



# The University of Auckland

## Review

**Creating an inclusive teaching and learning environment for students with impairments**

**Supplementary Report  
"Mental Health Impairments"**

**June 2010**

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## Introduction

This report focuses specifically on mental health issues and is supplementary to the 2009 "Creating an inclusive teaching and learning environment for students with impairments" report.

It amalgamates data related to mental health impairments gathered from interviews and a staff survey conducted for the 2009 review report together with new data from supplementary interviews.

As with the 2009 report, it is important to note that the findings represent the responses given to interviews and the staff survey. Absence of specific issues or topics should not be construed as negative; it is simply that they were not raised.

### Terminology

The following definitions were used by the 2009 review team and apply equally to this supplementary report:

An inclusive learning environment is one which identifies and removes barriers in all areas of campus life.

Impairments include: Deaf, hearing, blind, vision, head injury, medical conditions, **mental health conditions**, mobility/physical, speech and learning impairments.

Kia Ōrite (2004, p.10) uses the New Zealand Disability Strategy definition of disability, stating:

"We acknowledge the different viewpoints that exist with regard to the language around disability. The language we have chosen fits with the social model of disability. By referring to students with impairments, and to the interaction between the student with the impairment and the tertiary environment as creating disability, we separate out what can be changed. This is a useful tool for creating an inclusive environment."

### Student Interview Profiles

Interviews were held with two female students and one male postgraduate student who identified as having a mental health impairment. One was Maori.

Some interview data provided by two of these students was included in the 2009 report. This report adds to that information and provides data that was not able to be included together with new data gained from a supplementary interview.

### Staff Interview Profiles

Each interviewed student was asked to identify at least one staff member at the University who had supported their learning. Three staff members who were nominated by students with mental health impairments were interviewed. Two

were academic and one was a general staff member. While none of the staff knew the identity of the student who had nominated them, each had expertise in mental health issues which they discussed in their interview.

Some interview data from one staff member was included in the 2009 report. The other two staff interviews were carried out at a later date.

### **Staff Surveys**

Mental health issues were also raised by a few staff in the open ended section of the staff survey and were included in the original report.

### **Findings**

The findings are reported using relevant topic headings from the 2009 "Creating an inclusive teaching and learning environment for students with impairments" report. These headings were selected to correspond to "Best Practice Standards for Creating a Fully Inclusive Environment" outlined in Kia Ōrite Achieving Equity: New Zealand Code of Practice for an Inclusive Tertiary Education Environment for Students with Impairments (2004).

## **1. Access to buildings facilities and equipment**

Students with impairments will have equitable access to the physical environment within the tertiary institution in which they will study, learn, live and take part. (Kia Ōrite, 2004, p. 28)

In the interviews and staff survey, many of the staff and student participants mentioned concerns about physical access.

The size and location of the physical environment, particularly on the City Campus, creates particular challenges. One student with mental health impairments made the following comments:

*I hate being in a room where I feel closed in ... and if a room doesn't seem well ventilated then I tend to feel quite tired, soporific. ... I'm overweight as well, I sometimes tend to find the ergonomics of some of the chairs and what-have-you are sometimes not always that great. (Student)*

## **2. Examinations and assessment**

Assessment and examination policies, procedures and practices provide students with impairments the same opportunity as their peers to succeed. (Kia Ōrite, 2004, p. 37)

The University of Auckland Teaching and Learning Policy: Assessment of Student Learning has a clause pertaining to students with disability (p.6) which states:

*The University is committed to ensuring accessibility of its courses, programmes and assessment procedures for all students with disabilities.*

- *Teaching staff are required to respond positively to requests for reasonable adjustments to be made if assessment arrangements are*

*likely to place a disabled student at a disadvantage over non-disabled students*

- *Assessment and examination practices and procedures should provide disabled students with the same opportunities as their non-disabled peers to demonstrate the achievement of learning outcomes.*

Students and staff commenting specifically about mental health impairments noted that there were often more difficulties associated with the stress related to assignments, tests and exams:

*I can imagine I'm going to be more stressed in exams and stuff, considering I'm only doing one paper this year and it was already stressful enough and I got like, physically unwell as well. So, that's even more difficult. So yeah when I'm doing more than one paper I think it's going to be interesting, and working at the same time. (Student)*

