Mental Wellbeing Community (MeWell)
Non-profit association, Zurich
mewellcommunity.ch

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1. A message from our president

I am delighted to share with you my message as part of the 2022 annual report of MeWell Community. As I reflect on the progress we have made in promoting mental health in academia, I cannot help but feel immensely proud of what we have accomplished together.

MeWell Community is a student and staff association at the universities in Zurich that is committed to promoting mental health in the academic environment. Despite the challenges posed by the pandemic, we have remained steadfast in our mission to provide valuable resources and support to our community.

With the receding of the pandemic in the first quarter of 2022, we have successfully switched to in-person events, and it is heartening to see the enthusiastic response from our members and our audience. We have also rethought our community events to ensure that they are inclusive and accessible to all and serve the purpose to connect people.

We have also grown our team, and I am delighted to share that our new members bring with them a wealth of enthusiasm, energy, and fresh ideas that will allow us to serve our community even better.

I am also pleased to report that we have secured funding for 2024, and we have also received funding from VSETH to support our efforts. We were humbled to lead a TA workshop in collaboration with VSETH called the Fokusgruppen, which provided an incredible platform to share our knowledge and insights on promoting mental health in the academic environment.

Additionally, I am delighted to announce that MeWell Community has been officially recognized by Alias, a significant milestone in our journey to create a mentally healthy environment in academia. This recognition is a testament to the dedication and hard work of our team.

Finally, we had the privilege of contributing to the Selbsthilfe Schweiz conference, where we shared our experiences and insights on promoting mental health in academia, with a particular focus on young people seeking self-help.

As we continue to move forward, our unwavering commitment to promoting mental health in the academic environment remains stronger than ever. We will continue to innovate and explore new ways to serve our community better, and we are excited about the opportunities that lie ahead.

I would like to take this opportunity to extend my heartfelt thanks to all our members for their unwavering support and commitment to our mission. Together, we can continue to make a positive impact on the mental health and wellbeing of our academic community and beyond.

Sincerely,
Tiyam Nikray
President MeWell
2. Executive summary

*Increased knowledge*
7 talks/ podium discussion organized

*Increased resilience*
6 talks organized
2 interactive awareness events
4 Community events (game night, hike, BBQs)

*Increased treatment rates*
3 talks organized
700 website visitors per month (1000 visitors in October – mental health month)

*People reached*
1846 people attended awareness events
49 people attended community events
200 people watched recordings of awareness events

*Event rating*
Surveys are done after each event
1 in 6 of event participants takes part in surveys
Selected respondent quotes:

“I very much liked the discussion at the end, where everybody could pitch in to share their experiences.”

“I enjoyed the short stories the speakers added in with little lessons in them.”

“I learned new things I am now trying to build into habits!”

“I liked that the exercises were sprinkled between the theoretical parts, instead of one massive block of each theory and exercises!”

**Growth of Mental Wellbeing Community**

MeWell listed as support for employees and students at ETH

Introduction of MeWell to new students at ETH/UZH (introduction events, ersti-bags)

384 Instagram followers, 715 followers on LinkedIn, 296 newsletter subscribers

Physical advertisement at ETH/UZH, virtual advertisements at several universities

Recognized by Alias (student association of ZHAW)

MeWell was awarded with an ETH Diversity Award (organized by AVETH and ETH)
Finances
The expenses in 2022 amounted to: CHF 4272.39
The revenues in 2022 amounted to: CHF 6390.44
The annual profit in 2022 was: CHF 2118.05

Monetary value of social impact outcomes

- Direct healthcare costs of mental health issues in CH per year (Schuler et al., 2016):
  1798 CHF (year 2015 average costs)
- Estimate of people improving by increased knowledge/resilience/treatment rates:
  \[ 1914^1 \times 5\%-20\%^2 \times 19\%-22\%^3 = 53.7 \text{ people} (19.9 - 92.2) \]
- Assumption that increased knowledge/resilience/treatment rates reduce healthcare needs by three months\(^4\)

Mid-point estimate of monetary value: 24’125 CHF
Range: 8’950 – 41’425 CHF

It is important to note that this cost calculation does not include the magnitude of indirect costs associated with these illnesses (i.e. to lost personal and economic income).

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\(^1\) Awareness/community attendees
\(^2\) Prevalence of mental health disorders in general population
\(^3\) Effectiveness of positive mental health intervention (Schotanus-Dijkstra et al. 2018)
\(^4\) Longer duration of untreated illness tends to lead to poorer outcomes (Ghio et al. 2014)
3. **About us**

**Our Vision**

A mental health-positive culture at ETH and UZH,

where all students and academic workers at ETH and UZH participate in a mental-health normalized culture, supportive of each other's mental health, and know where to find mental help.

