

University of California Equity in Mental Health Funding Evaluation

Deliverable 6:

The 2024 UC Well-being Summit Report

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UC SANTA BARBARA

Executive Summary

Summit Aims

As part of the Equity in Mental Health (EMH) Funding Plan, University of California (UC) campuses and partners were invited to participate in a two-day Well-being Summit at the UC Los Angeles Campus. The annual summit offers the chance to connect thought leaders across diverse roles and disciplines that make up the UC well-being community, providing a key opportunity for learning, support, and collaboration.

The summit was held on October 22–23, 2024. The 191 participants who attended the conference came from all 10 UC campuses and included student leaders as well as representatives from campus departments and service units that are instrumental in student well-being efforts. The summit also engaged key stakeholders from outside the UC community, providing wider discussions on innovative approaches from partners such as the California Department of Health Care Services. The following topics were covered in summit sessions: The Okanagan Charter, program successes and challenges, equity and justice approaches, Children and Youth Behavioral Health Initiative programs and supports, campus climate, student leader insights and perspectives, and well-being data collection strategies.

Summit Highlights

The 2024 UC Well-being Summit provided a collaborative space for well-being thought leaders to share insights, discuss challenges, and explore strategies for supporting equity and well-being across the UC system. Building on previous discussions, this year's event took a broader approach, highlighting the wealth of experience and knowledge gained over the past several years of EMH Funding Plan implementation. Some of the key themes included the strong resolve to promote a culture of well-being as envisioned in the Okanagan Charter, streamlining resources through innovative partnerships, the need for equitable support systems for all students, the value of data-driven decision-making and the wisdom of creating spaces to recharge and refocus.

Key Summit Takeaways

Students today report facing an unprecedented array of challenges and pressures that impact their well-being at both individual and population levels, exacerbating health inequities. All 10 UC campuses have adopted the Okanagan Charter, committing to embed health into every aspect of campus life and advancing health promotion on both local and global levels. While the Okanagan Charter serves as an aspirational framework for campus well-being, implementing its principles through campus policies and practices can be challenging. The following summit takeaways include insights and recommendations from UC thought leaders, highlighting key strategies for fostering a holistic approach to well-being, including an emphasis on social justice to help address longstanding inequities.

- **Support basic needs centers** as they move from a narrow focus on food and housing to address broader issues such as social justice, financial stability, and health equity. Strengthen collaborative partnerships to support students across diverse areas of need, including transportation, community safety, physical and mental well-being promotion, and emergency support.
- **Enhance peer-to-peer well-being initiatives** across all UC campuses by bolstering existing peer services (e.g., Student Counseling, Health Promotion, and Mental Health First Aid peer educators) and fostering greater engagement with student-led organizations to help expand available care and support options.
- **Promote a stronger sense of belonging and support** by creating inclusive spaces, facilitating collective activities, co-creating community values and goals, reducing stigma, offering diverse services tailored to students' unique needs and integrating mental health programs across varied campus settings.
- **Promote well-being in academic settings** by integrating faculty training, developing mentoring programs, promoting well-being toolkits and supporting other approaches that promote care and inclusion in the classroom environment.
- **Prioritize support for student groups with high-acuity needs** by responding to students' call to expand the Collegiate Recovery Program systemwide and by implementing targeted policies and programs that better serve students with dependents and other groups experiencing complex challenges.
- **Strengthen staff recruitment and retention efforts** through flexible work schedules, equity in workloads and recognition of individual needs and circumstances. Recruitment should include those with diverse backgrounds that reflect the student body to provide culturally sensitive care and reduce mental-health stigma.
- **Improve access to well-being services** by addressing significant barriers described by students (e.g., wait times, insurance limitations, bureaucratic challenges). Strategies may include increasing coverage through the Children and Youth Behavioral Health Initiative (CYBHI) Fee Schedule Program, expanding partnerships with digital well-being providers and enhancing resources for improved care navigation.
- **Foster a positive campus climate** by deepening student engagement, increasing support for the work of student identity centers and hosting campuswide summits and open forums to build trust and promote healing.
- **Reframe the approach from treating "unwellness" to supporting "wellness" by developing metrics that reflect this priority.** This involves moving from deficit-oriented measures to measuring strengths and applying these findings to better understand program outcomes and to help inform future well-being efforts.

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Background

In 2021, the California Budget Act allocated \$15 million in ongoing funds to enhance mental health and well-being (MH&W) support for students across the University of California (UC) system. This led to the Equity in Mental Health (EMH) Funding Plan, with each of the 10 UC campuses submitting proposals to expand and strengthen students' mental health and well-being services. The EMH Funding Plan aims to promote well-being across the UC system so that all students have equitable opportunities for health and success.

The EMH Funding Plan distributes funding across three care domains, including Treatment and Recovery Support, Early Intervention and Collaborative Well-being, and Universal Prevention and Wellness (previously referred to as Tier I, Tier II and Tier III services). The UC Holistic Well-being Model (Appendix 1) was developed by the EMH research team and the UC Student Mental Health Oversight Committee (SMHOC) to illustrate these three domains and the principal well-being services and programs included in each. The three domains are not mutually exclusive, and well-being supports may fall into one or more domains. Additionally, all UC campuses have adopted The Okanagan Charter as a key strategy for promoting a culture of health and well-being for students, staff and faculty. This framework orients well-being strategies to nurture strengths such as belonging, resilience and self-determination and to embed health into all aspects of university life.

The annual UC Well-being Summit represents an opportunity for thought leaders to learn from, collaborate with and support each other in their student well-being improvement efforts. The inaugural 2023 Summit focused on data approaches, aiming to understand systemwide needs regarding student well-being data and develop a shared consensus on ways to help the campuses meet these needs. This year's summit had a broader approach, bringing leaders together to share insights, discuss goals and collaborate on future strategies. The event highlighted innovative programs and partnerships and focused attention on the well-being needs of the campus community, including the summit participants themselves. The UC Well-being Summit continues to serve as a catalyst for meaningful dialogue and action, shaping a healthier and more inclusive future for the entire UC community.

Summit Activities

The UC Well-being Leadership Summit took place on October 22–23, 2024. The University of California Office of the President (UCOP) facilitated the summit. Present at the summit were representatives from UC leadership, including the campus chief well-being officers (CWOs) who convened the summit, UC students, well-being providers from each of the 10 UC campuses, community providers and state agencies. Undergraduate and graduate student leaders dedicated to advancing mental health and well-being on their campuses and systemwide had a significant presence at the summit. This included officers from the UC Graduate and Professional Council (UCGPC) and the UC Student Association (UCSA).

The summit included three main breakout sessions, as shown in Table 1. (The full summit agenda can be found in Appendix 2.) The first two sessions offered the chance to explore diverse topics from innovative well-being programs and practices implemented on the UC campuses to broader discussions on systemwide challenges and opportunities. The third breakout session involved a series of reflections to discuss strategies, barriers and learning insights, which participants completed in groups based on their UC campus affiliation. Two keynote speeches, by Dacher Keltner and Mimi Khúc, outlined promising approaches for promoting mental health and well-being in the university campus setting. Another summit highlight was the fireside chat, where student leaders presented their unique perspectives, reflections and recommendations. Additionally, the summit offered two plenary sessions. The first of these explored Children and Youth Behavioral Health Initiative (CYBHI) supports for the UC student community, and the second described current efforts toward developing coordinated UC data systems to enhance student well-being.

Table 1: Summit presentations and discussion sessions

October 22	
Keynote	Science, practice, community and meeting the crisis of our times (Dacher Keltner)
Breakout Session 1	Implementing mental health first aid on a college campus Strategizing UC’s basic needs goals, challenges and promising practices: 2025 The Okanagan Charter Recruiting, retaining and supporting diverse staff Data collection and resourcing
Presentation	The Children and Youth Behavioral Health Initiative (CYBHI): Supports for the UC student community
Breakout Session 2	Graduate student mental health and academic success Coordinating care for students in distress through a social justice lens Advocacy, burnout and community-building CYBHI: Expanding coverage and access to behavioral health services for UC students Campus climate
October 23	
Keynote	Touring the abyss: Unwellness and care in the University (Mimi Khúc)
Presentation	Fireside chat with student leaders
Presentation	Strategy and support for data collection
Breakout	Campus conversations

Summary and Highlights

In total, 191 thought leaders attended the summit. This included 35 student leaders representing all 10 UC campuses. Attendees included campus/UC well-being leaders representing all well-being service sectors: campus recreation services, case management services, counseling and psychological services (CAPS), Center for Advocacy, Resources and Education (CARE) offices, health promotion, basic needs centers, student health services, crisis response services, collegiate recovery, equity resource centers and senior health and well-being leadership. In addition to attendees from within the UC system, outside health and well-being partners, including the California Department of Health Care Services (DHCS) and Kooth Digital Health, contributed to the proceedings. The complete list of summit attendees is presented in Table 2 below. (See Appendix 3 for a summary of well-being departments and service groups within the UC Mental Health and Well-being system.

