

Mandated Leave Policies in the Context of Student Mental Health Challenges at Canadian Universities: A Framework Analysis

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Résumé de l'article

Bien que l'on s'intéresse de plus en plus aux besoins des étudiants universitaires en matière de santé mentale, on a accordé moins d'attention aux politiques universitaires relatives à la santé mentale. De nombreuses universités publiques canadiennes ont des politiques de congé obligatoire qui précisent les conditions dans lesquelles un étudiant doit prendre un congé de l'université. L'objectif de la présente étude est d'analyser les politiques actuelles de congé obligatoire dans les universités publiques canadiennes anglophones. Une méthodologie d'analyse de cadre appliquée a été utilisée pour examiner les approches visant à trouver un équilibre entre les besoins des étudiants ayant des problèmes de santé mentale et la nécessité de fournir un environnement sûr sur le campus. Trois thèmes principaux ressortent concernant les politiques en matière de congés obligatoires, soit (a) les approches pour répondre aux problèmes de santé mentale, (b) l'équilibre entre les besoins de l'étudiant et les besoins de l'université, et (c) les lignes directrices, les normes et l'assurance de la qualité. Les implications pour les politiques de congé obligatoire et les approches auprès des étudiants ayant des problèmes de santé mentale sont discutées.

MANDATED LEAVE POLICIES IN THE CONTEXT OF STUDENT MENTAL HEALTH CHALLENGES AT CANADIAN UNIVERSITIES: A FRAMEWORK ANALYSIS

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Abstract

Although there is increased attention to the mental health needs of university students, far less attention has been given to mental health-related university policies. Many Canadian public universities have mandated leave policies that specify the conditions under which a student may be required to take a leave of absence from university. The purpose of the current study was to conduct an in-depth analysis of current mandated leave policies in public Canadian English-speaking universities. Applied framework analysis methodology was used to examine the approaches to balancing the needs of students experiencing mental health challenges and providing a safe environment on campus. Three primary themes regarding mandated leave policies were identified, including (a) approaches for addressing mental health concerns, (b) balancing the needs of the student with the needs of the institution, and (c) guidelines, standards, and quality assurance. Implications for mandated leave policies and approaches to students experiencing mental health challenges are discussed.

Keywords: emerging adults, Canadian universities, university students, mandatory leave, mental health, policy

Résumé

Bien que l'on s'intéresse de plus en plus aux besoins des étudiants universitaires en matière de santé mentale, on a accordé moins d'attention aux politiques universitaires relatives à la santé mentale. De nombreuses universités publiques canadiennes ont des politiques de congé obligatoire qui précisent les conditions dans lesquelles un étudiant doit prendre un congé de l'université. L'objectif de la présente étude est d'analyser les politiques actuelles de congé obligatoire dans les universités publiques canadiennes anglophones. Une méthodologie d'analyse de cadre appliquée a été utilisée pour examiner les approches visant à trouver un équilibre entre les besoins des étudiants ayant des problèmes de santé mentale et la nécessité de fournir un environnement sûr sur le campus. Trois thèmes principaux ressortent concernant les politiques en matière de congés obligatoires, soit (a) les approches pour répondre aux problèmes de santé mentale, (b) l'équilibre entre les besoins de l'étudiant et les besoins de l'université, et (c) les lignes directrices, les normes et l'assurance de la qualité. Les implications pour les politiques de congé obligatoire et les approches auprès des étudiants ayant des problèmes de santé mentale sont discutées.

Mots-clés : jeunes adultes, universités canadiennes, étudiants universitaires, congé obligatoire, santé mentale, politiques

Introduction

Post-secondary students who live with mental health issues experience multiple challenges in university environments,

including non-completion of their studies or degree. These students are disproportionately affected by university policies that encourage premature or involuntary exits from their course of study. Mandated leave policies aimed at stu-

dents with mental health concerns have recently received increased attention (Addison, 2019; The Canadian Press, 2018), with little understanding of their effects. This gap in knowledge exists at a time when universities are struggling to create fair and reasonable policies to support and accommodate students with mental health issues while also ensuring safety on campus. Furthermore, as universities turn their attention to Equity, Diversity, Inclusion, and Indigenization (EDI), there is a need to ensure that policies provide equitable access to those who have been traditionally and systematically disadvantaged, including those who are most impacted by mandated leave policies. To explore this critical area, we conducted a review of existing mandated leave policies from 11 English-speaking universities across five Canadian provinces utilizing an applied policy framework. The goal of this study was to examine the following research questions: (a) What are the common elements of mandated leave policies within Canadian universities? and (b) How do mandated leave policies address the needs of students experiencing mental health challenges while also protecting the interests of the university?

Background

Over the past 30 years, enrolments in post-secondary education have increased dramatically (Usher, 2018). In Canada, over two million people attend college or university. Globally, Canadian young adults (ages 25–34) are among the most educated (Organisation for Economic Cooperation and Development [OECD], 2019), and most Canadians aged 18–29 are currently enrolled in post-secondary studies (Statistics Canada, 2020). A college or university education is increasingly considered a prerequisite for stable employment (Frank et al., 2015; OECD, 2019). Although individuals with major mental health concerns were historically excluded from universities (Kessler et al., 1995), the increasing rates of mental health issues on university campuses and reports of greater utilization of counselling services by students with serious mental health concerns suggests that this has changed over time (for a review, see Hunt & Eisenberg, 2010). Indeed, rates of depression, anxiety, and thoughts of suicide are increasing among university students (Lipson et al., 2019; Oswald et al., 2020). For example, when Canadian students were asked about their well-being in the past 30 days, 68.5% reported feeling overwhelmed by all the things they had to do, 51.0% felt very sad, 45.6% felt overwhelming anxiety, 39.0% felt things were hopeless, and 30.4% felt so depressed it was difficult

to function (American College Health Association, 2019). Research has also revealed that there has been a rapid rise in the use of psychological services on university campuses in Canada (Ng & Padjen, 2019), and institutions across Canada are struggling to meet this growing demand (De Somma et al., 2017). Importantly, there has been increasing recognition of the rights of students living with mental health concerns, which has resulted in greater levels of attendance of these individuals at post-secondary institutions (see Pedrelli et al., 2015).

