

Policy of the University of the Free State on Student Mental Health

POLICY OF THE UNIVERSITY OF THE FREE STATE ON STUDENT MENTAL HEALTH

1. Definitions and abbreviations

1.1 Acute mental health difficulty

This refers to mental health symptoms that are:

- short-term or temporary in duration (less than 12 [twelve] months);
- may or may not meet a full psychiatric diagnosis; and
- significantly interfere with academic functioning.

1.2 CUADS – Centre for Universal Access and Disability Support

1.3 Health Professions Act

Health Professions Act, 1974 (Act No. 56 of 1974)

1.4 HEDSA – Higher Education Disability Services Association

1.5 HPCSA – Health Professions Council of South Africa

1.6 ITP – Integrated Transformation Plan

1.7 Mental health

The World Health Organisation defines ‘Mental Health’ as a state of wellbeing, in which every individual –

- realises their own potential;
- can cope with the normal stresses of life;
- can work productively and fruitfully; and
- is able to make a contribution to their community.

The positive dimension of mental health is stressed in WHO’s definition of health, as contained in its constitution: “Health is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity.”

1.8 Mental health care

The Mental Health Care Act 17 of 2002 defines the following:

‘assisted care, treatment and rehabilitation’ means the provision of health interventions to people incapable of making informed decisions due to their mental health status and who do not refuse the health interventions; *‘assisted care, treatment and rehabilitation services’* has a corresponding meaning;

‘care and rehabilitation centres’ means health establishments for the care, treatment and rehabilitation of people with intellectual disabilities;

‘involuntary care, treatment and rehabilitation’ means the provision of health interventions to people incapable of making informed decisions due to their mental health status and who refuse health interventions but require such services for their own protection or for the protection of others; *‘involuntary care, treatment and rehabilitation services’* has a corresponding meaning;

'involuntary mental health care user' means a person receiving involuntary care, treatment and rehabilitation;

'mental health care practitioner' means a psychiatrist, or registered medical practitioner, or a nurse, occupational therapist, psychologist or social worker who has been trained to provide prescribed mental health care, treatment and rehabilitation services;

'mental health status' means the level of mental wellbeing of an individual as affected by physical, social and psychological factors and which may result in a psychiatric diagnosis;

'mental illness' means a positive diagnosis of a mental health-related illness in terms of accepted diagnostic criteria made by a mental health care practitioner authorised to make such diagnosis;

'psychiatric hospital' means a health establishment that provides care, treatment and rehabilitation services only for users with mental illness;

'psychiatrist' means a person registered as such in terms of the Health Professions Act;

'psychologist' means a person registered as such in terms of the Health Professions Act;

'rehabilitation' means a process that facilitates an individual attaining an optimal level of independent functioning;

'social worker' means a person registered as such in terms of the Social Services Professions Act, 1978 (Act No. 110 of 1978); and

'voluntary care, treatment and rehabilitation' means the provision of health interventions to a person who gives consent to such interventions.

1.9 **Mental health disability**

This refers to a mental health condition that:

- has been diagnosed by a registered mental health practitioner using a recognised psychiatric classification system;
- is of a duration of at least 12 (twelve) months; and
- substantially limits the student's ability to perform academically.

1.10 **PHC – Public Health Care**

1.11 **Psychosocial disorders**

According to the HEDSA coding framework and the National Mental Health Framework, these disorders (henceforth referred to as *mental health disabilities*) include, amongst others:

- depression;
- anxiety;
- panic disorder;
- schizophrenia; and
- bipolar disorder.

1.12 **Psycho-educational resources**

Resources providing information on various aspects related to mental health.

