University Students' Council Standing Policy
COVID-19 Mental Health Policy Paper

Legislative History
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Land Acknowledgement

The University of Western Ontario is located on the traditional territories of the Anishinaabeg, Haudenosaunee, Lunaapeewak and Attawandaron peoples, who have long-standing relationships to the land and region of southwestern Ontario and the City of London. The local First Nation communities of this area include Chippewas of the Thames First Nation, Oneida Nation of the Thames, and Munsee Delaware Nation. In the region, there are eleven First Nation communities and a growing Indigenous urban population. Western University values the significant historical and contemporary contributions of local and regional First Nations and all of the Original peoples of Turtle Island (North America).

To learn more about these Indigenous communities and how you can best be an ally, please refer to the London & Middlesex Indigenous Culture Card. For more information about land acknowledgements, please refer to the article "Rethinking the Practice and Performance of Indigenous Land Acknowledgment" by Robinson et al. A land acknowledgement is an important step in recognizing colonial history but should by no means be the full extent to which we acknowledge and support indigenous communities.

Key Terms

Mental Health:[1] CMHA defines mental health as a state of well-being. Just like every individual has a state of physical health -- good or bad -- so, too, do we have a state of mental health. According to CMHA, a state of positive mental health is when one is enjoying life, has a sense of purpose, and is able to manage life's highs and lows.

Mental Illness:[2] Mental illnesses are described as disturbances in thoughts, feelings, and perceptions that are severe enough to affect day-to-day functioning. Some examples are anxiety disorders, schizophrenia, and mood disorders, such as major depressive disorder and bipolar disorder. Mental health is not simply the absence of mental illness and living with mental illness does not mean that one cannot have good mental health. Just like a

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[1] "Mental Health: What is it, really?" Canadian Mental Health Association, published 13 January 2020. https://cmha.ca/blogs/mental-health-what-is-it-really
[2]"Mental Health: What is it, really?" Canadian Mental Health Association, published 13 January 2020. https://cmha.ca/blogs/mental-health-what-is-it-really

person with diabetes, for example, can live a healthy life, so can someone with a mental illness.

Intersectionality:[3] Intersectionality is defined as how race, class, gender and other individual characteristics "intersect" and overlap with one another. Looking at an identity through an intersectional lens means understanding that a person's experience of one aspect of a person's identity (ie. femininity) is informed by all the other aspects of that person's identity (race, class, religion, disability, etc.). In this way, no part of a person's identity can be properly understood without taking into account the intersections of race, class, gender, age, sexual orientation, disability, religion, etc.

Zoom Fatigue:[4] "Zoom fatigue describes the tiredness, worry, or burnout associated with overusing virtual platforms of communication."

Body Dysmorphia:[5] Body dysmorphic disorder is a mental health disorder in which you can't stop thinking about one or more perceived defects or flaws in your appearance — a flaw that appears minor or can't be seen by others. When you have body dysmorphic disorder, you intensely focus on your appearance and body image, repeatedly checking the mirror, grooming or seeking reassurance, sometimes for many hours each day. Your perceived flaw and the repetitive behaviors cause you significant distress, and impact your ability to function in your daily life.

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[3]Crenshaw, Kimberle. "Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics," *The University of Chicago Legal Forum,* no. 1 (1989): 139-167, https://chicagounbound.uchicago.edu/cgi/viewcontent.cgi?referer=&httpsredir=1&article=1052&context=uclf; Coaston, Jane. "The Intersectionality Wars," *Vox,* last modified 28 May, 2019, https://www.vox.com/the-highlight/2019/5/20/18542843/intersectionality-conservatism-law-race-gender-discrimination

[4] Lee, Jena. "A Neurophysical Exploration of Zoom Fatigue." The Psychiatric Times, published 17 November, 2020, https://www.psychiatrictimes.com/view/psychological-exploration-zoom-fatigue

[5] "Body Dysmorphic Disorder." Mayo Clinic, date accessed: 16 February, 2021, https://www.mayoclinic.org/diseases-conditions/body-dysmorphic-disorder/symptoms-causes/syc-20353938

Introduction

Now, more than ever, it is important that the University recognizes student mental health as both a priority and a substantial concern.

In a 2019 study by the American College Health Association, it was found that over 50 percent of Canadian university students felt so depressed that it was difficult to function, almost 70 percent felt overwhelming anxiety, and about 16 percent had seriously considered suicide in the preceding twelve months.[6] Every year for at least the last four years, promising Western students with bright futures ahead of them have taken their own lives, devastating both their families and the campus community alike. This trend cannot continue; student mental health is not an issue that can be left unaddressed.

