environment for students with mental health problems

“Recruiting students brings with it a responsibility to look after them” (Senior academic)

“We really don’t promote well enough the student care aspect of what we offer here”
(Senior manager)

“This is, without doubt, the most student centred university that I have worked in”
(Dean)

3. Factors and Principles that have shaped the Strategy

3.1 Responding to Diversity

NUI, Galway attracts students from diverse backgrounds with varying abilities, needs, skills and aspirations, making the University a vibrant and exciting environment in which to study and learn. Most students will cope well with the challenges of University life. Others may need occasional additional support, and some will have a high level of support needs.

3.2 Building on existing supports

NUI, Galway already provides a wide range of support for students. The strategy builds on this and provides a framework for a more proactive and coordinated approach, making the best use of available resources and involving all parts of the University. There is a growing tendency among students to seek help for emotional and mental health problems and an increasing demand on the support services

3.3 Mental health in a University environment

A report by the Royal College of Psychiatrists, *The Mental Health of Students in Higher Education* (2003), found that University students report more mental health problems than their peers:

“Higher education is associated with significant stressors, including the emotional demands of transition from home and school to the less structured environment of college, independent study and examinations, and financial pressures. Although stress is not pathological in itself, and indeed it may be necessary for maximal performance, such stressors may contribute to the higher rate of emotional symptoms among students.”

The consultation process found a very supportive response from all staff for the development of a strategy on Mental Health. The following are examples of the comments made by staff:

“There is a lot of dependence upon ‘good will’. It will be good to have a more formal statement of the responsibilities of staff towards student welfare” (Senior Academic)

“We must look after our students while they are here. If we do that, they’ll succeed, be happy undergraduates and go on to be happy and supportive alumni. You can’t underestimate the importance of positive word of mouth for your reputation.” (Senior Academic)

The Strategy recognises that providing supports for students operates in an environment where there is sharp competition for resources. Within this context, the strategy draws together the many strands of good practice, highlights gaps, and presents a structured approach which if followed will:

- Enhance understanding of mental health issues among students
- Ensure that sources of help and support are well publicised
- Promote the University’s commitment to the mental well-being of all its students as a core component of its brand promise – to be ‘student centred’
- Recognise the contribution of a number of ways that support and promote mental health
- Ensure that services provided to students in distress are coherent, well managed and used appropriately.

3.3 The Policy Context

The development of A Mental Health Strategy for Students is consistent with a growing recognition in Ireland of the importance of promoting positive mental health and supporting those experiencing mental health problems (Department of Health and Children 1998; 2000). Ireland’s approach to mental health is set out in *A Vision for Change* (Department of Health and Children 2006) which provides a framework for addressing mental health in all settings, including education. Across Europe, an increasing number of Universities are committed to addressing mental health issues as part of the World Health Organisation initiative for the Health Promoting University (Tsouris et al 1998; Dooris 1999; Kracen 2003).

Reach Out, Ireland’s suicide prevention strategy also places a strong emphasis on promoting mental health within higher education, and includes the following objective:

To promote positive mental health, develop counselling and support services and put standard crisis response protocols in place in all third level education settings, and to establish mental health issues as part of the appropriate third level curricula. (Department of Health and Children 2005)

The importance of a strategic approach to mental health is further reinforced by several legal imperatives, particularly those concerned with the ‘duty of care’ for students and the requirements of non-discrimination. This wider body of legislation places a responsibility on the University to take specific steps to provide a supportive environment across a range of issues, including disability, equal opportunity and discrimination.

In addition to the wider public policy context, the development of a Mental Health Strategy is consistent with the objectives of the NUI, Galway Strategic Plan to be a Student Centred University that has a focus on enhancing the student experience and aims to improve supports for students.

The Mental Health Strategy takes cognisance of and complements policies and protocols in place in the University in such areas as *Equal Opportunity, Alcohol, Bullying, Harassment, Disability, Health and Safety, Student Death, Access, Smoking*

3.4 Evidence Based Practice and Positive Mental Health

Students with high levels of emotional, psychological and social well-being have better educational outcomes, as well as improved long term outcomes for health, employment and relationships (NIMHE 2005; Barry and Jenkins 2007).

