



POLICY PAPER

Health and Wellness

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Introduction

Maintaining health and wellness is paramount to academic success, influencing students' abilities to attend classes regularly, fulfill course requirements, and uphold active engagement throughout the duration of their studies. More than the absence of disease, student health requires a holistic examination of mind, body, and spirit to tackle issues that may contribute to distress or illness outside the realm of individual biology.

The goals of the MSU are to have student needs reflected in the policies and procedures in place regarding campus life as they pertain to health and wellness in order to help students achieve their post-secondary education goals. With growing concerns surrounding access to and quality of care within the university setting, the Ontario government is committed to addressing student health needs by providing an increase in funding to accommodate current resource shortages. Given the new wave of financial support, the MSU intends to ensure that student voices are heard and funding is allocated to areas of highest need.

The MSU's Health Services Review exposed shortfalls in spheres of mental health support, Student Wellness Centre (SWC) services, and academic accommodations, revealing unanswered calls for change where unmet demands are prevalent. Students want timely access to formal care, better integration of services both on and off campus, and academic accommodations that adequately reflect specific health needs. Through consideration of student concerns, current services and range of care, constructive action can be taken to promote a healthy, equitable campus.

This policy seeks to alleviate barriers to care by conducting effective health promotion strategies which address the social determinants of health and reduce health inequalities among students. Through the following discussions of interconnected domains of student life which contribute to health, the MSU hopes to improve the student experience by advocating for urgent and necessary health services. Students require a campus committed to supporting their health needs, whereby resources are dedicated to improving health as well as illness prevention. Through collaborative efforts among university stakeholders, McMaster can flourish as a happy, health-conscious campus. By promoting healthy lifestyle choices, encouraging students to seek help without fear of stigma or being turned away, and upholding values of holistic health, students will thrive in an environment conducive to success in which they are able to perform at their highest potential.

Health Promotion First Year Transition

Principle: Students should have easy access to relevant resources regarding university transitions and how health can play into these transitions.

Concern: First year acts as a large transition for all students, yet on-campus and off-campus students have disproportionate access to first year transition opportunities, events, support, and resources.

Recommendation: The Society of Off-Campus Students (SOCS) and the Off-Campus Resource Centre should work with Residence Life to develop and endorse health promotion focused events specifically targeted to first year students living off-campus.

Transitioning into university is a big challenge for all students. Increased relevant support, programs, resources, and information offered by McMaster would enhance the transition and promote the health and wellbeing of first year students. Jack.org, a charity which advocates for young adults' mental health, has described the first year transition as "one of the most exhilarating and also the most traumatic and dangerous, experiences of your life. It's also the time that the onset of mental health problems typically happens."¹ Providing easily accessible, informative materials regarding university transitions and how health can play into these transitions is the first step in promoting health of first year students.

Not all first year students have equal access to support from the McMaster Community, though. Students on-campus receive more information than off-campus students through a variety of transition opportunities, events, support, and resources from McMaster's Residence Life program. Some examples are "stress busters" which during peak stress times, intramural teams that are financially supported by the residence program, and informative sessions that are only open for students in residence due to the proximity factor. Despite all of these great programs, the off-campus students do not share a similar first year transition experience. They are often unaware of these opportunities due to a lack of outreach by the school.

SOCS is a group with the goal of engaging all students by encouraging involvement in various programs offered by them. There are several programs and opportunities occurring each month for students on campus, though there are no programs being offered by SOCS. On their event calendar, no programs, events, or opportunities are shared with students. Evidently, the off-campus students do not have equal opportunity for a healthy first year transition experience.

To close the gaps between first year students who live on campus and those who live off campus, Housing & Conference Services of McMaster University should connect the Residence Life program with the Off Campus Resource Centre to improve the

¹ The Globe and Mail. August 16, 2017. Accessed October 10, 2017.

experiences of all students. Providing the same programs to all students is one method to reduce differential access. In addition, promoting and developing the new pilot program, in which the Off-Campus Community Advisor will be working with 20–30 off-campus students, will connect all students together and help with forming a community.² Additional consideration should be made regarding the increasing number of international students attending McMaster³, to effectively ensure their needs are met. McMaster University's International Student Services (ISS) should provide more variety and effective services related to health and wellbeing. Currently, ISS does not offer any health-related support. Collaboration between ISS and other health promoting support services would strongly improve the quality of the service offered and improve the wellbeing of international students.

With an established, connected community among on and off-campus students, the Off-Campus Resource Centre should offer health related events specifically targeted to off-campus students to ensure that all first year students have appropriate and fair access to support their health and wellbeing.

Continued Engagement for Upper Years

Principle: All students deserve access to high quality and accessible health information and resources as a part of the McMaster Community.

Concern: Leaving residence and living off campus is another major transition for students and there are inadequate health related resources for students undergoing this transition.

Recommendations: There should be integration between upper year students and SOCS in which useful and informative resources regarding the transition to off-campus housing are provided.

Students who lived on campus had a great amount of access to different resources and support throughout their first year. However, regardless of the fact that second year students are still a part of the McMaster Community, a disconnect occurs when students move off campus where they are not provided with resources that would help with the challenging transition of life in a new and unfamiliar environment. For many, second year is the time when students become first-time renters. Students living off campus have many stress factors, such as family, roommates, and housing problems.⁴ As McMaster students, all deserve access to high quality and accessible health

² Office of Public Relations. "New Off-campus student integration strategy. *Daily News*, January 27, 2017. Accessed October 10, 2017.

³ McMaster University. "McMaster University Fact Book 2015–2016." Accessed October 29, 2017.

⁴ Horvath, Alicia J. "College Living Environments and Stress: Commuters Versus On-Campus Residency." *Indiana University South Bend Undergraduate Research Journal*: 81. Accessed October 9, 2017.

information and resources that will enhance with the transition into the new environment and lifestyle.

The university has provided a variety of support to first year students for their transition into university. However, upper year students are challenged to adjust to new types of environments, yet they are given inadequate health related resources. They require more resources related to health to compensate for their additional stressors. Furthermore, upper year students are less likely to engage in extracurriculars compared to students living on campus. Adequate health related support and resources can help upper year students adjust to their new environments and undergo their transitions more smoothly.