**What we offer**

MeWell offers a range of engaging activities focused on fighting mental health stigma in academia. Our events cover two main areas:

1. **Mental health awareness**
   Our mental health awareness program consists of educational activities which inform and teach our community about various aspects of mental health such as: promoting mental wellbeing, recognizing the signs and symptoms of poor mental health, and talks covering current research.

2. **Community outreach social events**
   Our community outreach events offer an opportunity for our community to directly interact with our team. This serves two main purposes: A) As a recruitment and team development program B) As a direct program to engage our community and potentially help redirect people to professional support organizations in the case of poor mental health.
4. **Academic review**

Scientific research has changed the view of rationality. While in previous times people were considered to be fully rational beings and rationality solely the result of thinking, research of the brain and psychology revealed a different reality. People are not fully rational and to be able to make rational decisions, the recognition of bodily sensations (aka: feelings) is essential (Damasio, 1994). Furthermore many biases and noise in human thinking have been found and are getting recognized not only in psychology but also economy (Kahneman, 2011). The idealization of the mind in our culture is therefore questionable. An (at least partly artificial) distinction between mind and body exists in our culture (Descartes, 17th century), which extends into an (artificial) distinction physical and mental health (Thibaut, 2018). But newer research shows that physical and mental health cannot be separated and both affect each other (culminating in the new discipline of psychosomatics; Thibaut, 2018). In other words the importance of mental health for health in general is now generally accepted (Prince et al., 2007).

Scientific studies also revealed the high prevalence of mental health disorders. Conservative estimates for annual and lifetime prevalence of mental health disorders are 1/6 and 1/3 people in the general population (OECD/EU, 2018). In the student population several studies found even higher prevalence of psychological distress and mental health disorders (Levecque et al., 2017; Evans et al., 2018; BFS, 2021). Students are a particularly relevant group for mental health interventions since the onset of mental health disorders is quite early in life. 50 % of all disorders occur by age 14 and by age 24, 75 % of all mental health disorders have developed (OECD, 2012). There is on average a gap of 12 years between the onset of mental health disorders and the first treatment thereof (OECD, 2012). The typical age of students is therefore an age when increased knowledge/treatment of mental health disorders are highly relevant to address already existing or developing mental health problems.

Although mental health disorders are very prevalent, only a small fraction of people in need of professional treatment of mental health disorders take advantage thereof. Studies found that only 1 out of 4 people with severe mental health disorders receive adequate treatment, i.e. 3 out of 4 people did not receive adequate treatment, and for moderate mental health disorders the treatment rate is even lower (Kohn et al., 2004; OECD, 2012). A study of young Swiss adults revealed a similar treatment gap. While 1 in 4 of all surveyed Swiss adults between 17-21 years of age showed symptoms of mental health disorders, only 1/5 of these 25 % received treatment (Werlen et al., 2020). The main reason for the high rates of missing or inadequate treatment of mental health disorders is stigmatization of mental health disorders (Barbato et al., 2016). Similar statistics hold for the general population in Switzerland. About 530'000 people in Switzerland receive professional treatment of mental health disorders each year.
(Schuler et al., 2020), a number that has been increasing steadily in the last 20 years by about 8’000 people each year. But much more people would actually need adequate treatment, 1’200’000 people would be in need of professional treatment of mental health disorders each year as has been modeled by Künzi et al. (2020), i.e. 670’000 persons more than are currently in treatment.

Mental health disorders have not only a high prevalence but also a severe impact on the quality of life. Mental health is the leading cause of disability in the European region and the third leading cause of overall disease burden (World Health Organisation, WHO, Fact sheet sustainable development goals, SDGs, target 3.4). This results in high economic costs for society. The economic burden for the European region has been assessed by the OECD/EU (2018) to be around 600 billion Euro per year. For Switzerland it has been estimated as 22 billion CHF per year (about 2750 CHF per year per inhabitant of Switzerland; Jäger et al., 2008; OECD/EU, 2018).

The high rates of undertreatment, the high burdens for affected individuals and for society in general have caused action by policymakers. The WHO, European Union (EU) and other Organisation for Economic Co-operation and Development (OECD) countries have established dedicated programs in the last decades to reduce stigma around mental health (e.g. WHO, 2008). While this has led to reduced suicide rates and increased acceptance of mental health and treatment of mental health disorders, the treatment gap remains large (OECD/EU, 2018). The United Nations (UN) therefore include mental health in their 2030 goals for sustainable development (SDGs) to ensure healthy lives and promote well-being at all ages (Target 3.4: ensure a reduction of mortality from non-communicable diseases and promote mental health). Mental health is considered not just an issue for the health sector because it is also related to equality and basic individual rights and there is no health without mental health (UN, SDGs 3).