A growing body of research suggests that mental health and mental illness are not on a continuum but form two different factors, i.e. people with a diagnosed mental health disorder (e.g. depression, schizophrenia) may have mental illness plus poor mental health, but equally may have moderate or good mental health (Keyes 2005; Gilleard et al 2004). Strengthening those aspects of University life and University policy that promote mental health will benefit all students including those with existing mental health problems.

Effective practice in promoting mental health involves reducing risk factors and strengthening protective factors (Department of Health and Children 2006; Barry and Jenkins 2007) and adopting a whole University approach, e.g. the Health Promoting University model (WHO 2004; Tsouros 1998). Key areas are *Lifestyle, Study Skills, Assessment, Accommodation, Finance, Extra Curricular Activity and Support*.

3.4.1 Lifestyle

There is abundant evidence that lifestyle choices can affect mental health and that mental health affects lifestyle choices (NIMHE 2005; Department of Health and Children 2006). Diet, exercise, sleep, alcohol and drug use all influence mental health much more than is commonly realised. Efforts to encourage healthy eating, increase physical activity and reduce alcohol consumption can make a significant contribution to improving emotional well-being and cognitive function (MHF 2005; 2006). The Alcohol Policy and Health Promotion Strategy at NUI, Galway already support mental well-being, but there is scope for additional awareness raising on the links between lifestyle and mental health, and for improving levels of participation in sport.

3.4.2 Study Skills

The more diverse the student population, the greater variation in students' study skills and the greater the risk that some students may struggle to cope, fall behind or drop out. In the consultation process, in the data from the Health Promotion and in the evaluation data from Student Connect, anxiety about academic issues emerged as the most common trigger for students to seek help. Improving study skills support is likely to have a significant impact on student mental health and could contribute to reducing demand for Counselling services and the Student Health Unit services. This is an area that can be addressed by CELT. The Exam Support Group provided by Student Services is also an important and useful resource. More broadly, the consultation with academic staff revealed a view that greater value should be placed on 'making a contribution', to encourage support for teaching and 'people' skills by members of academic staff.

3.4.3 Accommodation and Finance

Good accommodation and enough money to participate in student life are pre-requisites for student well-being and academic achievement, and students need to know where to go for practical help. The evidence is that many more students are employed in part-time work than may have been the case in the past, creating additional pressures. Whilst it is noted that Student Residences are managed independently of the University, the Residences represent an opportunistic setting in which to promote mental health. The staff managing these residences would benefit from simple information on sources of help for students in difficulty or distress and from basic mental health awareness training or guidance.

3.4.4. Extra Curricular Activities

NUI, Galway has an excellent reputation for the quality and diversity of its Clubs and Societies. Strengthening opportunities for all students to participate in a wide range of activities is part of further developing a culture and ethos that supports well-being. Having a social life, being connected and taking part in these other aspects of the University experience are all supportive factors for positive mental health (NIMHE 2005; Social Exclusion Unit 2004; Department of Health and Children 2006).

3.4.5 Support

In relation to the more formal levels of support for students with difficulties, providing the appropriate level of support and achieving clarity about who is responsible at each level is a challenge in a University environment, where students may have different needs met by different services/departments and access support through different contact points e.g. Tutors, Academic Staff (lecturers and administrative staff) Student Mentors, Chaplaincy, Student Health Unit, Student Counselling, Disability Service, Health Promotion Service, Students Union, Friends etc.

The following key issues emerged during the consultation:

- *NUI Galway now has a student population with different and more complex needs than in the past*
- *There is a lack of clarity about different roles and levels of responsibility for support, notably the relative roles of Counselling, Student Health Unit Psychiatric Services and local mental health services*

Student Health Unit, Counselling, Chaplaincy, Disability and Psychiatric Services need to agree a shared protocol for responding to students experiencing problems. This should distinguish between responsibility for the management of mild, moderate and severe mental health problems.