Although it is well established that significant changes in service delivery are required to better address mental health issues on campus, far less attention has been paid to mandated leave policies that impact these students. Many Canadian universities have policies that mandate students with a mental health issue to withdraw from their program of study under certain conditions. For example, in 2018, the Governing Council of the University of Toronto established a Mandated Leave of Absence Policy, allowing the university to place a student on an involuntary leave of absence from the university in the event of a mental health crisis where the student has declined to accept accommodations, or these accommodations have not been successful (University of Toronto, 2018). The policy was developed, in part, to provide students with a non-punitive option when mental health issues interfere with student safety, and in response to a 2014–15 report that outlined the need for university policies that would be imposed when accommodative approaches have proven unsuccessful (University of Toronto, 2015), but it has sparked controversy regarding the rights of students with mental health concerns (Banares, 2019; Senel, 2021). Other universities in Canada have faced similar issues after developing and attempting to implement mandated leave policies. McGill University released a draft of their policy in September of 2019 only to revoke the policy shortly thereafter due to protest from student groups who opposed the lack of student input on the policy and possible impacts on students who might resist accessing services due to fears of being removed from campus (Addison, 2019; Popple, 2019). Interestingly, although many other Canadian universities have mandated leave policies that are applied in the context of student mental health challenges, few have garnered the same attention as the University of Toronto policy, likely due to its emergence during a time of increased attention to the mental health needs of students on university campuses.

One of the major concerns regarding mandated leave policies is the extent to which they present a barrier to

students seeking campus mental health services. Stigma among students with mental health issues is already a significant barrier to help-seeking (Eisenberg et al., 2011). There is concern that mandated leave policies will further limit disclosures (Appelbaum, 2006; Mezey, 2021) and exacerbate mental health concerns for students who fear the repercussions of a mandated leave (Miller, 2016). In addition, there are concerns that these policies reflect human rights violations in that they exclude those with mental health concerns from active participation in systems of education (Dickerson, 2007). Among the recommendations from the recent report of the University of Toronto Task Force on Mental Health is the need for ongoing dialogue about the policy and continued review and evaluation of its impacts (University of Toronto, 2020). Generally, mandated leave policies overlook the continuum of mental health and instead categorize students as either mentally healthy or mentally ill, thus undermining that there are often varying degrees of mental health and wellness.

This lack of information is a major limitation for understanding the potential impact of these policies. For some students, discontinuing their studies may provide an opportunity to focus on their mental health and recovery. For others, involuntary discontinuation reflects an education system that has not met their needs (Thompson-Ebanks, 2017). Students may experience increased shame and stigma (James & Graham, 2010), and are left without a critical credential that has been increasingly recognized as essential for accessing greater opportunities in an already precarious labour market (OECD, 2019). Furthermore, for some students, leaving the university context may remove an important mental health resource, where the routine of daily class attendance and availability of social and mental health supports are important sources of coping. Although mandated leave policies are seldom implemented (e.g., eight students were impacted by the mandated leave policy at the University of Toronto in 2018–19; University of Toronto, 2020), their impact is significant for both those who fall under the purview of these policies and those who are living with mental health issues and may question whether disclosing their concerns or accessing university services may have the unintended consequence of triggering a mandated leave. Additionally, mental health related mandated leave policies are situated within a university's mental health framework and therefore contribute to the campus culture around mental health (De Somma et al., 2017). Some have argued for student-focused policies that prioritize the rights of the student, whereas others highlight the need to protect

the university both in terms of liability and the safety and well-being of other students on campus (Levin, 2007). To date, however, it is unclear whether mandated leave policies effectively manage these somewhat competing interests.

In summary, although it is well established that mental health issues have increased among university students and that university policies around mental health issues contribute to the mental health culture within post-secondary institutions, university policies that have a direct and critical impact on students with mental health issues have received almost no attention in the research. Thus, the purpose of the current study is to conduct an in-depth analysis of current mandated leave policies within Canadian universities.

Method

Research Design and Overview

Because the researchers were attempting to make sense of policy as it pertains to students with mental health concerns, the current study used a social constructionist epistemology which refers to the construction of the social and psychological worlds based on social processes and interactions (Young & Collin, 2004). The current study used framework analysis, which can be used to analyze qualitative data collected through policy search or review (Furber, 2010). This approach is matrix-based (Smith & Firth 2011; Spencer et al., 2014) and facilitates the management and mapping of data (Gale et al., 2013).

Participants and Procedures

A total of 94 English-speaking Canadian university public policies were reviewed with attention to involuntary leave in the context of mental health challenges. As a first step toward finding policies, a list of search terms was developed by the research team (e.g., “involuntary leave and student mental health,” “mandated leave policy,” “postsecondary involuntary leave and mental health,” “leave policy and mental health crisis,” “involuntary mental health crisis”). We then searched specifically for academic withdrawal in university regulations, policies, and codes of conduct that were written in English and available on the websites of Canadian public universities. We reviewed these documents

and identified all policies that referred to mandated or involuntary leaves of absence due to mental health difficulties. In total, 11 universities had policies that met these criteria.