A new view of mental health not only includes increased treatment of disorders but also having adequate knowledge of what can be done to prevent mental health disorders and promote wellbeing (Stewart-Brown, 2017). The full spectrum of mental health needs to be known to everyone, since everyone has a mental health state. This leads to two dimensions of the mental health of a person: the state of mental health and how well one deals with if or if there is treatment of a possible disorder. While for many mental health disorders treatments like psychotherapy work well and people can recover, for some mental health disorders only an improvement but no full recovery is possible (Stewart-Brown, 2017). But a well-managed disorder is better than an untreated one. Since stigmatization and tabooization of mental health are prevalent, far too many mental health disorders are not treated or not treated adequately. This causes unnecessary suffering and the stigmatization itself can cause people to feel even worse. The emotional burden by stigmatization has been called a “second disease” (Finzen, 2001).
The Covid-19 pandemic has also a substantial impact on mental health. While it has put mental health into public recognition it also creates a strong mental health burden. Studies in many countries (including Switzerland) found increased prevalence of symptoms of anxiety and depression during lockdown (de Quervain et al., 2020; Xiong et al., 2020, Passavanti et al., 2021). This further increases the need for better recognition and treatment of mental health disorders.

A further aspect of mental health is that there is a general need to improve the health of people with severe mental health disorders because they die 7-10 years younger than the general population (mainly due to increased physical health problems; Walker et al., 2015; Erlangsen et al., 2017). This is particularly critical when estimates indicate that one in three individuals experiences a mental disorder during their lifetime. Reasons next to suicide are inadequate attempts of self-treatment (smoking, alcohol abuse), reduced physical activity or misdiagnosis of physical health problems as mental health problems by health professionals (Firth et al., 2019). The key to treatment, is early intervention. It is actually much easier and much more feasible to prevent conditions of ill health from arising rather than trying to reverse the conditions after they have arisen. The society needs to be more proactive. We need to be aware that people with mental health disorders are at risk of physical health problems. Mental health and physical health are intrinsically linked, so any patient presenting with frequent somatic complaints requires a mental wellbeing assessment, while any patient with mental health problems needs a thorough physical check.

The literature on the cost-effectiveness of mental health interventions is still sparse (e.g. Schotanus-Dijkstra et al. 2018), but a recent review (Le et al., 2021) of existing studies found that most interventions analyzed were either cost-neutral or even cost-saving (considering only the direct costs of mental health treatments and no indirect costs like loss of productivity or costs in other parts of the social security system).
5. Our impact measurement approach

Theory of change:

PROBLEM:
Treatment gap of mental health disorders; lack of knowledge about prevention of mental health disorders and what is good for mental health; having no one to talk about mental health

SOLUTION:
Provide information and community

INPUTS:
Staff, time, funding, expertise

ACTIVITIES:
Awareness events, community events, website and social media, self-help group, brand building

OUTPUTS (OUR DATA):
Registrations and number of participants of events; surveys after each event; Website and social media statistics

OUTCOMES:
Increases knowledge about mental health, increased resilience, increased treatment rates

GOALS:
All students at universities in Zurich receive adequate treatment of mental health disorders (closing of treatment gap), “exercises” for mental health are as typical and common as for physical health, mental health is a normal topic of conversation, no more distinction between physical and mental health

→ 3 main social impact outcomes:

1) Increases knowledge about mental health: know what mental health disorders exist, how common are they, what are typical symptoms, how can they be treated, what can be done for prevention, how can others be helped

2) Increased resilience: increasing the possibilities to deal with hardships

3) Increased treatment rates: everyone with a mental health disorders needs to seek and receive adequate treatment
6. Social impact outcomes

Overview

HOW MUCH:
We have hosted over 80 events since our inception - engaging hundreds of people across three of the main Zürich universities as and have hosted professional guests (of which 64% were women) from Switzerland, Germany, France, UK, Greece, Poland, US, Canada, and India.

CONTRIBUTION:
Participants of our events give them overall a very high rating (4.3 out of 5.0). The content (4.4 out of 5.0) is relevant to them and they like the speakers (4.4 out of 5.0).