One student was advocating for alternative options for assessment:

*I just think it's such a pity to pay like five hundred, six hundred bucks for a paper and then you drop out and you've failed your paper even though you've maybe for the first three quarters of the semester you've done pretty well. ... Or maybe even options like all internally assessed instead of an exam or just all exam. I mean I don't know how they could work out who could get that option but I still think it's about being creative. You know, I want to be able to support people to get tertiary education and it's just the way to do it I guess. (Student)*

### **3. Access to general and specialist services**

Students with impairments have equal educational opportunity through access to appropriate support and services. (Kia Ōrite, 2004, p21).

#### **3.1 Specialist services**

##### **University Health and Counselling Centre**

Most students with impairments need to access Student Health and Counselling if they wish to apply for special conditions.

This service was specifically mentioned by one of the students with a mental health impairment who said she "found two people there to be spectacular" and one staff member who said she had received "huge support" from them:

*Student health was really supportive, ... I saw [my GP] through most of Uni and they had a number of nurses there as well that I kind of saw regularly and at one point I was going daily to pick up meds from them which my psychologist externally had kind of organised and they were really supportive and kind of would talk to me as well even though they were kind of rushed of their feet at times. (Student)*

There was one response in the open-ended sections of the survey that related to this service:

*I would like to see the University take a more actively supportive approach to student mental health. The University Counselling Services provide an excellent service, however they can only offer students 10 free sessions. For most if not all mental illnesses, long-term therapy is the best treatment (and much recent research supports this), however students cannot usually afford this for the duration of their studies. (Staff member)*

## **Student Records Office**

Issues related to deletion of papers for students with mental health impairments were raised by two of the interviewees (one student and one staff member). It appears there is a need to achieve a balance between recognising that it is difficult to predict whether mental health impairments will be an ongoing issue or not. When the student is well they can be very successful but at other times they may be at risk of failing everything. It was also noted that in some cases a student may be too unwell to fill in the required section of the application form.

### **Information about services**

Many of the staff and students who participated in this review did not know which services were available to support students with impairments and/or who was entitled to use them:

*I think what would be useful for me is people I could access ... that would understand where I'm coming from and give me some information about the questions I might have. So I might want to know how to get an extension or I want to know what to do if I don't feel up to my exam or stuff like that. But in a non detrimental way, like I mean I suppose I could look up the university website but it's so huge I don't know where to ask these questions and I think a lot of people feel the same way. (Student)*

When asked if they had considered using Disability Services as a facility that could offer some support, two students with mental health impairments indicated they did not know it applied to them:

*[It] didn't occur to me at all. I always presumed it was to do with wheelchairs or dyslexia or needing a reader or needing a writer for an exam or something like that – not the kind of work I was doing because so much of it was in my head. (Student)*

*I was never aware of anything for mental health issues and perhaps that's just because I'm not aware of it. But ... I had looked out for it, I looked in the places that I thought would be obvious like craccum, the student mag. And I never really knew if I was supposed to tick the box that said do you have a disability? Because I don't think I have a disability but I have things that impact on how I work. (Student)*

A number of comments were made about the importance of students knowing how to access specific support and/or supportive strategies:

*I think around whether someone has problems with mental health issues or whether they've got some kind of ergonomic problem, physical problem or whatever it is, it would be useful maybe if the University is more explicit in*

*spelling out how people with different problems maybe helped or aided and also what the expectations are from those persons ... it's sort of there but could be made more explicit. (Student)*

Also seen as important was the need to reduce the stigma surrounding mental health impairments in order that students are able to access support:

*I think that it's important that in orientation that it's addressed, it should be revisited so that students are aware... it's important that the University doesn't stigmatize mental illness in any way- that it's seen to be open and accommodating. ... The University has to be able to give the students information about what's available if certain circumstances arise. (Staff member)*

One student cautioned that it was important to consider how support available to students with mental health impairments should be promoted:

*As long as it's not marketed as a disability because most people don't think of mental illness as being a disability. (Student)*

## **4. Teaching and Learning**

All academic programmes are accessible to students with impairments, and staff design and implement appropriate teaching and learning strategies. (Kia Ōrite, 2004, p.33).