Table 2. Student Well-being Leadership Summit Participants

First Name	Last Name	Job Title	Campus/ Agency Affiliation:
Sheela	Abucay	Staff Services Manager II	DHCS
Angela	Andrade	Dean of Student Wellness	Santa Barbara
Rebecca	Angela	Vice President, UCI Associated Graduate Students External Affairs	Irvine
Alexis	Applebaum	Disability Justice Officer, UCSA	UCSA
Josh	Armstrong	Staff Services Manager 1	DHCS
Saanvi	Arora	Chief Partnerships Officer, GenUP / Vice President, ASUC External Affairs	GenUP and UCB
Ngozi	Ashibuogwu	Associate Director, CARE	Los Angeles
Louis	Avalos	Peer Educator at the Hub Basic Needs Center	San Diego
Fatima	Azam	Communications Coordinator	UCOP
Kevin	Baldueza	Interim Co-Director Student Affairs Case Management	San Diego
Ishia	Barajas	Director, UCLA Students with Dependents Program	Los Angeles
Bianca	Barreto	Assistant Director, Student Affairs Case Management	San Diego
Kate	Beihl	Chief Marketing Officer	Kooth Digital Health
Staci	Bias	Associate Director, Systemwide Community Safety	UCOP
Brittney	Blake	Project Manager	CYBHI
Raeann	Bowlds	Director of Health Education and Promotion	Davis
Stacey	Brezing	Director, Staff and Faculty Health and Well-being	Davis
Michelle	Brinkop	Medical Director	Merced
Sonya	Brooks	Student Regent-designate	Los Angeles
Jessica	Bulleri	Wellness Coordinator, Faculty & Staff Wellness Program	Santa Cruz
Courtney	Burkes	Director of Fitness & Wellness	Irvine
Michelle	Burt	Director of Multicultural Services	Davis
Emmett	Campbell	Student	Berkeley
Tulsi	Cassius Fernandez	Chair, ASUC Mental Health Commission	Berkeley
Jane	Castillon	Director, Disabled Students Program	Santa Barbara
Courtney	Castleman Bucher	Autism Disability Specialist	Berkeley
Alexia	Cervantes	Assoc. Dir. of Recreation - Fitness & Wellness	San Diego
Crystal	Chacon	HR Analyst	Los Angeles

First Name	Last Name	Job Title	Campus/ Agency Affiliation:
Albert	Chang	Medical Director	Irvine
Jennifer	Chow	Associate Director, Student Support	Davis
Abby	Choy	President, ASUCR	Riverside
Naomi	Chu	Director, CARE	Berkeley
Peter	Cornish	Founder and President	Stepped Care Solutions
Cynthia	Davalos	Executive Director of Student and Equity Affairs	UCOP
Christine	Davidson	Program Supervisor, Expanded Food and Nutrition Education Program	UC ANR
Tenia	Davis	Associate Director, Operating Budget	UCOP
Shailen	Dawkins	Youth Advisor for the CYBHI Youth Suicide Prevention Campaign	CYBHI
Serifa	Dela Cruz	Chair, UCLA Economic Crisis Response Team	Los Angeles
Cindy	Delgado	Director, Risk Services and Occupational Health	Santa Cruz
Perzianee	Devoux	Community Programs Office Transportation Services Manager	Los Angeles
Frances	Diaz	Director, Counseling Center	Irvine
Cynthia	Diwan	Clinical Coordinator Student Mental Health & Well-being	San Francisco
Christime	Dominguez	Mental Health Coordinator	Santa Barbara
Erin	Dowdy	Professor	Santa Barbara
Brenna	Eckerson	Creative Director, Marketing, Brand, and Content	Kooth Digital Health
Edwin	Feliciano	Behavioral Health Director UCSB Student Health	Santa Barbara
Errol	Feria	Clinical Case Manager	San Francisco
Cassie	Finazzo	Alcohol & Other Drugs and Peer Education Programs Manager	Irvine
Nellie	Fitzgerald	Executive Projects Coordinator	Davis
Chiara	Frank	UCLA Student Wellness Commissioner	Los Angeles
Marianne	Frapwell	Director, CARE at the Sexual Assault Resource Center	San Diego
Michael	Furlong	Professor	Santa Barbara
Luis R	Garcia Chavez	Graduate Student	Los Angeles
Bene	Gatzert	Chief Strategy Officer, University Health Services	Santa Barbara
Regina	Gemignani	Project Policy Analyst	Davis
Phelan	Glenn	Graduate Student Researcher	Los Angeles
Monroe	Gorden	Vice Chancellor for Student Affairs	Los Angeles
Laura	Gramling	Counseling Psychologist	Berkeley
Nicole Presley	Green	Senior Executive Director, Student Resilience and Mental Health	Los Angeles
Deb	Gruen	Senior Event Planner	UCOP
Kritika	Gupta	Research, Evaluation, and Data Analyst	Riverside
Naomi	Hammonds	Chair, UCGPC	UCGPC
Aditi	Hariharan	President, UCSA	UCSA
Emily	Harris	Director, Case Management Services	Los Angeles
Chelsea	Harris	Rapid Rehousing Case Manager, Basic Needs Center	Davis
Katia	Hatem	Vice President of External Affairs, Graduate Student Association	Riverside
Karen	Hedges	Director, Student Financial Education and Essential Support Services	Los Angeles
Denise	Hicks	Student Lead of Marketing, The Well's Active Minds	Riverside
Neven	Holland	Legislative Director	Los Angeles
Sydney	Holmes	Mental Health Promotion Specialist	Davis
Arthur	Honegger	Clinical Director, CAPS	Santa Barbara
Fiona	Hosmer-Hughes	Mental Health Chair, AS UCSB Commission on Student Well-being	Santa Barbara
Kendra	Hypolite	CARE Advocate for Racial Justice	San Francisco

First Name	Last Name	Job Title	Campus/ Agency Affiliation:
Gaius	Ilupeju	President, ASUCD	Davis
Catie	Imbery	Operations & Research Coordinator, Semel Health Campus Initiative	Los Angeles
Takiyah	Jackson	Director, African American Student Development	Berkeley
Christian	Jacobs	Behavioral Health Coordinator, Student Mental Health and Well-being	UCOP
Dia	James	Student Parents Reimagining CalWORKs Leader	Los Angeles
Reina	Juarez	Associate Director of Student Mental Health & Well-being	San Diego
Ed	Junkins	Executive Director of Student Health and Well-being	San Diego
Bavneet	Kaur	Director, Basic Needs	Merced
Beth	Kellman	Senior Event Planner	UCOP
Dacher	Keltner	Professor	Berkeley
Mimi	Khúc	Managing Editor, The Asian American Literary Review Adjunct Professor	Georgetown University
Genie	Kim	Director, Student Mental Health & Well-being	UCOP
Paul	Kim	Director, Counseling Services	Davis
Heather	King	Basic Needs Project/Policy Analyst	UCOP
Meg	Kobe	Well-being Collective Director	Santa Cruz
Gladys	Koscak	Interim Director, Health & Wellness	Santa Barbara
Finn	Kovi	Program Manager, Health Education & Resource Team	Los Angeles
Anne-Marie	Krumrei	Basic Needs Coordinator	Irvine
Allison	Lawrence	Community Engagement Liaison	Kooth Digital Health
Brenda	Lear	Assistant Director of Recreation, Fitness & Wellness	Santa Barbara
Jo Jo	Lee	Triton CORE Clinician	San Diego
Laurie	Lee	Interim Director, Student Affairs Case Manager	Riverside
Shaozhuan	Li	Senior Staff Psychologist, Counseling Center	Irvine
Clayton	Littrell	Co-Director, Student Disability Services	San Francisco
Mariah	Lyons	Assistant Dean of Students, Student Support Programs	Santa Cruz
Victoria	Magallon	Student	Santa Cruz
Samantha	Magpusao	Administrative Manager	Los Angeles
Miral	Malik	Postdoctoral Fellow, CAPS	Los Angeles
Monique	Mangum	Graduate Teaching Assistant	Los Angeles
Ryan	Manriquez	President, UCGPC	Berkeley
Connie	Marmolejo	Mental Health Educator	Riverside
Ethan	Martinez	President, AS UCI	Irvine
Andres	Martinez-Sabino	Executive Vice President, SUA	Santa Cruz
Joshua	Mayfield	Interim Program Director, RISE Center	Los Angeles
Erinn	McMahan	Executive Director, UCLA Recreation	Los Angeles
Monica	Mendoza	Assistant Director, UCLA Community Programs Office	Los Angeles
Sarah	Meredith	Director, CARE	Davis
Cassidy	Miller	Student	Santa Barbara
Shira	Minerd	WorkLife Well-being Program Manager	Santa Barbara
Elizabeth	Mondragon	Interim Executive Director MH Initiatives/Director CAPS	Riverside
Andrea	Mora	Director, Basic Needs Center	Irvine
Katie	Morrison-White	Senior Case Manager	Berkeley

First Name	Last Name	Job Title	Campus/ Agency Affiliation:
Chaitali	Mukherjee	Executive Director, Arthur Ashe Student Health & Wellness Center	Los Angeles
Maryjan	Murphy	Director, CAPS	Santa Cruz
Rich	Mylin	Director of Recreation	San Diego
Amrit	Nagra	Director, Clinical Operations	Los Angeles
Nathan	Ngo	Youth Fellow	CYBHI
Caroline	Nguyen	Policy Director	UCSA
Javier	Nunez-Verdugo	External Vice President, UCSA	Los Angeles
Bedlam	Oak	Vice President of Financial Affairs, UCSB Graduate Student Association	Santa Barbara
Brian	Olowude	Executive Director, CAPS	Santa Barbara
Karin	Omark	Director, Health Promotion Services	San Diego
Tiffany	O'Meara Veinbergs	Director of Outreach Services	San Diego
Patricia	Ordonez-Kim	Executive Director	UCGPC
Ishia	Orozco-Barajas	Program Director, Students with Dependents Program	Los Angeles
Brenda	Ortiz	Assistant Dean for Student Advocacy and Retention	Merced
Hee Kyung	Park	Postdoctoral Scholar	Santa Barbara
Janice	Park	Basic Needs Coordinator	Irvine
Eli	Pascal	Director, UCI CARE	Irvine
Niraly	Patel	Health Promotion Specialist	Merced
Jhanvi Nandkishor	Patel	Mental Health Commission Creative Visioning Lead, ASUCI	Irvine
Bettina	Pedone	Nurse Practitioner, Director of Population Health	Los Angeles
Walther	Perez	Partnerships Manager	Kooth Digital Health
Thu	Pham	Graduate Student	San Francisco
Sarah	Porat	Associate Director of Clinical Services, UCSB Alcohol & Drug Program	Santa Barbara
Roxana	Price	Trees For Tomorrow Coordinator	UC ANR
Leslie	Ramirez	Wellness and Safety Manager	Santa Barbara
Jema Mae	Ranoy	The Well's Active Minds Student Lead of Outreach	Riverside
Jailyn	Richardson	President, GPSA	San Diego
Tabia	Richardson	Senior Research Analyst	Los Angeles
Laura	Riley	Director, Student Disability Resource Center	Riverside
Predair	Robinson	Director of Academic Satellites	Davis
Krista	Rocha	Staff Services Manager	DHCS
Lindsay	Romasanta	Chief of Staff, Student Affairs	Davis
Greg	Rothberg	Director, Campus Recreation	Irvine
Sven	Rundman	Associate Director of Prevention, CARE	Santa Barbara
Josephine	Saechao	Basic Needs Manager	San Francisco
Julio	Sagastume	ACEs Aware Patient Advisor and Council Leader	Los Angeles
Antonio	Sandoval Ayala	Chairperson, UCLA Basic Needs Committee	Los Angeles
Dennis	Santiago	Associate Director & Basic and Essential Needs Manager	Los Angeles
Mohit	Saraswat	Treasurer, UCGPC	UCGPC
Zephyr	Schnelbach	Chair, UCSA	UCSA

