FORUMSPACE

Leveraging Communities of Practice to Address Post-Secondary Mental Health and Addictions Issues

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The McMaster Health Forum strives to be a leading hub for improving health outcomes at the regional and provincial levels in Canada. Through problem-solving and discussion, they harness information, convene stakeholders, and prepare action-oriented leaders to address pressing health issues creatively.

INTRODUCTION

The progress made in recent years in promoting a greater awareness and acceptance of mental health and addictions issues has been accompanied by a concerning rise in mental illnesses among post-secondary students. In 2016, the Ontario University and College Health Association conducted a survey regarding the physical and mental well-being of over 25,000 post-secondary students. When asked about factors that affected their academic performance, 21.9% of respondents identified depression, 33.1% identified anxiety, and 42.9% identified stress.[1] 13.7% of students also reported that they had seriously considered suicide within the past year.[1] The survey also identified alarming statistics of risky behaviours that accompanied substance use. Notably, about 12.1% of students reported driving under the influence of alcohol in the last month alone.[1]

By consulting various services and stakeholders, the McMaster Health Forum Fellows have identified several concerns regarding the delivery of mental health and addictions care at McMaster University. Several key informants have questioned whether mental health training programs operated by the university are guided by evidence. One such program is safeTALK, a three-hour training program that teaches participants how to recognize persons with thoughts of suicide and connect them with suicide prevention resources. Other informants expressed concerns about funding shortages for initiatives like Arrive and Thrive, which aim to address detrimental coping mechanisms like substance abuse among students. Some informants have also questioned whether outsourcing mental healthcare to third parties like Aspiria would effectively and sustainably address the severe shortages in mental health care on campus, where only twelve counsellors are available for over 25,000 undergraduate students.

Current evidence needs to be examined through a critical and evidence-informed lens to determine how health systems can be best leveraged to address these complex issues. This work necessitates a student-led organization with the structure of a community of practice.

DEFINING COMMUNITY OF PRACTICE

A community of practice (CoP) provides a platform through which practitioners can collectively learn and share knowledge on a particular field.[2] CoPs are defined by three characteristics:[3]

- the **domain,** or the discussed field of interest, which distinguishes members from non-members;
- the **community,** or the interactions through which knowledge is shared; and
- the **practice**, or the requirement that members are active practitioners in the field.

Though the term 'community of practice' itself may be unfamiliar to most students, CoPs have existed for centuries in various forms. They can be incredibly diverse in scope, location, and resource availability.[3] Examples of CoPs can range anywhere from a group of surgeons who meet monthly to discuss novel techniques to an online forum of civil engineers working collaboratively to troubleshoot design problems.[3] The most successful CoPs tend to have access to financial resources, existing professional networks, and opportunities for regular interactions between members.[4]

CoPs can be especially valuable in healthcare. Healthcare practitioners have long performed in silos without sufficient interdisciplinary collaboration beyond bedside care.[5] For example, doctors and nurses rarely have professional interactions during mandated continuing education events. Unfortunately, this results in missed opportunities to improve best practices.[5] CoPs seek to address this challenge by breaking down traditional performance silos and fostering collective decision making.[6] This is especially relevant as Ontario's healthcare system transitions to delivering care through interprofessional teams.[7]

An example of a CoP is Ontario's Seniors Health Knowledge Network (SHKN), a platform that facilitates knowledge translation between healthcare providers, policymakers, and researchers.[8] Since its launch in 2005, SHKN has become one of Ontario's most effective CoPs. It has over 8,000 members who help develop healthcare innovations for seniors, use evidence to inform practices, and advocate for health system changes based on evolving demographics and needs.[8] One recent initiative advocated for early detection of illnesses in elderly citizens receiving community care in order to prevent frailty-related injuries.[9] Given the success of CoPs, as exemplified by SHKN, it would be beneficial to implement a similar initiative at the undergraduate level to address health challenges faced by post-secondary students.

ADAPTING CoPs TO EXAMINE STUDENT MENTAL HEALTH AND ADDICTION ISSUES

Although CoPs are often comprised of practitioners, implementing such a platform within the student body can spark equally meaningful action for mental health and addictions issues. This year, the Forum Fellows recruited 25 undergraduate students to form a student-led Community of Action (CoA). Each participant brings unique perspectives based on their academic backgrounds and lived experiences. With members from the Faculty of Health Sciences, the Faculty of Science, the Faculty of Social Sciences, and the Arts and Science program, this CoA will tackle issues in an interdisciplinary and multifaceted manner.

This year's CoA will focus on developing students' competencies in health evidence research and synthesis. From there, students will work in teams to closely examine current practices and policies on campus. This process will involve synthesizing evidence on specific problems, and exploring implementation considerations for potential solutions. Throughout the year, students will also network with field professionals through mentoring events and panel discussions on pressing issues. Additionally, our student team will publish written materials and videos that highlight new discoveries, policy changes, and pertinent questions in order to reach a broader audience through plain-language summaries of health evidence.

Through this CoA initiative, findings will be used to inform the scope of a winter capstone event, which may consist of student-led dialogues with regional health system stakeholders or public panel discussions with experienced practitioners. By evaluating the current state of university policies for mental health and addictions, the CoA will provide McMaster University and its partners with an evidence-informed voice for issues affecting its students. Such a voice is critical to effectively address students' mental health and addictions, especially in the face of campus legislative changes regarding tobacco and marijuana use and rising concerns from key stakeholders. Looking forward, it is hoped that the CoA will bring tangible improvements to the McMaster student experience. ■

ARTIST
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