To ensure that we did not overlook any university where the policy was not available online, we sent emails to the relevant universities seeking clarification on whether they had a mandated leave policy. Fifty-one universities were contacted; 26 did not respond, 23 responded that they did not have a relevant policy, and two confirmed information about their policies. The final sample consisted of 11 English-speaking publicly funded universities across five Canadian provinces. Characteristics of the sample universities are presented in Table 1. Among the 11 universities, eight institutions had a standalone policy, and three universities had a policy within another policy (e.g., academic code of conduct, academic regulation).

Analytic Strategy

We used the principles of framework analysis to inductively establish a thematic framework to capture the key areas addressed by the policy documents. Framework analysis is often used in applied policy research and is meant to influence policy by facilitating actionable outcomes (Ritchie & Spencer, 1994). Embedded within this approach is the

formation of a thematic framework that allows researchers to label, classify, and organize data using themes and concepts (Ritchie & Spencer, 2002). The data analysis follows a series of five stages.

In the first stage, *familiarization*, we immersed ourselves in the data by reviewing all the involuntary leave policies, noting key ideas and categories, and beginning the process of abstraction and conceptualization. All four members of the research team focused on one involuntary leave policy, making note of their observations, and then met to discuss ideas that were emerging and document similarities and differences. There was a special consideration for gaps in the policies, with specific reference to how the policy supported—or did not support—student mental health. Subsequently, three members of the team reviewed five involuntary leave policies, paying attention to key ideas and recurrent concepts.

The second stage involved *identifying a thematic framework* based on the major research questions (i.e., What are the common elements of mandated leave policies within Canadian universities? How do mandated leave policies address the needs of students experiencing mental health challenges while also protecting the interests of the university?), and broad ideas arising from patterns in the data (e.g., student advocacy). This resulted in 15 major cat-

Table 1

Characteristics of the Universities with Mandated or Involuntary Leave Policies

ID	Province	Urban/Rural	Approximate Number of Students	Standalone Policy
UN001	Quebec	U	46,260	Yes
UN002	Ontario	U	36,404	No
UN003	New Brunswick	R	2,250	Yes
UN004	Alberta	U	31,951	Yes
UN005	Ontario	U	23,052	Yes
UN006	Ontario	U	62,864	Yes
UN007	Manitoba	U	9,419	No
UN008	Ontario	U	16,321	Yes
UN009	British Columbia	U	6,4807	Yes
UN010	New Brunswick	U	1,951	Yes
UN011	Ontario	U	11,079	No

egories that the researchers used to code the data. Criteria for each code were developed, and consensus was reached among the team regarding the concepts and criteria. Using NVivo, two members of the team then coded one policy to further test the reliability of the thematic framework.

Stage three focused on *indexing*, where the team applied the framework to all the policies in the dataset, reported any discrepancies, and discussed any additions or deletions due to conceptual overlap. The same two members of the team indexed all 11 policies, achieving a percentage agreement of 77% to 100% across the policies and the categories. At the fourth stage, *charting*, the same two members of the team charted the data by developing a framework matrix in NVivo. The indexed sections were imported into the matrix, and summaries were created for each category and university. The two team members reviewed each other's summaries, and the lead author reviewed all summaries collectively in NVivo. Finally, we engaged in mapping and interpretation of the data, which consisted of pulling together key characteristics and interpreting the dataset. The mapping and interpretation of the data resulted in three major themes, and the preliminary results were presented at a lab meeting for discussion and feedback, after which the second author reviewed the results.

Methodological Integrity

We discussed methodological integrity with attention to the American Psychological Association's standard for qualitative research involving integrity, fidelity, and utility (Levitt et al., 2018). The findings of the present study have been grounded in evidence from the policies as excerpts were used to support the claims. At the same time, attention was given to contextual information, including whether the institutions were categorized as large, medium, or small, and located in urban or rural areas, noting possible differences between urban and rural universities. Furthermore, as previously noted, the analytic process facilitated consistency through inter-rater or inter-coder reliability, whereby two coders were assigned the task of coding the policies in NVivo. Finally, a trail of evidence was kept, where all relevant files, notes, coder meeting minutes and discussion points were retained for the study, which was audited by the second author.

Results

Three key themes regarding university involuntary or mandated leave policies in the context of mental health challenges were identified, including (a) approaches for addressing mental health concerns, (b) balancing the needs of the student with the needs of the institution, and (c) guidelines, standards, and quality assurance. Although these three major themes have areas of conceptual overlap, based on the nature of framework analysis, they provide a good representation of the mapping of 11 universities regarding their involuntary or mandated leave policies in the context of mental health challenges.

Approaches for Addressing Mental Health Concerns

Approaches for addressing mental health concerns refer to the extent to which policies included information about how the identified student would be provided with mental health supports, offered a personalized plan to return to their program, and included in decisions regarding their progress and recovery. This theme was broken down into two sub-themes: (a) response to student concerns, and (b) student recovery, resumption, and support.