First Name	Last Name	Job Title	Campus/ Agency Affiliation:
Spencer	Scruggs	Director, Center for Accessible Education	Los Angeles
Rebecca	Segundo	Basic Needs and Rapid Rehousing Manager	Santa Barbara
Amy	Sekhon Atwal	Associate Vice Chancellor, Health & Well-being / Executive Director, Health & Counseling	Merced
Suzanne	Seplow	Associate Vice Chancellor, Student Development and Health	Los Angeles
Kelly	Shedd	Program Manager, Co-Worker Experience UCI Health	Irvine
Drew	Shelburne	Director, Student Accessibility Services	Merced
Wendelin	Slusser	Associate Vice Provost for the Semel Healthy Campus Initiative Center	Los Angeles
Jaymi	Smith	Interim VP for Graduate Education / Interim Dean, Graduate Division	Irvine
Sam	Soetenga	FITWELL Coordinator, UCLA Recreation	Los Angeles
Jeanne	Stanford	Interim Executive Director, Student Mental Health and Well-being	San Francisco
Petra	Steinbuchel	Director	Cal-MAP
Tim	Stempel	Behavioral Health Program Manager	San Diego
Jody	Stiger	Systemwide Director of Community Safety	UCOP
Jason	Stone	Health Communication & Media Campaigns Manager	Santa Barbara
Sohil	Sud	Director	CYBHI
Amarbir	Takhar	Unit Chief	DHCS
Tong-Reen	Tan	Program Coordinator	Davis
Alina	Tejera	Administrative Analyst - Special Projects, Student Policies & Governance	UCOP
Adan	Tfayli	UCLA Student Body President	Los Angeles
Kiyoko	Thomas	Basic Needs Center Director	Berkeley
Marisol	Torres	Senior Health Promotion Specialist	Riverside
Laura	Tully	Vice President Clinical Integration and Partnerships	Kooth Digital Health
Andrew	Vesper	Director, Social Work Services	Santa Barbara
Cindy	Villaflores	Assistant Director, CARE at SARC	San Diego
Valara	Villanueva	Director, CARE	Merced
Patty	Violi	Associate Director for Student Services	Los Angeles
Cory	Vu	Associate Vice Chancellor of Health and Well-being	Berkeley
Becca	Wallace	Director, Student Rights and Responsibilities	San Francisco
Allison	Wang	Doctoral Student	San Francisco
Iyanna	Waring	Basic Needs Associate Manager	Los Angeles
Acacia	Warren	Associate Director, Bruin Resource Center	Los Angeles
Devin	Wicks	Associate Director Wellness Programs, UC Berkeley Recreation & Well-being	Berkeley
Hung	Wu	Wellness Coordinator	Riverside
Hannah	Yip	Student	Los Angeles
Kathleen	Yumul	Wellness Program Coordinator	San Francisco
Michelle	Zaragoza	Graduate Student	Berkeley

AS: Associated Students; ASUC: Associated Students of UC (Berkeley); CARE: Campus Assault/Advocacy Resources and Education; CAPS: Counseling and Psychological Services; CARE; CYBHI: Children and Youth Behavioral Health Initiative; GPSA: Graduate and Professional Student Association; SUA: Student Union Assembly; UC ANR: UC Agriculture and Natural Resources; UCGPC: UC Graduate and Professional Council; UCOP: UC Office of the President; UCSA: UC Student Association

UC Campus Abbreviations: Berkeley = UC Berkeley, Davis = UC Davis, Irvine = UC Irvine, Los Angeles = UC Los Angeles, Merced = UC Merced; Riverside = UC Riverside, Santa Barbara = UC Santa Barbara, Santa Cruz = UC Santa Cruz, San Diego = UC San Diego, San Francisco = UC San Francisco

Activities — Day 1

1. Opening

UC President Michael V. Drake opened the summit with a video address highlighting the holistic mental health and well-being goals and strategies of the UC system. He thanked UC well-being leaders for their compassion and commitment to addressing the unique needs, identities and strengths of students across all UC campuses. President Drake also acknowledged the participation of student leaders at the summit, emphasizing that student perspectives and insights are central to ongoing equity and well-being efforts. He noted that the UC Well-being Summit provides a valuable learning opportunity for all well-being leaders as they share their expertise, vision and strategies.

2. Keynote: Science, practice, community and meeting the crisis of our times

Dacher Keltner

Dacher Keltner discussed the concept of awe and its role in reducing stress and fostering a sense of belonging, joy and purpose. He emphasized that the positive effects of awe deepen the more it is practiced. Noting that awe can be cultivated through collective experience, Keltner led the attendees in an activity involving the mirroring of a partner's motions. He also offered many practical suggestions for cultivating awe in the campus context, including promoting opportunities to connect to nature, practicing and reflecting on kindness and moral beauty and fostering "collective effervescence" through various activities like music, dance, sports, political events and recreational activities, among others. Drawing from the work of the Greater Good Science Center, he proposed ways to extend this work through community outreach and suggested that UC campuses collaborate to mobilize resources and explore these opportunities.

The keynote was well received by thought leaders, with frequent reference to the concept of awe and its relevance to campus well-being throughout the next two days. During the Q&A session, the leaders shared relevant examples, including stories of colleagues whose courage and humanity in caring for others has been a source of inspiration. They also reflected on challenges, especially the need for broad change in campus culture. For example, a case manager described how awe may appear as a luxury beyond the reach of students facing significant pressures related to time and productivity. As one participant remarked, "How do we as institutions push against this societal push towards more productivity, towards not having enough time for these things that are causing the very crises that we're encountering?"

3. Morning breakout sessions

Implementing mental health first aid on a college campus

Angela Andrade; Fiona Hosmer-Hughes; Gladys Koscak; Cassidy Miller

The presentation by the UC Santa Barbara Mental Health First Aid team described the evolution of this program's successes over the past 13 years, providing helpful insights into lessons learned and promising future directions. The training program, developed by the National Council for Mental Well-being, equips individuals with the knowledge and skills to effectively respond in situations when an individual is developing a mental health or substance use problem or experiencing a crisis. Program components, known by the acronym ALGEE, are delivered by a team of both students and professional staff and include: (1) Approach and assess for risk of suicide or harm, (2) Listen non-judgmentally, (3) Give reassurance and information, (4) Encourage professional

help and (5) Encourage self-help and other support strategies. Additionally, the team described the curriculum's ten training segments and highlighted their guiding principle to provide "Hope with Facts," which emphasizes personal agency and the process of recovery.

The speakers described how they have benefitted from a strong collaboration with students, particularly the significant support provided by UC Santa Barbara Associated Students since the early 2020s. During this period, the program also leveraged EMH mini-program grants to develop an on-campus instructor pool. A peer-to-peer approach, resources tailored for the campus community and specialized training for various campus departments were all identified as key factors in program success.

A lively Q&A session focused on potential ways to expand the program. Ideas discussed included offering a flexible menu of training options to train more faculty, collaborating with graduate programs to incorporate the program into professional development (e.g., medicine, nursing, law) and extending the program into K–12 educational settings. There was also strong support for more systemwide UC efforts, including the possibility of a UC-sponsored training to help other campuses launch the program. The team offered advice and encouragement for new initiatives, emphasizing the availability of resources and suggesting that "it just takes a few people putting their heads together."

Strategizing UC's basic needs goals, challenges and promising practices: 2025

Heather King, Andrea Mora

Heather King, UCOP's coordinator for basic needs, and Andrea Mora, the UC Irvine Basic Needs Center director, provided an overview of the history of basic needs initiatives in California and within the UC system, tracing the evolution from a student-led movement to the established services and resource centers that are prevalent today. Key changes in this progression include enhanced collaboration and expanding the content of basic needs services, which now cover a broad spectrum of support beyond food, addressing issues such as social justice, financial stability and health equity. The current UC definition of basic needs encompasses equitable access to nutritious food; safe, secure and adequate housing; healthcare that promotes sustained mental and physical well-being; affordable transportation; resources for personal hygiene; and emergency support for students with dependents.

The speakers highlighted several important successes, including the establishment of basic needs centers at all 10 UC campuses, which provide essential support to the campus community. This support includes integrated case management, crisis resolution, rapid rehousing supports and access to immediate resources including pantry supplies, meal swipes and CalFresh benefits. At the same time, challenges include meeting the growing need for these services, particularly in the face of rising living costs and the reduction of increased pandemic-era safety net supports. Considering these evolving conditions, a re-evaluation of the UC system's goal to cut food and housing security by 50 percent by 2025 may be necessary.

The Okanagan Charter

Meg Kobe, Jessica Bulleri, Bene Gatzert

Meg Kobe, Jessica Bulleri and Bene Gatzert discussed the adoption of the Okanagan Charter across the UC system. They emphasized the dual calls to action in the Okanagan Charter, including (1) embedding health into all aspects of campus culture and (2) leading health promotion action and collaboration locally and globally. The approach centers on health and sustainability and contributes to a holistic vision of well-being that encompasses "people, places and the planet."

The role of universities as health-promoting institutions recognizes the importance of whole-systems approaches to health and well-being that are participatory, transdisciplinary, collaborative, innovative and focused on strengths and assets. The speakers described how broader systems affect health through social and institutional structures, cultural values and norms, laws and policies and the built environment. They emphasized the shift from actions that focus solely on modifying individual behaviors and outcomes to those that also aim to modify conditions found in the setting itself and in the broader systems that affect university life.