Bereavement, loss, relationship breakup, conflict and other sorrows and difficulties are a part of life. It is not the role the Mental Health Strategy to imply that without professional assistance students will be unable to cope or that the University should provide direct help for all of life's ups and downs. Most students including those with mild depression or anxiety will recover without long term support. A mental health promoting ethos across the whole University is advocated to encourage early access to support (practical, academic and emotional) before problems escalate. It is important that students and staff know when and where to seek professional help. A simple guide to support services is needed by both students and staff. (In the course of the consultation process the case was made for the creation of a

one-stop-shop or portal through which information for all students in need of support would be provided.).

For Milder Depression and Anxiety many patients respond to guided self help. Computerised Cognitive Behavioural Therapy (CCBT) is likely to be a cost effective option for the University, and could be made available on a self referral basis. The National Institute for Clinical Excellence (NICE) recommends *Beating the Blues* for the management of mild and moderate depression and *FearFighter* for the management of panic and phobia.

It is important to create an environment in which all students, and particularly those that are isolated or vulnerable, are more able to take action to look after their own mental health and student resilience is developed. The majority of students mention family, friends and partners as their key source of support in times of difficulty (HPRC 2006). In this context the further development of peer support systems, e.g. Student Connect should be explored. There may be scope also for expanding the number of self help groups. (The development of peer support services and systems in third level education is one of the recommendations of *Reach Out*)

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Promoting the mental health and wellbeing of students

PROMOTION

SUPPORT WHEN THINGS GO WRONG

MANAGING ONGOING PROBLEMS

PRE-ENTRY

ADMISSION/
ORIENTATION

MENTORING/
PEER SUPPORT

STUDY ADVICE

TEACHING/
ASSESSMENT

WHO NEEDS TO BE ENGAGED AND INVOLVED

FOUR STRATEGIC OBJECTIVES:

RAISE AWARENESS

OPPORTUNITIES FOR SELF HELP

LEARNING ENVIRONMENT

TIMELY APPROPRIATE SUPPORT

Strategic Objectives and Action Plan

Strategic Objective 1: Raise knowledge and awareness among staff and students of the importance of mental health and well-being and of the commitment of the University to promoting this.

Lifestyle choices can affect mental health and that mental health affects lifestyle choices. Actions to encourage healthy eating, increased physical activity and reduction in alcohol consumption can make a considerable contribution to improving emotional well-being and cognitive function. The University Alcohol Policy and the Student Services Health Promotion Strategy are an important contribution to mental well-being, but there is more scope to raise awareness on the links between lifestyle and mental health, and particularly for improving levels of participation in sport.

Early access to support (practical academic and emotional) before problems escalate is advocated. This is best achieved through a whole University approach where staff and students know when and where to seek help.

The consultation process among staff and students demonstrated considerable support for the development of a Mental Health Strategy and a very favourable disposition towards actions to improve the mental wellbeing of students.

Actions:	Person/s Responsible	Implementation Time-frame
<ul style="list-style-type: none"> Produce a simple resource pack on lifestyle guidance that is distributed to all first years 	Health Promotion Officer, Student Services	
<ul style="list-style-type: none"> Produce a graphic that shows students where to go for help in relation to personal difficulties, low mood/anxiety and study skills. This should include detail on self-help resources. 	Health Promotion Officer, Student Services.	
<ul style="list-style-type: none"> Continue to produce and distribute a booklet for staff on the identification, management of and sources of help for students in distress. Make it available to key staff in Student Residences as well as University staff. Support this booklet with a training workshop where staff have the opportunity to become more conversant with skills of identification, management and referral of students in distress 	Head of Counselling.	
<ul style="list-style-type: none"> Utilise calendar opportunities to promote mental health, e.g. a number of special events on world mental health day 	Health Promotion Officer, Student Services.	
<ul style="list-style-type: none"> Review the University Alcohol Policy 	Student Services Administrator and Health Promotion Officer, Student Services.	
<ul style="list-style-type: none"> Offer personal development programmes on improving mental wellbeing to staff and students. 	Head of Counselling and HR	
<ul style="list-style-type: none"> Review the Student Services Health Promotion Strategy 	Health Promotion Officer, Student Services.	
<ul style="list-style-type: none"> Develop a Drugs Policy 	Alcohol and Drugs Counsellor.	
<ul style="list-style-type: none"> Promote the support services for students with mental health diagnoses, particularly in schools in the University catchment area. 	Health Promotion Officer, Student Services and Disability Officer.	