### **4.1 Encouraging students to ask for support**

Staff show a willingness to discuss support, invite students to approach them privately and contact students where performance may be affected by impairments. (Kia Ōrite, 2004, p.35).

The importance of encouraging students to ask (and access) support was one of the key areas discussed in relation to mental health impairments. A few staff commented specifically about the need to be aware of invisible disabilities, and mental health impairments in particular, in order to encourage students to ask for support. For some staff, personal experience (e.g. with a family member or friend) has been a catalyst in developing understanding of these issues:

*It's not viewed very positively like somebody who is bright and this is just an episode of un-wellness and they will move beyond that and be able to continue and study and do other things. Sometimes it appears that there is a very poor understanding of the experiences students have that affect their ability to learn. (Staff member)*

*...If anything I became quickly aware of the vulnerability of people and how things can change or how people can really change under a mental illness and it is not their fault and I wasn't very good at coping with it initially, but I have learnt and I have learnt to divorce the person from the illness. But I think there are certain skills required and experts have helped me to learn these sorts of things. (Staff member)*



*We get a lot of, "I am not sure if this student is disabled?" from administrative staff because they don't walk in with a cane, they don't sign, they don't come in a wheelchair. And invisible disabilities like mental illness is one that still struggles a lot from that significantly because its not necessarily perceived in the same way and of course there are still stigma issues around mental illness. (Staff member)*

*I know a lecturer who in the past said she didn't understand depression so she said at the start of last semester - if anyone has a mental illness, can someone come and talk to me about what its like and someone ... someone went and talked to her about it and explained to her what it was like to have depression and she actually has a greater appreciation for it now. She gets up and says this is an intensive programme, if you have mental health issues, go and see XXXX to get things organised now before things spiral out of control when things are crazy and busy. (Staff member)*

Some interviewees discussed the relationship between stress and mental health impairments and the importance of staff understanding this, as well as supporting students to develop strategies to manage stress and/or being aware of what support is available:

*I know [students] are in an age of emergent mental health conditions where we might have a first diagnosis of bipolar disorder or schizophrenia versus anxiety and depression, which are not as heavy a diagnosis as a rule. It's a difficult time for them and university life can be an increase stressor whether it is because they are living away from home or their normal support system, [and] academic stress. It's not surprising a number of them get into trouble. ... The university has a responsibility to look after them (Staff member)*

*Many students suffer from mental health issues, often exacerbated by stress. Setting deadlines in any form adds to their stress levels. I do my best to work with them on healthy responses to stress, depression and quite often alcoholism and drug dependency. (Staff member)*

*I am aware that in the mental health area that Dr Tony Fernandez in Psychological Medicine has set up a website, it's really about developing self-help skills- to deal with anxiety and stress and all those sorts of things. So there are a lot of things we can do around managing our own emotions and mental health and a level of understanding about what going on about ourselves. I think it is called 'Calm'. (Staff member)*

*Well I just know that there's counselling services and GP related services and those sorts of things. So if I have a discussion with a student that surfaced and I had some very strong concerns then I would say to the person, you know, I'd be quite open with the person and say, you know, this is happening and maybe impacting on your learning and these are the types of services that are available close to hand. And I'd advise them to maybe check those people out. (Student)*

*I don't know how it could be done, but it would be quite good if the university kind of acknowledged that whether you've got a vulnerability to mental illness or not, you can hit the wall and that people can do it in lots of different ways. And that maybe offers of help don't need to be in the context of 'come here and we will take care of you'. (Student)*

Two interviewees (one staff and one student) cautioned that staff should be aware of what is within their jurisdiction and expertise when supporting students with mental health impairments. For example, a graduate student explained that when she was starting to feel “destabilised” and was considering going back onto medication to clear her head, one of her supervisors said “don't do that, it's not good for you” which was not considered to be a helpful intervention.