While student mental health support is a topic that has been discussed for a number of years now, existing mental health concerns have been exacerbated significantly by the COVID-19 pandemic. With student loneliness and depression rising to new heights as a result of quarantine,[7] the student need for better mental health support has become impossible to ignore. Although many mental health concerns have become even more apparent during the past twelve months, these issues are not new. Rather, these issues have existed for a long time, and the pandemic has only served to bring them to the forefront.

The University Students' Council strives to identify areas in which the current mental health offerings at Western could be expanded or improved, both during the pandemic and as the University settles into the post-pandemic "new normal." In this paper, the USC addresses mental health with regards to access to resources, social isolation & loneliness, residence, and academics. Moreover, the USC strives to convey the importance of approaching student mental health through an intersectional lens. Various recommendations within this paper as well as the section of the USC's standing Mental Health Policy Paper which focuses on intersectionality speak to the ways in which this should be done.

This paper is intended to give comprehensive recommendations about post-secondary mental health for Western University and the Government of Ontario. The authors of this paper thought it was important to note that though this paper was created during the COVID-19 pandemic, many of the principles, concerns and recommendations outlined throughout the paper are relevant to students at all times. To read the University Students' Council's standing,

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[6]"National College Health Assessment: Canadian Reference Group," American College Health Association, Published 2019, https://www.cacuss.ca/files/Research/NCHA-II%20SPRING%202020 19%20CANADIAN%20REFERENCE%20GROUP%20EXECUTIVE%20SUMMARY.pdf

[7] Hellmans, Kim et al. "For university students, COVID-19 stress creates perfect conditions for mental health crises," The Conversation, last modified 24 November, 2020, https://theconversatio n.com/for-university-students-covid-19-stress-creates-perfect-conditions-for-mental-health-crises-149127

non-COVID-19-related mental health recommendations, please refer to the [2021 Mental Health Policy Paper](#).

Access to Resources

Principle: Students should be aware of the mental health services available to them and their functions.

Principle: Mental health resources should be actively promoted to students.

Principle: All members of the campus community should have a clear understanding of the COVID-19 protocols on campus.

Concern: Many students are unaware of how mental wellbeing service offerings have changed in format due to the COVID-19 pandemic.

Concern: Many students report email fatigue. The extreme influx of emails as a result of the pandemic has led to many emails regarding COVID-19 going unread by students.

Recommendation: The University should collaborate with the student body in order to create a promotional campaign that clearly defines Western's various mental wellbeing service offerings and how they can be accessed during the pandemic. One priority of this campaign should be to increase the online presence of Western's mental wellbeing service offerings.

Recommendation: When the pandemic has definitively ended and Western is returning to its "new normal" state, The University should launch a second promotional campaign that clearly defines Western's various mental wellbeing service offerings and how they can now be accessed going forward, making note of any changes in format/timing.

Recommendation: The University should create a centralized, online location for COVID-19 updates and information. At minimum, this webpage should be updated weekly; if there is no change in protocol/circumstance from the previous week, this lack of change should be noted.

Now, more than ever, students are struggling with their mental health. Prior to the pandemic, data collected by the American College Health Association in 2019 found that, among it's Canadian respondents, over 50 per cent of University students felt so depressed that it was difficult to function, almost 70 per cent felt overwhelming anxiety, and about 16 per cent had seriously considered suicide in the preceding twelve months.[8] In this way, university students are a demographic seriously at risk of suffering from poor mental health.

Unfortunately, the pandemic has only exacerbated the conditions that cause students stress. With the pivot to remote learning leading to "a sense of uncertainty about academic futures," mandatory physical distancing measures and restrictions on social gatherings leading to increased isolation and loneliness, and COVID-19 itself leading to students constantly being worried about their own health and safety, a study by *The Conversation* claims that the pandemic "can be thought of as a chronic and unpredictable form of stress."[9] This study further predicts that, given "the robust relationship between loneliness and depression," depressive symptoms in students may be exacerbated in the climate of COVID-19, and it states that student substance abuse has already increased as a result of the pandemic.[10]

Indeed, in the USC's consultations with The Mental Health Roundtable (a group of student mental health leaders from main campus, the affiliates, professional schools, residence staff/sophs, and student mental health organizations including MyHBA, Active Minds, and The Peer Support Centre) we have heard overwhelming feedback that students across all programs are feeling increased levels of academic and personal stress this year in comparison to other school years in the past.[11] It is clear that now, more than ever, students need access to the mental health resources that Western has to offer.

However, with the changes in format of various mental health service offerings as a result of the pandemic, the closing of the Wellness Education Centre, and a lack of physical space to promote services to students, it is easy to see how many students could become confused and/or overwhelmed when attempting to seek out mental health resources. It is important that the University eliminates as many barriers to access as possible with regards to its mental health resources.

