

MENTAL HEALTH & WELLBEING ACTION PLAN

2026-2030



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MESSAGE FROM CLAYTON CHRISTIAN COMMISSIONER OF HIGHER EDUCATION

Dear Montana University System Community,

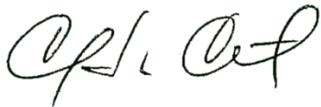
The health and wellbeing of MUS students and employees is central to everything we do. Mental health is foundational to thriving campus environments, and the Board of Regents and I are committed to making it a priority across the system.

Since 2016, the MUS Student Suicide Prevention and Mental Health Task Force has done extraordinary work—saving lives, reducing stigma, and transforming how we approach wellbeing on our campuses.

Building on that foundation, I'm pleased to offer my strong support for the MUS Mental Health and Wellbeing Action Plan, developed with active engagement from OCHE staff, campus stakeholders, and an external advisory committee. While it provides a coordinated systemwide approach, the plan is designed to be tailored to each campus's unique needs. Its three goals—integrating mental health into campus culture, promoting student success through evidence-based practices, and fostering employee wellbeing—reflect our shared commitment to the people at the heart of the MUS.

I encourage every member of our community to engage with this plan and help bring its goals to life on your campus.

Sincerely,



Clayton T. Christian
Commissioner of Higher Education
Montana University System

Acknowledgements

The Office of the Commissioner of Higher Education is grateful for those who contributed their time and energy to developing this plan including current and past MUS Suicide Prevention and Student Mental Health Task Force members (2015-2026), those who participated in the System and Campus Stakeholder Needs Assessment discussions, MUS student affairs officers, chief academic officers, chief human resources officers, Montana Associated Students, OCHE and campus leadership, and the External Consultation Committee.

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MUS MENTAL HEALTH & WELLBEING ACTION PLAN

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THE MONTANA UNIVERSITY SYSTEM MENTAL HEALTH AND WELLBEING ACTION PLAN establishes mental health and wellbeing as essential to the MUS mission and its strategic goals: increasing educational attainment, growing a strong workforce, serving thriving communities across the state, and advancing innovative research enterprises that strengthen Montana’s economy and communities. This plan establishes a bold, coordinated approach to transform how the system supports student and employee wellbeing over the next four years, deepening our collective capacity to fulfill this core mission.

This effort builds on a decade of foundational work, from establishing the MUS Suicide Prevention and Mental Health Task Force (Task Force) in 2015, through the transformative 2022 MUS Enriching Community Mental Health & Wellbeing Summit, to the creation of two system-level positions dedicated to supporting student and employee mental health and wellbeing.

The Action Plan is built around the following **CORE COMMITMENTS**:

WE ARE STRONGER TOGETHER.

This plan emerged from a comprehensive, collaborative process involving stakeholder input from every campus including students, clinical and health promotion staff, faculty, academic and student affairs administrators, leaders in human resources, and state and national partners. Establishing shared goals and MUS campus community support has been essential to the development of the action plan and will continue to be necessary for its success.

More importantly, strong relationships and the depth of the collaborative planning process gave rise to one of this plan’s

distinctive features: the recognition that student and employee mental health wellbeing are deeply interdependent, and that effective support strategies must reflect that connection. Integrating student and employee mental health and wellbeing into a single, system-level action plan represents a first-in-the-nation approach.

Mental health and wellbeing are unequivocally foundational to student success. When employees are supported in their own wellbeing, they are better equipped to serve on the front-line to recognize distress, respond with empathy, and cultivate classroom and campus environments where students are supported to fully engage and thrive. Importantly, in this ecosystem, employee wellbeing is a value in its own right – our workforce deserves environments that promote health, resilience, and sustainability.

Finally, implementation of a coordinated system-level approach allows the MUS to leverage existing infrastructure to enable campuses to share expertise, develop collective resources, and access specialized support – building a collective capacity that no single institution could sustain alone, while respecting each campus’s autonomy, context, community, and student population.

STUDENT SUCCESS IS THE HEART OF OUR WORK.