Regardless of the support students receive in first year, the lack of health-related resources will lead to poor promotion of the wellbeing of upper year students if the university stops their engagement after first year. Upper year students should be given more opportunities to engage with campus health initiatives. Interacting with SOCS will help them form a stronger community with one another. Specifically, events for second year students regarding the transition to the off-campus environment is necessary. These recommendations will support students in ways which will enhance their health and wellbeing.

Resources

Principle: All students deserve access to high quality and accessible health information and resources as a part of the McMaster Community.

Concern: Many students feel as if the existing pamphlets and resources are insufficient, out of date, or ignorant of intersectional identities.

Concern: Student's have little awareness of the SWELL and SWC services.

Recommendation: The SWC and the Student Wellness Education Lower Lounge (SWELL) should improve the information and the content on their website to provide more relevance to school events and topics related to students' daily lives.

Recommendation: The SWC and the SWELL should re-evaluate physical resources.

Recommendation: There should be no information offered within a university space that is not also available easily online.

Recommendation: The SWELL should encourage distribution of informational materials produced by student services and groups.

Recommendation: The SWC and the SWELL should improve the information and the content on their website and social media pages.

Having access to relevant, timely, and accessible information is a critical aspect of promoting health and wellbeing among students within the McMaster Community. McMaster is committed to the importance of health promotion through the signing of the Okanagan charter which has two calls to action, the first being that higher

education institutions will “embed health into all aspects of campus culture, across the administration, operations and academic mandates.”^{5,6} Health promotion and access to information ranging from safe(r) sex, nutrition, healthy relationships, physical activity, mental health and illness and more are all essential to making informed choices regarding one’s health. Due to its importance, all students deserve access to high quality and accessible health information and resources as a part of the McMaster community.

Despite this mutually recognized importance, the reality for many students is that they lack access to quality health promotion. The value of these pamphlets to students with intersectional identities has been previously discussed in the MSU’s Gender and Sexual Diversity Policy Paper, with the summary that “overall students have found most of the information presented to be offensive, insufficient, out of date, and/or ignorant of intersectional identities.”⁷ Beyond concerns related to specific identities there are generalized concerns about the information being provided in pamphlets and brochures. Existing pamphlets are largely informational, focusing on statistics of prevalence and rarely provide information regarding next steps or community specific resources. For example, if a student was concerned about HIV prevention, an ideal resource would normalize the experience of worry, provide information on safe(r) sex and harm reduction, and would go over or link to Hamilton and commuter region specific resources where testing (both rapid and combined antigen/antibody) and relevant medications like PEP and PrEP can be prescribed. This level of follow of detail is essential in allowing students to make autonomous and informed choices regarding their personal health and wellbeing, however it is lacking in the majority of resources currently available to students.

To combat these concerns, the SWC and SWELL should conduct a wide scale evaluation and needs assessment of the literature and resources available both in their physical locations but also on their respective websites and social media accounts. This evaluation should consider the quality and relevance of information provided. Additionally, the relevance of information presented to those seeking further action or next steps should be provided. Wherever possible, referrals in the Hamilton or commuter areas should be provided. Furthermore, resources relating to mental illness and disability should overview the role of Student Accessibility Services in navigating accommodations.⁸ Additionally, as many students feel more comfortable seeking out health information online anonymously, all information available within the SWC and SWELL should also be available online. Lastly, many student groups on campus produce relevant resources for specific identity groups that relate to health. These resources are often phrased in more student friendly language, use more relatable experiences, or offer more comprehension of the impact of identity on health. As a result, the SWELL should connect with relevant MSU peer support services when

⁵ McMaster Answers Global Call to Promote Health of People, Places, Planet | McMaster Daily News” n.d.

⁶ Okanagan Charter: An International Charter for Health Promoting Universities and Colleges (2015).

⁷ OUSA Health and Wellness Policy Paper.

⁸ Ontario College Health Association. “Towards a comprehensive mental health strategy: The crucial role of colleges and universities as partners” Retrieved July 11 (2009): 2012.

conducting their resource review and should encourage distribution of informational materials produced by student services and groups.

Health promotion goes beyond physical resources as well and the SWELL offers a wide variety of wellness oriented programming and services. However, many students are unaware of existing resources and services available. Without this awareness, students lack access to the information offered.

Many students are unaware of the services and programming offered through the SWELL and as a result are missing out on opportunities that could be relevant and helpful to them. Additionally, there is a significantly low engagement rate with their social media. Table 1 overviews Social media engagement on the shared Facebook page between the SWELL and the SWC from August 26th to October 5th this year. Despite having over 1300 page likes and followers as of October 30th, 2017, the page's most popular post in the time frame garnered just 25 likes. Social media represents a valuable opportunity to conduct health promotion and distribute resources and information regarding health to a wide audience. Investing in social media strategy and page content could better reach out to students both regarding awareness of services offered but also as a distribution mechanism of health-related resources and information.

Table 1: McMaster Student Wellness Centre Facebook Page Engagement

		Interactions (reactions, like, love etc.)
August 26th	Post regarding Ways to Wellness Campaign	1
August 28th	Post regarding Ways to Wellness Campaign – linking to MSU service pages	8
August 30th	Food for thought McMaster post Share	0
August 30th	Ways to Wellness MSU BoD photo	4
August 31st	Ways to Wellness Video	5
September 8th	Food for thought McMaster post Share	1
September 10th	Mindfulness Mondays post	10 +1 comment
September 11th	W.I.N.D post	23+ 2 comments
September 13th	NGen Youth Centre and St Joe's YWC at Rainbow Prom 2017 – SAGE Fundraiser! share	0 +2 shares
September 18th	Breathe Easy- smoke free campus launch	25 + 1 share
September 18th	Wellness Skills Programs for Fall Term 2017	1

September 19th	Stress less post	0
September 19th	Yoga and Mindfulness Group – Spaces still available!!	1
September 22nd	Free Fruit Friday	6
September 22nd	FREE- safeTALK (suicide alertness) session !	10
September 25th	SWELL Unplugged post	3
September 26th	Food for thought McMaster post Share	8 +1 comment
September 27th	W.I.N.D post	2 +1 share
September 29th	Consent is: HOCO post	4
October 2nd	HPV Prevention Week!	0
October 3rd	Mental Illness Awareness Week	3
October 4th	SWELL Unplugged and WIND (Walk in Nature Days) post	3
October 4th	SWELL Unplugged post	5
October 5th	An Introductory Self-Defense Workshop for Trans-Identified Women post	3

On and Off Campus Integration

Principle: All students should have access to high quality and accessible health services regardless of their insurance coverage, social identities, or location.