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[8]"National College Health Assessment: Canadian Reference Group," American College Health Association, Published 2019, https://www.cacuss.ca/files/Research/NCHA-II%20SPRING%202020 19%20CANADIAN%20REFERENCE%20GROUP%20EXECUTIVE%20SUMMARY.pdf
[9]Hellmans, Kim et al. "For university students, COVID-19 stress creates perfect conditions for mental health crises," The Conversation, last modified 24 November, 2020, https://theconversatio n.com/for-university-students-covid-19-stress-creates-perfect-conditions-for-mental-health-crises-149127
[10]Ibid.
[11] Mental Health Roundtable, consultation conducted by author, London (via Zoom), 27 November, 2020.

Thus, the USC recommends that the University should collaborate with the student body in order to create a promotional campaign that clearly defines Western's various mental health and wellbeing service offerings and how they can be accessed during the pandemic. For example, the University could create a one-page virtual document available to all students that lists 1) all of Western's mental health service offerings, 2) the purpose of the service and how it differs from the others (if applicable), and 3) information about the current format of the various resources with direct next steps for each (link to online booking, zoom call information, phone number, etc.). In addition to being posted on the Health and Wellness Homepage and the Western University Homepage, this information should further be made into a graphic that can be shared on social media, and should be given to groups like the USC, faculty councils, residence staff, etc. to be shared in order to reach a large student audience as quickly as possible. It should be prioritized that all mental health service offerings at Western have a strong online presence so that, if students are looking for mental health resources at Western, they can be easily found.

Further, when the pandemic has definitively ended and Western is returning to its "new normal" state, the University should launch a second promotional campaign. In addition to listing and defining all of Western's mental health service offerings, this campaign would give information on how these resources can be accessed going forward, making specific note of any changes from how they were offered during the pandemic. Once again, this information should have clear next steps, whether that be a location/hours of operation, a phone number, a registration link, or otherwise. Any time that a mental health service offering changes, this information should be updated so that students will always be able to go to the same place for information on up-to-date mental health service offerings.

With the ever-changing outlook on COVID-19 in the news, it is very easy for students to wonder if COVID-19 protocols at Western will be changing as a result of new information. Currently, the primary way of communicating COVID-19 updates with the campus community has been via email. However, students report email fatigue due to the sharp increase in the amount of emails they have been receiving since the pandemic began. Because of this, many students are missing emails and thus are not receiving important COVID-19 updates.

In order to ensure that all members of the campus community are receiving the most up-to-date information in a timely manner, the USC recommends that Western create a webpage where all COVID-19 information and updates can be posted. This website should be updated weekly at minimum. Updates should inform members of the campus

community of any relevant news or changes in protocol. If there has been no change since the previous week, this lack of change should be clearly noted. The USC further suggests that Western adopt a standardized system of reporting the severity of COVID-19, similar to the "Three Stage Re-Entry Plan" and the current colour system of the Ontario Government.[12] By creating a system with clearly defined "stages" or "colours," students will better understand what is expected of them. For example, "red" could mean Western is mandating its strictest lockdown procedures, "green" could mean Western is completely open with in-person classes again, and other colours could be used to denote in-between stages with varying protocols with regards to social distancing and gathering size. Thus, the University could announce that "Western University is 'red' for the next two weeks, and members of the campus community would understand what is expected of them. If a colour or stage system is put in place, this information could be displayed clearly on the proposed Western COVID-19 webpage and weekly updates could inform students whether the University is shifting to a new stage or maintaining the current stage for the next week. Finally, Western should consider using multiple forms of communication in order to reach as many members of the campus community as possible, including emails, website updates, and social media (especially instagram and twitter).

Social Isolation & Loneliness

Principle: Western students should be provided with COVID-19-safe programming in order to fulfil their need for social interaction and bonding.

Concern: Social isolation is proven to have an adverse effect on mental and physical health.

Concern: Western students have reported feeling lonely and isolated.

Concern: With a lack of COVID-19-safe activities being offered by residences, students must either 1) continue to allow isolation to negatively impact their mental health, or 2) engage in unsafe social activities.

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[12] Appia, Veronica. "Here's How Ontario's COVID-19 Colour Codes Work." Toronto.com, published 2 February, 2020. https://www.toronto.com/news-story/10239506-here-s-how-ontario-s-covid-19-colour-codes-work/

Concern: International students are more likely to feel isolated and must deal with unique stressors, as they 1) are less likely to go home during breaks, 2) may experience xenophobia with regards to COVID-19 (specifically international students from Asia), 3) may experience fear for the health of family living in COVID-19 higher risk areas, and 4) may feel stress regarding the uncertainty of when they will be able to return home and see their families.