Student success—and every person within the university system who makes that success possible—is the heartbeat of this plan. Retention and completion goals cannot be achieved without addressing the mental health barriers that prevent students from persisting. This plan directly advances the [MUS Success Agenda](#) by embedding mental health and wellbeing into institutional planning, ensuring these priorities are foundational to student success strategies, rather than treated as separate initiatives.

The data are clear. Research consistently shows that poor mental health is one of the strongest predictors of student attrition (Gallup, 2025; HMN, 2024). However, efforts to improve the mental health of students can lead to improved academic performance, persistence, and graduation rates (Lipson et al., 2022). CUPA-HR reports that wellbeing and job satisfaction are the single best predictors for employee retention (Burrell, 2024). When we take care of our employees by creating cultures of wellbeing and providing access to resources and services, they are more likely to thrive in the workplace and contribute positively to our mission (Brewster et al., 2022; UKG, 2025).

A PUBLIC HEALTH APPROACH IS COMMUNITY APPROACH.

A public health approach to mental health and wellbeing means that support is integrated into everything we do, not confined to any single service or office. It means that we are equally focused on upstream prevention measures, skill-building for those who need extra support, and timely crisis intervention. It means that every campus student, faculty, and staff—has the knowledge and skills to play a meaningful role in building environments where all students and employees can thrive.

Aligned with these commitments, the Action Plan establishes **three interconnected goals** to guide the system's work in student and employee mental health and wellbeing through 2030.

Goal 1 implements a system-wide, multi-tiered, public-health informed approach to mental health and wellbeing, integrating trauma-informed practices into campus policies and plans.

Goal 2 embeds evidence-based mental health and suicide practices across all campuses, improving early identification, intervention, and help-seeking behaviors.

Goal 3 fosters employee mental health and wellbeing by strengthening workplace culture and equipping employees with the resources to support students while sustaining their own wellbeing.

TOGETHER, THESE GOALS WILL DELIVER MEANINGFUL CHANGE ACROSS THE SYSTEM BY:

- **INCREASING RETENTION AND COMPLETION** by addressing mental health barriers to student persistence.
- **SUSTAINING DATA-DRIVEN PROGRESS** through regular system-wide assessments that guide ongoing work.
- **ENHANCING ACCESS TO SUPPORT** through coordinated infrastructure that enables campuses to share expertise and leverage collective resources.
- **SUPPORTING A THRIVING WORKFORCE THROUGH UPSTREAM STRATEGIES** that sustain employee wellbeing and strengthen workplace culture.
- **BUILDING CAMPUS COMMUNITIES** where faculty, staff and students are equipped to recognize distress, respond with empathy, and foster cultures of care.

VISION, MISSION, & GUIDING PRINCIPLES

ACTION PLAN VISION

The Mental Health and Wellbeing Action Plan envisions a thriving Montana University System (MUS) community in which mental health and wellbeing are recognized as fundamental to student success, employee excellence, and the fulfillment of the MUS mission.

MUS MISSION

The mission of the MUS is to serve students through the delivery of high quality, accessible postsecondary educational opportunities, while actively participating in the preservation and advancement of Montana's economy and society.

CONNECTION TO MUS SUCCESS AGENDA

Recognizing that mental health and wellbeing are essential prerequisites for educational attainment and for a thriving MUS workforce, this Action Plan responds to the MUS Success Agenda's call to improve retention and completion (Success Agenda Item #4) by enhancing the system's capacity to address student mental health and wellbeing. It also addresses recruitment and retention of a thriving workforce (Success Agenda Item #10) by providing supports and professional development to faculty and staff.

GUIDING PRINCIPLES

Public Health Approach. The Action Plan advances a public health approach adopted at the 2022 MUS Mental Health & Wellness Summit. Through this approach, all campus community members – administrators, faculty, staff, and students – share responsibility and play unique and meaningful roles in creating supportive, holistic environments, where students and employees can thrive. Aligned with a public health model, this Action Plan provides support and strategies across the 'Mental Health Continuum' from excelling to crisis including health promotion, prevention, early intervention, and crisis response (Delphis, 2020).

System-Level Collaboration and Shared Infrastructure. By working collaboratively across the system, MUS institutions leverage collective expertise, pool resources, and build shared infrastructure that amplifies what individual campuses could achieve alone. System-wide coordination of shared services, professional development, and integrated data systems expands capacity and strengthens outcomes across all institutions.