Selected respondent quotes:
“She gave enough space for questions, which was great.” “The very interesting talk and the exchange with other participants was very good!” “The moderator did a great job. Great mixture of engagement with the discussions and questions!”
About 200 respondents to the surveys after each of our events rated the relevance of the following topics to them:

Our audience is mostly (PhD/master/bachelor) students:
Increased knowledge

Our output in 2022:
7 talks (the heart of change, loneliness, mental health while living abroad, stigma of mental health disorders in movies, effects of humor, menstruation and social media&mental health) organized

WHAT:
Mental health encompasses not only mental health disorders but a full variety of mental health states from flourishing to several mental health disorders (called the mental health spectrum). MeWell aims to spread information about the whole mental health spectrum.
The field of positive psychology has grown in the last decades and it aims to improve the quality of life. A number of factors may contribute to happiness and subjective well-being. For example, social ties with a spouse, family, friends, colleagues, and wider networks; membership in clubs or social organizations; physical exercise, and the practice of meditation.
Next to knowing what is good for mental health it is also important to know how a deterioration of mental health, crisis or other hardships can be dealt with. Resilience has also received considerable attention in recent years and general knowledge about resilience should be available to everyone (see also our next social impact outcome).
Being able to recognize symptoms of mental health disorders in oneself and others is essential to increasing the treatment rates of them. It also needs to be known which treatments and services exist, how effective these treatments are and it can help to know how other people deal with them (see the last of our social impact outcomes).

WHO:
According to a representative survey of the adult Swiss population (Bühl, 2018) would 51% of Swiss adults need more knowledge about mental health disorders to be able to talk more openly about mental health. 27% would like to have campaigns that invite to talk about mental health and 21% would find it useful to hear about the experience of others. Only 8% do not need any further incentive to talk about mental health. Given this high demand for more information we assume that > 90% of students and employees at universities in Zurich will profit from increased mental health knowledge. These are more than 85,000 people.
FTE=Full Time Equivalent

HOW MUCH:
We have hosted 7 talks about general mental health topics. These attracted 215 participants.

CONTRIBUTION:
Participants of our increased knowledge events give them overall a very high rating (4.4 out of 5.0). The content (4.3 out of 5.0) are relevant to them and they like the speakers (4.3 out of 5.0) and find the events engaging (4.3 out of 5.0).
Selected respondent quotes:
“Thanks for encouraging people to interact! It was also great to hear in the beginning that many people are lonely (no one needs to be ashamed) and that we are in control of it.”
“It was nice to hear different people talking about their personal experiences with failure and giving advice on how to deal with it.”
“The very interesting talk and the exchange with other participants was very good.” “The speaker did a great job. The examples, the exercises and the interaction made the 1.5 hours just fly by.”

RISK:
Given the lack of knowledge, we assume a very low risk that we distribute knowledge that is already known to people. The effectiveness of other campaigns/interventions has shown that such campaigns/interventions are cost effective or outweigh their costs in general.

MONETARY VALUE OF SOCIAL IMPACT:
- Direct healthcare costs of mental health issues in CH per year (Schuler et al., 2016):
  1798 CHF (value for the year 2015)
- Estimate of people improving by increased knowledge:
  215 x 5-20% x 19-22% = 5.5 people (2.0 – 9.5)
- Assumption that increased knowledge reduces healthcare needs by three months

**Mid-point estimate of monetary value: 2’475 CHF**
Range: 925 – 4’250 CHF

It is important to note that this cost calculation does not include the magnitude of indirect costs associated with these illnesses (i.e. to lost personal and economic income).

ASSESSMENT:
Given to overly positive feedback to our awareness events we assess our engagement to classify as “Contribute to solutions”.
CASE STUDY: Menstruation and Mental Health – by Dr. Isolde Semm & Katharina Dinzen

One of the great pleasures of being a Gynecologist is to be at the forefront of women's health, feminine issues, and the female “Da sein”. – Dr. Isolde Semm

Our team at MeWell is very proud to have organized a talk with Dr. Isolde Semm and Katharina Dinzen to broaden our knowledge about the influence of menstruation on the hormonal regulation of the body.

Dr. Isolde O'Neill Semm is an internationally recognized Obstetrician-Gynecologist currently based in Zürich, Switzerland and Katharina Dinzen is a certified teacher for fertility education and natural family planning (NFP) and founder of Ovulista. Ovulista offers online courses and digital products for menstrual health and fertility education. 90 participants joined this event. It was also recorded and uploaded on youtube:

The audience was very positive about speaker and event:
“The moderator did a great job. Great mixture of engagement with discussants and questions”
Increased resilience

Our output in 2022:
6 talks (pursuit of happiness, adult bullying, comparison phenomenon, mental health in industry, exam anxiety, sexual abuse) organized
2 interactive awareness events (CCL booth and mental health pavilion) organized
4 Community events (game nights, hike, BBQ's) organized

WHAT:
It is important to know how a deterioration of mental health, crisis or other hardships can be dealt with. Resilience has received considerable attention in recent years and general knowledge about resilience should be available to everyone. E.g. the benefits of growth mindset (intelligence and talents can develop over time) over a fixed mindset (they are fixed) (https://psycnet.apa.org/record/2006-08575-000), that it's more beneficial to praise process than talents or natural abilities (https://psycnet.apa.org/record/1999-05027-021), that failure can be considered a learning experience or that mental health states change over time.