Response to Student Concerns

Response to student concerns reflects the processes in place to respond to the concerns raised by the identified student. For most institutions ($n = 7$), the responsibility to provide students with a response was delegated to a team, which included several stakeholders to facilitate collaboration and decision by consensus. For example, in one university policy it was stated:

A Student-of-concern Case Team will provide a coordinated response and support to the student-of-concern. Procedures for dealing with a student-of-concern may differ depending upon the level of threat posed by the student and are set out in the Process and Procedures for Responding to Students-of-Concern. (UN001, Large, Urban)

Only a single institution explicitly mentioned student representatives as part of the team:

The Assessment Panel shall be comprised of: (a) one faculty member and one member of the division of Stu-

dent Development and Support (one of whom shall be appointed as Chair by the President [or designate]), and one student, all of whom shall be voting members and appointed by the President (or designate); and... (UN008, Large, Urban)

Teams often included representatives outside of the mental health arena, including campus safety personnel and campus police. In one policy it was stated:

Student Support Team (SST) – A team established by the Vice-Provost, students, that may include student service representatives, registrarial personnel, medical professionals, academic administrators, equity officers, campus safety personnel, and Campus Police or others. The team brings together multi-disciplinary expertise to assist in a nuanced and comprehensive analysis of the student's needs. (UN006, Large, Urban)

In another policy, there was attention to providing access to resources and support to both the identified student and affected members of the university community, but still no indication of the student having representation or advocacy in the process:

The primary focus of the Student-at-Risk Team is to ensure the student who is exhibiting at-risk behavior and individuals affected by such behavior have access to resources and support to promote and assist in addressing student health and safety and the health and safety of the University community. (UN004, Large, Urban)

Support for Student Mental Health Recovery and Resumption

Support for student mental health recovery and resumption refers to aspects of the policies that outlined approaches or services to support the student in their recovery and with a resumption and support plan for returning to campus.

Although most policies outlined plans of action that were interventive in nature, some policies also included proactive strategies designed to prevent an emergency or problem from occurring. Four policies included a preventive approach by outlining mental health services that could be accessed by the identified student. However, preventive approaches often placed the onus on the student to seek out these resources. One university included supports for students, such as general health, mental health, and wellness services. The policy read, "health, wellness, and counsel-

ing services are available on campus to support students who may be experiencing personal difficulties" (UN005, Large, Urban). Another university policy focused on providing special supporting services and accommodation. The policy documented that "the University offers supportive resources and Accommodations to assist Students who are encountering academic difficulties, including where those difficulties may arise from health issues or personal problems" (UN006, Large, Urban).

Only one policy referred to a campus-wide approach to mental health awareness and prevention, noting that the focus was on creating a university culture that worked to promote and protect students' mental health. The policy stated that "we believe that positive mental health and wellness is created through campus culture and as a campus community" (UN003, Small, Rural).

Although students and their representatives were not always identified as stakeholders in decision making about their leave, they were typically expected to initiate the process of return. All universities required students to submit a request to return to campus while a majority ($n = 7$) also required students to provide corroborating evidence that their health condition had either been improved and/or managed. For example, in one university policy it was stated that:

A student who withdraws from academic study under this policy, either voluntarily or involuntarily, cannot return to academic study until such time as the Vice-Provost receives appropriate professional documentation in the way of competent medical evidence that either the health condition no longer exists or the health condition is being properly managed, and that the student no longer: (a) poses a significant danger or threat of causing harm to him/herself or others or to property rights; or (b) is engaging in behaviour that substantially impedes the lawful activities of members of the campus community or the educational processes or proper activities or functions of the University or its personnel; or (c) is unable to engage in basic required activities to obtain an education. (UN008, Large, Urban)

Several policies ($n = 5$) included a return-to-campus management plan for students as a part of their mandated leave policies. Where there was attention to resumption and support, the policies included terms and conditions for students' return, support services that were required, and supervision by a member of the university community for a certain period. In one policy it was stated that:

The Policy Coordinator and the Case Team shall prepare a Return to Campus Management Plan that outlines any terms and conditions of the student's return to campus and any support services required. The Policy Coordinator, or a designate from the Case Team, will implement the Return to Campus Management Plan and monitor the student-of-concern's transition back to campus. (UN001, Large, Urban)

Another policy emphasized support for students' well-being and ongoing monitoring of their re-integration back to campus:

Where a student has received approval to return to campus following leave or withdrawal, the...[team] shall prepare a return to campus plan that outlines any support required to ensure student success. The...[team] Chair will oversee the return to campus plan and support the student's transition back to campus. The person supporting the return to campus plan shall regularly report the student's progress back to the...[team]. (UN003, Small, Rural)

Balancing the Needs of the Student with the Needs of the Institution

This theme refers to how policies addressed the mental health needs of students and whether they were supportive of the student's rights or punitive in nature, prioritizing the needs of the institution. Although an involuntary leave of absence policy is implicitly a reactive policy, the analysis revealed that policies varied in balancing the needs of the student living with a mental health concern versus the needs of the larger university community. Two sub-themes emerged: (a) maintaining safety on campus, and (b) maintaining engagement and involvement for the identified student.

Maintaining Safety on Campus

Maintaining safety on campus refers to aspects of the policies that address steps to limit the engagement of the identified student and maintain the safety of the community. All 11 policies referred to potential threats to safety posed by the identified student to themselves or others within the university community. For example, one university stated that "in some urgent situations such as those involving serious threats or violent behavior, it may be necessary to remove the Student from the University immediately" (UN006, Large, Urban). Similarly, in another university pol-

icy, it was documented that:

A Student-of-concern may be required to take an Involuntary Leave of Absence in situations where the student's behavior and/or apparent mental and/or physical health interferes with their academic pursuits or that of others or interferes with the regular activities of the University. (UN001, Large, Urban)

Plans of action embedded within the policies ($n = 8$) typically focused on maintaining the safety of the institution and its members. Sometimes, plans of action were instituted in a punitive manner and included permanently identifying the student as someone at-risk who was prohibited from engaging in university life. For example, many policies enforced an immediate leave from university for a specified period ($n = 8$), a notation on the student's transcript ($n = 3$), trespass notices ($n = 3$), bans from entering campus ($n = 4$), and bans from using university resources ($n = 3$). In one policy it was noted that "students required to withdraw will not be granted re-admission for a period of one year" (UN007, Medium, Urban). Another university policy revealed that "the withdrawal will be noted on their transcript" (UN002, Large, Urban).