Integration and Sustainability. This Action Plan recognizes that building capacity to address student mental health and wellness is essential to improving student retention and completion rates. Similarly, employees who are supported in their own mental health and wellbeing are better equipped to support students, foster inclusive learning environments, and sustain the demands of working in higher education. Investing in employee wellbeing is both strategically essential and a value in its own right. To sustain this commitment overtime, student and employee mental health and wellbeing must be embedded in institutional planning, policies, and practices – not treated as standalone initiatives. Integrating these priorities into system-level and campus strategic plans, academic affairs, student services, and campus operations ensures a sustainable, long-term commitment.

DATA & ACTION PLAN PRIORITIES

STUDENT AND EMPLOYEE MENTAL HEALTH AND WELLBEING DATA

To establish a strong foundation for the Action Plan, the MUS Suicide Prevention & Student Mental Health Task Force identified eight priority areas based on findings from the and the Healthy Minds Study (HMS) (administered AY2023-2024) and the NCHA-III (administered AY2023-2024).

Healthy Minds Study Summary Findings on Student Mental Health & Wellbeing and Faculty/Staff Response

| HMS Item | Students (N=3,923) | Agree or Strongly Agree with the statement | Fac/Staff(N=891) |
|--|--------------------|--|------------------|
| Flourishing | 34% | I feel comfortable having conversations with students about their mental health. | 63% |
| Depression | 38% | I have a good idea how to recognize that a student is in mental or emotional distress. | 52% |
| Anxiety | 33% | Student mental health problems are significantly worse now than when I started my career. | 52% |
| Loneliness (Isolated from others) | 69% | Supporting students in mental and emotional distress has taken a toll on my own mental and emotional health. | 22% |
| Suicidal ideation (last year) | 15% | | |
| Self-injurious behavior | 31% | | |
| Mental health negatively impacted academic performance | 81% | | |

Healthy Minds Study Summary Findings on Faculty & Staff Wellbeing

| HMS Item | Fac/Staff (N=891 Faculty 47% & Staff 53%) | |
|---|---|---|
| Achieve a healthy balance between personal and professional life* | 72% | |
| Flourishing | 58% | "Flourishing" is based on an 8-item summary measure of self-perceived relationships, self-esteem, purpose, optimism, etc. |
| Felt overwhelmed by all I had to do (past year)* | 74% | |
| Job has taken negative toll on mental or emotional health* | 50% | |
| Feel burnt out because of work** | 55% | *Somewhat agree, agree, and strongly agree |
| Lifetime campus mental health or wellness resource use | 14% | |
| Institutions should be investing more resources to support fac/staff mental health and wellbeing* | 80% | **Somewhat, to a high degree, and to a very high degree |