Well-being Collective Director Kobe and Wellness Program Manager Bulleri discussed the successful launching of the Okanagan Charter at UC Santa Cruz, beginning with a workgroup established in 2023 and tasked with identifying key focus areas and strategies for measuring impact. Two approaches that have helped the movement grow on this campus are (1) identifying and recruiting campus champions to help influence positive change and (2) holding campus “road shows” to promote the benefits of the approach, including health benefits and an enhanced sense of belonging and community. The future work at UC Santa Cruz will be organized into five key pillars including promoting a culture of well-being, belonging and connection, faculty and academic success, sustainability efforts and infrastructure improvements.

University Health Services Chief Strategy Officer Bene Gatzert discussed the Healthy Campus Initiative at UC Berkeley, one of the original eight UC universities to formally adopt the Okanagan Charter. This initiative currently includes several broad programs to support campus well-being. The Healthy Learning Environment Toolkit provides practical ways to institutionalize well-being practices in the classroom, building care and inclusion into academic settings. The Equity Assessment Lens for Everyday Decision-Making includes key questions to consider when evaluating a campus program/policy or proposing a change that may affect well-being. Finally, Healthy Work Environments promotes employee well-being and environmental-level changes to support the well-being of all.

The presentation was followed by a group discussion on key strategies to continue building widespread support for a systems- and settings-based approach to well-being. This conversation drew on the collective impact literature, with thought leaders discussing how they could develop as an effective “backbone” organization by focusing on key activities such as guiding vision and strategy and building public goodwill.

Recruiting, retaining and supporting diverse staff

Christian Jacobs, Nicole Presley, Miral Malik

The presentation began with a discussion of efforts to promote a pluralistic UC workforce and an overview of current trends in UC recruitment and retention. UCOP Behavioral Health Coordinator Christian Jacobs reviewed recent data on diversity across the UC academic and staff workforce. While there have been some gains in the past decade in terms of increased diversity among faculty, the large majority of faculty are white (57.1 percent) or Asian (23.7 percent), with low percentages of underrepresented groups: 8.3 percent Hispanic/Latinx, 3.7 percent African American, 0.3 percent Native American, 0.1 percent Native Hawaiian or Pacific Islander and 1.8 percent claiming two or more races/ethnicities. Similar percentages are found among senior career staff. Considering how to increase workforce diversity can be challenging in the current economy, with the UC system experiencing widespread workforce challenges and with recruitment and retention an ongoing concern.

Nicole Presley, the Executive Director of UC Los Angeles Student Resilience and Mental Health Services, presented a case study exploring questions of job satisfaction and burnout among staff at UC Los Angeles CAPS, drawing on data from employee surveys. These data were largely positive, showing a large decrease in burnout since 2015, with staff expressing a high sense of accomplishment deriving from positive staff relationships and the opportunity to support students in meaningful ways. However, many staff stated that they experienced “one

or more symptoms of burnout.” Notably, staff who identified as LGBTQ+ reported far higher levels of burnout relative to those identifying as heterosexual (43 percent compared with 17 percent), as did women compared to men (30 percent compared with 15 percent). Twenty-three percent of individuals who identified as Black, Indigenous or People of Color (BIPOC) reported symptoms of burnout, relative to 19 percent of staff who identified as white. Much smaller numbers reported persistent burnout, including 4 percent of white and 2 percent of women staff members. Presley explained that the most common contributing factors to burnout were salary, workloads, and the complex needs of the students they serve. Staff members suggested improvements including increased pay, equity in workloads and more flexible work schedules to alleviate burden. The session concluded with a Q&A session exploring recruitment successes and challenges across UC, led by Postdoctoral Fellow Miral Malik.

4. The Children and Youth Behavioral Health Initiative (CYBHI): Supports for the UC student community *Sohil Sud, Khoa-Nathan Ngo, Shailen Dawkins, Julio Sagastume*

Director Sohil Sud of CYBHI, provided an overview of the initiative’s work to meet the call of California’s youth to “Do more and do better” by advancing behavioral health supports and services across the state. He outlined their strategy to address workforce shortages by introducing a new wellness coach program aimed at increasing capacity and diversity in the mental health workforce. In partnership with the UC system, they are expanding training programs, including increased funding for psychiatric mental health nurse practitioners and social welfare education programs. On the side of program improvements, they are scaling up evidence-based practices in several areas including digital resources, home visits and community-based youth centers. Additionally, a major focus is expanding access to school-linked care services by restructuring coverage for these services, with program details provided during an afternoon breakout session. Sud introduced three youth panelists working with CYBHI, each of whom presented on their respective programs.

CYBHI Youth Fellow Khoa-Nathan Ngo presented two virtual service platforms for children and families — BrightLife Kids and Soluna — which are administered under the state’s CalHOPE program and aim to improve accessibility to mental health care. BrightLife Kids is a free video coaching program for children aged 0–12 and their caregivers. It features coaches from diverse backgrounds and experience providing culturally responsive care. Many areas of support and advice are available including infant care, learning differences and tween services. The second platform, Soluna, developed by Kooth for ages 13–25, offers free resources such as self-guided tools, community support and coaching. It focuses on ways to support young people by providing a safe space with premoderated, anonymous content. Both programs emphasize accessibility, affordability and the importance of meeting users where they are in their mental health journeys.

Youth Advisor Shailen Dawkins from the CYBHI Youth Suicide Prevention Campaign shared his work on the Never a Bother campaign. The campaign's core message is that reaching out for help is “never a bother,” aiming to reduce the stigma around mental health struggles and to alleviate the anxiety of reaching out for help. Dawkins discussed the campaign's emphasis on youth co-creation and the significant role of young people in shaping its messaging and resources. The campaign includes accessible materials, social media content and opportunities for submitting music and other art focusing on self-expression and mental health advocacy. It also features support from public figures aiming to normalize conversations about mental health among youth.

From the Office of the California Surgeon General’s ACEs and Toxic Stress Campaign, Youth Advisor Julio Sagastume shared his personal journey of navigating a health issue as a child and discovering the impact of Adverse Childhood Experiences (ACEs) on mental health. He described the Live Beyond campaign, which aims to raise awareness about ACEs, chronic stress and their long-term effects, especially among young adults. Julio discussed the campaign's efforts to encourage young people to seek support and recognize that they are not

alone in their experiences of ACES. The program provides an array of helpful resources, such as stress-busting activities and personal stories, to help empower youth to cope with these challenges.

5. Afternoon Breakout Sessions

Graduate student mental health and academic success

Patricia Ordonez-Kim

Ph.D. candidate and Executive Director Patricia Ordonez-Kim of the UC Graduate Student Professional Council led a presentation and discussion on the topic of graduate student mental health. She discussed her own positionality and reflected on how graduate student identities intersect with both privileges and forms of oppression.

The presentation highlighted statistics on the mental health struggles of graduate students across the US. Thought leaders discussed underlying causes, including high-stakes milestones in a competitive and hierarchical environment, power dynamics between students and faculty and external pressures such as parenthood and full-time jobs. A major contributor to stress is financial instability, which exacerbates isolation and stress for lower-income students. Additionally, the increased accessibility of graduate programs has led to a more diverse student body, including more individuals with ACEs, for whom institutions may not be equipped to provide effective support.

Ordonez-Kim introduced a socioecological framework that emphasizes the interplay between individual, interpersonal, community, institutional and policy factors in shaping student mental health and academic outcomes. Through group discussion, thought leaders reflected on how individual factors such as financial pressure and chronic illness affect both mental health and academic progress. For example, students in research positions located in the Bay Area face high living costs, while being paid at low rates associated with their UC campus location. Discussions about interpersonal factors focused on relationships with advisors, peers and family members. Positive adviser relationships were seen as vital for student success, while negative ones can increase stress and anxiety, contributing to poor mental health. A disability services provider noted that students from immigrant families often experience the added challenge of stigma around mental health within their family and community, and they often express anxiety around seeking this support.

The discussion also addressed institutional factors, like insufficient mentoring, lack of career development support and financial challenges, which can contribute to mental health issues and lead to higher attrition rates. Students may face "mastering out," where they leave doctoral programs with a master's degree. These systemic issues disproportionately affect underrepresented students, including women of color, who often face more intense pressure to persist without drawing attention to the institutional challenges they may be facing.

Several suggestions were made to support graduate students' well-being, including access to disaggregated data to better understand the needs of different populations and inform future support. Another recommendation was to improve mentoring support, where mentors can assume the role of "institutional broker" to advocate for students' needs and help foster a greater sense of belonging within the department and campus. Related to this, Ordonez-Kim shared that the UC Academic Personnel Manual has recently been updated to include mentorship standards, formally recognizing faculty for mentorship as part of their tenure and promotion.

Coordinating care for students in distress through a social justice lens

Jo Jo Lee, Kevin Baldueza, Bianca Barreto, Ishia Barajas

The presentation on care coordination within a social justice framework was led by Co-Directors Kevin Baldueza and Bianca Barreto of UC San Diego Student Affairs Case Management, Clinician Jo Jo Lee for Tritan CORE at UC

San Diego and Director Ishia Barajas of UC Los Angeles' Students with Dependents (SwD) program. The speakers shared their work providing care for students in distress and connecting them to appropriate resources. They highlighted the importance of social justice principles, including equity, accessibility and cultural competence, when coordinating care for students in distress.

The UC San Diego team reviewed service data showing that the Tritan CORE team responded to 95 crisis calls and provided care for 75 students during the 2023–24 academic year. The concerns most often reported included suicidal ideation, academic struggles, interpersonal conflict, psychosis and substance use. A significant proportion of affected students are BIPOC, international and/or transfer students. Additionally, Student Affairs case management conducted 930 meetings, addressing primary concerns related to academics, mental well-being, physical health concerns, family bereavement and interpersonal challenges. High-acuity needs were particularly prevalent among students with dependents, international students, transfer students, BIPOC students and other marginalized groups, including LGBTQ+, undocumented and religious minority students.