Principle: The SWC should continually support all students who pay for it's operations.

Concern: The location of a referred service can have negative effects on a student's ability to access sufficient care.

Concern: The SWC doesn't have the necessary knowledge to adequately refer services located outside of the Hamilton area.

Concern: Services that are not covered by the Ontario Health Insurance Plan (OHIP), University Health Insurance Plan (UHIP), or the MSU Health and Dental Plan pose financial barriers to students and are therefore not widely accessible.

Concern: Students who currently access referrals can feel isolated from the SWC and feel as if they are no longer able to use its services once they have been referred.

Concern: Students may have negative experiences with referred services.

Recommendation: The SWC should provide information regarding the transportation to popular referrals.

Recommendation: The SWC should be able to provide high quality referral options to students that are located in high commuter regions.

Recommendation: The SWC should provide a variety of referral options including public and privately funded services.

Recommendation: The affordability of a referral should be included when provided to a student.

Recommendation: SWC should have the capacity and ability to acts a primary care point for all students who pay for its operations.

Recommendation: The SWC should implement service feedback system to collect knowledge on students experiences with a referral and make changes to future referrals.

McMaster and its students are a vibrant part of the Hamilton community. Students live their lives both on and off campus and their health care should reflect that. McMaster hosts a diverse range of students and community members each with unique needs and as a result unique challenges, requiring a person-specific approach to health care. Because of this, all students should have access to high quality and accessible health services regardless of their insurance coverage, social identities, or location. For most students, the SWC acts as one of the key providers of essential care and students pay \$415.89 every year in a student service fee a significant portion of which is distributed to the Student Wellness Centre. As such, the SWC should continually support all students who pay for it's operations, in a way that's reflective of prioritizing student needs and feedback in their care services.

Students at McMaster generally have few transportation options when travelling off campus. All full-time undergraduate and graduate students hold a 12-month, unlimited ride bus pass with the Hamilton Street Railway (HSR), as they automatically pay the HSR ancillary fee on their student accounts with tuition.⁹ Transit, therefore, is likely the mode of transport to be used by students at McMaster to access off-campus health resources. However, many students are not residents of Hamilton, and may not have a comprehensive knowledge of how to get around the city. The current method of referrals does not provide students with detailed direction that caters to this need. This means that the location of a referred service can have negative effects on a student's ability to access sufficient care, as little direction or aid is given in actually guiding the student to these facilities. For students who have access to a car, things like finding affordable parking or the best routes to take are also not currently provided or easily accessible. It can also be especially difficult for students who want to keep their diagnosis private to ask for other means of assistance in finding these locations outside of their SWC physician.

Looking outside of the Hamilton area, the location of a referral still has large impacts on its accessibility to a student. Commuter students and other students who go to their family's home, may be better served by a referral in that city as opposed to the Hamilton area. This has a particular impact for students who will not be in the Hamilton area over the summer term. Despite this importance, students are concerned that the SWC does not have the appropriate knowledge to refer to services in large commuter regions. The added transit costs and/or travel time may force students to miss and or cancel appointments with their service referral, negatively impacting their quality of care.

To alleviate stress and make referrals more accessible to students, the SWC should provide information regarding the transportation to popular referrals. For instance, blood testing services are needed for most prescription-necessary mental health consultations, and many physical health diagnosis confirmations. The SWC does not provide this key service, meaning students have to travel to blood testing centres far from campus which have limited hours. The SWC should provide a map, directions, parking instructions or recommended bus routes, and hours of operation. They should also offer to print relevant information in office to accommodate those without a printer at home, or e-mail these instructions so that students can access it at their leisure. Furthermore, the SWC should build upon their referrals so that students in commuter regions have equal access to care. The SWC should be able to provide high quality referral options to students that are located in high commuter regions.

The University Health Insurance Plan (UHIP), as discussed in the International Students MSU Policy, is a private health insurance plan that provides coverage of basic health care services to international students, and is a substitute to OHIP for domestic students. Unfortunately, the current UHIP does not meet the standard care afforded to domestic students. For international students, being referred out to the community increases their barriers to health care. A conversation with the clinical nurse manager of the Student Wellness Centre, Cathy Jager, revealed the definite lack of community

⁹ McMaster Students Union. 2017. "The HSR U-Pass PRESTO Card Is Available For Pick-Up August 19 Inside The Campus Store". *Msumcmaster.Ca*.
<https://www.msumcmaster.ca/posts/765>.

partners to assist international students.¹⁰ OHIP also does not cover all medically necessary services for students. Routine eye examinations for people between the ages of 20 and 65 as well as glasses and contact lenses are not covered.¹¹ Physiotherapy is usually not covered (unless specific requirements are met), and routine dental services such as examinations, fillings, cleanings and non-surgical extractions are not covered.¹² Some of these services can be covered if one chooses not to opt-out of the MSU Health and Dental Plan, however, others like Physiotherapy and certain referrals are still not covered by any of the discussed plans. These services that are not covered by OHIP and UHIP, or the MSU Health and Dental Plan, are not accessible to many students.

The SWC should provide a variety of referral options including public and privately funded services and the affordability of such referrals should be included when distributed to students. Health coverage is specific to each individual, and the SWC should be prepared to provide all the necessary information about a referral. By providing a variety of options with different costs and coverage options, a student can make the best fiscal decision possible for their health care.

Beyond increasing referral capacity, it is important to recognize that many students have negative experiences with referred services.^{13,14} Such students who have negative experiences with their referral may be less likely to pursue future options as a result. As such, it is incredibly important that there are checks in place to ensure students are receiving high quality referrals. Students may have negative experiences regarding the quality of a referral, it's competency at providing care to individuals of specific identity groups, or the relationship with the referred physician may not be a match. Individuals may feel uncomfortable debriefing a referral that didn't work, feeling personal responsibility. This not only negatively impacts the student's relationship with the referred service but also the original referring physician. With no built-in feedback opportunities, students face additional barriers to bringing up negative experiences with a referred service. A related but distinct concern to this, is that students who currently access referrals can feel isolated from the SWC and feel as if they are no longer able to use its services once they have been referred. When students are referred for specialty care, not offered in the SWC, they may feel as if they can no longer return to the SWC.