- 1.13 **Reasonable accommodation**
Reasonable accommodation means any modification or adjustment to the environment that will enable a student with a disability to have equitable access to the University. These measures ensure that students with disabilities have a fair opportunity to achieve academic excellence, enjoy a humanising student experience and receive adequate support services at the University of the Free State. For the purposes of the Mental Health Policy, the phrase 'reasonable accommodation' refers to appropriate adjustments to teaching and learning activities to ensure that students with mental health disabilities or acute mental health difficulties are not placed at a substantial disadvantage compared to other students.
- 1.14 **RAP – Reasonable Accommodation Panel**
The Reasonable Accommodation Panel (RAP) is being established to adjudicate on all applications for reasonable accommodation. The primary aim of reasonable accommodation is to reduce the impact of a person's impairment on his/her/their ability to perform essential functions as a student in a higher education setting and to create an enabling environment. The Panel will be chaired by the Deputy Vice-Chancellor: Academic, and members of the panel will include CUADS, SCD, faculty managers, representative from the Faculty Student Council and specialists as identified per applicant.
- 1.15 **Registered mental health practitioner**
A practitioner that is registered with a recognised professional body (HPCSA, South African Council for Social Service Profession or Traditional Health Practitioners Council of South Africa) and specialises in mental health.
- 1.16 **Specialised support services**
Specialised support services refers to SCD and CUADS within the ambit of Student Affairs.
- 1.17 **Staff**
All officers and employees of the University of the Free State.
- 1.18 **Students**
Current undergraduate, postgraduate and higher-degree research students who are studying full or part time and are registered at the University of the Free State.
- 1.19 **Support Services**
Refers to all support services within the University of the Free State.
- 1.20 **SCD – Student Counselling & Development**
- 1.21 **UFS – University of the Free State**
The UFS encompasses all campuses (Bloemfontein, Qwaqwa and South), students and staff of the University of the Free State.
- 1.22 **White Paper**
White Paper for the Transformation of the Health System in South Africa, 1997

1.23 WHO – World Health Organisation

2. Background

- 2.1 Recent years have seen an escalation in the number of students entering higher education who are struggling with significant mental health difficulties. This points to the need for an institutional policy that addresses both the promotion of mental wellbeing amongst the student population and the supporting of students faced with mental health issues. The UFS, furthermore, wishes to align with the National Mental Health Policy Framework and Strategic Plan 2013 – 2020 and the Comprehensive Mental Health Action Plan 2013 – 2020 of WHO.
- 2.2 As per the ITP, the UFS seeks to promote the health and wellness of its students. To this effect, the UFS has resolved to establish a Mental Health Policy as a way of responding to mental health challenges on campus and across the higher education sector. This Policy is set within the context of national strategies.
- 2.3 The National Mental Health Policy Framework recognises that:
- 2.3.1 Until the development of this document, there has been no officially endorsed National Mental Health Policy for South Africa;
 - 2.3.2 Mental health care continues to be under-funded and under-resourced compared to other health priorities in the country, despite the fact that neuropsychiatric disorders are ranked third in their contribution to the burden of disease in South Africa, after HIV and AIDS and other infectious diseases;
 - 2.3.3 There is enormous inequity between provinces in the distribution of mental health services and resources;
 - 2.3.4 There is a lack of public awareness around mental health and widespread stigma against those who suffer from mental illness;
 - 2.3.5 There is a lack of accurate, routinely collected data regarding mental health service provision;
 - 2.3.6 Mental health services continue to labour under the legacy of colonial mental health systems, with heavy reliance on psychiatric hospitals; and
 - 2.3.7 While the integration of mental health into PHC is enshrined in the White Paper and the Mental Health Care Act, in practice, mental health care is usually confined to management of medication for those with severe mental disorders, and does not include detection and treatment of other mental disorders, such as depression and anxiety disorders.
- 2.4 The WHO indicates that by 2020 depression will be the second most costly medical condition in the world. In addition, higher education institutions are seeing an increase in both the prevalence and severity of mental health issues that students present with. These mental health issues can be triggered by many factors, including stress, life events, past experiences and genetics. Student life exposes individuals to additional risk factors affecting mental health, including debt, periods of transition, substance use, culture shock and the disconnection from previous support structures. The UFS has a responsibility towards students whose mental condition falls within the ambit of this Policy.
- 2.5 The Comprehensive Mental Health Action Plan 2013 – 2020 (WHO) that committed all United Nations Member States (including South Africa) to address mental health challenges, identified four key objectives:

- 2.5.1 Strengthen effective leadership and governance for mental health;
- 2.5.2 Provide comprehensive, integrated and responsive mental health and social care services in community-based settings;
- 2.5.3 Implement strategies for promotion and prevention in mental health; and
- 2.5.4 Strengthen information systems, evidence and research for mental health.