Barajas provided data from UC Los Angeles' Students with Dependents (SwD) Program, which serves 825 students, 91 percent of whom are first-generation. Of the undergraduates, 68 percent are Pell Grant eligible, along with 32 percent of graduate students. Established in 2009, the program utilizes the Aspen Institute's two-generation (2Gen) approach, recognizing the whole family unit and working to develop supportive university policies and programs. Barajas pointed out that students in the program report a wide range of needs spanning mental health support, basic needs assistance, academic challenges and access to family and community resources.

The presenters underscored the critical role of partnerships, both within campus units and with the broader community, in strengthening student support systems. A group discussion allowed thought leaders to share successful collaborations, identify gaps in student support and explore ways to build more inclusive networks of care. Other key discussion points included leveraging data to evaluate equitable care, defining relevant metrics and enhancing feedback mechanisms to assess successes and address ongoing needs.

Advocacy, burnout and community-building

Bedlam Oak

Facilitated by Ph.D. student and UC Santa Barbara GSA Vice President of Financial Affairs Bedlam Oak, this session focused on three key topics: (1) strategies for creating change, (2) dealing with challenges and the experience of burnout and (3) community-building concepts and experiences. The session's goal was to share and synthesize ideas to support thought leaders as they continue to work toward positive changes in health and well-being on their campuses.

The discussion about strategies began with participants discussing their different approaches to enacting change, including activism, advocacy and volunteering. The leaders emphasized the importance of forging collaborations across student, staff and faculty groups to effectively navigate institutional structures and set achievable goals.

When discussing challenges, leaders shared that working as an advocate for change can sometimes be difficult, as expectations for their positions require adherence to rules. One individual described experiencing "tensions that arise from challenging a system that doesn't seem like it's designed to be challenged." Another shared that hurdles and roadblocks can often lead to frustration, particularly when they have spent significant time and effort trying to implement a program without seeing the fruits of their labor. Additionally, the group highlighted a lack of time, funding and staff as major obstacles. They described difficulties simply trying to maintain their current programs, leaving them feeling that doing "the best thing" is out of reach.

On the topic of community-building, thought leaders discussed several helpful approaches. They agreed that it starts with being willing to "put yourself out there," showing humility, actively listening to others' ideas and

building on common interests.

Expanding coverage and access to behavioral health services for UC students

Petra Steinbuchel, Amarbir Takhar, Josh Armstrong

This session covered two important initiatives to expand access to behavioral health: The California Child and Adolescent Mental Health Access Portal (Cal-MAP) and The CYBHI Fee Schedule Program.

Director Petra Steinbuchel of Cal-MAP outlined how this program addresses the growing incidence of mental health challenges faced by today's youth by increasing timely access to mental health care. She discussed US Surgeon General Vivek Murthy's advisories on the current mental health crisis among youth and the urgent need to expand access to pediatric mental health care. Steinbuchel explained that Cal-MAP is an expansion of a successful UCSF program begun in 2019 (the Child and Adolescent Psychiatry Portal or CAPP), which is supported by additional funding from the California DHCS and the Health Resources and Service Administration (HRSA).

Cal-MAP provides no-cost consultation, education and resource navigation to providers caring for California youth aged 0-25, especially those living in underserved and rural areas. The program focuses on providing accessible care in the lowest stigma setting — primary care services. It aims to center the voices of youth and families and to empower them to make choices around their care. She described this as a "right time, right place, right clinician, for the right length of time" stepped-care model that both respects the care choices of service users and helps direct scarce resources to where they are most needed.

Key Cal-MAP program elements include coaching primary care providers (PCPs) to support thoughtful diagnosis and treatment planning, care coordination — including navigation support and referrals — and extensive training opportunities, including Project ECHO (peer-to-peer tele-mentoring) and webinars providing education on specific mental health conditions. Steinbuchel also shared the positive feedback they have received from PCPs stating that the advice and support on addressing mental health needs with their patients has increased their confidence and helped address compassion fatigue. While the current focus has been on providing phone consults, future efforts will incorporate texting and asynchronous email exchanges (e-consults).

Amarbir Takhar and Josh Armstrong of the California DHCS presented on the CYBHI's Fee Schedule program. This program transforms the system of services and supports across the state, enhancing access to school-linked behavioral services for children and young adults under age 26. It enables children and youth in TK–12 schools and public higher education institutions (IHEs) to receive mental health services directly at their schools.

In addition to improving service access, other benefits of the program include establishing sustainable reimbursement revenue for covered behavioral health services, expanding the range of eligible practitioners and easing the administrative complexities for educational institutions. Oversight is provided by multiple state agencies, including DHCS, the Department of Managed Healthcare (DMHC) and the California Department of Insurance (CDI).

The Fee Schedule program is implemented through a collaboration between Local Educational Agencies (LEAs), public higher education institutions and designated providers. Multiple payers — including Medi-Cal managed care plans, commercial health plans and disability insurers — work together to support this effort. Carelon Behavioral Health, as the third-party administrator, plays a central role in managing provider networks, processing claims and ensuring smooth payment operations.

The speakers shared an overview of the program's phased rollout, which began in January 2024 with a pilot group of LEAs. The program expanded more broadly in July 2024 and is expected to continue growing through 2025. UC campuses will be eligible to participate beginning in fall 2024, with CYBHI offering ongoing enrollment opportunities every six to 12 months. A range of helpful resources were provided during the session, many of which are available on the DHCS Fee Schedule program website (<https://www.dhcs.ca.gov/es/CYBHI/Pages/Fee-Schedule.aspx>).

A Q&A session allowed thought leaders to ask questions about the program's implementation, particularly in the

UC context. One question was whether the program would increase workloads for campus billing offices. The speakers clarified that Carelton would primarily manage claims and reimbursements, minimizing the administrative burden on campuses. Leaders also raised several questions related to the service structures on the UC campuses. The presenters stated their appreciation for the discussion and pointed out the importance of having the group's input during this early phase in program development.

Campus climate

Jodi Stiger

Systemwide Director of Community Safety Jodi Stiger facilitated a Q&A session on campus climate. The session began with a summary of UC policies related to free speech; free expression; and student, faculty and staff safety. Stiger explained that in response to 2024 student protests and action by the California State Legislature, the UC President directed chancellors to enforce campus policies to protect community safety and maintain university operations. Each campus currently provides information on campus time, place and manner (TPM) regulations on its website, which outlines the parameters for allowable free speech activities. These and related policy guidelines for individual campuses and the overall UC system can be found online on the Campus Climate webpage (<https://diversity.universityofcalifornia.edu/actions/campusclimate.html>).

When asked about higher levels of police presence sometimes seen on campuses, Stiger pointed out that unless there is a life-threatening situation, it is left to each UC chancellor's decision-making team to decide whether there is a need for police involvement. Several thought leaders expressed concern that the police presence can often contribute to, rather than diffuse, campus tensions. Stiger explained that campus safety models follow a holistic tiered response approach, with community safety responders, student community service officers and mental health crisis teams responding in the first tiers and sworn police officers only brought in as a last resort. He suggested that some campuses have launched successful nonemergency response programs that help to "remove police from non-policing jobs," such as Health34 at UC Davis and SWIFT at UC Riverside. Thought leaders discussed a need to expand these programs more widely across the UC system to help diffuse crises and center community well-being. They suggested a need for more consistency in implementing the tiered response approach, as well as more guidance on procedures to follow when there are concerns and questions about the campus safety system.

Further discussion centered on communication challenges between students and campus administration. Students stated that they sometimes feel they are not being heard by the administration when they report experiencing discrimination and harassment. Stiger pointed out that certain speech and expressive conduct may be protected by freedom of speech laws, which can limit the administration's response options. However, he emphasized the importance of working together to improve communication channels to make sure they are accessible and effective for all students.

Finally, there were several important suggestions about the need to find ways to promote healing and rebuild trust across the campus community. Several thought leaders advocated for a multipronged approach that incorporates increased partnering with students; support for the work of student identity centers; campus-wide summits and similar opportunities for open dialogue and continued mental health and well-being supports, including peer-to-peer support. Stiger expressed that he appreciated the proposals and helpful input. He suggested that the leaders reach out to campus officials to develop these and other ideas for restoring the sense of inclusion and belonging that is so central to campus well-being.

Activities — Day 2

1. Keynote: Touring the abyss: Unwellness and care in the university

Mimi Khúc

The keynote address by Mimi Khúc introduced the idea of “unwellness,” which Khúc explained is broader than an individual state, experienced by everyone and shaped within social contexts. Khúc focused on the importance of developing an understanding of unwellness that is more accepting and challenges the ideal of a “normal” level of wellness. Khúc also discussed how the university environment contributes to unwellness through both the intense pressures related to productivity and academic/professional success and the pressures of “compulsory wellness.” Pointing both to specific difficulties experienced by “model minority” groups such as Asian Americans, as well as challenges found more broadly across university campuses, they suggested the need to explore approaches that recognize unwellness and build new opportunities for care and support in community with others. This reconceptualization of “wellness” appeared to resonate strongly with wellness providers and student thought leaders alike.

2. Fireside chat with student leaders

Saanvi Arora, Aditi Hariharan, Rebecca Angela

UC student leaders presented a conversational panel to explore the topic of student well-being, including successes, challenges and recommendations. Presenters included ASUC External Affairs Vice President Saanvi Arora, UCSA President Aditi Hariharan and UC Irvine’s Associated Graduate Students External Affairs Vice President Rebecca Angela.

Hariharan identified accessibility as a major concern. She highlighted the limited availability of collegiate recovery programs for students dealing with substance-use issues. Currently, only a few UC campuses have dedicated recovery programs, creating a significant gap in support. Additionally, students without university-provided health insurance (UC SHIP) often face barriers in healthcare access. Hariharan also noted that there is also a lack of culturally competent care and that students may struggle to find providers who share their identities, affecting both the quality and effectiveness of care.

Angela echoed these concerns, particularly emphasizing the high caseloads at disability services centers (DSCs), which cause significant delays in receiving necessary accommodations. She also noted that graduate students have limited access to certain mental health services such as the Soluna program, which has age restrictions, and often experience long wait times for resources such as Live Health Online.