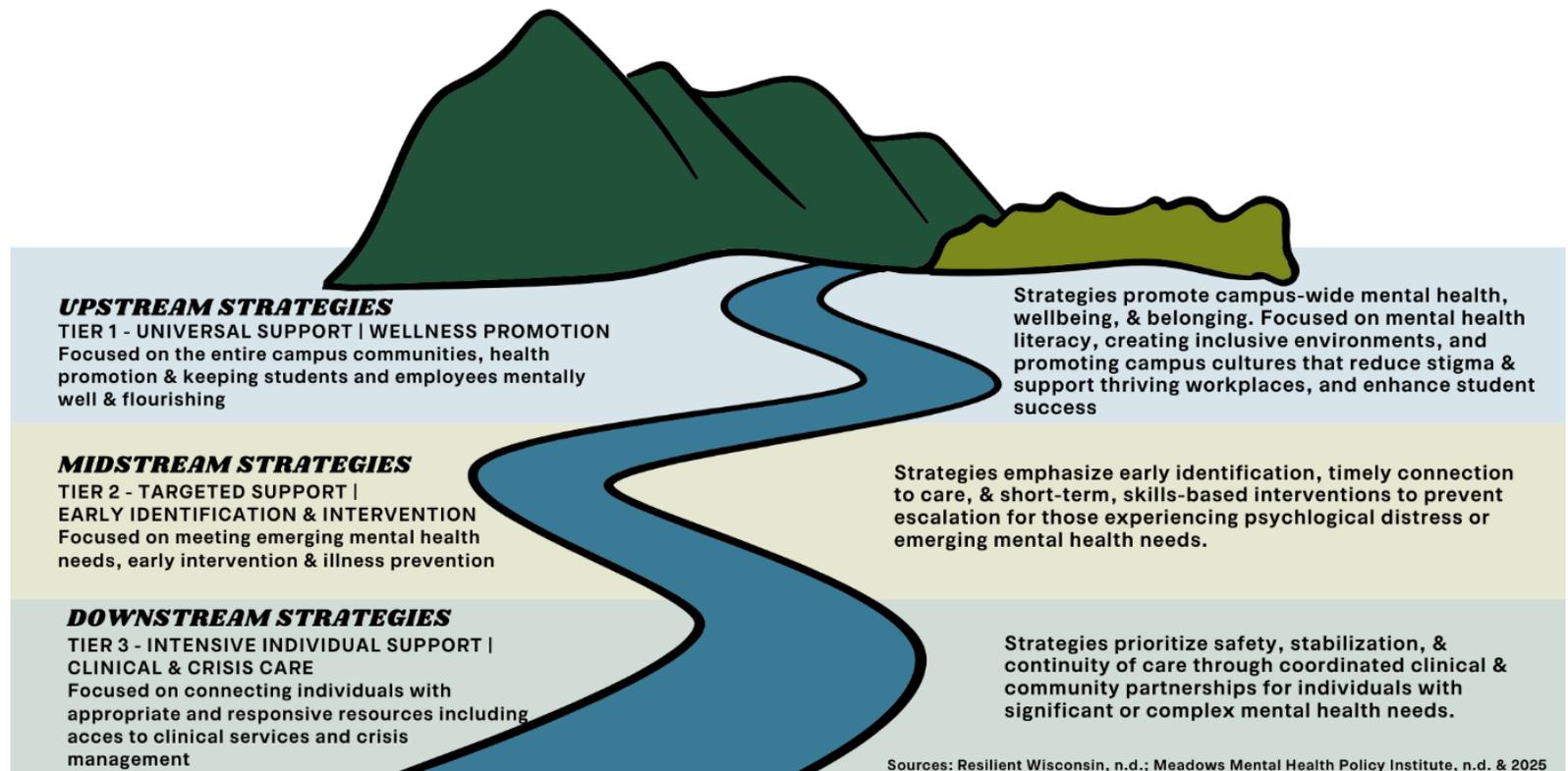
DATA & ACTION PLAN PRIORITIES

PRIORITIES TO ACTION: A PUBLIC HEALTH APPROACH

Based on systemwide NCHA and HMS data and in response to campus stakeholder feedback, the Task Force identified eight priority areas for the Action Plan:

- Reduce negative academic impact of student mental health challenges.
- Decrease student anxiety.
- Address student basic needs insecurity, including food and housing.
- Decrease loneliness and increase sense of belonging for students.
- Adopt a public health approach (shared responsibility) for student mental health and wellbeing.
- Reduce barriers for students seeking help.
- Create a campus culture of care where students feel welcomed and supported.
- Expand mental health training and support for students, faculty, and staff

These priorities are united by a single organizing framework: a public health approach. The Action Plan supports strategies across three tiers of mental health support, spanning the full mental health continuum from health promotion and prevention, to early intervention, to access to timely and appropriate care.



MENTAL HEALTH & WELLBEING ACTION PLAN



GOAL 1

Integrate mental health and wellbeing into campus culture by implementing a public health approach that builds thriving communities.

GOAL 2

Promote positive student success outcomes through evidence-based mental health & suicide prevention practices.

GOAL 3

Foster employee mental health & wellbeing to create a thriving workplace where all employees can fully contribute to the MUS mission.