Recommendation: Western should prioritize the creation of mental health resources focused on dealing with isolation and loneliness during COVID-19.

Recommendation: Virtual social programming should be offered so that students living at home can feel engaged with the Western community.

Recommendation: When possible, pursuant to provincial COVID-19 guidelines, the University should prioritize the creation and offering of COVID-19-safe social events and study spaces for students.

Recommendation: Western should create mental health supports and programming specifically for international students.

Loneliness is defined by the CDC as "the feeling of being alone, regardless of the amount of social contact," while social isolation is defined as "a lack of social connections." The CDC notes that social isolation may lead to the experience of loneliness, which in turn is associated with higher rates of depression, anxiety and suicide.[13] Another study published in *Perspectives on Psychological Science* in 2015 found that a lack of social connection heightens health risks as much as smoking 15 cigarettes a day or having an alcohol use disorder.[14] The study concludes that "being connected to others socially is widely considered a fundamental human need -- crucial to both well-being and survival."[15]

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[13] "Loneliness and Social Isolation Linked to Serious Health Conditions," Centers for Disease Control and Prevention, last modified 4 November, 2020, https://www.cdc.gov/aging/publications/features/lonely-older-adults.html#:~:text=Social%20isolation%20is%20a%20lack,lonely%20without%20being%20socially%20isolated.

[14] Novotney, Amy. "The risks of social isolation," *American Psychological Association,* vol. 50, no. 5 (2019), https://www.apa.org/monitor/2019/05/ce-corner-isolation

[15] Novotney, Amy. "The risks of social isolation," *American Psychological Association,* vol. 50, no. 5 (2019), https://www.apa.org/monitor/2019/05/ce-corner-isolation

Lengthy quarantine and limitations on physical gatherings have led to increasing levels of social isolation and loneliness among students.[16] Indeed, in our consultations with The Mental Health Roundtable, it has been made abundantly clear that students across all programs are feeling isolated and lonely. With a lack of organized, safe social programming offered by Western, students must either stay at home, exacerbating loneliness and isolation, or seek out social connection, potentially putting them at risk of exposure to COVID-19. As loneliness and isolation is a significant risk to the mental and physical health of Western students, it is clear a middle-ground needs to be found.

For this reason, Western should prioritize the creation of mental health resources focused on dealing with isolation and loneliness during COVID-19. Further, virtual social programming should be offered so that students living at home can feel engaged with the Western community. Lastly, while health and safety should always be the main priority, the University should prioritize the creation of outdoor, COVID-19-safe events and study spaces whenever it is possible to do so.

International students are particularly at high risk for loneliness and feelings of isolation. International students are less likely to leave campus during breaks due to travel restrictions. For this reason, many international students have not seen their families for months. Unlike international students living in residence who may be able to socialize with one another during breaks (note that international students living in residence also face isolation and loneliness, as discussed in the next section), international students living off-campus may end up living alone in an empty house over the holidays, as they are unable to return home like their housemates. Furthermore, international students may experience fear for the health of family living in COVID-19 high risk areas, and they may feel stress regarding the uncertainty of when they will be able to return home and see their families. International students from Asia may experience social isolation as a result of xenophobic rhetoric with regards to the coronavirus.

Thus, the USC recommends that Western create mental health supports and programming specifically for international students.

Residence

Principle: All members of the residence community should have a clear understanding of the COVID-19 protocols in their residence.

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[16] Hellmans, Kim et al. "For university students, COVID-19 stress creates perfect conditions for mental health crises," The Conversation, last modified 24 November, 2020, https://theconversatio n.com/for-university-students-covid-19-stress-creates-perfect-conditions-for-mental-health-crises-149127

Principle: All members of the residence community should have a clear understanding of the role of residence staff, student residence staff and sophs in enforcing COVID-19 protocols.

Principle: Student residence staff members and sophs should receive training on COVID-19 protocols. This training should include how to handle specific scenarios that are likely to arise.

Principle: Students living in residence during COVID-19 should be provided with COVID-19-safe programming in order to fulfil their need for social interaction and bonding.

Concern: Students living in residence have reported a lack of understanding of the COVID-19 protocols that they are expected to follow, stating that they find it difficult to keep up with the frequent changes to the COVID-19 protocol in their residence and are afraid that they will accidentally break protocol due to this lack of clarity.[17]

Concern: With the ever-changing outlook on COVID-19 in the news, it is easy for students to wonder if the COVID-19 protocols in their residence have changed. Residences do not currently send regular updates to clarify that the COVID-19 protocols have not changed.