Another challenge discussed was the administrative burden associated with seeking care. The speakers pointed out that students often struggle to navigate complex bureaucratic processes, leading them to deprioritize their well-being. They stressed the importance of improving access to ensure that all students, including graduate and nontraditional students, receive the mental health support they need.

Reducing the stigma around mental health was also a key theme. While progress has been made in normalizing conversations about mental health struggles, it was felt that more work is needed to encourage help-seeking behaviors. The speakers emphasized that students should feel safe acknowledging their mental health challenges and empowered to seek support without fear of judgment. This requires a commitment from universities to provide culturally competent, accessible care while fostering an environment where mental health care is integrated into students’ daily life. The speakers noted that this is crucial in fostering a sense of belonging and helping students feel connected and supported in their campus journey. Faculty, teaching assistants and staff can

play an important role in modeling these practices by openly discussing their wellness journeys and expanding outreach efforts to help overcome stigma.

The discussion then shifted to the concept of holistic care and well-being, with each speaker sharing their perspective. They defined holistic care as the ability to work toward one's best physical, mental and emotional state, recognizing that this process is unique to everyone. They emphasized that ensuring students' access to food, community safety, trust and a supportive campus environment are all integral to holistic wellness. The panelists agreed that there is no one-size-fits-all approach to health and well-being and that campuses should diversify their services to meet students' varied needs.

The speakers emphasized several proposals to improve the well-being of UC students, including:

- Increasing the compensation for healthcare workers to attract a diverse staff.
- Expanding programs such as UC Programs in Medical Education (UC PRIME) to support underrepresented students entering health-related fields.
- Broadening mental health services beyond traditional settings, such as peer counseling programs that offer relatable and accessible support.
- Strengthening student-run organizations that create community spaces where students feel connected and supported.

Finally, the panel suggested that campus climate and trust issues significantly influence students' willingness to seek services. Many students, particularly those involved in activism, feel distrusted or even targeted by their campus administration. The panel described a growing disconnect between students and administrators, particularly when students feel their rights to free speech and civic engagement are met with punitive measures or surveillance. The speakers suggested that rebuilding trust requires more than just offering resources — it involves actively listening to students, acknowledging administrative mistakes and ensuring that students feel their voices are valued and protected. The panel suggested that UC must commit to supporting student activism and mental health simultaneously, with clear, transparent practices that foster a sense of security and respect.

3. UCLA Vice Chancellor for Student Affairs and Student Mental Health Oversight Committee Co-chair Monroe Gorden

Vice Chancellor Gorden discussed the Student Mental Health Oversight Committee's efforts to develop a holistic approach to well-being. They emphasized the importance of social determinants of health and how addressing issues such as food and housing insecurity is central to students' opportunity to live and thrive on their university campuses. Vice Chancellor Gorden thanked the participants for their many contributions to these efforts and outlined some of the recent areas of progress on the UCLA campus, including culturally responsive in-person and telehealth CAPS services, satellite locations, peer-to-peer programs, embedded services in academic and Student Affairs departments, the Resilience in Your Student Experience (RISE) center and the CAPS Compassionate Response (CORE) mobile crisis team. Gorden also described some of the new collaborations with state-sponsored resources, including the Soluna mental health application and the recent redesign of the UCLA well-being website, which now features "Be Well Bruin," a comprehensive student health and well-being resource directory.

4. Strategy and Support for Data Collection

Erin Dowdy, Michael Furlong, Mark Savill

The EMH Evaluation research team discussed current efforts to address disparities in access and utilization and to improve health equity across the UC system. Campuses have utilized EMH funding to expand the scope and availability of well-being services. A crucial challenge discussed during the 2023 UC Well-being Summit is how data can support EMH goals by improving understanding of student needs and assessing the effectiveness of current programs. Some of the important takeaway messages from that meeting included the need for shorter, cost-effective survey approaches that emphasize a strength-based approach; greater integration and coordination of data collection and analysis with support from UCOP; deeper insights into what students need to thrive; and more integration of student perspectives into the conversations about well-being. The EMH evaluation team outlined two pilot approaches to meet these data needs.

Michael Furlong and Erin Dowdy shared their progress on developing two campus well-being pulse surveys at UC Santa Barbara created in collaboration with students. These surveys are designed as brief, adaptable tools to measure student well-being, with the goal of eventual integration into a centralized UC dashboard system to better understand student needs. They are currently being pilot tested with diverse student groups on the UC Santa Barbara campus. Each of the two strength-based surveys is designed to be completed in under five minutes. The first assessment is based on the The Substance Abuse and Mental Health Services Administration (SAMHSA) [Eight Dimensions of Wellness](#), including environmental, physical, financial, emotional, social, intellectual, academic and existential/spiritual dimensions, along with a cultural dimension to align with UC EMH efforts. The second survey incorporates items from the validated Mental Health Continuum Short Form, which assesses emotional, social and psychological well-being. The team is using feedback from student focus groups and developing social media marketing materials to encourage broad participation. Early data from the first pilot phase with the SAMHSA-based survey showed positive feedback from students regarding the survey's length and ease of completion, with some students requesting additional information about how the survey may contribute to positive changes in campus well-being. The team will continue collaborating with a wide range of staff and students across the UC Santa Barbara campus to refine the survey tools and develop implementation plans.

Mark Savill discussed a collaboration at UC Davis involving the EMH research team, the Graduate Affairs Office, Institutional Research and Academic Planning (IRAP), Student Health and Counseling Services, the Aggie Compass Basic Needs Center and Kooth, which supports the Soluna mental well-being application. He highlighted a key issue of concern — while students complete campus well-being surveys, there is often a lack of follow-up to address the needs identified in the survey.

In response, the team is conducting a pilot intervention that uses existing questions on the UC Graduate Student Experience Survey (UCGSES) to connect UC Davis graduate students with mental health and well-being resources, including counseling services, the Aggie Compass Basic Needs Center and the Soluna Mental Health application, among others. The survey asks about basic needs insecurity, as well as emotional states related to depression and anxiety. For the latter, the survey uses the PHQ-4, a validated tool for predicting depression and anxiety disorders. If a student indicates basic needs insecurity or reports symptoms of depression or anxiety, they will receive a message with resource links tailored to their needs. If successful, there are plans to explore possibilities for expanding the project to other UC campuses.

During the discussion, one thought leader highlighted the importance of integrating qualitative data into the pulse survey to provide a richer understanding of student well-being experiences. The presenters agreed and pointed out that many participants of the first UC Well-being Summit had expressed a need for qualitative data along with analytical support to interpret findings. Leaders also suggested increased involvement from providers, who, alongside students, should play a central role in developing meaningful approaches to well-being data.

The discussion also revisited another key theme from the earlier summit, the concepts used by UC campuses to define and measure student “success.” Student participants challenged traditional notions of success that emphasize an idealized image of the high-achieving student. Echoing earlier comments from Khúc, students shared that comparison against this ideal can foster feelings of inadequacy and failure. Instead, they advocated for an understanding of success that reflects the diverse realities of student life and is more closely linked to key aspects of well-being, including personal growth, purpose, emotional fulfillment and a deeper appreciation for oneself and others. Participants underscored the importance of creating campus environments where students are supported not just academically, but as whole individuals.

5. Campus conversations

During the final session of the summit, breakout groups were organized by each UC campus to reflect on key insights gained throughout the event. These discussions provided a space for thought leaders to discuss their well-being efforts, identify barriers and opportunities and develop strategies to break down silos and foster collaboration. The groups also discussed action items, including approaches to ensure equity and to support data-driven decision-making to maximize impact. At the conclusion of the session, a representative from each campus shared key points from their discussions. The guiding questions for the breakout groups can be found in Appendix 4.

UCLA

The UCLA team shared that their breakout allowed students to discuss their lived experience with campus well-being and to suggest areas for improvement. They identified tangible takeaways from the summit, such as strategies to enhance support for students with disabilities and opportunities to integrate the Healthy Campus Initiative with other well-being priorities.

UC Santa Barbara

The team from UC Santa Barbara focused their discussion on forming a campus wellness collaborative and planning a follow-up meeting. They explored the possibility of creating wellness committees within each department to better connect academic units with campus well-being efforts. Additionally, the team collaborated on a Student Well-being Statement which affirms that well-being at UC Santa Barbara is a shared responsibility for the entire university and is defined by a person’s physical, mental and emotional health; the health of our communities and the ability for individuals on the campus to contribute to the world with a sense of meaning and purpose.

UC Davis

The UC Davis team outlined several future goals to improve well-being among students, staff and faculty. These included integrating teaching and research assistants into well-being work, creating more spaces across the campus for open dialogue, strengthening basic needs resources, increasing graduate student support and promoting collaborative partnerships across departments and student organizations.

UC Irvine

The UC Irvine team emphasized a commitment to their collaborative approach. This includes leveraging well-being data through shared research projects and potential partnerships with graduate students from the Schools of Nursing and Population & Public Health. They explored ways to enhance efficiency to work smarter rather than harder. Finally, the group expressed that clear communication with leadership would help facilitate their well-being initiatives.

UCSF

The UCSF team expressed appreciation for this session, stating that they have rarely had the opportunity to be in the same place and have broad participatory discussions. They highlighted the need to meet the students “where they are” by engaging with existing student-led events and initiatives. For example, students explained that they organize successful monthly events and suggested opportunities for staff members to join them. The group also discussed the possibility of collaborating with students on campus well-being grants. Additionally, they committed to advancing the Okanagan Charter on their campus. Finally, they emphasized specific takeaways from summit presentations, including providing training for faculty, using strength-based language more consistently in well-being efforts and integrating data collection into their planning processes.

UC Santa Cruz

The team from UC Santa Cruz reflected on the strengths and challenges of their efforts to improve well-being for students, staff, and faculty. They found that recognizing their shared challenges helped foster a sense of community and allowed them to brainstorm steps to enhance support across services and programs. Other key summit takeaways included strategies to help individuals navigate the complex landscape of well-being resources and to support well-being among care providers themselves.