Although the policies outlined the plan of action that would be pursued in cases of involuntary leave, most policies also included a stepped approach where different actions were implemented depending on the perceived threat and risk of the identified student. However, for some policies, details regarding how these assessments would be conducted were sparse, and the policies varied regarding the number of risk or threat levels. Seven policies mentioned the existence of assessment levels without further details, while five universities extensively categorized the assessment levels including two ($n = 1$) and three levels ($n = 4$), reflecting increasing risk to the student or other members of the community.

Maintaining Student Rights and Involvement

Maintaining student rights and involvement refers to aspects of the policies that addressed the student's rights to advocacy and appeal. Different from having representation on the case team, this aspect of the policy reflected specific reference to the student's right to be represented during the process. Five policies referenced student advocacy by allowing students to have a representative of their choice involved in some or all aspects of the mandated leave process. For example, in one university policy it was noted that "the student is entitled to seek the support of a health pro-

fessional of their choice, a legal advocate and/or a family member or other support person at any time during the application of this Policy” (UN006, Large, Urban). Similarly, another university documented that “the student-of-concern may be assisted at this meeting by a family member, a health professional of their choice, or a member of the University community” (UN001, Large, Urban).

Most universities ($n = 8$) also upheld the student’s rights by allowing for appeal and review of the decision to place them on a mandated leave. For example, a decision may be reversed if a student were to provide new evidence, or if a decision was found to be unfair. In one policy, it was stated that “the student-of-concern may appeal the decision(s) made [about involuntary leave of absence]” (UN001, Large, Urban). In another policy, it was noted that “the Provost will review the student’s request for review and may solicit a written response from the Head of Student Affairs” (UN009, Large, Urban).

Guidelines, Standards, and Quality Assurance

Guidelines, standards, and quality assurance refer to the inclusion of strategies for holding the university accountable in their use and implementation of their mandated leave policy. This theme encompassed two subthemes: (a) policy review and recommendation, and (b) drawing on previous practices and important legislation.

Policy Review and Recommendations

Policy review and recommendations reflects the inclusion of a system to monitor and review the policy and evaluate its impacts. Within the involuntary policies, it was frequent practice to include a review period. This allowed for recommendations and potential for improvement, including attempts to better serve students and/or to address gaps in the policy. Reviews typically identified the number and nature of cases and a holistic review and debrief of decisions. In addition, involuntary leave policies were often implemented alongside changes in mental health service delivery, allowing for additional attention to other areas in the institution that required improvement.

Of the 11 universities, only five included a statement about regular review cycles, where policies were reviewed annually ($n = 3$), once each semester ($n = 1$), or once every three years ($n = 1$). In one policy that indicated an annual review, the focus was on reviewing decisions and trends. It

was documented that “the Case Team will meet annually to review the Policy, debrief student cases and decisions, as well as to identify trends” (UN005, Large, Urban). Furthermore, this institution specifically referred to both students who have been unwillingly placed on a mandated leave, as well as students who have voluntarily left; therefore, being affected by the voluntary leave of absence. For one university, the policy read:

The Office of the Vice-Provost, Students, shall prepare and submit annually to the University Affairs Board a report consisting of a narrative of the functioning of the Policy over the course of the preceding academic year. The report shall also include statistics in aggregate form, without names or any identifying personal information, of the number of Students agreeing to a Voluntary Leave of Absence or being subject to a University Mandated Leave of Absence decision under this Policy, and the numbers of any of those Students returning to registered status at the University during the academic year. (UN006, Large, Urban)

Recommendations arising out of the review could include revisions to campus mental health programs and policies. For example, in one policy it was stated that a review may lead to recommendations that include “suggestions for specific education and awareness campaigns, the need for enhancement of existing programs, training needs or policy changes” (UN005, Large, Urban).

Drawing on Previous Practices and Important Legislation

Drawing on previous practices and legislation refers to the use of existing information and policies toward the development of the mandated leave policy. Two policies referenced involuntary leave policies from other institutions as well as policies pertaining to Student Codes of Conduct, Medical Withdrawal Policies, and Student Codes of Non-Academic Conduct. One university adapted their involuntary leave policy from a foreign university (UN010, Small, Urban). Another university consulted several other sources.

Five policies considered important provincial and federal regulations or acts, with three policies referencing provincial regulations. For example, in one policy where both provincial and federal policies were referenced, federal policies were first addressed:

The University acknowledges that the mutual respect

of student and teacher is fundamental to the learning process. It accepts as first principles the rights and freedoms as interpreted under the Canadian Charter of Rights and Freedoms. While the protection of the Charter is afforded to all, this does not diminish the obligation to observe the law and not to interfere with the rights and privileges of others or the continuity of the educational process. (UN008, Large, Urban)

Regarding provincial policy, one university stated that:

The University is subject to provincial legislation regarding privacy and access to personal information. Any sharing of personal information, including personal health information, must be made in accordance with the Freedom of Information and Protection of Privacy Act (FIPPA) and the Personal Health Information Protection Act (PHIPA). (UN005, Large, Urban)

Discussion

The purpose of the present study was to examine the mandated or involuntary leave policies of public Canadian universities in the context of mental health challenges. Inductive framework analysis revealed three key themes that best captured the data: (a) approaches for addressing mental health concerns, (b) balancing the needs of the student with the needs of the institution, and (c) guidelines, standards, and quality assurance. Findings highlight the ongoing challenges that universities face in establishing effective policies that meet the needs of the campus community while also creating a culture that promotes inclusivity and mental wellness through proactively attending to the needs of students who are living with mental health concerns. In the sections that follow, we outline some of the key gaps that we observed from our review and offer some alternative approaches, including recommendations to guide policy development as it pertains to students with mental health concerns.