Concern: Student residence staff members and sophs have reported feeling very uncertain as to their role in enforcing COVID-19 protocols in residence.[18]

Concern: Student residence staff members and sophs have reported feeling unclear on how the COVID-19 protocols in residence apply when attempting to support a student in a crisis situation.[19]

Concern: Students in residence report uncertainty regarding which specific sanctions apply to certain actions in terms of COVID-19 protocol violations.[20]

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[17] Mental Health Roundtable, consultation conducted by author, London (via Zoom), 27 November, 2020.
[18] Mental Health Roundtable, consultation conducted by author, London (via Zoom), 27 November, 2020.
[19] Ibid.
[20] Ibid.

Concern: Though training for student residence staff members was offered, it did not include situational training. Student residence staff members and sophs have reported that they did not feel that this training was comprehensive.[21]

Concern: International students in residence are more likely to feel isolated and must deal with unique stressors, as they 1) are less likely to leave residence during breaks, 2) must go through mandatory quarantine when returning to residence, 3) may experience xenophobia with regards to COVID-19 (specifically international students from Asia), 4) may experience fear for the health of family living in COVID-19 higher risk areas, and 5) may feel stress regarding the uncertainty of when they will be able to return home and see their families.

Concern: Social isolation is proven to have an adverse effect on mental and physical health.

Concern: Students living in residence report feeling lonely and isolated.

Concern: With a lack of COVID-19-safe activities being offered by residences, students must either 1) continue to allow isolation to negatively impact their mental health, or 2) engage in unsafe social activities.

Recommendation: Current COVID-19 residence procedure should be communicated to all students and student staff on a weekly basis. If there are changes to the procedure, these should be clearly highlighted. If there are no changes to the procedure, an email should still be sent confirming the existing procedure.

Recommendation: Detailed COVID-19 procedures should be created and disseminated to residence staff. Topic covered should include, but not be limited to: 1) what, if any, role student staff have in enforcing COVID-19 protocols, 2) How COVID-19 protocols should be considered when a student is in crisis, 3) next steps to be taken when a student staff member is unclear of the procedure in a given situation.

Recommendation: Sanctions for violating COVID-19 protocols should be made clear to both students and residence staff members. All members of the residence community should be aware of the rules and the consequences for breaking them. Sanctions should never be a surprise.

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[21] Ibid.

Recommendation: If a student receives a sanction for breaking COVID-19 protocols, they should understand exactly why they are receiving sanctions, which policy governs this behaviour (ie. Student Code of Conduct, Residence Contract, etc.), and what the appeal process looks like for their specific situation.

Recommendation: What role, if any, residence sophs have in enforcing COVID-19 protocols should be made explicitly clear to them and the residence community.

Recommendation: Residence staff and residence sophs should receive situational COVID-19 protocol training in the Summer before students move into residence.

Recommendation: Western Housing should partner with residence councils in order to create COVID-19 safe programming for students living in residence.

Recommendation: Western Housing should create mental health supports and programming specifically for international students who are living in residence.

Since the beginning of the pandemic, it has been clear that whatever information is believed to be true in one moment can change by the next, at the fault of no one. Nonetheless, it is also true that, for the safety of our Western Community, it is essential that every person understands and abides by the COVID-19 protocols put in place by the University. This is especially true in residence, where living in close-quarters with others means the safety of the community and the prevention of a large outbreak depends on every community member complying with the COVID-19 protocols. While all members of the residence community must understand the COVID-19 protocols, it is essential that all individuals in leadership and/or enforcement positions -- Housing staff, student residence staff, and residence sophs -- have an absolute understanding of what is expected of everyone in order to lead by example. If this is not the case, confusion and miscommunication will certainly ensue.

In consultation with student residence staff and residence sophs, it is clear that many do not feel confident in their understanding of residence COVID-19 protocols. Student residence staff and sophs also note that with information changing rapidly, many residence staff members and sophs are uncertain as to whether their understanding of the current COVID-19 protocols is both accurate and comprehensive. This lack of concrete understanding makes promoting and enforcing COVID-19 protocols challenging. Furthermore, if student leaders in residence are struggling to understand the COVID-19 protocols in their residence, undoubtedly students living in residence are

experiencing the same uncertainty, as they have less direct avenues for policy clarification than student leaders.