3. Guiding principles

- 3.1 This Policy will set out how the UFS strives to deliver a coherent institutional approach to supporting the mental health and wellbeing of the UFS student population. A collection of procedures and guidelines will support the implementation of the Policy.
- 3.2 Whilst the UFS seeks to provide a supportive environment, it is important to recognise that there are limits to the extent of the support that can be provided to individual students. It is crucial to note that the support that can be offered to the students will be confined to the existing levels of capacity at the UFS. In this regard, students should always be referred to external resources as deemed appropriate.
- 3.3 This Policy is guided by the Mental Health Care Act 17 of 2002; National Mental Health Policy Framework and Strategic Plan 2013 – 2020; and the Comprehensive Mental Health Action Plan 2013 – 2020 of the WHO.
- 3.4 This Policy seeks to redress the inequalities and disadvantages created by prejudice and discrimination against persons with mental health disabilities and difficulties. Hence, clinical definitions of recognised mental health issues are considered unhelpful in terms of an institutional response. It is important to avoid tendencies to label students and, rather, to focus on the issues of response and support. This Policy will thus refer to the two categories of mental health disability and acute mental health difficulty.
- 3.5 The UFS strives to create an environment that promotes and is supportive of mental wellbeing. The expertise of the UFS, however, lies in the provision of higher education and there will thus be limitations to the level of services that can be delivered.
- 3.6 All UFS staff should constantly be aware of their own professional limitations. No member of the UFS should move beyond their professional scope in supporting or advising students with regards to mental health. Where the UFS does not provide a specific service, this should be made clear to students and they should be encouraged to seek out other services available to them. In the context of mental health, this means encouraging students to seek external professional mental health services available within the community.
- 3.7 The UFS recognises that students may be reluctant to declare a mental health difficulty, which could be based on the fear of stigma, that confidentiality will not be respected, or that their academic standing will be affected. However, the UFS encourages students to declare these difficulties at an early stage in order for these challenges to be addressed in a timeous manner.
- 3.8 The UFS provides specific guidelines on confidentiality in respect of student health and wellbeing. These embody the general principle that consent should be sought before

information is shared, except in situations that are in accordance with legislation and strict professional ethical guidelines. Therefore, any decision to break confidentiality must be made at the appropriate level.

- 3.9 In the application of this Policy, the UFS commits to complying with the relevant legislation and Policy frameworks.
- 3.10 The UFS recognises the rights of all students registered with the University to:
- a) study without being subject to prejudice or discrimination as a result of their mental health difficulties or conditions; and
 - b) access support from the UFS with regards to their mental health challenges, taking into consideration the limits of provision the UFS offers.

4. Policy

The Student Mental Health Policy aims to:

- 4.1 Promote awareness, understanding, recognition and destigmatisation of mental health difficulties amongst the student population;
- 4.2 Create an ethos in which confidentiality and dignity are respected;
- 4.3 Comply with national and international best practice guidelines for student mental health, while accommodating the specific contextual needs of the UFS student body;
- 4.4 Provide consistent and effective support to students experiencing mental health difficulties; and
- 4.5 Provide guidance and training to people involved in the support and care of students.

4.6 Rights and undertakings

The implementation of the Policy encourages an intersectional approach with shared undertakings between different stakeholders with respect to addressing student mental health issues. This section covers rights and undertakings for students and staff at the UFS. The University strives to support the needs of students with mental health difficulties. However, the University also has to balance the rights of students with mental health challenges with the overall duty of care it has to all of its students and staff.

4.6.1 University of the Free State

- a) The UFS is tasked with the promotion of the Mental Health Policy, which envisions creating a campus where mental wellbeing is valued and encouraged based on a holistic approach.
- b) Where a student discloses a mental health disability or difficulty to the UFS, the University will seek to ensure that reasonable adjustments are made to prevent the student from being unduly disadvantaged by this disability or difficulty.
- c) The UFS seeks to provide specialised support services to students.
- d) The UFS will encourage and monitor all mental health initiatives by both staff and students.
- e) The UFS will ensure that all staff and students are informed about this Policy and their respective responsibilities arising under this Policy.
- f) The UFS will provide staff with information and skills regarding how to support students appropriately.