WHO:
Since mental health states change over time and hardships can occur to anyone, resilience training will be beneficial to everyone. Several studies found increased rates of symptoms of common mental health disorders in graduate students including an international survey in 26 countries finding that 41%/39% of graduate students have moderate to severe symptoms of anxiety/depression (Evans et al., 2018). Academics have been found to be among the occupational groups with the highest levels of common mental disorders (Guthrie et al., 2017). Given this high prevalence of psychological distress in the academic world, we assume that most students and employees at universities in Zurich will profit from increased resilience.

HOW MUCH:
We have hosted 6 talks about topics related to increasing resilience and 2 interactive awareness events. These attracted 1555 participants and 164 people watched the recordings of these events (2 events could be recorded in agreement with the speakers and participants). Community events like evening walks/hikes and game nights were also organized.

CONTRIBUTION:
Participants of our increased resilience events give them overall a very high rating (4.2 out of 5.0). The content (4.6 out of 5.0) are relevant to them and they particularly like the speakers (4.3 out of 5.0) and find the events engaging (4.3 out of 5.0).
Selected respondent quotes:
“I’ve never heard about any events regarding mental well-being at ETH and I think it’s very important.”
“…is really interesting and sadly not talked about much.”
“I was really satisfied with the workshops, great slides, very good explanations and I loved the visualization of the exam stress and the happy place.”

RISK:
Given the lack of knowledge, we assume a very low risk that we distribute knowledge that is already known to people. The effectiveness of other campaigns/interventions has shown that such campaigns/interventions are cost effective or outweigh their costs in general.

MONETARY VALUE OF SOCIAL IMPACT:
- Direct healthcare costs of mental health issues in CH per year (Schuler et al., 2016):
  1798 CHF (year 2015 average costs)
- Estimate of people improving by increased resilience:
  1768 x 5-20% x 19-22% = 45.3 people (16.8 – 77.8)
- Assumption that increased resilience reduces healthcare needs by three months

Mid-point estimate of monetary value: 20'375 CHF
Range: 7'550 – 34'975 CHF
It is important to note that this cost calculation does not include the magnitude of indirect costs associated with these illnesses (i.e. to lost personal and economic income).

**ASSESSMENT:**
Given to overly positive feedback to our awareness and community events we assess our engagement to classify as “Contribute to solutions”.

**CASE STUDY:**
CCL-week at UZH
On the 29.04.2022 the Celebrate Campus Life (CCL) took place at the UZH. Four of our Mewell members were present at the booth and were actively talking to anyone passing by. People were encouraged to put up post-its about self-comparison. Parallel to this we organized a talk exploring the comparison phenomenon which was organized together with Mindful[L]. The speaker in this talk was Rita Girzone. She studied Human Development and Clinical Social Work. Currently she is working as a counselor at Elternnotruf and gives courses in Mindful Self-Compassion.

The comparison phenomenon describes the fluctuation between feeling inferior and superior to others. This inhibits us from being happy with ourselves and connecting with others. In total 37 people were present and of the 15 who answered the survey the satisfaction score was very high. Some of the comments were:
“Rita was very engaging and able to share a lot of great content”.
“I liked the honest talk and listening to someone with a lot of knowledge about the topic. I learned new things I am now trying to build into habits!”
“It was really good, I can’t think of anything that could be improved.”

![Mewell booth](image1)
This is from the CCL-week at UZH (Celebrate Campus Life)
CASE STUDY:

*Bonfire Community event:* In 2022 we announced another fun Mewell community event! “Schlangenbrot”, marshmallows, snacks, funny games, and the pleasure to enjoy the possibility to meet people again after these “Corona years”. In total 49 people joined the community events.

Bonfire Event (June 2022)

*Hike (November 2022)*

*Mental Health Month:* We hosted a very exciting Mental Health program consisting of 3 awareness and 1 interactive awareness event occurring during the month of October. We thank Gemeinnützige Gesellschaft des Kanton Zürich for sponsoring our Mental Health Month with 3345 CHF.