The SWC should have the capacity and ability to acts a primary care point for all students who pay for its operations. The MSU acknowledges that some services require a referral for best care as not every health service can be offered on campus. However, in areas where referrals occur the SWC should still be there as a support to students while accessing these referred services. This can look like booking debrief

¹⁰ Areghan, Ezekiel, Ryan Deshpande, Aquino Inigo, Angela Ma, and Annie Yu. 2017. "International Students Policy Paper". Hamilton: McMaster Student Union.

¹¹ Government of Ontario. 2017. "What OHIP Covers". *Ontario.Ca*. <https://www.ontario.ca/page/what-ohip-covers#section-8>.

¹² Government of Ontario. *Ontario.Ca*.

¹³ "Hamilton a Desert for Transgender Healthcare, but Hope Is on the Horizon." n.d. CBC News. Accessed October 30, 2017. <http://www.cbc.ca/news/canada/hamilton/transgender-healthcare-1.4003071>.

¹⁴ Cole Gately. n.d. "Trans/Forming Healthcare in Hamilton - BentQ." Accessed October 30, 2017. <http://bentq.ca/transforming-healthcare-in-hamilton/>.

appointments to ensure that students are receiving the care they were expected to receive at the referred service, maintaining relationships with students in other areas of their health, and being clear that students are welcome to book follow ups if new concerns arrive or the student wants to return for any reason. Additionally, the SWC should implement a service feedback system to collect knowledge on students' experiences with a referral and make changes to future referrals. The implementation of this feedback system, whether informally online through their website or in person through follow up debrief appointments, reinforces the SWC as a network of care the student can always return to or use in tandem with a referred service. Furthermore, this allows the SWC to build information on its commonly referred services, for example if trans students report being mis-gendered at a referral, then the SWC can pursue additional referral options and give students more information when working with students to find the right referral for them. Students should be able to ask what experiences other students have had with a referred service before booking an appointment with that service. The implementation of this system as well as an increased focus on remaining a continuous source of care for students who wish, would increase students experiences with the SWC and allow for more successful referrals to be provided.

Relationships with Off-Campus Partners

Principle: McMaster University should make and maintain collaborative relationships with health related community organizations.

Concern: Services and programs offered in the community are significantly less accessible.

Recommendation: The SWC should invite community partners to host health related events, services and outreach on campus, especially when these services are not offered through the SWC.

McMaster has pledged to be an active community member and a leading organization in community engagement. To this end, health care should also be a part of this commitment. The current services available on campus do not account for the needs of all students at all times. As a result, making and maintaining collaborative relationships with health-related community organizations is crucial for effective student care. However, as discussed above, there are significant barriers in regard to cost, location and quality when students seek care in the community as opposed to on campus.

A way to bridge this service gap is to increase the collaboration between on and off campus health care providers. The SWC should invite community partners to host health related events, services and outreach on campus, especially when these services are not offered through the SWC. Similar to how Canadian Blood Services has a regular on campus presence for blood drives, the SWC should work with health services in the Hamilton area to fill service gaps and provide more relevant information to students. For example, partnering with organizations like Men4Men to provide confidential, anonymous, and rapid sexual health testing targeted towards members of the queer

community on campus, is an excellent opportunity to deliver community specific health care and health promotion outreach. Another example could be partnering with Hamilton Public Health to run naloxone training sessions throughout the year (as despite their recent availability there is a lack of awareness about their use or value) and events on bed bugs during move in periods. Working with these partners and inviting them to run programming on campus allows for coverage gaps to be addressed as well as community specific outreach to occur.

Peer Support

Principle: All students at McMaster should have access to high quality support services and health information, including those provided peer to peer.

Concern: Peer support services face issues of access, stigma, and general lack of integration into universal service strategies, impeding a student from accessing them.

Recommendation: The University should allocate dedicated envelope funding to MSU Peer support Services.

Peer support involves the coming together of individuals with shared lived experiences to provide support and build community. At McMaster, these services are currently run through the MSU's Student Health Education Centre (SHEC), Queer Students Community Centre (QSCC), Peer Support Line (PSL), Women and Gender Equity Network (WGEN), and Maccess. The Mental Health Commission of Canada states that "peer support programs can help alleviate some of the pressure on Canada's strained healthcare system by reducing not only the need for hospitalization but also the emotional distress experienced by patients. They also help people develop the skills they need to take charge of their lives. Yet despite these benefits, peer support is still undervalued by the mental health community."¹⁵ In addition to these impacts, the QSCC, WGEN, and Maccess also build community within identity groups. These communities of support have wide reaching impacts on student health. Despite this unique value, peer support services face issues of access, stigma, and general lack of integration into universal service strategies, impeding a student from accessing them. Students seeking more formalized support through the SWC may also benefit from more informal connections to MSU Peer support services yet there is no information regarding these services within the SWC.

To combat these concerns, the University should allocate dedicated envelope funding to MSU Peer Support Services. As of now students are providing unique and unparalleled health services to other students through these services. The MSU believes that both access to formal and more informal support options are foundational to student health and wellbeing. Additionally, the community based aspect of many of these services means that students are more likely to engage in resources and conversations of health promotion as a result. Furthermore, as the existence of peer support services within McMaster is becoming a more realized service, services are experiencing high usage. From this it is clear that the MSU through these services is providing a unique and highly beneficial service to many students. Yet, currently service part-time managers are not able to dedicate significant resources to some forms of volunteer training and resource creation due to budgetary constraints. This could involve the implementation of existing training programs like

¹⁵ "Peer Support | Mental Health Commission of Canada." n.d. Accessed October 30, 2017. <https://www.mentalhealthcommission.ca/English/focus-areas/peer-support>.