One of the key considerations in developing a mandated leave policy is to have a non-punitive option for students who are living with a mental health issue (University of Toronto, 2018). Leave policies have been criticized for creating a barrier to mental health service access, due to students fearing a mandated leave if they were to disclose serious mental health concerns, particularly suicidal ideation, or self-harm (Appelbaum, 2006; Mezey, 2021). The current

analysis revealed that responses to student concerns typically involved a team approach; although, the role of the team was defined in different ways across the policies, with mixed attention to protecting the interests of the identified student. For example, the inclusion of a student representative on the team is an important step toward ensuring that the student's interests are truly upheld, but this was only present in a single policy. To the extent that mandated leave policies rely on a team approach for assessment and implementation, teams should be named, structured, and tasked with balancing the needs of the student with the safety of the wider campus community (Eells & Rockland-Miller, 2010).

Relatedly, a major concern with the implementation of any mandated leave policy is the extent to which the student's rights are violated because of having to implement a policy against their will (i.e., in the absence of a student agreeing to a voluntary leave of absence). Although this may be warranted in situations where the student poses a significant threat to themselves or others, it is important to consider that these policies are most likely applied in situations where a student is experiencing an acute mental health crisis. Our review revealed that, once that crisis has resolved and there is no longer a safety risk for the student and/or larger community, the students' rights within the university are not immediately reinstated. Furthermore, some policies included elements that could be regarded as punitive, such as marking transcripts to indicate that an involuntary leave had been implemented. Other policies offered less clarity around when a student could resume their studies, or banned students from access to education and use of needed resources for a specified period (typically a year), and only reinstated access if the student could demonstrate their readiness to return.

Although universities frequently provided resources to assist students, they did not always work collaboratively with students (or their representatives) to create and select beneficial support programs. In addition, only some policies included a reference to supports for students as they returned to campus. Mandated leave policies limit the identified student's agency to make decisions about their studies at a time when independence and autonomy are considered developmentally critical (Arnett, 2007; Lamborn & Groh, 2009). Legally, students are expected to take ownership of their academic lives and families are typically not involved due partly to issues of confidentiality. However, policies did not always allow ownership over the mandated leave process. Our review highlights several approaches that allow students to reasonably participate in the mandated leave

process—either through selecting a representative, collaborating on a plan for transitioning back to university, or outlining options for review and appeal. It may also be important for parents, families, and families of choice to play a role. Although they were largely omitted from mandated leave policies, universities should consider how families can provide appropriate support to their child through formal policies and processes that effectively involve families in their children's education (Wartman & Savage, 2008). At the same time, universities would need to address the barrier of competing interests, as university students are considered adults who have a right to privacy and confidentiality.

Notably, the policies analyzed typically included reactive rather than proactive and preventative measures. This likely reflects that these policies are often considered a last resort, implemented when accommodations are not successfully taken up or voluntary leave of absence options are refused. In some ways, the implementation of the policies reviewed in this article suggests a flaw in the voluntary leave of absence policies, where students may lack sufficient information about the conditions under which a leave of absence can be initiated or fear the academic, financial, and personal repercussions of taking a leave of absence (Mezey, 2021). Counselling students to take a voluntary leave of absence requires university personnel to proactively identify those who are struggling and ensure they have sufficient information about their options to circumvent crisis situations where mandated policies are applied. Institutions should consider how to better incorporate preventative measures to provide students with appropriate mental health supports and equitable opportunities to succeed in their education. For example, Mowbray et al. (2006) suggested that campuses should develop procedures like Employee Assistance Programs (EAP), which would allow faculty and staff to refer students to services, whether problems are academic, behavioural, or physical. This approach would help students to obtain appropriate assessments and assistance, allowing them to continue their education. Another useful approach is the Clinical Triage Model that some Canadian post-secondary institutions have implemented. This involves the rapid assessment of the acuity of the presentation and placement into appropriate levels of care/service (Centre for Innovation in Campus Mental Health, 2020).

We recognize that involuntary or mandated leaves may be necessary under certain circumstances, but it is critical that a culture of care and a focus on wellness is embedded within all policies and practices across the university. Al-

though the nature of an acute mental health crisis is such that it often renders the individual temporarily unable to exercise the judgement and decision making to consider alternatives (i.e., a voluntary leave or accessing accommodations), it is imperative that policies consider how to maximize the degree to which students can exercise autonomy within the limits of a mandated leave (see Wyder et al., 2013 for similar recommendations regarding involuntary hospital admissions). The Okanagan Charter (International Conference on Health Promoting Universities and Colleges, 2015) provided a road map for wellness initiatives in post-secondary institutions across Canada and outlined a call to action wherein healing is embedded within all campus policies. Current mandated leave policies would benefit from aligning more closely with this charter—ensuring that students' rights are fully represented and attended to throughout the process and that all efforts are made to uphold the principle of offering students a non-punitive option where their rights are regarded as equal to the rights of the broader university community.

Given the challenge associated with the creation of a dichotomy between being mentally healthy and mentally ill, it is important for universities to create a working definition of students' mental health and wellness. This working definition should highlight mental health and wellness as situated on a continuum, giving attention to individual difference, and allowing flexibility in current leave policies. Furthermore, this understanding would further heed the call of the Okanagan Charter.