GOALS, OBJECTIVES & ACTIONS

GOAL 1: INTEGRATE MENTAL HEALTH AND WELLBEING INTO CAMPUS CULTURE BY IMPLEMENTING A PUBLIC HEALTH APPROACH THAT BUILDS THRIVING COMMUNITIES

MEASURABLE OUTCOME: By AY29, all MUS institutions will embed a public health-informed, trauma-responsive approach to mental health and wellbeing into campus culture and systems, that advances upstream prevention, early intervention, timely access to clinical services, and shared responsibility, while measuring progress through training participation, use of services, and system-level wellbeing data.

| | |
|---|--|
| <p>OBJECTIVE 1: BUILD SHARED RESPONSIBILITY FOR MENTAL HEALTH & WELLBEING ACROSS CAMPUS</p> | <p>ACTION 1: Launch a system-wide public health education campaign* with role-specific guidance for faculty, staff, student leaders, and administrators on providing support across the mental health continuum.</p> <p>ACTION 2: Establish and disseminate clear, campus-specific pathways for students and employees to access mental health and substance use clinical services.</p> <p>ACTION 3: Reduce barriers to seeking help through stigma reduction campaigns and promotion of available mental health and wellbeing resources.</p> |
| <p>OBJECTIVE 2: INTEGRATE MENTAL HEALTH AND WELLBEING INTO CAMPUS POLICIES, PRIORITIES, AND SUPPORT STRUCTURES</p> | <p>ACTION 1: Facilitate collaborative planning with campuses to align mental health and wellbeing efforts with student success, retention, equity, and institutional priorities informed by assessment data and Task Force Recommendations.</p> <p>ACTION 2: Support campuses in reviewing and updating policies, strategic plans, or frameworks to intentionally integrate mental health and wellbeing using MUS public health models.</p> <p>ACTION 3: Provide a public health pyramid framework to help campuses assess resource gaps and strengthen support across promotion, prevention, early intervention, treatment, and crisis response.</p> <p>ACTION 4: Develop and disseminate equitable, trauma-informed guidance for policies related to academic accommodations, medical withdrawal and return, mandated leave, threat assessment, and crisis communication that balances student welfare with meeting campus safety and legal obligations.</p> |
| <p>OBJECTIVE 3: EXPAND ACCESS TO WELLBEING RESOURCES AND TRAINING OPPORTUNITIES</p> | <p>ACTION 1: Develop and maintain digital platforms including:</p> <ul style="list-style-type: none"> • A Campus Professional Resource Hub with templates for trauma-informed campus crisis response, postvention (recovery support) protocols, and community partnership agreements. • An Interactive Wellbeing Learning Hub offering mental health and wellbeing learning modules*, evidence-based self-help tools, crisis and suicide prevention resources, and direct connections to campus-specific support services for students and employees. <p>ACTION 2: Host regular system-wide convenings* to promote a public health approach to mental health and wellbeing.</p> <p>ACTION 3: Evaluate emerging technologies, including AI tools, related to student mental health and wellbeing, and provide guidance to MUS Mental Health Task Force, MUS AI Task Force, and other relevant system and campus leaders.</p> |
| <p>OBJECTIVE 4: TRACK PROGRESS AND RESPOND TO EMERGING NEEDS THROUGH DATA</p> | <p>ACTION 1: Administer system-wide comprehensive wellbeing assessments (Healthy Minds Study, National College Health Assessment, or equivalent) to students and employees every three years beginning in the fall of 2026, to monitor trends, identify emerging needs, and inform continuous improvement.</p> |

Notes
 *Training and education efforts across goals will be coordinated through the Task Force to reduce duplication, align messaging, and tailor content by role and population.

**Faculty and non-clinical staff should not diagnose mental health conditions or provide clinical services. Their role is to notice concerns, connect individuals to resources, and maintain their wellbeing.

GOALS, OBJECTIVES & ACTIONS

GOAL 2: PROMOTE POSITIVE STUDENT SUCCESS OUTCOMES THROUGH EVIDENCE-BASED MENTAL HEALTH AND SUICIDE PREVENTION PRACTICES

MEASURABLE OUTCOME: *Early support and connection to resources improves student retention, safety, and academic success. By AY29, all institutions will implement and sustain evidence-based mental health, wellbeing, and suicide prevention practices that help identify and support students at risk and encourage help-seeking behaviors. Progress will be measured through participation in prevention training and awareness initiatives and indicators on use of services, help-seeking, and loneliness.*

OBJECTIVE 1: INCREASE EARLY IDENTIFICATION, INTERVENTION, AND HELP-SEEKING

ACTION 1: Establish, regularly review, and update standardized procedures through CARE/BIT teams or early alert systems to identify and support students showing signs of distress.
ACTION 2: Adopt a required system-wide foundational evidence-based online suicide prevention training* for all new faculty, staff, and students (e.g., SOS for Higher Ed.).