Strategic Objective 2: Strengthen opportunities for students to do things that promote their own mental health and well-being and that of others.

Strengthening opportunities for all students to participate in a wide range of activities is part of further developing a culture and ethos that supports well-being. Having a social life, being connected and taking part in these other aspects of the University experience are all supportive factors for positive mental health.

The majority of students mention family, friends and partners as their key source of support in times of difficulty (HPRC 2006). In this context the further development Peer Support Systems, e.g. Student Connect should be explored. There may be scope also for expanding the number of self help groups.

In the consultation process the problem of alcohol consumption by students was highlighted strongly and also need to challenge the alcohol culture through the promotion of alternative socializing opportunities.

The isolating effect arising from fact that NUI, Galway student population largely moves home at weekends for those that remain behind was also adverted to in the consultation process.

Actions:	Person/s Responsible	Implementation Time-frame
<ul style="list-style-type: none"> Challenge the drinking culture by having alcohol free socializing alternatives widely available 	VP Student Services and Human Resources VP Physical Resources; Development Officer Clubs and Participation; Societies Officer; Student Services Administrator.	
<ul style="list-style-type: none"> Promote greater participation in sports clubs, recreational sport and physical activity, particularly in the context of new facilities 	Development Officer Clubs and Participation.	
<ul style="list-style-type: none"> Examine the activities of Clubs and Societies with a view to encouraging and facilitating activities at weekends 	Development Officer Clubs and Participation; Societies Officer.	
<ul style="list-style-type: none"> Further develop Student Connect and explore the provision of other peer support systems in addition to existing self-help groups 	Administrative Assistant Student Services.	
<ul style="list-style-type: none"> Continue to support the growth in participation in student societies 	Societies Officer.	
<ul style="list-style-type: none"> Continue to promote student volunteering 	CELT; Administrative Assistant Student Services; Societies Officer; Clubs and Participation Development Officer.	

Strategic Objective 3: Create a learning environment that supports the mental health needs of all students.

NUI, Galway attracts students from diverse backgrounds with varying abilities, needs, skills and aspirations. The more diverse the student population, the greater variation in ability and the greater the risk that some students may struggle to cope, fall behind or drop out. In the consultation process, the link between mental health issues in the student population and study issues was emphasized strongly: *“emotional problems lead to study problems and study problems lead to emotional problems and it all affects results.”* Data from the Health Promotion and from Student Connect demonstrated that that anxiety about academic issues as the most common reason for students to seek help. Improving study skills support is likely to have a significant impact on student mental health and could contribute to reducing demand for Counselling services and the Student Health Unit services. It is an area that can be addressed by the CELT. The Exam Support group provided by Student Services is also an important and useful resource.

The consultation with academic staff revealed a view that greater value should be placed on ‘making a contribution’, to encourage support for teaching and ‘people’ skills. University Senior Management emphasised the student centred focus of the University and the role of staff in supporting this objective:

“The strategy should support our mission to be a ‘student centred university’; staff need to be aware of this mission and support it.”

Actions:	Person/s Responsible	Implementation Time-frame
<ul style="list-style-type: none"> Support diverse learning strategies 	CELT.	
<ul style="list-style-type: none"> Provide access to study and learning support for students, particularly first years, in all colleges 	Student Services Administrator to establish current provision.	
<ul style="list-style-type: none"> Establish a structure across the University whereby all students have a designated member of academic staff to turn to for support 	Registrar.	
<ul style="list-style-type: none"> Continue to put resources/structures in place to provide proactive career development support for students. 	Head of Careers Development Centre.	
<ul style="list-style-type: none"> Promote and recognise more widely the welfare support “contribution” of academic staff. 	Registrar.	
<ul style="list-style-type: none"> Recognise and encourage the role of all staff in supporting students 	Registrar.	

Strategic Objective 4: Provide timely, appropriate support for students with mental illness

In relation to the more formal levels of support for students with difficulties, providing the appropriate level of support and achieving clarity about who is responsible at each level is a challenge in a University environment, where students may have different needs met by different services/departments and access support through different contact points e.g. Tutors, Student Connect Mentors, Chaplaincy, Student Health Unit, Student Counselling services, Students Union, Friends etc.