Another staff member also discussed boundaries:

*I often think that for people to discuss [things like depression] in the first place you have to be perceived to be trustworthy and somebody [student's] feel like they can talk to. But as I said you've got to be really clear about your own boundaries and what you can offer people and what you can't offer people and who are the appropriate people to do that. And in the University we have counselling services and GPs and support systems that can better work for students and you should be hooking people into that, if that's appropriate. (Staff member)*

All staff participants who were interviewed and most of the academic survey respondents said that inviting students to make contact with them about any aspect of their class was important. However, most respondents said they never include a statement about their willingness to make arrangements for students with impairments in their course notes, and the majority do not invite students to privately discuss their special learning requirements. Many said they would consider doing this in the future. One noted the importance of this in relation to students with mental health impairments:

*Well basically we have always had the clearly identifiable students with physical disabilities, but we have an unbelievable spike in the students with diagnosed mental health issues and accessing mental health advisers. (Staff member)*

### **The importance of disclosure**

Communication systems are effective in providing relevant and timely information to both staff and students, and a safe environment exists for students to disclose information. (Kia Ōrite, 2004, p.42).

Staff and student respondents placed high importance on the need for students with impairments to disclose in order to access the specific support they required. The following comments were made in relation to mental health impairments:

*In discussing students with mental health issues the other thing we would do would be to give the student special consideration at examiners meetings, but I don't think that we can really do that unless we have documentation. ... We do need documentation to give the student the*

*benefit of the doubt. But otherwise I think the system could be open to abuse. (Staff member)*

*I have probably worked with more students maybe with a mental health impairment or maybe a learning disability and I can work with them sort of 1:1 in terms of meeting what their needs are... I guess my concern with any student is that if you don't disclose what you do need, I may not provide the right kind of help. ... Most of our students are competing to get into medicine so it is very cut throat and so there is probably little motivation for students to help one another. So that is why it's all the more important to tell me what is going on... (Staff member)*

*it's going to be a trust issue for some people about just how comfortable they are as to whether they [talk about their mental health illness] or not. It would be useful for those students who ... are halfway through a paper and become unwell and need time out [if] the university has some way of looking at that and saying ok we will credit you the first part and we will maybe allow you next semester to come back in, finish the paper off ...and the student in turn would need to present some medical certificate or something to validate that... (Student)*

### **Reasons for non-disclosure**

While there was a high level of agreement about the advantages for students to disclose impairments, it was also clear from the student participants, and some staff, that there were many reasons for not disclosing impairments. These reasons include fear; not wanting to make additional work for others; the additional effort required to disclose; not wanting to stand out; and not knowing the correct person to approach. For students with mental health impairments disclosure is likely to be even more challenging:

*Well I guess it's a bit of a two way street though I mean I never really knew whether I should talk about it you know, talk about how crap I felt or what I was going through, I kind of felt like I shouldn't, I think particularly for under grad because well in [subject area] there's hundreds and hundreds of students especially in stage one and I just kind of felt like I would be [a burden] or just one of the numbers. In post grad it's a bit different because there was about fifteen of us so I felt that I could actually share a bit more about ... how I am. Some of it was about me not sure whether I should share that and then the fear of what if I did? ... Would lecturers or tutors be unsupportive? (Student)*

*I don't know whether I declared that I had a disability or not ... When I first started doing the paper I was feeling reasonably good and you know I wanted to do study under my own merits as it were, I really [didn't] want to be given special treatment per se. (Student)*

*... it's whether people feel safe to come out of the closet or not. I did at my previous place and I ... was quite open that I had a problem with depression, so the [people] there ... know that it is an issue at times. But I know other people who have had various problems who do not feel comfortable to come out as such and say so. (Student)*

*One of the really difficult things about having any kind of mental illness or vulnerability to mental illness, is as soon as you talk about it or try and get help for it, it becomes so serious and intense and concerning and you end up being a patient when actually being a patient isn't what you are after you are just after a little bit of help. So it's quite difficult I think for the university to have that kind of light touch across issues of mental illness that says "we're here and if you come in here you don't automatically need to see a psychologist ... [The light touch is] outputs focused, it says if you need more than this we can help to refer you to somebody else but in the meantime if the behaviour that you want to encourage is being able to sit and write and the behaviour that you want to discourage is staying up half the night and not writing then we can help you with that because there are some really good therapists out there that can do that work. (Student)*