OBJECTIVE 2: IMPLEMENT COMPREHENSIVE EVIDENCE-BASED SUICIDE PREVENTION STRATEGIES

ACTION 1: Develop templates and best practices of evidence-based suicide prevention programming and activities that reduce access to lethal means and support campus-level adoption and implementation.
ACTION 2: Develop evidence-based resources and share best practices for promoting social connectedness and reducing isolation including for first-year, transfer, online, commuter, and underrepresented students. Support campuses in adopting and implementing strategies

GOAL 3: FOSTER EMPLOYEE MENTAL HEALTH AND WELLBEING TO CREATE A THRIVING WORKPLACE WHERE ALL EMPLOYEES CAN FULLY CONTRIBUTE TO THE MUS MISSION

MEASURABLE OUTCOME. *Employee wellbeing is a cornerstone of the MUS workplace culture. It both shapes and reflects the quality of student support, campus climate, and overall institutional success. By June 30, 2028, the system will work to remove barriers to wellbeing resources and strengthen a culture that values balance, care, and support for all employees.*

OBJECTIVE 1: STRENGTHEN A SYSTEM-WIDE CULTURE THAT PRIORITIZES EMPLOYEE WELLBEING THROUGH VISIBLE LEADERSHIP SUPPORT, EMPLOYEE ENGAGEMENT, AND RECOGNITION OF CAMPUS WELLBEING INITIATIVES

ACTION 1: Issue system-level guidance that encourages and supports employees to attend designated MUS-sanctioned wellbeing events.
ACTION 2: Leverage the Chief Human Resource Officers (CHRO) community and MUS Wellness Champion Program to gather employee input, elevate campus-level perspectives and inform system-level guidance on employee wellbeing that campuses can adapt.
ACTION 3: Establish a Community of Practice for staff and faculty to regularly share innovative wellbeing initiatives and host an annual virtual symposium to showcase the year's most impactful initiatives system-wide

OBJECTIVE 2: PROMOTE WELLBEING RESOURCES AND PROVIDE PROFESSIONAL DEVELOPMENT THAT EQUIP EMPLOYEES WITH TOOLS TO SUPPORT THE WELLBEING OF STUDENTS AND COLLEAGUES, WHILE PROTECTING THEIR OWN MENTAL HEALTH

ACTION 1: Provide guidance on role-appropriate response to faculty and staff**—including recognizing distress in students and colleagues, making referrals rather than providing care, and maintaining personal wellbeing through boundaries and self-care—in system-wide suicide prevention training.*
ACTION 2: Utilize employee assistance programs to promote workshops and trainings* to reduce employee stress and burnout, including trauma-informed practices, setting boundaries, managing compassion fatigue, supporting students with anxiety in the classroom, and inclusive teaching practices through EAP and other resources.
ACTION 3: Promote evidence-based wellbeing strategies for employees in teaching, leadership, and support roles (e.g., MUS Teaching Scholars Initiative, Equipping Leaders Toolkit).
ACTION 4: Create a centralized Employee Wellbeing Navigation Hub that streamlines access to existing system-level benefits, provides clear, confidential pathways to support services, and connects employees to available resources through campus sites and e-gov delivery.

IMPLEMENTATION AND YEAR 1 KEY ACTIVITIES

The Action Plan will be in place for four years and will be implemented in a coordinated approach through 3 drivers:

1. OCHE STAFF – IMPLEMENTATION LEADS

Key drivers of the Action Plan will be OCHE’s Associate Director of Student Wellbeing and Associate Director of Employee Wellbeing. These two positions were newly created in 2024 and 2025, respectively, to build capacity to support both system-level coordination and the unique needs of each campus in advancing the goals of the Action Plan. These two positions will coordinate and align efforts across the plan, coordinate the work of the Task Force, support campus teams in their implementation plans, and ensure communication and collaboration with other mental health and wellbeing efforts across the system.