4.6.2 Student Affairs

Student Affairs provides access for students through the following specialist support services:

4.6.2.1 Student Counselling & Development (SCD):

- a) SCD provides a free and confidential service to all registered UFS students.
- b) SCD, to which students can self-refer, provides mainly short-term counselling. Students are counselled on an individual basis, through group therapy, support programmes and workshops.
- c) In addition to its direct work with students, SCD provides a range of psycho-educational resources to all staff and students, advises members of staff who are concerned about an individual student's mental health, and contributes to initiatives that aim to foster student wellbeing.
- d) SCD provides motivations for reasonable accommodation for students with mental health disabilities or acute mental health difficulties, following a minimum of four consultations, or where such motivations are deemed clinically necessary by the treating practitioner and where the student has provided written consent for such information to be disclosed.
- e) Mental health crisis procedures:
 - i. During office hours, a student may visit, or be referred to, any of the SCD offices for professional assistance.
 - ii. Alternatively, any crisis line can be contacted.
 - iii. In severe cases, a student, who voluntarily consents, may be referred to an appropriate mental health care practitioner, psychiatric hospital, provincial hospital or rehabilitation facility.

4.6.2.2 Centre for Universal Access and Disability Support (CUADS):

- a) CUADS promotes inclusive practice and compliance with the legislation and relevant policy frameworks across the UFS in respect of students with disabilities.
- b) The service provides the following to current and prospective students with disabilities:
 - i. advice and guidance relating to how to get the most from their studies and the best way to overcome any particular barrier that they may experience as a result of their disability; and
 - ii. referral of students to specialists and other service providers, e.g. dyslexia screening, assessment services and healthcare practitioners.
- c) CUADS advises UFS staff regarding the support of students with disabilities (e.g. teaching, assessment, individual discussions and/or group training sessions, where particular issues are presented), whilst respecting appropriate confidentiality requirements at all times.
- d) CUADS makes recommendations about institutional reasonable adjustments and accommodations, and collaborates with all parties to support the implementation thereof.

4.6.3 Faculties and academic departments

- a) Faculties and academic departments must ensure that appropriate arrangements for student welfare in the departmental context are in place and are communicated to students.

- b) Staff should be alert to mental health difficulties.
- c) Staff should be able to offer an appropriate response to a student's declaration of such difficulties and be able to refer students to appropriate support, including encouraging the student to seek help from the specialised support services.
- d) In crisis situations, staff should contact Protection Services and the SCD office on campus.
- e) In a medical emergency, staff should contact ER24 immediately and then alert Kovsie Health and Protection Services.
- f) Information regarding the procedures for applying for reasonable accommodation on mental health grounds are made available to students.
- g) Students with acute mental health difficulties may apply to academic departments directly for concessions for academic obligations (such as extensions on assignments or tests), following the same procedures that each department provides for concessions for acute medical / health conditions. The decision to grant academic concessions on mental health grounds is subject to the same requirements as for medical / health grounds, whereby adequate supporting documentation from a treating health or mental health professional should be provided.
- h) Faculties and academic departments should familiarise themselves with the UFS Student Mental Health Policy and comply with it.
- i) Faculties and academic departments should be aware of the principles of confidentiality and disclosure. Written, electronic or verbal information, which relates to a student's mental health, must be handled in a secure and confidential manner (unless the student's, or any other person's, immediate personal safety is at risk).
- j) All staff should remain aware of the boundaries of their own roles. Staff should be ready to offer support to students, but are not expected to assume responsibilities outside of their primary role and capabilities.

4.6.4 Support services

- a) Staff should be alert to indicators of mental health difficulties.
- b) Staff should be able to offer an appropriate response to a student's declaration of such difficulties and be able to refer students to appropriate support, including encouraging the student to seek help from the specialised support services.
- c) Staff should familiarise themselves with the UFS Student Mental Health Policy and comply with it.
- d) Staff should be aware of the principles of confidentiality and disclosure. Written, electronic or verbal information, which relates to a student's mental health, must be handled in a secure and confidential manner (unless the student's, or any other person's, immediate personal safety is at risk).
- e) With respect to UFS residences, residence heads will be considered as the first responders and primary contact persons for cases pertaining to mental health disabilities and difficulties. The residence system and staff do not have the capacity, nor competencies, to take responsibility for providing students with professional mental health care and clinical monitoring. Where this is needed, students should seek assistance from SCD or other mental health care facilities.
- f) All residence staff, SRC and residence committee members must be informed of this Policy, as well as receive information and training in terms of support available and procedures to manage students with mental health difficulties and disabilities.