Thus, current COVID-19 residence protocols should be communicated to all students and student staff on a weekly basis. These regular communications should clearly note any changes to the current COVID-19 protocols students are expected to follow. If there are no changes from the previous week, the weekly communication should make clear that there are no changes and re-iterate the existing protocols. Housing may want to adopt a system similar to Ontario's "Three Stage Re-Entry Plan" in the summer or Ontario's current colour system in order to manage communication.[22] If there are designated, predetermined levels of restriction put in place, Housing could declare a certain residence to be in a certain stage as needed. For example, "red" could be full-lock down with the most strict COVID-19 protocols, while other colours would have varying protocols with regards to social distancing and gathering sizes. All members of the residence community could be made aware of this system in advance. This way, if an outbreak were to occur, Housing could change the status of the residence to one of the pre-defined stages (ie Ontario Hall will now be "red" for the next two weeks) and students will understand what that means and what is expected of them.

Further, student staff have noted a lack of clarity in a few key areas.[23] Firstly, student residence staff are unsure as to what extent they are expected to enforce COVID-19 protocols and what that enforcement should look like. Moreover, student residence staff have noted that the students living in residence are equally unsure as to the role of student residence staff in enforcing COVID-19 protocols, leading to a potential lack of trust and/or the belief that a student residence staff member is being intentionally unfair by enforcing COVID-19 protocols. In addition, student residence staff members have reported a lack of clarity around how COVID-19 protocols apply to student residence staff members dealing with a student in crisis, where that student may be at risk of harming themselves or others.

Therefore, the USC recommends that detailed COVID-19 procedures should be created and disseminated to residence staff. Topics covered should include, but not be limited to: 1) What, if any, role student staff have in enforcing COVID-19 protocols, 2) How COVID-19 protocols should be considered when a student is in crisis, and 3) next steps to be taken when a student staff member is unclear of the proper procedure in a given situation. Furthermore, student residence staff and sophs should receive situational COVID-19 protocol training in the Summer before students move into residence to

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[22] Appia, Veronica. "Here's How Ontario's COVID-19 Colour Codes Work." Toronto.com, published 2 February, 2020. https://www.toronto.com/news-story/10239506-here-s-how-ontario-s-covid-19-colour-codes-work/

[23] Mental Health Roundtable, consultation conducted by author, London (via Zoom), 27 November, 2020.

ensure that all student leaders understand not only the COVID-19 protocols, but also understand how these protocols can be applied to situations they are likely to encounter.

Residence sophs, specifically, have expressed a lack of clarity as to what role, if any, they have in enforcing COVID-19 protocols in residence. Like student residence staff, this lack of clarity amongst students and sophs as to their role in enforcement could lead to a potential lack of trust and/or the belief that a residence soph is being intentionally unfair by enforcing COVID-19 protocols. This could damage the trusting relationship between soph and student. Thus, what role, if any, residence sophs have in enforcing COVID-19 protocols should be made explicitly clear to both residence sophs and the broader residence community.

Students in residence have reported uncertainty regarding which specific sanctions apply to certain actions in terms of COVID-19 protocol violations.[24] When the consequences of a potential action are unclear, it is difficult for students to understand the gravity of the situation and the importance of following the rules. Although ideally all people would follow all policies to the letter, "unwritten norms" are a cultural phenomena that exist in all types of workplace cultures and have been written on by everyone from McKinsey & Company to Fast Company. According to an article by Baird Group, a healthcare consulting firm, "regardless of the written policies, codes of conduct, and wall-mounted plaques espousing values, it is the unwritten rules that, if left unchecked, quietly abduct the culture and hold it hostage. It's the unwritten rules that form the cultural norms."[25] Although the COVID-19 policies in residence are clear on paper, a lack of defined sanctions for noncompliance may send the message that these policies are not "serious" or that sanctions are given at random, both encouraging unwritten norms of noncompliance. In this way, it is essential the sanctions for violating COVID-19 protocols are made clear to both students and residence staff members. All members of the residence community should be aware of the rules and the consequences for breaking them.

Furthermore, if a student receives a sanction for breaking COVID-19 protocols, they should understand exactly why they are receiving sanctions, which policy governs this behaviour (ie. Student Code of Conduct, Residence Contract, etc.), and what the appeal process looks like for their specific situation. Transparency and clarity around sanctions will ensure that all students are aware of the gravity of the situation and the importance of following all protocols.

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[24] Mental Health Roundtable, consultation conducted by author, London (via Zoom), 27 November, 2020.
[25] Baird, Kristin. "Unwritten Rules Shape Culture," Baird Group, published 18 October, 2019, https://baird-group.com/unwritten-rules-shape-culture/

Lastly, it was established in the "Loneliness & Social Isolation" section of this paper that "being connected to others socially is widely considered a fundamental human need -- crucial to both well-being and survival."[26] It was further established that Western students need a safe outlet social interaction, or else they risk either feeling increasingly isolated (thus negatively impacting their physical and mental health) or they risk their physical safety by seeking out in-person social interaction. The risk of isolation and loneliness is especially large for students in residence, as they are restricted to only a room and, occasionally, a lounge as opposed to a whole house. Therefore, the USC recommends that Western Housing should partner with residence councils in order to create outdoor and COVID-19-safe programming for students living in residence. This programming will allow students in residence a safe source of social interaction and will thus limit the need for students to seek out unsafe social gatherings in order to fulfill their need for social interaction.