Limitations, Future Directions, and Conclusions

Although the approach utilized in this review of mandated university leave policies was appropriate for the scope of this study, there are some limitations. First, the researchers relied solely on a review of documents to inform the analysis. Additional research should include stakeholder perspectives on these policies, including interviews with administration, faculty, staff, and students. Second, some universities did not respond to our request for information regarding whether they have mandated leave policies. Consequently, there may be other nuances to mandated university leave policy in Canada that were not captured by the current review. A final limitation is that the team was not equipped with the resources needed to include French-speaking universities. Therefore, mandated poli-

cies used by French-only universities were not included in the current review. One other future direction involves consideration of equity, diversity, inclusion, and indigenization within mandated leave policy framework. This is important given the association between the social determinants of health and mental health outcomes for equity-deserving persons and the need to be more sensitive to persons who have been historically negatively affected by social policies. Despite these limitations, this is the first study to provide an overview and analysis of the themes covered in mandated leave policies. This is a critical starting point for reflecting on the implementation of these policies, which have the potential to significantly impact the educational future of students who live with mental health issues.

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References

- Addison, K. (2019, October 8). Dean of Students suspends plans for involuntary leave policy. *The McGill Tribune*. <https://www.mcgilltribune.com/news/dean-of-students-suspends-plans-for-involuntary-leave-policy-0711019/>
- American College Health Association. (2019). *American College Health Association National College Health Assessment II: Canadian Reference Group Data Report spring 2019*.
- Appelbaum, P. S. (2006). Law & psychiatry: "Depressed? Get out!": Dealing with suicidal students on college campuses. *Psychiatric Services*, 57(7), 914–916. <https://doi.org/10.1176/ps.2006.57.7.914>
- Arnett, J. J. (2007). Emerging adulthood: What is it, and what is it good for? *Child Development Perspectives*, 1(2), 68–73. <https://doi.org/10.1111/j.1750-8606.2007.00016.x>
- Banares, I. (2019, August 12). U of T's university-mandated leave of absence policy remains controversial a year after it was approved. *The Varsity*. <https://thevarsity.ca/2019/08/12/u-of-ts-university-mandated-leave-of-absence-policy-remains-controversial-a-year-after-it-was-approved/>
- Centre for Innovation in Campus Mental Health. (2020). *Meeting the demand for post-secondary student concerns in health and mental health centers: Thinking through a clinical triage model*. <https://campusmental-health.ca/webinars/triage/>
- De Somma, E., Jaworska, N., Heck, E., & MacQueen, G. M. (2017). Campus mental health policies across Canadian regions: Need for a national comprehensive strategy. *Canadian Psychology*, 58(2), 161–167. <https://doi.org/10.1037/cap0000089>
- Dickerson, D. (2007). Mandatory withdrawal and leave of absence revisited. *NASPA Leadership Exchange*, 28(1), 28–29. <https://ssrn.com/abstract=1156124>
- Eells, G. T., & Rockland-Miller, H. S. (2010). Assessing and responding to disturbed and disturbing students: Understanding the role of administrative teams in institutions of higher education. *Journal of College Student Psychotherapy*, 25(1), 8–23. <https://doi.org/10.1080/87568225.2011.532470>
- Eisenberg, D., Hunt, J., Speer, N., & Zivin, K. (2011). Mental health service utilization among college students in the United States. *The Journal of Nervous and Mental Disease*, 199(5), 301–308. <https://doi.org/10.1097/NMD.0b013e3182175123>
- Frank, K., Frenette, M., & Morissette, R. (2015). *Labour market outcomes of young postsecondary graduates, 2005 to 2012*. Statistics Canada. <http://www.statcan.gc.ca/pub/11-626-x/11-626-x2015050-eng.pdf>
- Furber, C. (2010). Framework analysis: A method for analysing qualitative data. *African Journal of Midwifery and Women's Health*, 4(2), 97–100. <https://doi.org/10.12968/ajmw.2010.4.2.47612>
- Gale, N. K., Heath, G., Cameron, E., Rashid, S., & Redwood, S. (2013). Using the framework method for the analysis of qualitative data in multi-disciplinary health research. *BMC Medical Research Methodology*, 13(1), 1–8. <https://doi.org/10.1186/1471-2288-13-117>
- Hunt, J., & Eisenberg, D. (2010). Mental health problems and help-seeking behavior among college students.