Most students including those with mild depression or anxiety will recover without long term support. For Milder Depression and Anxiety many patients respond to guided self help; Computerised Cognitive Behavioural Therapy (CCBT) is likely to be a cost effective option for the University and could be made available on a self referral basis. The National Institute for Clinical Excellence (NICE) recommends *Beating the Blues* for the management of mild and moderate depression and *FearFighter* for the management of panic and phobia.

A Mental Health Promoting ethos across the whole University is advocated to encourage early access to support (practical academic and emotional) before problems escalate. It is important that students and staff know when and where to seek professional help.

The majority of students mention family, friends and partners as their key source of support in times of difficulty (HPRC 2006). In this context the further development Peer Support Systems, e.g. Student Connect should be explored. There may be scope also for expanding the number of self help groups. (Development of peer support services and systems in third level education is one of the recommendations in *Reach Out*)

The following key issues emerged during the consultation:

- *NUI Galway now has a student population with different and more complex needs than in the past*
- *There is a lack of clarity about different roles and levels of responsibility for support, notably the relative roles of Counselling, Student Health Unit, Psychiatric services and local mental health service*

Actions:	Person/s Responsible	Implementation Time-frame
<ul style="list-style-type: none"> Student Health Unit, Student Counselling, Chaplaincy, Disability and Psychiatric services agree a shared protocol for responding to students experiencing mental health problems 	Head of Counselling; Medical Director, Health Unit.	
<ul style="list-style-type: none"> Put a psychiatrically led team structure in place to provide a support plan in relation to psychiatric, academic, practical and career needs of individual students who have mental illness, this plan to be based on needs assessment and agreed with the student. 	Student Services Administrator to discuss with Prof. of Psychiatry.	
<ul style="list-style-type: none"> Provide guided self help, e.g. Computer Assisted Cognitive Behavioural Therapy for milder depression and anxiety 	Head of Counselling.	
<ul style="list-style-type: none"> Review policies and practices to ensure that disclosure of mental illness is safe, confidential and without fear of stigma. 	Each Unit.	
<ul style="list-style-type: none"> Establish policies around mental illness and implications for “Fitness to Practice” 	Registrar; Council of Deans; Disability Officer	
<ul style="list-style-type: none"> Establish clear procedures for managing mental illness emergencies. 	Medical Director, Health Unit.	
<ul style="list-style-type: none"> Strengthen links with external, local mental health services 	Medical Director, Health Unit.	

Evaluation

Actions	Person/s Responsible	Implementation Time-frame
<ul style="list-style-type: none">• Establish a detailed framework, including a Steering Group, for monitoring and evaluating the progress and effectiveness of the strategy• Review and revise strategy as appropriate in response to evaluation outcomes.	VP Student Services and Human Resources. VP Student Services and Human Resources.	

Some Comments from the Consultation Process

“Recruiting students brings with it a responsibility to look after them” (Senior academic)

“We really don’t promote well enough the student care aspect of what we offer here”
(Senior manager)

“This is, without doubt, the most student centred university that I have worked in”
(Dean)

“Students come to us all day and every day and a lot of the time they are in difficulty – they think they’ve chosen the wrong degree, they have problems with exams – everyone has a duty of care.” (Faculty Admin)

“Faculties could and should play a key role: emotional problems lead to study problems and study problems lead to emotional problems and it all affects results.”
(Counselling and Health Unit Focus Group)

“The strategy should support our mission to be a ‘student centred university’; staff need to be aware of this mission and support it.” (Registrar)

“We must look after our students while they are here. If we do that, they’ll succeed, be happy undergraduates and go on to be happy and supportive alumni. You can’t underestimate the importance of positive word of mouth for your reputation.” (Senior Academic)

“The key message must be that we all have a role to play – morally and legally” (Access)

“It should support our mission to be a student centred university” (Student Services)

“There is a lot of dependence upon ‘good will’. It will be good to have a more formal statement of the responsibilities of staff towards student welfare” (Senior Academic)

“Small things seem to crush kids more easily these days; it’s not easy to say whether this is due to the greater accumulation of pressures or that they are less resilient” (Chaplaincy)

“I’d be wary of throwing more resources at something unless you were sure it was going to work or could at least evaluate its effectiveness” (Dean)

“Those students that are involved in things and feel they belong are less likely to end up in the health centre” (Academic)

“NUI, Galway is known as a four day a week university, nothing happens on a Friday. Many students go home, but many are left across a long weekend with little to do. This can be an isolating experience.”