- g) Reasonable accommodation for students with mental health disabilities and difficulties will be offered by UFS Housing and Residence Affairs, within the consideration of space within the residence system. Supporting documentation from a registered mental health practitioner may be required in order to be considered for reasonable accommodation in student residences.
- k) All staff should remain aware of the boundaries of their own roles. Staff should be ready to offer support to students, but are not expected to assume responsibilities outside of their primary role and capabilities.

4.6.5 Individual students and prospective students

- a) Students who are currently experiencing mental health difficulties or conditions should, where possible, inform the UFS of this at the earliest opportunity in order to receive advice and assistance. Without such disclosure, the UFS cannot provide appropriate support or make appropriate referrals.
- b) All students have a social responsibility to assist the University in working towards a stigma-free environment with regards to mental health difficulties and disabilities.
- c) All students should endeavour to recognise their own personal limits with regards to any mental health difficulties or conditions they are experiencing and seek advice and assistance from the University's specialised support services, at the earliest possible opportunity.
- d) Students should consider declaring an existing mental health disability on their application form so that the University can prepare to offer the student reasonable accommodation.
- e) Students should encourage other students experiencing mental health difficulties to seek the appropriate assistance.
- f) Students should be aware of the Policy and supporting documents.
- g) Students should be aware of their own limitations when supporting a fellow student experiencing a mental health difficulty or disability, and use the referral processes available, both internally and externally.

4.7 Reasonable accommodation

- 4.7.1 The UFS aims to welcome a diverse student body and does not discriminate against persons with any disabilities in its application process.
- 4.7.2 The UFS recognises that students with mental disabilities and acute mental health difficulties should be considered for reasonable accommodation through the RAP chaired by the Deputy Vice-Chancellor: Academic.

4.8 Conduct and discipline

- 4.8.1 Mental health disabilities or acute mental health difficulties do not exclude students from the requirement to comply with the UFS regulations on conduct and discipline.
- 4.8.2 In situations where a student's ability to participate in disciplinary procedures is affected by mental health disabilities or acute mental health difficulties, the situation will be approached with due sensitivity, ensuring that the student is fit to take part and is appropriately supported by CUADS and/or SCD.

5. Implementation of the Policy

The Deputy Vice-Chancellor: Institutional Change, Student Affairs and Engaged Scholarship is responsible for the implementation of this Policy.

6. Purpose of the Policy

The UFS's aims, in respect of mental health, are to:

- 6.1 Promote and support the mental health and wellbeing of the student population;
- 6.2 Destigmatise mental health disabilities and difficulties;
- 6.3 Create an institutional philosophy in which confidentiality and human dignity are respected and ensured; and
- 6.4 Align with mental health legislation and policy frameworks.

7. Scope

This Policy applies to:

- 7.1 All students who are enrolled in a study programme at the UFS;
- 7.2 Registered students on University premises or elsewhere on University business or study activities; and
- 7.3 All registered students who have disclosed a mental health disability and/or difficulty.

8. Promotion and support

In creating a campus where mental wellbeing is valued and encouraged based on a holistic approach, a number of measures are advocated and designed to promote and support the mental health of the UFS student community.

- 8.1 The whole UFS community is encouraged to be positive in its approach to mental wellbeing.
- 8.2 The UFS promotes a culture that encourages and supports the destigmatisation of mental health difficulties and disabilities.
- 8.3 The UFS ensures the continuous education and development of students and staff, with regards to the mental wellbeing of students, through the provision of psycho-educational resources and initiatives that aim to foster student wellbeing.
- 8.4 The University promotes an understanding and awareness of both the internal and external support services available.
- 8.5 The University provides information and guidance to UFS staff regarding the support of students with mental health disabilities and difficulties (e.g. individual discussions and/or group training sessions), whilst respecting appropriate confidentiality requirements at all times.

9. Resource consequences of the Policy

The UFS shall endeavour to provide the following in ensuring the successful implementation of this Policy:

- 9.1 Establishing a RAP with necessary funding; and
- 9.2 Striving to adhere to the recommended international standard of psychologist-to-student ratio: 1 (one) psychologist for every 1500 (one thousand five hundred) students.