International students living in residence are particularly at high risk for loneliness and feelings of isolation. International students are less likely to leave residence during breaks due to travel restrictions. For this reason, many international students have not seen their families for months. When the majority of students leave residence for breaks, the students left behind are likely to feel the resulting emptiness keenly. In the February 2021 Western Gazette article titled "Many international students have spent months alone in residence," many examples are given of the isolation international students staying in residence during breaks experience.[27] One student mentioned that they were the only student living on their entire floor for the duration of winter break, which made them feel "a bit isolated during that period of time."[28] While many students note that they rely on the company of other international students for social interaction during breaks, one student mentioned that, in traditional and hybrid-style residences where there is less space to socially distance, it is even more difficult to have safe social interactions. For example, in Ontario Hall, the closure of the common rooms has limited the ability of students to interact with one another.

International students who choose to leave residence for breaks must go through mandatory quarantine when returning to residence, an experience which can feel incredibly isolating. International students may experience fear for the health of family living in COVID-19 high risk areas, and they may feel stress regarding the uncertainty of when they will be able to return home and see their families. Furthermore, international

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[26]Novotney, Amy. "The risks of social isolation," *American Psychological Association,* vol. 50, no. 5 (2019), https://www.apa.org/monitor/2019/05/ce-corner-isolation
[27] Rodrigues, Rebekah. "Many international students have spent months alone in residence," The Western Gazette, published 1 February, 2021, https://westerngazette.ca/news/many-international-students-have-spent-months-alone-in-residence/article_6578d37e-5f24-11eb-ba01-237f811bf23b.html
[28] Ibid.

students from Asia may experience social isolation as a result of xenophobic rhetoric with regards to the coronavirus.

Thus, the USC recommends that Western Housing create mental health supports and programming specifically for international students who are living in residence.

Academics

Principle: Students, especially those who have completed a semester of virtual learning, are ideal candidates for providing feedback on teaching best practices in a virtual setting.

Principle: Just as there is a proper code of conduct for in-person classes, so too should there be a clear code of conduct in the virtual classroom setting that clearly outlines sanctions for discrimination/harassment.

Principle: The format chosen for an online class should be the one that optimizes the ability of all students to learn.

Concern: As a completely virtual classroom is a new experience for everyone, there is an understandable variation in how different faculty members have structured their virtual courses.

Concern: Virtual classes allow for new and different types of harassment and discrimination. Indeed, there have already been a variety of instances of racial discrimination on zoom calls at Western this year.

Concern: Students have reported experiencing zoom fatigue and body dysmorphia as a result of professors mandating that their cameras must be on at all times. This need to be "on" and presentable at all times, the hyper-awareness of being watched, and the hours spent looking at one's own image can be exhausting and/or damaging to a person's mental health.

Recommendation: The University should encourage faculty to adopt the best practices outlined in the USC's letter to the Associate Deans, sent on Friday, January 29th, 2021. While more detail can be found in the letter itself, a summary of the recommendations in the letter are provided below.

Recommendation: The University should encourage professors to seek and incorporate feedback from students with regards to course format and structure in addition to the usual feedback questions.

Recommendation: Measures must be put in place to protect students in a classroom setting, including better security to prevent "hackers" and clear sanctions outlined for if instances of discrimination/harassment do occur. Online safety and etiquette should be discussed by faculty with students on the first day of classes.

Recommendation: The University should encourage faculty to refrain from making it mandatory for students to have their cameras on at all times. Further, faculty should consider alternate methods of assessments in order to allow for students to participate in class without needing to be online all day long.