Applied Suicide Intervention Skills Training (ASIST), Wellness Recovery Action Plan (WRAP) training, etc. or the development of community specific trainings that address the unique communities and intersections that many services address. With dedicated grant based university funding dedicated to resource design, creation, and distribution, and volunteer training, the MSU would be able to expand on these areas of strength in collaboration the university. This collaboration enables both MSU services and the SWC to remain autonomous while coming together on specific training and resource focussed projects. This initiative allows the University to work with students in new ways to create communities of support, that are well resourced and can better connect students to support, referrals, and resources than is currently done by either the MSU or the SWC at present. This increases the quality and availability of existing services while also allowing for the collaborative and targeted creation of new innovative inn initiatives.

Academic Accommodations

Training for Academic Advisors

Principle: Students who disclose their personal information to their academic advisors should be provided with the right resources available to them, regardless of their faculty.

Concern: Students must go through their academic advisors for external accommodations when missing academic work that does not fall within the parameters of the McMaster Student Absence Form (MSAF), leading students to share personal, sensitive information.

Recommendation: Academic advisors should be provided with mandatory training regarding student health concerns to create a culture of trust and understanding that rewards students for seeking accommodations in situations that deal with more serious health concerns.

The official McMaster Student Affairs website states the following in regards to academic advising assisting with personal situations:

“Often, students find the pressures of their first-year daunting. This can lead to extreme stress and depression. An Academic Adviser refers to appropriate resources (i.e. psychological counselling) for students demonstrating these kinds of issues. Academic Advisors and Student Wellness Centre staff work together to support students.”¹⁶

However, many students have found this system to be ineffective, with many personal stories emerging about a lack of resources or references available to them upon disclosure, as well as extremely long wait times. Furthermore, many students have faced situations in which academic advisors unintentionally alienate or devalue students’ situations due to a lack of effective sensitivity and mental health training.

A standardized system, such as a resource handbook available to all academic advisors in all faculties could prove beneficial, as it has at post-secondary institutions such as Algonquin College.¹⁷ Here, a standardized academic advisor handbook is a resource available to all academic advisors and provides basic information regarding their job duties, as well as resources for handling sensitive issues, such as: “Are there tissues in the office in case a student becomes emotional? Offering of tissues can be an incredibly supportive gesture.”¹⁸ As well it provides links to further resources and case studies which can be referred to as examples. Furthermore, a more standardized or at least equal amount of resources should be given across faculties to ensure every student receives equitable treatment.

McMaster already has Mental Health First Aid Training available to all staff and faculty which has the following goals:

¹⁶ "Academic Advising." Student Affairs. March 30, 2015. Accessed October 23, 2017. <http://studentaffairs.mcmaster.ca/academic-advising/>.

¹⁷ Algonquin College of Applied Arts and Technology. "Academic Advisors." Academic Advising. Accessed October 23, 2017. <http://www.algonquincollege.com/acadvising/resources/>.

¹⁸

- **“Recognize and understand the symptoms** of mental health problems, including those related to substance use.
- **Provide help & support** to prevent a mental health problem from developing into a more serious state.
- **Promote the recovery** of good mental health by accommodating employees in distress or recovering from a crisis
- **Be aware** of McMaster and other community based resources.”¹⁹

However, while this training is available, it is not mandatory to all staff and faculty. By making this training mandatory to all staff including academic advisors, this resource could be far better used, and allow all staff to be better equipped to handle various situations.

Training for Educators

Principles: All students should feel comfortable approaching educators (professors and teaching assistants) to inquire about accommodations for any type of illness or personal problems, without disclosing personal information that is not required by SAS.

Concern: Some students feel uncomfortable reaching out to educators about accommodations, because they feel that their situations will be invalidated, not respected or not kept confidential.

Concern: Educators are not necessarily aware that students in SAS do not have to disclose their conditions in order to be given accommodations.

Recommendation: All educators should be required to have mandatory training on how to respond to sensitive issues such as illness or a student’s personal emergencies.

Recommendation: All educators should be trained on what the guidelines of SAS are and subsequently follow them.

As previously mentioned, Mental Health First Aid Training is already available at McMaster for staff and faculty, however it is not required.²⁰ Having this training become a requirement for all staff would mean that professors and teaching assistants (TAs) would be better equipped to handle situations involving mental illness as a result of an instilled sense of empathy. This would allow students to feel more comfortable approaching their professor or TA during times of need and receive appropriate responses. It would also make better use of a resource which is already established and available at McMaster. This “available but not required” mental health training seems to be a common thread among many Ontario universities.

However, the University of Toronto provides their teaching assistants with a handbook entitled “Supporting Students in Distress: Guidelines for Teaching Assistants at the University of Toronto,” which serves as a valuable resource for teaching assistants across all faculties about how to best handle

¹⁹ McMaster University > Working at McMaster > Mental Health First Aid Training. Accessed October 26, 2017.

²⁰ Ibid.

difficult situations in which students face distress.²¹ Perhaps a standard handbook similar to this along with mandatory training could prove very useful to teaching assistants at McMaster as well.

In order for a student to be considered for an academic accommodation, the student must confide their personal circumstances to professors. Students have shown that they struggle with isolation, balancing work, studying, financial difficulties, and living alone throughout university, which directly affect their academics.²² These stresses can lead students to develop mental health illnesses. As these diagnoses of illnesses increase, so should the training being provided by the university to its staff.

In the last ten years, the Canadian Institute for Health Information reported that emergency department visits by children and youth in regards to mental health and substance abuse has increased 63%, and hospitalizations has increased 67%.²³ According to a study conducted by the Centre for Addiction and Mental Health (CAMH), one third of university students show elevated levels of distress, though the percentage of students experiencing moderate to severe levels of distress which interfere with daily life is rapidly increasing.²⁴ McMaster needs to continue prioritizing the mental health of its students, and above all, provide these students with the necessary resources to seek help regardless of their circumstance. This mandatory, free, training should be provided by McMaster University to educators who act as a main point of contact to students. Having this training will better educators to accommodate students who are living with mental health illnesses including depression, suicidal thoughts, anxiety, bipolar disorder and more.

Accommodations for Students with or without a Diagnosed Illness

Principles: Students should have accommodations that reflect their individual needs.

Concerns: Students often wait to seek out accommodations until they are in crisis.

Recommendations: McMaster should implement a system for professors who have a student with an ongoing illness to be able to easily make and keep track of accommodations, which is accessible to SAS and the student.