Alcohol and substance abuse recording (youtube), this took place during the mental health month.

Menstruation and mental health recording (youtube), this took place during the mental health month.
Mental Health Pavilion
This was organized in collaboration with Mindful[LI] and Nightline. It took place during mental health month.

Suicide prevention event that took place during mental health month.
**Increased treatment rates**

**Our output in 2022:**
- 3 talks (suicide prevention and recovery, avoid and beat eating disorder, alcohol and substance abuse) organized
- 700 website visitors per month (1000 visitors in October – mental health month)
- New design of website

**WHAT:**
Mental health disorders are common but many people do not receive adequate treatment for them. Many people only search for help when their mental health problems start to affect their performance (Michel et al., 2018). Being able to recognize symptoms of mental health disorders in oneself and others is essential to increasing the treatment rates of them. It also needs to be known which treatments and services exist, how effective these treatments are and knowing how other people deal with mental illness can help was well.

**WHO:**
The lifetime prevalence of mental health disorders is at least 1/3, i.e. at least 1 in 3 people experience mental illness in their lives. The annual prevalence is at least 1/6, i.e. at least 1 in 6 persons is suffering every year from one or more mental health disorders. The rate of people not receiving treatment is huge, 30 - 90 % depending on age and diagnosis (OECD, 2012; Kohn et al., 2005, Schuler et al., 2020). 1 in 20 people per year have one or more severe mental health disorder (OECD/EU, 2018) but only 3 out of 4 persons with severe mental health disorders receive adequate treatment (Hewlett and Moran, 2014). The OBSAN report 2020 for mental health in Switzerland (Schuler et al., 2020) reports a recent estimate of 7.8% of the population in Switzerland have an unmet need for treatment of mental health disorders. A nationwide, representative survey for Switzerland revealed that ~25 % of young adults screen positive for at least one common mental health disorder and out of those less than 1 in 5 utilize mental health services. The mental disorder prevalence in surveys may not accurately represent the actual need for treatment. Künzi et al. (2020) modeled that ~14 % of the Swiss population need professional mental health treatment each year. We estimate therefore that between 4 % (5 % x 3/4) to 10 % (14 % x (1-1/5)) of students at universities in Zurich (i.e. **3'000 to 7'600 students**) out of a total of more than 73’000 students) would benefit from utilizing professional mental health services but do not do so yet and similar estimates apply for employees at universities in Zurich. Applying our methodology to estimate how many students currently receive adequate treatment at ETH Zurich and University Zurich, the target group of the psychological counseling service Zurich (PBS), gives a range of 625 to 1400 students receiving professional treatment per year. PBS reports that 670 of their clients received psychotherapy or psychiatric treatment (mostly externally from PBS since the
resources of PBS are limited; PBS, 2019). The good agreement between our estimate and the actual value corroborates our estimates.

HOW MUCH:
We have hosted 3 talks about topics related to mental health disorders and treatment thereof. These attracted 76 participants and 36 people watched the recordings of these events (2 events could be recorded in agreement with the speaker and participants). We also provide information about mental health in general, common mental health disorders and services available to students and employees at universities in Zurich on our website which has 700 visitors each month.

CONTRIBUTION:
Participants of our increased treatment rates events give them overall a very high rating (4.6 out of 5.0). The content (4.25 out of 5.0) are relevant to them and they like the speakers (4.4 out of 5.0) and find the events engaging (4.1 out of 5.0).
Selected respondent quotes:

“I liked that the exercises were sprinkled between the theoretical parts, instead of one massive block of each theory and exercise.”

“Interactions forced me to think about some things.”

RISK:
Given the large gap in treatment, we assume a low risk that we distribute knowledge to people who already are in adequate treatment.

MONETARY VALUE OF SOCIAL IMPACT

● Direct healthcare costs of mental health issues in CH per year (Schuler et al., 2016):
  1798 CHF (year 2015 average costs)

● Estimate of people improving by increased treatment rates:
  76 x 5-20% x 19-22% = 2.9 people (1.1 – 4.9)

● Assumption that increased early treatment reduces healthcare needs by one year

Mid-point estimate of monetary value: 1’300 CHF

Range: 475 – 2’225 CHF

It is important to note that this cost calculation does not include the magnitude of indirect costs associated with these illnesses (i.e. to lost personal and economic
income). Note further that visitors of the information provided on our website about mental health information or services provides for students and university employees in Zurich are not included in this estimate.

**ASSESSMENT:**
Given to overly positive feedback to our awareness events we assess our engagement to classify as “Benefit people & planet”.