Recommendation Summary from Letter to Associate Deans, January 2021:
Section 1: Interacting with Course Content

a. *Integrating synchronous components, even in asynchronous courses.*
   - Synchronous lectures or providing a suggested work schedule
   - Optional sessions once a week to review concepts taught through self-directed learning

b. *Staying within the specified class time and providing regular breaks.*
   - End class with enough time for a reasonable break
   - Short breaks in classes longer than one hour

c. *Creating built-in extensions for assignment deadlines*
   - Giving two extra days for students to submit an assessment without penalty so they can manage their workload with slightly less pressure.
   - Clearly communicate to students how they can request an extension or accommodation if needed.

d. *Opt-in to accessible practices and universal design for learning.*
   - Ensure all students are able to engage with the material
   - Caption any videos or recorded lecture content.

e. *Avoid remote proctoring where possible.*
   - Create alternative assessments such as assignments, projects and reflections that allow students to apply their knowledge

Section 2: Interacting with Other Students

a. *Effectively integrating group work and fostering student-student connection*
   i. *Group Work*
      - Create roles within assigned group projects that each member can assume
      - Provide a clearly defined project timeline and checkpoints

- Eliminate elements of competition for grades within the group
ii. *Breakout Rooms*
- Create groups that are smaller, yet big enough that students are incentivized to participate (e.g. 4-6)
- Have groups work on their progress in a shareable document
- Structure group work around real-world problems

b. *Remain understanding of the current reality of student life and show students kindness and compassion.*
- Compassion helps to foster healthy classrooms, lower anxiety, fear and nerves as well as models important behaviour for life after and outside of university.
- This teaches students important life lessons and is likely to be your most effective driver of classroom engagement.

Section 3: Interacting with You, Their Instructor

a. *Over-communicate with your students and engage with them on your preferred platform.*
- Participate and engage with students about the course content via discussion forums or other collaborative outlets on OWL
- Record and post short videos to introduce major concepts or assignments and then host a Q&A session to clarify student concerns.
- Provide detailed feedback - in written or recorded format - on assignments

b. *Ask for feedback*
- Ensure the feedback process is anonymous.

c. *Manage realistic workloads.*
- Gain a better understanding of students' holistic workload by writing out all of the deliverables expected of your students (each quiz, forum post, assignment and midterm)
- Reduce the workload of students in your courses wherever possible.
- Post content regularly and provide reminders.

d. *Providing mental health resources and support to students.*
- Uphold an open door policy to help students navigate resources and seek support.

Western's students and faculty have had to quickly adapt to a virtual classroom model. Understandably, as this is a new experience for everyone, there is variation amongst professors with regards to the structure of their online courses. After a semester of predominantly-remote learning, certain teaching practices have stood out as the most preferred by students. After conducting consultations, the USC compiled these best

practices into a letter, which was then sent to the Associate Deans on January 29th, 2021. This letter was to be disseminated to faculty members shortly thereafter.

The University Students' Council recommends that the University encourage faculty members to adopt the best practices outlined in this letter. For more information on each recommendation, please refer to the original letter, which can be found here. The USC further recommends that the University encourage professors to seek and incorporate feedback from students with regards to course format and structure in addition to the usual feedback questions. In this way, faculty can ensure that their chosen course structure and format is one that students believe to be the most effective.

The virtual classroom model allows for many new, undesirable scenarios: discriminatory messages and/or the harassment of another classmate in the virtual classroom chat/private chat, the hacking of virtual lectures/meetings, the videotaping of class by other students, etc. Just as there is a clear code of conduct for in-person class, so too should there be a clear code of conduct in the virtual classroom setting. The University should explicitly define what proper conduct looks like in a virtual setting and clearly outline sanctions for discrimination/harassment and other code of conduct violations. Furthermore, the University should encourage faculty to discuss online safety and virtual classroom etiquette with students on the first day of class.

Students have reported experiencing zoom fatigue and body dysmorphia as a result of professors mandating that their cameras must be on at all times.[29] This need to be "on" and presentable at all times, the hyper-awareness of being watched, and the hours spent looking at one's own image can be exhausting and/or damaging to a person's mental health. Indeed, Diana Concannon, PsyD and psychologist, says that the experience of seeing oneself on screen all day "creates a feeling of being on stage and is often accompanied by a compulsion to perform, which also requires more energy than a simple interaction."[30] In addition, the experience of body dysmorphia is noted to "cause significant distress, and impact the ability to function in [one's] daily life."[31] In order to address this issue, the University should encourage faculty to refrain from making it mandatory for students to have their cameras on at all times. Furthermore, the University should encourage faculty to implement alternative forms of participation so as to limit the need for students to be in Zoom meetings all day long.

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[29] University Affairs Standing Committee, consultation conducted by Victoria Barroso, London (via Zoom), 10 February, 2021.

[30] Gillespie, Claire. "Zoom Fatigue: Why Video Chat is Exhausting You Right Now, and What To Do About It." Health, last modified: 17 February, 2021, https://www.health.com/condition/infectious-diseases/coronavirus/zoom-fatigue

[31] "Body Dysmorphic Disorder." Mayo Clinic, date accessed: 16 February, 2021, https://www.mayoclinic.org/diseases-conditions/body-dysmorphic-disorder/symptoms-causes/syc-20353938