²¹ *Supporting Students in Distress: Guidelines for Teaching Assistants at the University of Toronto*. PDF. Toronto: University of Toronto, 2014.

http://tatp.utoronto.ca/wp-content/uploads/sites/2/TATP-Guide-Support-Students-in-Distress_Mar2017.pdf

²² Jon Wakeford, "It's time for universities to put student mental health support first | Jon Wakeford," *The Guardian*, September 07, 2017, accessed October 15, 2017, <https://www.theguardian.com/higher-education-network/2017/sep/07/its-time-for-universities-to-put-student-mental-health-first>.

²³ Cribb, Robert, et al. "Demand for youth mental health services is exploding. How universities and business are scrambling to react" *The Star*, May 2017.

²⁴ CAMH, "One-third of Ontario students report elevated psychological distress, CAMH survey shows (2016).

http://www.camh.ca/en/hospital/about_camh/newsroom/news_releases_media_advisories_and_backgrounders/current_year/Pages/One-third-of-Ontario-students-report-elevated-psychological-distress.aspx

Recommendation: McMaster should introduce a “Late Withdrawal” opportunity to drop a class if a student is struggling to keep up in the course.

In 2014, the American Psychological Association published a paper which stated that in one year, about one third of students had difficulty functioning due to depression alone, and half of these students also reported feeling overwhelming anxiety.²⁵ As well out of all of the students who seek mental health services, more than 30% of students have reported “seriously considering attempting to commit suicide at some point in their lives.”²⁶ This is a red flag for any university support programs, as it demonstrates that students tend to wait until after a crisis to seek help. Often, they are nervous to ask for accommodations before an impending crisis; however, if they have been identified as having a need for an accommodation, they should not need to wait until after a crisis to receive it. This framework should be provided beforehand to relieve some stress and possibly prevent the crisis from happening in the first place. This data also shows an increasing incidence of these mental health crises occurrences, stressing a growing need for accommodation services.

According to the Human Rights Legal Support Centre, every institution in Ontario has a legal obligation to give accommodations to whomever is giving or receiving a service from the institution. As well, each accommodation should be unique to the individual, as each person is different with their own set of needs for an accommodation.²⁷ Therefore, having an open line of individual communication directly between students and their professors will allow proper accommodation needs to be met throughout the duration of an illness. This will allow professors to see what accommodations the student is eligible for through SAS, and then be able to provide these accommodations and keep track of them.

In an article about McMaster’s mental health the following was stated by a student: “They say ‘I can’t get my work done. I’m not sleeping. I can’t concentrate.’”²⁸ This quote highlights how students refrain from seeking help until their academics are already negatively affected. Allowing strategies to be in place before the symptoms seriously affect academic work could help to make this work more manageable from the start.

Another recommendation is to provide McMaster students the opportunity to drop a course without a penalty if the student has not written the exam, up to a maximum of 3.0 credits, called “Late Withdrawal.” This is a tool that has been implemented across universities like York University and University of Toronto.²⁹ The course can be dropped any time until the last day of classes, without penalty; instead of receiving a fail, the course will appear on the student’s transcript but with no grade.³⁰ These

²⁵ Monitor on Psychology. Accessed October 25, 2017. <http://www.apa.org/monitor/2014/09/cover-pressure.aspx>.

²⁶ Ibid.

²⁷ “Your Right to Accommodation.” Your Right to Accommodation | Human Rights Legal Support Centre. Accessed October 25, 2017. <http://www.hrlsc.on.ca/en/how-guides-and-faqs/your-right-accommodation>.

²⁸ Craggs, Samantha. “One-third of McMaster students battle depression: survey.” CBCnews. October 02, 2012. Accessed October 26, 2017. <http://www.cbc.ca/news/canada/hamilton/news/one-third-of-mcmaster-students-battle-depression-survey-1.1200815>.

²⁹ “Dropping Courses,” Office of the Registrar, , accessed October 15, 2017, <http://www.utoronto.ca/registrar/dropping-courses>.

³⁰ “Course Withdrawals,” Manage My Academic Record, , accessed October 15, 2017, <http://myacademicrecord.students.yorku.ca/course-withdrawal>.

course withdrawals do not provide refund fees, but provide an academic relief. It is meant to help struggling students who are overwhelmed with their academic situation, allowing them drop a class and focus on other classes without penalizing their GPA.³¹ This tool that can be added to aid students with their academic work, and manage academic stress.

Documentation

Principles: All students who are experiencing an illness should be aware that they are able to access academic accommodations without needing documentation immediately.

Concern: It is not widely known that documentation is not immediately required to be granted an academic accommodation, discouraging many students from seeking an accommodation even if they qualify, as acquiring documentation can be a lengthy process that some students feel will further add to their stress.

Recommendation: Infographics should be developed to make students more aware of the existing policy regarding documentation in high traffic areas such as the SWC and SAS as well as online.

Recommendation: The SWC staff should be aware of this policy and communicate it effectively to students needing accommodations.

The existing policies are that a student does not need documentation immediately to receive accommodations, which can be granted on “good faith” temporarily, however appropriate documentation must be submitted by a specific date at the end of the semester which the accommodations are used during. However, the majority of students do not know this option is available, and often shy away from receiving much needed accommodation due to the perceived stress of having to acquire documentation.

For example, approximately only one third of students who have mental health disorders, all of whom could potentially qualify for some form of accommodation, actually seek out treatment, and therefore have actual documentation available to prove they can receive these accommodations. However this means two thirds of potential academic accommodation-receiving students do not have the documentation readily at hand to receive these accommodations, and if they did not know about the good-faith policy, would probably be hesitant to seek out accommodations if they thought documentation was immediately required.

³¹ Ibid.

Through better awareness and communication of this policy, more students who are in need of academic accommodations who may not have documentation immediately available will reach out to receive the accommodations they need with less hesitation.

MSAF

Principle: Students should feel comfortable using the MSAF in instances of minor health concerns without fear of having their form rejected.

Concern: There are no set guidelines for time frames given to students after the usage of MSAF, resulting in different deadlines being given to students depending on the professor.

Recommendation: There should be a set guideline on how many days can be given to students to submit their work after the submission of an MSAF, so all professors and students are aware of the tool's proper use.

It can be very hard to approach professors in circumstances regarding personal health. Professors must understand that mental illnesses affect students academically through: lack of concentration and attention, insomnia, missed classes, social integration, behavioural changes and more.³² The MSAF is a tool designed to easily provide accommodations for students during times of minor health concerns, though there is no unified guideline as to how the MSAF is to be carried out by professors.