Year One Key Activities: Coordinate and relaunch task force, organize systemwide summit, coordinate administration of Healthy Minds Study for students and employees at each campus, launch employee wellbeing resource hub, and help launch campus implementation teams.

2. MUS MENTAL HEALTH AND WELLBEING TASK FORCE & WORK GROUPS

Task Force: The Mental Health and Wellbeing Task Force (Task Force) will operate under a defined charge to guide implementation, monitor progress, ensure accountability, and maintain alignment with the MUS Strategic Plan. Membership will represent each campus across a range of roles, reflective of the focus on both student and employee mental health and wellbeing and will include administrators, student and employee support staff, student affairs and academic affairs staff, mental health professionals, faculty, and students. This representation will ensure diverse perspectives inform decision-making and that strategies are practical, inclusive, and responsive to campus needs. The Task Force will define Work Groups that will operationalize the Action Plan. Work Groups may include additional campus, system, or external members who can lend specific expertise and capacity. Work Groups will meet regularly, develop implementation timelines for assigned action items, and report activities and progress to the full Task Force.

Year One Key Activities: Relaunch Task Force, determine priorities and timeline for Action Plan activities, secure student and employee suicide prevention training, and develop resources for systemwide public health education campaign. Establish Task Force Work Groups and define key activities, timeline, establish metrics for progress, and report activities to full Task Force.

3. CAMPUS IMPLEMENTATION TEAMS (CITs)

Each campus will establish a CIT to translate system-level goals into campus-specific strategies and actions, ensuring implementation is responsive to each campus’s unique context and community. OCHE staff and the Task Force will provide CITs with clear expectations and guidance. Campuses will define their implementation teams based on their campus plan. Representatives may include leaders and staff from student affairs, academic affairs, counseling and mental health services, health and wellness services, human resources; equity, access, and belonging offices; campus safety; communications and marketing; students; and faculty.

Year One Key Activities: Identify campus-specific mental health and wellbeing needs, develop campus plan responding to foundational Action Plan activities and strategies to address campus-specific needs, and establish implementation team to carry out campus plan.

ACTION PLANNING PROCESS & HISTORY

STAKEHOLDER ENGAGEMENT

The MUS Mental Health and Wellbeing Action Plan is a living document – dynamic in nature and responsive to emerging evidence, campus needs, and system priorities. Its development has been, and will continue to be, grounded in data and evidence, with the ongoing collaborative engagement of system and campus stakeholders to ensure that implementation is inclusive, action-oriented, and aligned with the goals of MUS and its individual institutions.

This plan was developed through a collaborative process involving OCHE staff and MUS campus stakeholders, with the guidance of an external consultation committee comprised of local, state, and national experts.

PLANNING PROCESS & TIMELINE

AY2023-2024—Data Gathering

Systemwide administration of the Healthy Minds Study for students and employees. Systemwide administration of National College Health Assessment for students.

Spring 2025 Semester—Determining scope and priority needs

MUS Suicide Prevention & Mental Health Task Force assesses HMS and NCHA data and determines system-wide priorities for student mental health needs and scope for action plan.

Summer 2025—Campus Stakeholder Engagement

Led by student affairs officers, campus stakeholders (student affairs staff, clinical services, health promotion, faculty, administrators, and students) provided input on local-level mental health and wellbeing needs. Assessment instruments based on JED [“Comprehensive Approach to Mental Health Promotion and Suicide Prevention for Colleges and Universities”](#) model. Campuses used institutional level NCHA and HMS data to guide stakeholder feedback.

Fall 2025—Develop & Share Draft Goals & Objectives

Based on HCM and NCHA data and input from campus stakeholder engagement, the Task Force developed draft goals and shared broadly with MUS leadership groups including CAOs, SAOs, MAS, and others.

Fall 2025—Expand Plan Scope to Include Faculty & Staff

In response to campus stakeholder and leadership feedback and to align with parallel efforts to support faculty and staff mental health and wellbeing, the action plan scope expanded to include employees.

Nov. '25-Feb. '26—Develop & Vet Draft Goals In Support of Fac/Staff

Task Force and OCHE staff assessed employee wellbeing data and input from faculty and staff, HR leaders, and academic administrators to inform goals addressing fac/staff mental health and wellbeing needs.