10. Review procedure

- 10.1 This Policy and any associated advice and guidance will be communicated annually by the Department of Communication and Marketing to the UFS community.
- 10.2 This Policy will be made available in a series of webpages with links to associated procedures and guidance documents. Copies in alternative formats are available on request.
- 10.3 When statutory law changes, the Policy is automatically held to have been amended by that change and it will be updated as soon as is practically possible.

11. Policy record

Document name	Student Mental Health Policy
Document number	
Coordinating UMC member	Dean: Student Affairs
Contact person	Director: Student Counselling & Development (SCD)
Status	New Policy
Approved by	Council
Date finally approved	22 November 2019
Date last amended	New Policy
Date for next review	November 2022
Person responsible for review	Director: Student Counselling & Development
Monitoring by	Dean: Student Affairs
Related documents	Refer below
Effective date	22 November 2019

APPENDICES TO BE ADDED

- **GUIDELINES FOR SUPPORTING DOCUMENTATION FOR TEMPORARY REASONABLE ACCOMMODATION DUE TO ACUTE MENTAL HEALTH DIFFICULTIES**
- **MENTAL HEALTH SUPPORT ON CAMPUS**
- **PROCEDURE FOR STUDENT PSYCHIATRIC EMERGENCIES IN RESIDENCES OR ON CAMPUS AT UFS**
- **LEGAL AND POLICY FRAMEWORK FOR THE UNIVERSITY'S STUDENT MENTAL HEALTH POLICY**

LEGISLATION, POLICIES AND FRAMEWORKS FOR THE UFS STUDENT MENTAL HEALTH POLICY

The Constitution of the Republic of South Africa

(<http://www.gov.za/documents/constitution-republic-south-africa-1996>)

Employment Equity Act 1998

(<http://www.labour.gov.za/DOL/downloads/legislation/acts/employmentequity/eegazette2015.pdf>)

General Ethical Rules – Psychology Form 223 Health Professions Council of South Africa (HPCSA)

(http://www.hpcsa.co.za/Uploads/editor/UserFiles/downloads/conduct_ethics/rules/generic_ethical_rules/ethical_rules_annexure_12.pdf)

Health Professions Act 56 of 1974

(https://www.hpcsa.co.za/Uploads/editor/UserFiles/downloads/legislations/acts/health_professions_ct_56_1974.pdf)

Higher Education Act 1997

(<http://www.gov.za/sites/www.gov.za/files/a101-97.pdf>)

Mental Health Care Act 2002

(<http://www.gov.za/sites/www.gov.za/files/a17-02.pdf>)

National Health Act 2004

(http://www.chr.up.ac.za/undp/domestic/docs/legislation_55.pdf)

<p>National Mental Health Policy Framework and Strategic Plan 2013-2020 (https://www.health-e.org.za/wp-content/uploads/2014/10/National-Mental-Health-Policy-Framework-and-Strategic-Plan-2013-2020.pdf) </p>
<p>Promotion of Equality and Prevention of Unfair Discrimination Act 2000 (http://www.justice.gov.za/legislation/acts/2000-004.pdf) </p>
<p>Protection of Personal Information Act, 2013 (http://www.justice.gov.za/inforeg/docs/InfoRegSA-POPIA-act2013-004.pdf) </p>
<p>UFS Integrated Transformation Plan (ITP) (https://www.ufs.ac.za/docs/default-source/all-documents/the-ufs-integrated-transformation-plan.pdf?sfvrsn=9752a521_0) </p>
<p>UFS Policies (https://www.ufs.ac.za/about-the-ufs/governance/policy-documents) </p>
<p>United Nations Convention on the Rights of Persons with Disability (http://www.un.org/disabilities/documents/convention/convoptprot-e.pdf) </p>
<p>RELEVANT SOURCE MATERIAL</p>
<p>International Association for Counselling Services, Inc (http://www.iacsinc.org/staff-to-student-ratios.html) </p>
<p>Editorial (2014). A New Mental Health Policy for South Africa. <i>South African Medical Journal</i>, 104 (2), 115-116. DOI:10.7196/SAMJ.7938</p>
<p>WHO Mental Health Action Plan 2013-2020 (http://www.who.int/mental_health/action_plan_2013/bw_version.pdf) </p>