I. Welcome and Introductions: Janet Corson-Rikert, Executive Director of Gannett Health Services
   a. Skorton Center for Health Initiatives
      i. The Board of Trustees honored former President David Skorton by creating the Skorton Center for Health Initiatives (which renamed the Health Promotion Department). This creation aims to expand the mission of promoting strong research partnerships with faculty members from across campus.
   b. Renaming of “Council on Mental Health and Welfare” to the “Council on Mental Health and Well-Being”
      i. Well-Being is a more holistic term and our experience as human beings includes the mental, emotional, physical, and spiritual dimensions encompassed in the term “well-being”
   c. Cornell was named one of five “Healthiest Campuses” in the country
      i. Awarded by the Healthy Minds organization that is dedicated to improving the mental health of college students across the nation
      ii. The main criteria for this award was the extent of student involvement in mental health promotion on campus

II. Mental Health and Well-Being Framework: Tim Marchell, Director, Skorton Center for Health Initiatives
   a. View the Powerpoint slides (pdf)
   b. The Jed and Clinton Health Matters Campus Program
      i. Cornell University received the Jed Seal several years ago
      ii. The “Jed and Clinton Campus Program” acknowledges the impact AOD can have on mental health
   c. What do we mean by public health?
      i. A population-based approach
   d. Leadership Structures
      i. There are many structures, in addition to this Council, at Cornell that address student mental health and well-being
      ii. A new structure is the Student Assembly Health and Wellness Committee
   e. New Initiative to Promote Stress Reduction and Resilience
      i. Nature Rx
         i. Being outdoors and even looking at pictures of nature is shown to reduce stress
ii. **Nature Rx at Cornell** is a program aimed at getting students out of doors in order to reduce stress and cultivate an appreciation of nature. There is a group of faculty, staff and students who have been meeting regularly over the past 2-3 semesters, created a website with student bloggers and are hoping to conduct a research project in the near future.

iii. At Gannett, during the Spring 2016 semester we will begin prescribing students take time out in nature to improve overall health and well-being

f. Key Research Findings to date
   i. Decrease in depression/stress/anxiety resulting in inability to function academically
   ii. Decrease in alcohol-related harm
   iii. Decrease in hazing
   iv. Suicide rate consistent with average for IHEs

III. **Mental Health Awareness Week:** Students, Natasha and Kathleen, from Cornell Minds Matter

   a. At Cornell we have a lot of resources available to support students’ mental health, however, changes to campus culture are still needed

   b. **Dining with Diverse Minds Event**
      i. **Students’ Feedback on Campus Mental Health**
         i. When students are trying to work hard, there is an active disregard for mental health
         ii. Some undergraduate students believe that faculty do not see the value of mental health and its correlation with academic success
         iii. This disregard for mental health leads some students into unhealthy practices
            a. Including alcohol, marijuana, and other drugs
         iv. There is a strong culture of competition on campus that is reinforced by grading on a curve
            a. There is a competition on who is sleeping less. Being sleep deprived becomes a badge of honor.
            b. Being the most stressed-out wins the “Stress Olympics”
         v. Many students don’t believe that they have strong resilience
            a. When grades don’t meet a student’s pre-set standard, the student’s mental health plummets and they have trouble bouncing back.
         vi. International students don’t know how to look for resources or what resources are available at Cornell.
         vii. Other students state that the waiting period at Counseling and Psychological Services (CAPS) can be a barrier to addressing their mental health.

   ii. **Suggestions for Future Steps**
      i. Professors and TAs should get more training on how to support students’ mental health
      ii. Better academic relationship and understanding between faculty and students
         a. Recognize and address unnecessary stressors (e.g. unclear course expectations; unclear procedures for requesting an extension or other accommodation; grading on a curve)
      iii. A greater emphasis on mental health for all first-year students
a. Over the past 4-5 years, the College of Engineering has emphasized the importance of student mental health and well-being by including the Thrive and Friend2Friend programs in their first-year seminar Engineering 1050 course.

iv. A training or written guidelines for students on how to approach their professor in large lecture classes and how going to Office Hours can help.

v. The facilitation of more random acts of kindness

IV. **New Sub-Committee on Mental Health and Well-Being for Graduate and Professional Students:**

Janna Lamey, Assistant Dean for Graduate Student Life

a. The membership for this committee is being formulated
   i. Will include faculty, staff and graduate & professional students

b. This committee will pick up where the former GPCI Committee left off and focus on the mental health concerns and recommendations noted in that document

c. Additionally, the Graduate Student Satisfaction Survey (which is administered every other year) may provide further insights into current gaps.
   i. Another source of information to be considered will be the ‘Exit’ survey after a graduate student finishes their program.