UC Merced

The team from UC Merced used the session to strategize ways to increase campuswide buy-in for integrating mental health and well-being into all aspects of campus life. They discussed the importance of strengthening connections with academic departments, including faculty, academic advisors and research and teaching assistants. They also noted that, as a younger campus, UC Merced has the unique advantage of shaping its well-being initiatives with flexibility and innovation.

UC Berkeley

The UC Berkeley team identified the importance of creating more “spaciousness” for everyone involved in well-being efforts in order to improve work-life balance and increase efficacy. They discussed how being more strategic in planning and resource allocation could help achieve their collective mission. Their conversation centered on finding ways to build capacity and optimize efforts to support campus well-being.

Across all teams, a common theme emerged: the value of the diverse perspectives gained at the summit and the power of bringing ideas and energy back to their respective campuses to drive meaningful change.

6. Closing Remarks

Members of the Well-being Summit Planning Committee, Genie Kim and Devin Wicks, concluded the event by introducing the new UC Health and Well-being Website, which centers on the goal of holistic well-being for everyone across the UC system. They expressed their appreciation for the role of each of the summit attendees in advancing this goal through their creative energy, dedication and passion.

Discussion

The UC Well-being Summit is an important forum for thought leaders across the UC system to develop and refine well-being efforts, facilitate collaboration both within and across campuses and celebrate achievements. It fosters inspiration and support for participants striving to meet the mental health needs of students, staff and faculty while promoting healthy campus environments across the UC system.

This year's summit covered a broad range of topics central to mental health and well-being. Discussions highlighted innovative campus programs, new state behavioral health care resources and strategic directions for the future. The event saw strong participation from well-being leaders representing all ten UC campuses, with increased engagement from both undergraduate and graduate student leaders. Their contributions enriched discussions and shaped a plenary session focused on the student perspective.

Several common themes emerged from the summit. Thought leaders emphasized a holistic, strength-based understanding of well-being, focused on embedding health across all aspects of campus life. This was particularly evident in the discussions around the Okanagan Charter and the role of universities as health-promoting institutions. Throughout the summit, leaders underscored the need to promote policies and structures that center well-being, including stronger collaborations with student organizations and academic departments. There was also support for more campuswide conversations to overcome divisions and to foster trust and dialogue. Central to this discussion was the cultivation of a well-being culture for the UC community, encompassing a greater understanding of "unwellness," providing "spaciousness" for fostering purpose and meaning in one's work, enhancing belonging through a sense of awe and connection and other fundamental shifts in perspectives and values. A continuation of last year's summit conversation challenged the narrow definition of "student success" found across many university campuses and sought to replace this with something more inclusive, supportive and empowering.

The importance of an equity approach was also discussed extensively during the summit. This emphasized actively recognizing and responding to needs across the campus community, including individuals who identify as BIPOC, LGBTQ+, undocumented, students with dependents, graduate students, individuals with health conditions or impairments and other groups who may experience well-being challenges and inequities. Thought leaders highlighted current efforts to enhance equity, including promoting basic needs security, embedding well-being within a social justice framework, strengthening the work of student organizations and diversifying staff to foster representation and reduce mental health stigma. The leaders also discussed the importance of developing integrated data systems to effectively identify and respond to these needs.

Leveraging resources through collaborative partnerships was a key summit theme. Presentations showcased both longstanding and new partnerships within and beyond the UC system, including the collaborative approach of the basic needs ecosystem model and campus crisis response initiatives, among others. Students have played a pivotal role in many of these partnerships, particularly through the many peer-to-peer programs found across the UC campuses. A notable collaboration driving innovation in UC well-being services is the partnership with CYBHI, which is helping provide essential training, program improvements and access to digital mental health resources.

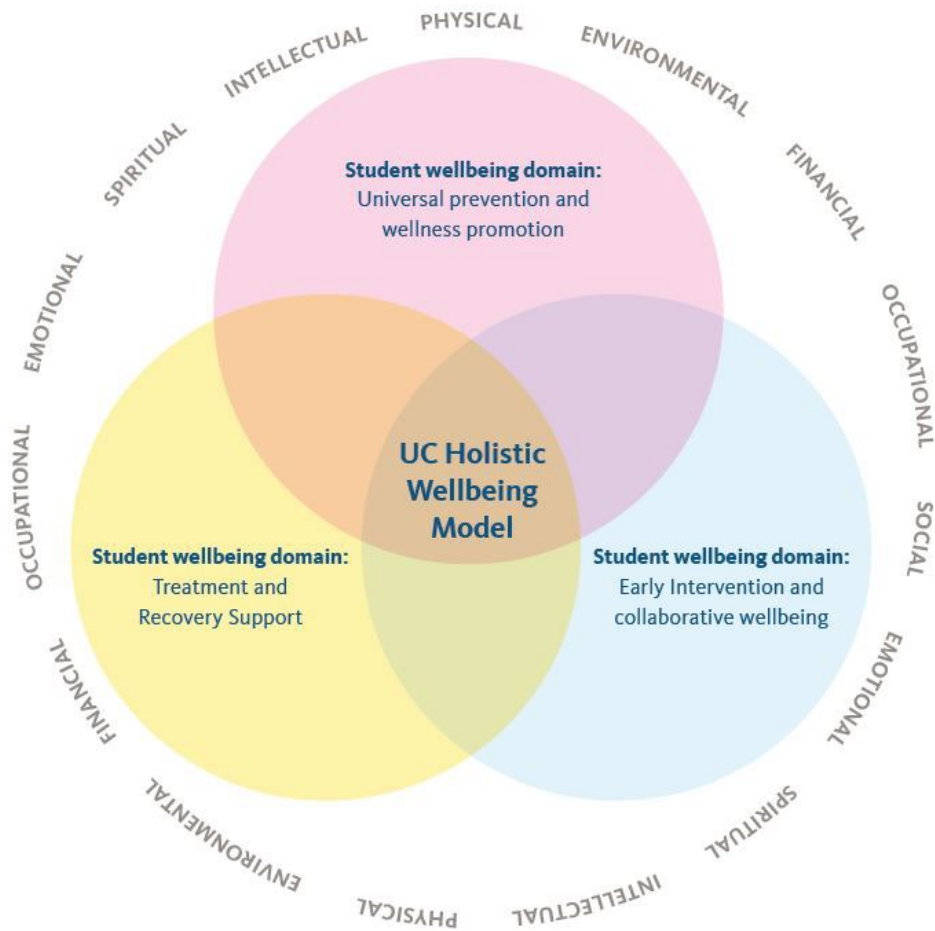
Addressing data needs was another central theme. Significant developments included work on a strength-based measure of student well-being to inform policy and programs, as well as efforts to maximize the utility of existing data collection efforts such as the UC Undergraduate and Graduate Experience Surveys (UCUES/UCGSES) to improve linkages to services amongst students in need. Going forward, leaders expressed an interest in using both quantitative and qualitative outcome data to assess program impact and identify barriers.

Finally, thought leaders reflected on shared challenges across UC campuses. A primary concern was addressing burnout among care providers amid a growing youth mental health crisis. There was broad agreement on the need to promote efficiencies to enable well-being leaders to "work smarter, not harder." Another key challenge was how to bridge differences in priorities and build broad campus support for well-being initiatives. Current and proposed strategies included campus "roadshows," faculty training and toolkits, community-building activities and adoption of a collective impact approach. Once again, students were recognized as essential drivers of change, contributing valuable leadership and advocacy.

Acknowledgments

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Appendix 1: The UC Holistic Well-being Model



Appendix 2 — 2024 Well-being Summit Agenda

Well-being Summit Agenda

UCLA, Carnesale Commons, Palisades Ballroom

UNIVERSITY
OF
CALIFORNIA

TUESDAY, OCTOBER 22, 2024

- 8–9 a.m. **Registration and breakfast** (*exhibitors and poster sessions*)
- 9–10 a.m. **Welcome and opening keynote: Science, practice, community and meeting the crisis of our times**
Dacher Keltner, Distinguished Professor of Psychology, UC Berkeley
- 10:30 a.m.–noon **Breakout session 1:**
Implementing mental health first aid on a college campus (*Venice A*)
Strategizing UC's basic needs goals, challenges and promising practices: 2025 (*Venice B*)
The Okanagan Charter (*Hermosa A*)
Recruiting, retaining and supporting diverse staff (*Hermosa B*)
Data collection and resourcing (*Palisades*)
- Noon–1 p.m. **Lunch** (*exhibitors and poster sessions*) Sponsored by: MindfulMe
- Noon–3 p.m. **Chair massage** (*Malibu Reflection Room*)
- 1:15–2:30 p.m. **The Children and Youth Behavioral Health Initiative (CYBHI): Supports for the UC student community** (*Palisades*)
Director Dr. Sohil Sud and Youth Fellow Khoa-Nathan Ngo, CYBHI;
Youth Advisor Shailen Dawkins, Never A Bother; Julio Sagustrume, Live Beyond
- 2:30–3 p.m. **Well-being break** (*exhibitors and poster sessions*)
- 3:15–4:30 p.m. **Breakout session 2:**
Graduate student mental health and academic success (*Venice A*)
Coordinating care for students in distress through a social justice lens (*Venice B*)
Advocacy, burnout and community-building (*Hermosa A*)
CYBHI: Expanding coverage and access to behavioral health services for UC students (*Hermosa B*)
Campus climate (*Palisades*)
- 5–6:30 p.m. **Summit reception and social** (*UCLA Luskin Conference Center*) Sponsored by: Soluna
- 6–7:30 p.m. **Inside Out movie screening and ice cream social**
Hosted by the UCLA Students with Dependents Program (*Luskin Optimist Room*)

WEDNESDAY, OCTOBER 23, 2024

- 8–9 a.m. **Breakfast** (*exhibitors and poster sessions*)
- 9–10 a.m. **Welcome and opening keynote**
- 10–10:45 a.m. **Fireside chat with student leaders** (*Palisades*)
- 11–11:10 a.m. **UCLA Vice Chancellor for Student Affairs Monroe Gorden** (*Palisades*)
- 11:10 a.m.–noon **Strategy and support** (*Palisades*)
- Noon–1 p.m. **Lunch** (*exhibitors and poster sessions*) Sponsored by: MindfulMe
- Noon–3 p.m. **Chair massage** (*Malibu Reflection Room*)
- 1:15–2:30 p.m. **Campus conversations** (*Venice A and B, Hermosa A and B*)
- 2:30–3 p.m. **Wrap-up**

Appendix 3 — Key departments and service groups within the UC mental health and well-being system

The UC mental health and well-being systems comprise several key departments and service units whose combined ideas, resources and strengths are a foundation for student well-being. A summary of some of these units is presented below. Found across all the UC campuses, each unit had a significant presence at the summit.