Students have different accommodations based on professors when they submit an MSAF form. With a standardized system there can be a set minimum of days given as an extension providing a fair accommodation for students across faculties and classes. Based on the category of each assignment such as: essays, lab reports, projects, etc., there will be a set minimum days of relief for students to hand-in the assignment or to reweigh their final grade. Through official policy, McMaster should implement a cohesive system that allows students to see what the relief will be when they submit an MSAF form, to be then listed on course outlines provided on Avenue to Learn. This will help students plan their schoolwork more efficiently.

³² Youth Mental Health and Academic Achievement, PDF, TeenScreen National Center for Mental Health Checkups at Columbia University.

Athletics and Recreation

Principle: All students should have exposure to an array of athletics and recreation programs on campus in order to achieve optimal levels of physical activity and procure the health benefits that come with maintaining an active lifestyle.

Principle: Athletics and recreation facilities should be a safe space where all students feel comfortable to achieve their fitness goals, regardless of ability.

Concern: There are gender disparities at the Pulse in which traditionally male-dominated areas such as the weight-room conjure feelings of intimidation, acting as a perceived barrier for many women who want to utilize the facility in its entirety.

Concern: Students with disabilities who have not been exposed to adaptive sports leagues prior to attending university carry with them attitudes of reluctance to participate given a history of exclusion, reducing overall league participation.

Recommendation: The Pulse should implement women's only hours multiple times a week to combat mental barriers and reduce the imbalance of men and women who workout on a weekly basis.

Recommendation: Intramurals should be promoted in ways that foster equitable participation on sports teams, encouraging those at beginner levels with limited experience to join.

Recommendation: Adaptive sport teams should be included in the intramural calendar throughout the duration of the year, with special equipment available at no extra cost.

Studies show that participation in athletics and recreation improves physical and mental health while promoting the development of interpersonal and team building skills. Students can benefit greatly from maintaining an active lifestyle, with demonstrated health benefits of more restful sleep, reduced overall stress, and enhanced concentration, all of which have a direct impact on academic performance.^{33,34} To achieve these health benefits, students should be able to confidently participate in campus athletics and recreation programs without encountering barriers.

Currently, a persistent concern involves gender disparities at the Pulse. Everyday, women are subject to unrealistic standards of beauty, constant judgement based on appearance, catcalling, etc., all of which result in many women feeling uncomfortable working out in co-ed settings. At the Pulse, the weight room floor tends to be primarily used by men, while women remain on the second floor which holds the cardio equipment. Gender socialization from birth instills a strict dichotomy of what is considered to be a healthy, attractive body type, in which men are taught to be

³³ Li, Joanna W., Helen O'Connor, Nicholas O'Dwyer, and Rhonda Orr. "The effect of acute and chronic exercise on cognitive function and academic performance in adolescents: A systematic review." *Journal of Science and Medicine in Sport* (2017).

³⁴ The Editorial Board. "Exercise and academic performance." *The New York Times*, (2013).
<http://www.nytimes.com/2013/05/25/opinion/exercise-and-academic-performance.html>

muscular and strong whereas women are taught to strive for an ideal of thinness. Healthy bodies come in all shapes and sizes, though muscle strength and adequate cardio are important for all individuals, regardless of gender. Yet, many women routinely defer to the second floor where there is a higher comfort level found in the company of a greater proportion of women.

Another aspect of inequity regarding McMaster athletics and recreation is individuals' with disabilities limited participation in intramural sports. Options are available, with Wheelchair European Handball as well as Goalball tournaments in addition to the opportunity for students to submit a request for accommodation on Open, Corec, Women's, and Men's leagues in an integrative environment. However, according to Lauren Crawford, McMaster's Sports League and Camps Coordinator, only about one request for accommodation is made per term. Crawford believes that the issue for many students is amount of exposure to adaptive sports before entering university; without prior opportunity to participate in athletics and recreation programs, students are less likely to willingly participate as they get older, given a history of exclusion.

Inclusivity and diversity are core values of McMaster University. To ensure all students feel comfortable making use of the facilities and sports programs offered to them, certain changes should occur to increase equitable participation. The Pulse should extend their Women's Only hours to improve women's access to athletic spaces and demonstrate a supportive stance on women achieving overall fitness in what has traditionally been considered a man's domain. While broad, systemic values surrounding gender norms are plentiful and difficult challenge, the immediate response of increasing Women's Only hours (which is currently 6 out of an available 110 hours weekly, restricted to Circuit City) would help promote women's use of the facility. In order to celebrate diversity, accommodations must be made to eliminate feelings of alienation many women have when working out.

To improve students with disabilities' access to intramurals, promotional efforts should target those who have perhaps never before had exposure to adaptive sports. Universities should strive to reduce barriers caused by a public education system which often inadvertently harbours a culture of exclusion since gym classes tend to restrict participation for students with disabilities, negatively influencing students' perceptions of their ability to play in the future. Heavy promotion of intramurals in a way that encourages students of all skill levels to join teams through the Intramurals website as well as social media posts and FAQ sheets distributed to relevant locations such as SAS and PACE would draw attention and increase rates of participation. In addition, offering regular adaptive sport tournaments throughout the duration of the school year as part of the intramural calendar would cement McMaster's dedication to making sports as accommodating and accessible to all individuals as possible. For the same reason, McMaster should dedicate funding towards purchasing specialized equipment so students do not have to pay additional costs to participate and to ensure spots are not limited.

Health Services

Mental Health Counseling

Principle: Students should have easy access to counselors to ensure concerns are addressed in a timely manner.

Concern: Students seeking counseling services at the Student Wellness Center experience lengthy wait periods due to insufficient staff to support undergraduate needs.

Concern: There is no designated safe space on campus for students to go and speak with a counselor.

Concern: Students are unable to seek assistance from a counselor during midterm and exam season after hours.

Recommendation: The Student Wellness Center should expand its counseling services to reduce wait times and allow for students to access counselors quicker.

Recommendation: The University should assign a dedicated safe area in the new Living and Learning Center for students to access a drop-in counselor.