V. **Questions and Discussion**

1. **Stigma**
   a. Peer-to-peer communication seems to be key to reducing student stigma about using mental health services.
   b. Is there a way to study what peer-to-peer interventions do/ have done for mental health? For example, looking specifically at how Cornell Mind Matters activities and events impact the campus and the impact of college-specific peer-to-peer mentoring or support networks.
   c. The peer-to-peer programs need support for the peers offering advice, mentoring and tutoring. Staff provides support for these students; faculty might be able to as well.

2. **Faculty support**
   a. If students are not allowed to sign up for more than a certain amount of credits for a semester without meeting with a faculty or staff advisor this can create a preventive or protective factor for distress or mental illness.
   b. However, getting students to take less credit hours per semester is difficult when there is a campus culture “to always do more”.
   c. In terms of prevention, working more with faculty who are trained and aware of how to work with students might be the first form of supporting students before it leads to reactive care.

3. **Course Logistics**
   a. What are we doing well that could be expanded?
      i. The drop deadline was extended several years ago, so that students can see a major grade that comes out before having the chance to drop a class
ii. In addition, the chance to change a class to S/U was moved to the drop deadline

b. What are we not doing and not doing well?
c. What should we be doing differently?
   i. Posting the Course Median on the Transcript
      i. For classes with a certain number of students, the median is posted to put it into perspective if the median is lower than other classes
      ii. Most likely, Cornell University is unique in posting this median grade as compared to other universities

4. Advisor Structure
   a. There is a big challenge in all the colleges to promote consistency among the faculty advisors to make sure that students get the support they need through advising.

   b. In addition, the assigned faculty advisor may not be the best resource for some students. Reaching out for academic advising from other faculty mentors or the college student services staff could offer another source of support.

   c. If student services and faculty advisors are stretched too thin, more training of student leaders through programs such as EARS could also create more support and promote the peer-to-peer model.

5. Sleep
   a. Many members of the Cornell community are not aware of how a low quality of sleep can lead to reduced learning, lowered productivity, and impaired mood including increased feelings of stress, depression or anxiety.

6. Resiliency: How can we be building this up in our students?
   a. Electronics/Technology
      i. While technology allows for a type of connectedness, there is also research beginning to emerge which demonstrates that technology use is also related to low resiliency among college students
      ii. Faculty and staff could do more to demonstrate to students their own healthy habits and behaviors which promote resiliency.
      iii. Remind students that resiliency does not mean doing something every minute of every day or participating in numerous organizations to pad the resume or taking more than the recommended number of classes or credit hours.

7. You can’t teach resilience unless students are interested in learning about it.
   a. Trying to teach freshman about resiliency may not be effective.
   b. Instead, having faculty, staff and peer role models and showing students instead of trying to teach students might be a better model.

8. Mindfulness: paying attention in a particular way, on purpose is a central component to building resilience
a. The College of Engineering offers an Eight-Week Mindfulness Meditation course through its Leadership Initiatives Program.

b. Becker House (West Campus) Assistant Dean Amanda Carreiro has offered the same Eight-Week Mindfulness Meditation Course to residents during the last two semesters.

c. The Let’s Meditate Program, coordinated out of CAPS at Gannett is growing with increasing numbers of attendees each semester.

d. Cornell fitness Centers continue to offer meditation courses through PE Classes.

e. Faculty and staff, as well as students/peers could do more to model and share about their own experiences and benefits from mindfulness practices.

2. Cultural Barriers
   1. Gannett Health Services works with numerous campus departments and organizations to promote inclusion and engagement in mental health and well-being services, activities and events for all students.

3. Concluding Remarks: Janet Corson-Rikert, Executive Director of Gannett Health Services
   1. Making incremental steps towards improving mental health and well-being will create a healthier, more supportive community for all students.
   2. We can turn good ideas into small-scale projects or into larger scale works moving forward.
   3. The idea of having a coordinated effort on some of these issues can be effective for working with the student, faculty and staff groups.

Minutes taken by: Nicolette Lee