Employee Support Subcommittee Proposal

    I.   Subcommittee charge
                  Identify gaps in CC's existing wellness resources for employees. Research and
                  recommend processes for filling those gaps.

    II.   Committee Process

d) that CC creates a mental health playbook for self-care that employees can tap into for daily check-ins as part of a proactive plan.
e) having access to temporary emergency care to support family emergencies with

fosters a respectful and collaborative environment, as staff and faculty need to work collaboratively and respectfully to provide their unique and valuable expertise that contributes to our student-based work. We propose:

a) CC leadership address faculty-staff relationships and trust-building between faculty and staff and between the administration and faculty/staff. Staff have relayed that there is a lack of trust in how faculty interact with them, and they often feel belittled in interactions with faculty. We need to address these issues to create a healthy working environment where staff feel valued. Our campus culture should foster a respectful and collaborative environment, as staff and faculty need to work collaboratively and respectfully to provide their unique and valuable expertise that contributes to our student-based work.

b) specifically creating physical spaces, and time, for marginalized communities (LGBTQ, BIPOC, etc.) to come together in a way that is supportive and rejuvenating and not oriented to service. Perhaps designated lunch spaces in Rastall or Benji's. Finally, consider supporting affinity groups for parenting and/or employees providing eldercare, etc.

3. Staff and faculty play a vital role in contributing to CC's mission. We need to create an environment that values the time taken from the personal lives of faculty and staff as they contribute to volunteer work at CC. We recognize the disparity in how service is recognized and rewarded between faculty and staff and encourage the college leadership to do so as well. We propose:

a) providing compensation or flex-time for staff that volunteer to support campus events and projects. For example, we propose that time spent contributing to this Employee Health and Wellness Task Force be recognized and compensated constructively.

Closing Thoughts

Other ideas that surfaced included:
   i.   Access to/coverage for "out-of-network" mental health providers:
      a.   Question - can CC fund those costs or expand the providers that are "in-network"? Many providers do not take insurance and getting reimbursed through Cigna can be extremely challenging, which adds to employee stress.
   ii.   The college needs to be mindful of the "whiteness" of proposals and

vi.   Ask the college leadership to acknowledge that the institution takes advantage of employees' time when asking employees to do "service" for the college that is outside the boundaries of job descriptions.

vii.   Whatever actions are taken – clearly communicate the timeline for steps to take place and update communications across campus often enough for community members to know progress is being made.

viii.   Establish and adhere to boundaries in terms of time; for example, do not have work expectations after 5 pm on weekdays or weekends.

Meeting over Zoom after 5 p.m. proved difficult after the first two meetings. The final session in April was over the lunch hour, but it also proved too difficult for the members to participate. The group's most significant barrier was the ability to participate in discussions and engage with each other.

Not having an assigned leader(s) of the group meant that planning meetings were not structured or timely, contributing to lower attendance for the second and third meetings.

Subcommittee Membership

Marlene Arnold, Assistant Director, International Student & Scholar Services
Jane Byrnes, Student Success Specialist, Pre-Health Professions

V. Timeline and closing thoughts: This playbook can be edited and deployed at any time. It is designed to be ready to use as is, or it can be improved upon by other members of the community. We believe that this centralized resource can, if it is deployed properly, serve as a quick reference tool for the entire community.

Subcommittee members:
- Lori Driscoll PhD, Professor, Psychology
- H. Knox Huang, CC Psychology major
- Jessica Hunter PhD, Associate Director, Creativity and Innovation
- Joan Ericson PhD, Professor, German/Russian/East Asian Languages, Asian Studies
- Matt Streich, Assistant Coach, CC Men's Basketball
- Jane Byrnes MA, Student Success Specialist, Pre-Health Professions Advising Manager
- Benjamin Peery MD, Valley View Hospital, Glenwood Springs, CO
- Caroline Myers LCSW, Private practice in Colorado and North Carolina

Fundraising and Campaign Subgroup Recommendations

I. Introduction

Among the students and staff of Colorado College, stigma around mental health is not as prevalent as it is on many other college campuses. Students especially are open about their mental health with each other. However, several problems remain. Firstly, not all mental illnesses are equally stigmatized; while many students appear comfortable talking about anxiety and depression, illnesses that are more serious and less common remain stigmatized. Even at CC, a student with a mental illness more complex than mild-to-moderate anxiety or depression still faces social risks should they choose to be more open about their mental health.

At the same time, mental health services provided by the college have evidently failed to address the needs of students. Students are demanding more mental health staff as well as an institutionalized peer support system, all of which carry additional costs.

The aim of this subgroup was to conceive a mental health campaign that would defeat stigma as well as fundraise for more student

or are going to be put in place before this campaign. We want the monetary aspect of this campaign to fund mental health resources on campus, but need to know more about what possibilities there are. Could we form student support groups? Bring in more licensed professionals? Will these aspects be covered by other parts of the task force/those focusing on mental health at CC? Additionally, we face the obstacle of incentivizing people to share vulnerable information about themselves with a wide audience. We think it will be necessary to financially compensate the students and alumni who share their stories with us.

Existing resources
We believe students and alumni will be willing to share their stories, thus this is a resource available to us. Warren Lloyd proposed relying on the Advancement Office to collect stories from alumni. We also still have access on GroupMe to hundreds of students who were interested in last semester's mental health protests, and whom we could recruit to oversee this project.

Financial constraints
Primary costs will include compensating students and alumni for sharing their stories, as well as costs of printing/distributing flyers. An ideal number of student stories would be

Mental Health and Wellness Task Force Recommendations

The mental health peer steward system will be a club or an organization that will mostly be run by the students but have at least one licensed therapist or clinical/counseling psychologist and one administrative assistant.

The peer steward will be a formal job position. Students will need to apply through Handshake and be interviewed by the professionals as well as 1-2 existing steward

Mental Health Resources —