Recommendation: The Student Wellness Center should expand its hours during midterm and exam season so students can access a counselor during the times they feel the most stressed at school.

The Student Wellness Center (SWC) promotes itself as the place on campus to address your wellness needs. It offers a wide variety of medical and wellness programs, including counseling services. The counseling services provided range from consultation appointments, group programs, and crisis appointments. Currently, due to lack of resources, students are often turned away and told to come back another day when trying to book an appointment.

The SWC has two staff counselors for the entire student population. When seeking a consultation appointment, in accordance to the SWC website, "A limited number of consultation appointments are offered on a first come first-served basis mornings and afternoons Monday - Friday." The language on the website is already discouraging and often times, students are told to come back as the appointment slots fill up too quickly. Furthermore, crisis appointments are mainly reserved "for students who are actively at risk of harming themselves or others, students who have experienced a recent traumatic event that requires time sensitive attention, and/or students experiencing serious alterations in mood or cognition." This is problematic as students can only receive immediate assistance when in immediate danger and even then, there are no guarantees because to accommodate students for a crisis appointment, the SWC will "do their best to arrange an appointment with a counselor within 24 hours."³⁵ The American College Health Association report demonstrated how a large percentage of students are struggle with their mental health. For example,

³⁵ "Counselling - Student Wellness Centre". 2017. Wellness.Mcmaster.Ca.
<https://wellness.mcmaster.ca/counselling/#MakingAnAppointment>.

33.1% of surveyed students responded they struggled with anxiety, while 21.9% struggle with depression.³⁶ Furthermore, 61.4% of students responded they felt overwhelming anxiety in the last 12 months and 61.4% responded they felt like things were hopeless. With such a large number of students struggling with their mental health, these wait times for students are too long, and students should not be sent home when seeking assistance and accommodated only when there is a crisis. If students were able to receive the appropriate treatment before a crisis, it will assist in preventing these crisis from occurring in the first place. Counseling on campus could become a resource for students struggling with their mental health, rather than only for students in crisis situations when they have reached their breaking point.

To improve wait times for students wishing to speak with a counselor, the SWC should expand its counseling services to more than two counselors. It is recommended to have 1 counselor to every 1 500 students.³⁷ The SWC currently has two counselors and this student to counselor ratio is concerning as services are stretched very thin and therefore unable to accommodate students need for counseling assistance. Students experience an incredible amount of stress at school making them particularly vulnerable to experience mental health concerns. Specifically, a 2012 Statistics Canada survey reported individuals between that individuals aged 15-to 24- had the highest rates of mood and anxiety disorders amongst all age groups.³⁸ For students seeking assistance, the SWC should hire more counselors.

The SWC is the spot-on campus to address wellness needs, however, upon entry into the SWC it resembles a sterile hospital environment and is unwelcoming to students seeking assistance for their mental health needs. The SWC is an area on campus more suited when seeking assistance from a physician than a counselor. The new Living and Learning Center should have a designated area for counseling services, that is a welcoming environment and safe space.

patients disclose more and are more engaged in a warm environment with dim lighting.³⁹ Furthermore, college students find rooms with bright wall space and nice decorations to be a more positive environment.⁴⁰ Currently, the SWC is a cold, industrial space that is not welcoming for students wishing to speak with a counselor. It is important to consider these factors when a student is seeking counseling as the more positive experience the student has, the more likely they are to continue seeking

³⁶ "ACHA-NCHA II: Canadian Reference Group Data Report," American College Health Association (2016)

³⁷ Physicians per 100,000 population by Province/Territory, 1986-2012," Canadian Medical Association (2012)

³⁸ Findlay, Leanne. 2017. "Depression and Suicidal Ideation Among Canadians Aged 15 to 24." Statcan.Gc.Ca. <http://statcan.gc.ca/pub/82-003-x/2017001/article/14697-eng.htm>.

³⁹ Miwa, Yoshiko, and Kazunori Hanyu. 2006. "The Effects Of Interior Design On Communication And Impressions Of A Counselor In A Counseling Room". *Environment And Behavior* 38 (4): 484-502.

⁴⁰ Pressly, Page K., and Martin Heesacker. 2001. "The Physical Environment And Counseling: A Review Of Theory And Research". *Journal Of Counseling & Development* 79 (2): 148-160.

assistance. When students continue to seek assistance, they develop coping mechanism to implement before their struggles metastasize into a crisis.

For these reasons, the University should designate a positive and safe space in the new addition to the David Brawley Athletic Center for students to receive counseling. It is problematic that students are required to go a medical clinic to seek the assistance of a counselor as it is deterring for students. A positive space on campus, that is separate from the SWC will increase the likelihood of students seeking help and returning for further consultations.

The SWC is open Mondays–Thursdays 8:45am–7:45pm, Fridays 8:45am–4:30pm and is closed on weekends. When seeking a counseling appointment, there are a limited number of appointments available on a drop-in basis in the mornings and afternoons for students. It can be very hard for a student to receive the assistance they need and it can become increasingly difficult when seeking assistance during midterm and exam season. Studies have demonstrated that students experience increased levels of stress at predictable times. When students study for exams there is a large amount of content to understand in a short period of time and grade competition is increased which in turn can increase anxiety.⁴¹

The SWC does not accommodate for the increased stress and pressure students face during exam season and for this reason the University should increase their counseling hours during these times. If students were able to speak to a counselor when they're feeling overwhelmed studying for an exam, it would help students with coping mechanism during these times. Furthermore, when students are experiencing test-anxiety, it can negatively impact their GPA. Studies have demonstrated this effect as students placed in high test-anxious groups they have significantly lower GPA's than students in low test-anxiety groups.⁴²

It is important for the University to recognize the increased stress students face during exam season and assist students by increasing their counseling availabilities after hours and on weekends. If the SWC could increase its counseling services offered to students after hours and on weekends it will help to decrease stress and assure that students can seek the assistance of a counselor if needed during these times.

⁴¹ Makaremi, Azar. 2000. "Relation of Depression and Anxiety to Personal and Academic Problems Among Iranian College Students." *Psychological Reports* 87(6): 693.

⁴² Culler, Ralph E., and Charles J. Holahan. 1980. "Test Anxiety And Academic Performance: The Effects Of Study-Related Behaviors." *Journal Of Educational Psychology* 72 (1): 16-20.