“Staff need to know who to contact and where to go if a student is in difficulty”

“Most students won’t consider mental health an issue, but there needs to be a way of getting it across that makes it relevant to them”

References

- Barry M and Jenkins R (2007) *Implementing mental health promotion* London: Churchill Livingstone Elsevier
- Canavan J (1999) Student life at NUI Galway: report of findings from a survey of students Galway: NUI Galway
- Health Promotion Unit, CLAN College Life and Attitudinal Survey
- Survey and Evaluation of the College Alcohol Policy Initiative
- O'Malley S and Doran M (2001) Preliminary findings from a study of reasons for non progression among full time students Galway: NUI Galway
- Department of Health and Children National Task Force on Suicide (1998) *Report of the National Task Force on Suicide*. Dublin: Stationery Office.
- Department of Health and Children (2000a) *National Health Promotion Strategy 2000-2005* <http://www.dohc.ie/>
- Department of Health and Children (2006) *A vision for change: report of the expert group on mental health policy* Dublin: Government of Ireland http://www.dohc.ie/publications/pdf/vision_for_change.pdf?direct=1
- Egan D and Foyle D (2005) *Review of Student Health Unit*, National University of Ireland, Galway
- Equality Sub-Committee (2001) Harassment and Sexual Harassment: advice to students and staff
- Health of Irish Students (2005)
- Health Promotion Research Centre and Women's Studies Centre (2006) *Perceptions of the Student Counselling Service at NUI Galway*
- Kelly (2007) The Irish Mental Health Act 2001 *Psychiatric Bulletin* 31: 21-24
- Kracen A (2003) *The Mental Health Initiative: a resource manual for mental health promotion and suicide prevention in third level institutions* Dublin: Trinity College Dublin/Northern Area Health Board http://www.tcd.ie/Student_Counselling/mental1.php
- Mark Dooris (1999) The 'Health Promoting University' as a Framework for Promoting Positive Mental Well-Being: A Discourse on Theory and Practice, *International Journal of Mental Health Promotion* 1:4: pps 34-44
- Mental Health Foundation (2005a) *Choosing Mental Health: a policy agenda for mental health and public health* London: Mental health Foundation
- Mental Health Foundation (2005b) *Up and running? Exercise therapy and the treatment of mild or moderate depression in primary care* London: Mental Health Foundation
- Mental Health Foundation (2006) *Feeding minds: the impact of food on mental health* London: Mental Health Foundation/Sustain

National Institute for Clinical Excellence (NICE) 2004 *Depression: Management of depression in primary and secondary care* London: NICE/National Collaboration Centre for Mental Health

NIMHE/CSIP (2005) *Making it possible: improving mental health and well-being in England* Leeds: National Institute for Mental Health in England

Royal College of Psychiatrists (2003) *The mental health of students in higher education* London: Royal College of Psychiatrists
<http://www.repsych.ac.uk/publications/cr/council/cr112.pdf>

Social Exclusion Unit (2004) *Mental health and social exclusion* London: Office of the Deputy Prime Minister

Student Services Committee (Alcohol Review) (2002) National University of Ireland Galway Revised Alcohol Policy

Tsouros A, Dowding G, Thompson J and Dooris M (1998) *Health Promoting Universities: Concept, Experience and Framework for Action*, Copenhagen, WHO Regional Office for Europe
http://www.tcd.ie/College_Health/healthpromotion/mentalhealthinitiative.php

University of Lancaster *Student Mental Health Planning, Guidance and Training Manual*
<http://www.studentmentalhealth.org.uk/>

University of Central Lancaster Health Promoting University
<http://www.uclan.ac.uk/studenthelp/healthpromo.shtml>