Feb. 2026—Share final draft plan with MUS stakeholders and gather input from External Consultation Committee

The final draft action plan including goals, measurable outcomes, objectives, and actions was shared and feedback collected from MUS stakeholder groups including SAOs, CAOs, CHROs, MUS benefits, and MAS. The Action Plan was also shared with the external consultation committee to gather expert state and national input from key experts and state partners including OPI and DPHHS.

Spring and Summer 2026—Launch MUS Mental Health & Wellbeing Action Plan

Present Action Plan to Board of Regents; relaunch Task Force and form work groups, and launch implementation; and support campuses in identifying campus implementation teams.

ACTION PLANNING PROCESS & HISTORY

HISTORY—MUS Suicide Prevention and Student Mental Health Task Force

The Montana University System has a long-standing commitment to student mental health and wellbeing. In response to growing recognition of mental health challenges facing college students, the MUS Suicide Prevention and Student Mental Health Task Force was established by the Office of the Commissioner of Higher Education in 2016. The Task Force was charged with enhancing mental health services, establishing holistic evidence-based practices, and strengthening suicide prevention efforts across the system – working to build shared best practices, identify emerging needs, and develop actionable recommendations for continuous improvement.

That same year, the Task Force developed [eleven recommendations](#) grounded in best practices to address student mental health, promote wellbeing, and expand access to education, prevention strategies, and resources. During the COVID-19 pandemic, the MUS launched the “You Matter” initiative to supplement campus efforts in addressing heightened student mental health needs. This initiative included a provider referral platform (Thriving Campus), mental health literacy training for students and employees (Kognito), and a web-based mental health and wellness platform (You@College). Together, these resources reflected the Task Force’s comprehensive approach to student mental health, emphasizing expanded access to clinical services, evidence based mental health literacy, suicide prevention education, and the cultivation of a campus culture of care. The [2022 Mental Health and Wellness Summit](#) further advanced the MUS commitment to a public health approach, centering on a public health approach in which every campus community member plays a role in supporting student wellbeing.

WORKING DEFINITIONS

CARE/BIT Teams: support student success, wellbeing and campus safety by identifying, assessing and responding to students displaying signs of distress; typically teams are campus-wide and interdisciplinary and are responsible for identifying appropriate interventions and/or connecting students to appropriate resources or support and addressing serious concerns and/or disruptive behaviors before they elevate to a higher level of concern

communities of practice: groups of people who share a concern or a passion for something they do and learn how to do it better as they interact regularly (Wenger-Trayner, E. & Wenger-Trayner, B., 2015)

lethal means: objects or items that can be used to attempt suicide (SAVE.org, 2026)

mental health: a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn and work well, and contribute to their community (World Health Organization, 2025)

mental health continuum: mental health is not a binary state, it falls on a continuum ranging from excellent mental health to experiencing severe symptoms, when a person may experience panic attacks or suicidal ideation

mental health literacy: knowledge and beliefs about mental disorders which aid their recognition, management or prevention (Jorm et al., 1997) mental health literacy is composed of several components, including (a) the ability to recognize specific disorders or types of psychological distress; (b) knowledge and beliefs about risk factors and causes; (c) knowledge and beliefs about self-help interventions; (d) knowledge and beliefs about professional help available; (e) attitudes which facilitate recognition and appropriate help-seeking; and (f) knowledge of how to seek mental health information (Jorm, 2000).

postvention: an organized response in the aftermath of a suicide to accomplish any one or more of the following: to facilitate the healing of individuals from the grief and distress of suicide loss; to mitigate other negative effects of exposure to suicide; to prevent suicide among people who are at high risk after exposure to suicide (Survivors of Suicide Loss Task Force, 2015)

public health approach to mental health: a campus-wide perspective that goes beyond providing clinical services and expands efforts to prevent mental health problems from arising and to promote the mental health of all students; this approach addresses the social and environmental risk factors that influence student mental health (Davidson & Locke, 2010)

trauma-informed approach: a program, organization, or system that realizes the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in students, staff and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, while seeking to actively resist re-traumatization (SAMHSA, n.d.)

wellbeing: an optimal and dynamic state that allows people to achieve their full potential (NIRSA, 2000)

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