Basic needs centers

Basic needs centers provide UC students comprehensive resources, including food, emergency housing and other support services such as life skills workshops. Systemwide advocacy, including by students, has resulted in recent funding increases, allowing for expanding these programs and services. The centers provide services and help educate students about basic needs through raising awareness and normalizing the process of accessing assistance.

These programs play a crucial role in assisting students in need, and UC students may access these services at any UC campus, regardless of where they are enrolled. Food is often provided to students on a self-assessed need basis and may include mobile pantries, weekly grocery supplies and electronic gift cards. Additional resources such as household care and childcare supplies are also offered. In addition, the centers provide application assistance and ensure successful enrollment in the CalFresh food assistance program. Housing services vary by campus but generally include emergency case management for students in crisis, direct aid and grants, technology support for remote learning and workshops to help students cope with housing challenges. Basic needs offices also collaborate with the broader community to help provide emergency housing to students.

Campus recreation

Campus recreation enhances the well-being of UC students, staff and faculty by providing access to a wide range of activities and services. Personal development, community engagement and holistic well-being are some of the central goals across the UC recreation departments. Access to all facilities is included for all students through tuition and fees and to other campus and community members through membership subscriptions. Facilities access includes campus recreation complexes and other facilities such as pools, stadiums and tennis courts. Participation in sports leagues and various recreation classes are available for quarterly membership fees, with financial assistance in many cases. Equity is a focus across the UC recreation departments. For example, the mission statement of UCLA Recreation is “to create inclusive and accessible spaces and experiences where all are empowered to pursue their well-being” (University of California 2023a).

Case management services

Within the UC system, both clinical and nonclinical case management may be available to students, depending upon need. Clinical case management typically involves the coordination, integration, rehabilitation and allocation of resources by mental health professionals to support mental health recovery (Thornicroft, 1991; Dadich et al., 2013). Nonclinical case managers typically focus on psychosocial rehabilitation to link students to appropriate medical, financial, academic, community or basic needs services.

Across both clinical and nonclinical disciplines, case managers provide students with problem-solving support, resources and advocacy to address various MH&W challenges they may face. These units

promote students' success by discussing options, defining achievable goals and action plans and empowering students to make informed decisions. They are instrumental in helping students bridge university departments to navigate complex policies and procedures and access the complete offering of campus resources and services. When a student receives off-campus care, such as hospitalization for mental health distress, they often meet regularly with a case manager to ensure a positive transition back to the campus environment. The location of case management in the UC system varies. Depending upon the type of case management provided, these services may be part of Counseling and Psychological Services (CAPS), Student Health, Health & Counseling (when health and counseling are integrated) or they may stand as a separate unit under Student Affairs.

Center for Advocacy, Resources, and Education (CARE)

CARE services provide comprehensive prevention and advocacy services to UC students, faculty and staff to address sexual assault, sexual harassment, sexual exploitation, intimate partner violence, stalking and harassment based on gender identity and/or sexual orientation. The acronym CARE was established in January 2015 in response to UC President Janet Napolitano's call to have a more consistent, systemwide effort to improve the climate within the University of California. Direct services available at CARE assist survivors and their friends and families. This includes confidential support and healing services, as well as survivor advocacy. CARE also implements prevention education training, often working collaboratively across departments to support creating safe and respectful campus communities.

Counseling and Psychological Service (CAPS) centers

CAPS centers serve a wide variety of functions, structuring their services to best respond to the needs of their university student population. Clinical service delivery at the CAPS centers on UC campuses primarily includes assessment and psychotherapy. Individual psychotherapy is offered using a short-term therapy model. Group therapy covers a wide range of topics. It provides opportunities for support in areas such as mood disorders, anxiety management, substance abuse, relationships and gender/ethnic identity, among many others. The focus of many of these is to help students learn and implement functional therapeutic skills and coping strategies. On some campuses, psychiatric services are delivered in whole or in part by CAPS psychiatrists. All UC campuses offer some form of crisis intervention services, often integrated within the CAPS departments. This includes several of the innovative UC mobile crisis units.

CAPS centers also offer many well-being programs and interventions beyond clinical treatment. These may include informal counseling sessions, support groups, peer educator programs and self-directed resources. CAPS providers often lead workshops and psychoeducation groups that support wellness and illness prevention. Another nonclinical strategy is the "Let's Talk" program, which provides informal mental health consultations on a drop-in basis, either virtually or in person. CAPS staff are also central to outreach and education efforts on the UC campuses in areas such as suicide prevention, substance abuse and violence prevention. As such, they engage students, faculty and staff in workshops and education programs such as Mental Health First Aid to promote critical thinking about mental health issues and methods for intervention. They also collaborate and consult with other campus departments to support the well-being of individual students and the campus population.

Health promotion

Health promotion departments also play a central role in MH&W programming, supporting students to make choices that positively affect their health. This may involve not only working directly with students

to improve their well-being, but also broader efforts to create a healthy campus and community environment where students can flourish. Health promotion in the UC system implements a variety of evidence-based primary prevention programs, often building on interdepartmental partnerships. Individual and group-based peer-to-peer programs are commonly at the forefront of these efforts, contributing to students' well-being whether they provide or receive services. The UC health promotion teams provide a range of self-directed wellness services and help connect students with appropriate resources on and off campus.

Student Health services

Student Health services aim to provide personalized, accessible, cost-effective healthcare. Across some UC campuses, student health services focus exclusively on providing medical services such as primary care. In others, these services are integrated with CAPS clinics as Student Health and Counseling services. Regardless of whether they operate as integrated or nonintegrated departments, psychiatry services are provided in all health centers except for UC Merced, where these services are accessed through UC Riverside.

Clinical services provided by UC Student Health typically include psychiatry assessment, psychotherapy and medication management, although psychotherapy is not available in every center. Generally, psychiatry services are accessed through counseling or a primary care provider and involve a separate psychiatry assessment. Student Health providers are uniquely placed to conduct mental screenings for students who, for various reasons, may not have access to mental health services. Other wellness services provided as part of Student Health may include substance abuse programs, social work services and eating disorder services.

Appendix 4 — Campus conversations breakout guide

Objective: To foster strategic and creative collaboration across diverse campus stakeholders, encouraging them to address systemic barriers and work holistically to improve well-being efforts for students, faculty and staff. This discussion should draw from the summit's agenda, focusing on actionable steps to bring back and implement on individual campuses.

Introduction (5 minutes)

1. Quick welcome and icebreaker:

- Begin by briefly introducing yourselves (name, department, role)
- Share one insight you've gained from the summit so far that you're excited about implementing on your campus.

Discussion goals:

- **Strategic planning:** Encourage creative and strategic planning to enhance well-being efforts on your campus.
 - **Silo breakdown:** Identify and discuss systemic barriers that prevent collaboration and integration.
 - **Action steps:** Explore how to translate key insights from the Summit into actionable strategies for your individual campus.
-

Conversation starters

1. Creative and strategic planning for well-being efforts (15–17 minutes)

- **Prompt 1:** What are the current strengths and weaknesses of well-being efforts on your campus (for students, staff, and faculty)?
 - What has worked well? What could be improved?
 - What new ideas have emerged from the Summit that could be adapted or scaled for your campus?
 - **Prompt 2:** Considering topics from the breakout sessions [such as Mental health first aid, Coordinating care for distressed students and/or Graduate student mental health], what are some practical strategies we can explore to improve the well-being of diverse populations (students, staff, faculty)?
 - **Prompt 3:** Given the evolving challenges (e.g., burnout, basic needs insecurity, graduate student stressors), how can we better integrate resources from health services, academic affairs, DEIBJ and student leadership into our strategic efforts?
-

2. Breaking down silos and systemic barriers (15–17 minutes)

- **Prompt 1:** Many of us work in departments that can feel isolated (Health Promotion, Basic Needs, Student Health, etc.) from other parts of campus. What are the main barriers preventing us from addressing well-being through a holistic, cross-functional approach?

- Where do you see communication or collaboration gaps?
 - How can we build more intentional connections across departments?
 - **Prompt 2:** Reflecting on the Okanagan Charter and its call for a holistic approach to well-being, how can we promote collaboration that involves every part of the university (faculty, staff, students) in supporting health and well-being?
 - **Prompt 3:** Are there any systemic issues (e.g., budget constraints, leadership support, campus climate) that hinder collaboration and comprehensive well-being efforts? How can we overcome these challenges?
-

3. Implementing lessons from the summit on your campus (15–17 minutes)

- **Prompt 1:** Which ideas or insights from the summit feel most relevant to your campus context?
 - How can you begin implementing these ideas in the next six months?
 - **Prompt 2:** Considering the diversity of departments represented, how can you ensure that well-being efforts are inclusive and equitable? (recruiting, retaining and supporting diverse staff; social justice lens; cultural implications of unwellness)
 - **Prompt 3:** Thinking about systemwide data strategies: What are potential opportunities to better use data to guide decisions around mental health, basic needs and student well-being on our campus? What tools/resources would help you collect and utilize this data on our campus?
-

Action items and sharing out (10 minutes)

- **Prompt 1:** Based on today's conversation, what are the top one or two action items your campus can take back to improve well-being efforts?
 - How will you communicate these ideas to your leadership and campus partners?
 - **Prompt 2:** How can you track progress? What metrics or indicators will show that these strategies are making an impact?
-

Conclusion (5 minutes)

- **Thank you and reflection:**
 - Thank your campus partners for their participation and insights.
 - Invite everyone to reflect on how they'll continue the conversation on their campus.
 - Encourage each other to stay connected and share resources across your campus to strengthen well-being efforts systemwide.