**CASE STUDY:**
**Suicide prevention and recovery – by Dr. Nadja Razavi**
MeWell organized this event with Dr. phil. Nadja Razavi who is a senior psychologist in the crisis intervention ward in the Regionalspital Emmental since 2021.
Stress, changes, painful events and other strains can cause people to experience a mental crisis. They are common and can affect anyone, regardless of age, education, profession, origin, and social status. In this event we got to know a short overview about the epidemiology of suicide and suicide attempts in Switzerland and what currently is being done to prevent people to commit suicide. Furthermore Dr. Nadja Razavi gave us a short introduction on how suicidality can evolve, how psychiatrists and psychotherapists assess suicidality and what options you have, when someone in your environment shows signs of suicidality. Finally, one of the most effective “post-suicide attempt” treatments was presented (ASSIP). In the end there was an open question and answer round. 41 participants joined this event. Due to the sensitive nature of the topic no recording and after-event survey was conducted.
7. **Our association**

MeWell is an association located in Zurich which abides by the Swiss Civil Code and is tax exempt.

Our structure consists of a board and active volunteers. Our board is further subdivided into committees: PR, Events and Funding & Administration. The PR team is further divided into the design committee and the promotion committee. The Events team is further divided into the community committee and the events committee. Our leadership and management is directed by these committee heads and our President/VP who preside over the committees and board respectively. Our treasurer acts as an independent evaluator on budget. Operational decisions are ratified by the board and general decisions by the general assembly.
8. **Finances**

- We had expenses and revenues around 4.3k CHF in 2022
- Expenses were mostly for awareness events (70 %) and event advertising (30 %); administration costs are low (2 %)
- Revenues were from Gemeinnützige Gesellschaft des Kanton Zürich (GGKZ), VSUZH, SPH, Prävention und Gesundheitsförderung Kanton Zürich (from2021), AVETH, VSETH, private donations
- We have an accounting profit of 2’118.05 CHF in 2022 (including 614.50 CHF profit from 2021 received in 2022)
## Expenses/Revenues 2022

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<thead>
<tr>
<th>Expenses (CHF)</th>
<th>Revenues (CHF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication</td>
<td>Donations</td>
</tr>
<tr>
<td>Advertising/Marketing</td>
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<tr>
<td></td>
<td>Private 155.76</td>
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<tr>
<td>Website hosting</td>
<td>58.80</td>
</tr>
<tr>
<td></td>
<td>Sponsors</td>
</tr>
<tr>
<td>Events</td>
<td>GGKZ 3’345.00</td>
</tr>
<tr>
<td>Awareness events</td>
<td>2’166.08</td>
</tr>
<tr>
<td></td>
<td>VSUZH(3) 963.97</td>
</tr>
<tr>
<td>Apéros</td>
<td>690.80</td>
</tr>
<tr>
<td></td>
<td>SPH 798.26</td>
</tr>
<tr>
<td>Community events</td>
<td>117.15</td>
</tr>
<tr>
<td></td>
<td>Kanton Zürich(2) 614.50</td>
</tr>
<tr>
<td>Administration</td>
<td>AVETH 303.20</td>
</tr>
<tr>
<td>Bank account/Notion</td>
<td>106.80</td>
</tr>
<tr>
<td></td>
<td>VSETH 209.75</td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td><strong>4’272.39</strong></td>
</tr>
<tr>
<td><strong>Total revenues</strong></td>
<td><strong>6’390.44</strong></td>
</tr>
</tbody>
</table>

1) Collaboration Mindful[L]

2) Revenue from 2021 Annual profit 2’118.05
Balance sheet per 31\textsuperscript{st} December 2022

<table>
<thead>
<tr>
<th>Assets (CHF)</th>
<th>Liabilities (CHF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bank account</td>
<td>2’494.07</td>
</tr>
<tr>
<td></td>
<td>Not yet reimbursed costs</td>
</tr>
<tr>
<td>Receivables</td>
<td>209.75</td>
</tr>
<tr>
<td></td>
<td>MeWell assets\textsuperscript{(1)}</td>
</tr>
<tr>
<td></td>
<td>Annual profit 2022</td>
</tr>
<tr>
<td>Total assets</td>
<td>2’703.82</td>
</tr>
<tr>
<td></td>
<td>Total liabilities</td>
</tr>
</tbody>
</table>

\textsuperscript{(1)} Including the annual profit of 2022 the MeWell assets at the end of 2022 are: 2’400.62 CHF

(Note that assets and liabilities must be equal at the end of the year)
Revision Report

Bericht der Rechnungsrevisoren über die Vereinsrechnung an die ordentliche Generalversammlung des Vereins MeWell, Zürich


Ich habe die Rechnung des Vereins MeWell von 2022 mit Abschluss per 31.12.2022 geprüft. Die Rechnung schliesst bei Aufwand von Fr. 4,272.39 und Ertrag von Fr. 6,390.44 mit einem Gewinn von Fr. 2,118.05.