- Journal of Adolescent Health*, 46(1), 3–10. <https://doi.org/10.1016/j.jadohealth.2009.08.008>
- International Conference on Health Promoting Universities & Colleges. (2015, June 22–26). *Okanagan Charter: An international charter for health promoting universities & colleges* [Conference presentation]. International Conference on Health Promoting Universities and Colleges / VII International Congress, Kelowna, BC, Canada. <http://dx.doi.org/10.14288/1.0132754>
- James, C., & Graham, S. (2010). An empirical study of students on academic probation. *Journal of the First-Year Experience & Students in Transition*, 22(2), 71–91. <https://www.ingentaconnect.com/content/fyesit/fyesit>
- Kessler, R. C., Foster, C. L., Saunders, W. B., & Stang, P. E. (1995). Social consequences of psychiatric disorders, I: Educational attainment. *American Journal of Psychiatry*, 152(7), 1026–1032. <https://doi.org/10.1176/ajp.152.7.1026>
- Lamborn, S. D., & Groh, K. (2009). A four-part model of autonomy during emerging adulthood: Associations with adjustment. *International Journal of Behavioral Development*, 33(5), 393–401. <https://doi.org/10.1177/0165025409338440>
- Levin, A. (2007). Addressing students' MH needs a balancing act for colleges. *Psychiatric News*, 42(13), 6–13. <https://doi.org/10.1176/pn.42.13.0006>
- Levitt, H., Bamberg, M., Creswell, J. W., Frost, D. M., Josselson, R., & Suarez-Orozco, C. (2018). Journal article reporting standards for qualitative primary, qualitative meta-analytic, and mixed methods research in psychology: The APA Publications and Communications Board task force report. *American Psychologist*, 73(1), 26–46. <http://dx.doi.org/10.1037/amp0000151>
- Lipson, S. K., Lattie, E. G., & Eisenberg, D. (2019). Increased rates of mental health service utilization by US college students: 10-year population-level trends (2007–2017). *Psychiatric Services*, 70(1), 60–63. <https://doi.org/10.1176/appi.ps.201800332>
- Mezey, L. (2021) Navigating a leave of absence. In M. B. Riba & M. Menon (Eds.), *College psychiatry: Psychiatry update* (vol. 1, pp. 113–122). https://doi.org/10.1007/978-3-030-69468-5_8
- Miller, M. (2016). Before it's too late: The need for legally compliant and pragmatic alternative to mandated withdrawal policies at postsecondary institutions. *Southern California Review of Law and Social Justice*, 25(3), 299–330. <https://gould.usc.edu/students/journals/rlsj/>
- Mowbray, C. T., Megivern, D., Mandiberg, J. M., Strauss, S., Stein, C. H., Collins, K., Kopels, S., Curlin, C., & Lett, R. (2006). Campus mental health services: Recommendations for change. *American Journal of Orthopsychiatry*, 76(2), 226–237. <https://doi.org/10.1037/0002-9432.76.2.226>
- Ng, P., & Padjen, M. (2019). An overview of post-secondary mental health on campuses in Ontario: Challenges and successes. *International Journal of Mental Health and Addiction*, 17(3), 531–541. <https://doi.org/10.1007/s11469-018-0015-5>
- Organisation for Economic Co-operation and Development. (2019). *Education at a glance 2019: OECD indicators*. OECD Publishing. <https://doi.org/10.1787/f8d7880d-en>
- Oswalt, S. B., Lederer, A. M., Chestnut-Steich, K., Day, C., Halbritter, A., & Ortiz, D. (2020). Trends in college students' mental health diagnoses and utilization of services, 2009–2015. *Journal of American College Health*, 68(1) 41–51. <https://doi.org/10.1080/07448484.2018.1515748>
- Pedrelli, P., Nyer, M., Yeung, A., Zulauf, C., & Wilens, T. (2015). College students: Mental health problems and treatment considerations. *Academic Psychiatry*, 39(5), 503–511. <https://doi.org/10.1007/s40596-014-0205-9>
- Popple, A. (2019, October 28). Involuntary leave policy suspended. *The McGill Daily*. <https://www.mcgilldaily.com/2019/10/involuntary-leave-policy-suspended/>
- Ritchie, J., & Spencer, L. (1994). Qualitative data analysis for applied policy research. In A. Bryman & R. G. Burgess (Eds.), *Analyzing qualitative data* (pp. 173–194). Routledge.
- Ritchie, J., & Spencer, L. (2002). Qualitative data analysis for applied policy research. In A. Bryman & B. Burgess (Eds.), *Analyzing qualitative data* (pp. 187–208). Routledge.
- Senel, I. V. (2021, November 15). *UTMSU continues to*

- fight against the mandated leave of absence policy*. Medium. <https://themedium.ca/utmsu-continues-to-fight-against-the-mandated-leave-of-absence-policy/>
- Smith, J., & Firth, J. (2011). Qualitative data analysis: The framework approach. *Nurse Researcher*, 18(2), 52–62. <https://doi.org/10.7748/nr2011.01.18.2.52.c8284>
- Spencer, R., Pryce, J. M., & Walsh, J. (2014). Philosophical approaches to qualitative research. In *The Oxford handbook of qualitative research* (pp. 80–98). Oxford University Press. <https://doi.org/10.1093/oxford-hb/9780199811755.013.027>
- Statistics Canada. (2020). *Table 37-10-0103-01 Participation rate in education, population aged 18 to 34, by age group and type of institution attended*. <https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=3710010301>
- The Canadian Press. (2018, June 27). *U of T approves policy that could place students with mental health issues on leave*. CBC News. <https://www.cbc.ca/news/canada/toronto/university-toronto-mental-health-mandated-leave-1.4725104>
- Thompson-Ebanks, V. (2017). Leaving college prematurely: The experiences of nontraditional-age college students with depression. *Journal of College Student Retention: Research, Theory & Practice*, 18(4), 474–495. <https://doi.org/10.1177/1521025115611395>
- University of Toronto. (2015). *University of Toronto report of the ombudsperson*. <https://governingcouncil.utoronto.ca/system/files/import-files/OmbudsAnnual-Report2014-15.pdf>
- University of Toronto. (2018). *University-mandated leave of absence policy*. <https://governingcouncil.utoronto.ca/system/files/2020-03/University%20Mandated%20Leave%20of%20Absence%20Policy%20%20June%202018.pdf>
- University of Toronto. (2020). *Presidential and provostial task force on student mental health*. <https://www.provost.utoronto.ca/wp-content/uploads/sites/155/2020/01/Presidential-and-Provostial-Task-Force-Final-Report-and-Recommendations-Dec-2019.pdf>
- Usher, A. (2018). *The state of post-secondary education in Canada, 2018*. Higher Education Strategy Associates.
- Wartman, K., & Savage, M. (2008). Parental involvement in higher education: Understanding the relationship among students, parents, and the institution. *ASHE Higher Education Report*, 33(6), 1–125. <https://doi.org/10.1002/aehe.3306>
- Wyder, M., Bland, R., & Crompton, D. (2013). Personal recovery and involuntary mental health admissions: The importance of control, relationships and hope. *Health*, 5, 574–581. <http://dx.doi.org/10.4236/health.2013.53A076>
- Young, R. A., & Collin, A. (2004). Introduction: Constructivism and social constructionism in the career field. *Journal of Vocational Behavior*, 64(3), 373–388. <https://doi.org/10.1016/j.jvb.2003.12.005>

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