Ich beantrage der Mitgliederversammlung, die Rechnung 2022 in der vorliegenden Form zu genehmigen und dem Kassier, David Neubauer, und dem Vorstand Décharge zu erteilen.

Für die Jahresrechnung ist der Vorstand verantwortlich, meine Aufgabe besteht darin, diese zu prüfen. Ich bestätige, dass ich die Anforderungen hinsichtlich Befähigung und Unabhängigkeit erfülle.

Zürich, 22.01.2023

Der Rechnungsrevisor

Jonathan Clemens

Bellage Vereinsrechnung
9. Our partners

Currently we are supported directly by the Gemeinnützige Gesellschaft des Kanton Zürich, VSUZH, SPH, AVETH, VSETH, our collaborators, and financial donations of our members. We are also supported with materials from “Wie Geht’s Dir?” Campaign. We are grateful for our collaborators and supporters who support us with coaching, trainings, media outreach, fee waivers, and mental health awareness campaign materials.

Our collaborators and/or partners over the past years include: VSETH, AVETH, VSUZH, Mindful[L], Nightline, PBS, Prävention und Gesundheitsförderung des Kanton Zürich, Gemeinnützige Gesellschaft des Kanton Zürich, PPA-PSI, Pro mente sana, PhD Balance, Findyourway coaching, Brainability, ensa, Student Sustainability Commission, Student minds project, MADNESST, PWC, Graduate, Consulting Club, NCCR Catalysis, Accenture, Schweizer Rotes Kreuz, Democrats abroad Switzerland, LIMES, phimale, CSNOW, SWISH, WiNS.
10. People behind the impact

Tiyam Nikray
President

Tiara Greber
Vice-President

David Neubauer
Treasurer

Yue Yu
Events Lead

Laura Gabriel
Events Lead

Anja Wullschleger
PR Lead

Gianluca Ielpo
PR Lead

Mohammad Nouraddini
PR/Events Committee
Tülay Karakulak
Events Committee

Lou Troxler
Events Committee

Naima Ferrante
Events Committee

Katarzyna Kita
Events Committee

Jasper Dekoninck
Events Committee

Shao Zhou
Events Committee
Stella Harper
Finance Committee

Silvan Kessler
Finance Committee

Alyssa Moody
Finance Committee

Ghjulia Sialelli
Active Member

Shijie Hu
Active Member

Jonathan Clemens
Active Member
11. Key learnings & next steps

Conclusion

In general, the people who filled out the survey were very happy with the quality of the talks. Some of their wishes were the following. Several people said it was a shame that there wasn’t a big audience present. Some of the talks consisted of only around 20 people. More advertisement or possible collaborations with other commissions could partly solve this problem. The website statistics show that during the mental health month, when more advertisement (including physical posters) is done, in October there were more viewers.

Additionally, we improved the design of our website in August and at the beginning of the semester in September there is always more advertisement during the lectures. For 2023 we plan therefore to use more physical posters at ETH, Universität Zürich and ZHAW.

Some of the respondents wished for more possibilities to connect after the event. An apero after events makes this challenge easier. For 2023 we will try to find more sponsors for the aperos. Another idea would be the monthly book club that was mentioned several times in the surveys, we are currently working on this idea for year 2023. This would build an even stronger connection between the people, which consist of more students and fewer PhD students than last year. A lot of specific wishes for new topics were mentioned in the surveys. Hopefully we will be able to fulfill a large majority of them.

We are in the process of recruiting more members for our PR, events, and funding & administration committees to spread the high workload.

For 2023, we continue with our proved format for event organizing, having the events designed around a monthly calendar (see image below) where we try to address a different mental health topic. In particular, we plan to host each month an invited professional guest who can talk more at length on the topic and can offer some insights or conclusions. In addition, community events and discussion will be organized, which will hopefully generally be possible in-person. We are also looking forward to the next edition of our Mental Health Month in 2023!

In 2023 we also look forward towards building a stronger funding relationship with some of our collaborators and to establish new partnerships with foundations in Switzerland.

We are grateful to announce: We could sign a contract with VSETH (ETH student representative body) which provide us from 2023 on with an annual stipend of 1000.- CHF for events and activities.
12. References


OECD (2012), Sick on the Job?: Myths and Realities about Mental Health and Work. https://doi.org/10.1787/9789264124523-en