One student explained that she did not identify mental health issues as impairments:

*I think most people with mental health challenges wouldn't [indicate a disability on the enrolment form] because I don't think most people define themselves as having a disability or impairment. So yeah, I think other people wouldn't access the kind of services for disability impairment. So I thought well there's a number of services to support people working or going into jobs, particularly for people with mental health issues, but I'd never really seen anything for supporting people in like education, like tertiary education, and I always thought it was a bit of a gap. (Student)*

Stigma was another reason provided for not disclosing mental health impairments, in particular:

*I suppose there are questions for students around their health status and some people may chose to declare mental health status. I know sometimes because of the stigma around mental health in general society that sometimes people won't. And if you say you have a stigma around mental health in the general society, we're just a part of general society so you'd expect that the same sort of stigma occurred here. (Staff member)*

### **Privacy issues**

Issues raised by participants in the 2009 review report included not wanting to be singled out as a student with an impairment (by being stigmatised); students having to constantly verify their impairment; or choosing not to register with Disability Services; or not realising that they need to register.

Additional issues were raised by one staff member in relation to mental health impairments:

*If a person confided in me and ... if I perceived that they needed help I would recommend and refer them on. But if the risk was serious, and there are some well publicised cases in the States where risk has resulted in serious outcome for others, and if I felt that I needed to talk to*

*somebody, I wouldn't hesitate to tell the person that what they've told me is of a serious nature and if they don't act on it themselves then I would feel I would have a moral obligation to talk to the people you are accountable to about what has been divulged. (Staff member)*

Support services such as Disability Services and Student Health and Counselling are aware of the legislative requirement to respect students' rights to privacy with regard to their health or disability-related conditions (Privacy Act 1993 and Health Information Privacy Code 1994). This legislation means that staff may not disclose health or disability-related information about students to other staff without consent from the students concerned unless the situation conforms to exemptions as outlined in "On The Record – A Practical Guide to Health Information Privacy". For example Rule 11(2)(d) of the Health Information Privacy Code 1994 states:

*Information may be disclosed if it is necessary to prevent or lessen imminent threat to public health or public safety, or the life or health of any individual, including the patient.*

*The threat must be serious.*

*The threat must be imminent.*

*It must be a threat to public health or to public safety, the life of a person or health of a person.*

*The information must be given to someone who can act to prevent or lessen the threat.*

*Only the information necessary to achieve that purpose should be given. It might not be necessary to disclose all of the information.*

## **Other challenges**

For some students their impairment is only one of a number of challenges they face. Other factors that were identified by students include illness, tiredness, family and cultural responsibilities:

*It's been really hard again with this paper, it's um, been complicated by the fact that my mental state hasn't been that great - certainly in the last couple of months - and my wife has also gotten depressed and had probably 4-5 weeks off work. So that's been hard going, and probably complicated by some health issues that I've had as well. (Student)*

## **4.2 Inclusive teaching and learning practices**

Student interview participants identified practices which had supported their learning at the University. Those who identified having mental health impairments discussed the importance of receiving support and understanding from staff. For some this included approval of extensions for assignment deadlines when required:

*[my supervisor] definitely was interested in me ... and that I was taking care of myself .... She kept her eye on the goal, and in fact that's one of the reasons why I chose her in the beginning, not because anyone had told me what a lovely person she was, but because I had been told she has a*

*reputation for getting people through. So I knew that's the kind of relationship that we would have... (Student)*

*There have been a number of times when I have gone to them needing extensions and whatever because I am struggling to finish my assignments because I am going through some stuff. So yeah, support in terms of extensions they have kind of been okay about that but other than that not really. (Student)*

Similar issues were identified by students with mental health impairments when asked if there were ways the University could have supported them better:

*I think that I would want the most is that my lecturer kind of understands my situation and ... can offer some flexibility in the time constraints for things. I think it is the assignment thing that kind of gets me in the end because I also kind of want to do well which is the really annoying bit and so the pressure to do well is also an issue... but more than anything I want my lecturers to understand or try to understand and kind of treat me as a person that's going through some difficult things ... I always feel like I shouldn't make times with my lecturers or whatever and talk to them... I would have talked to my tutors, some of my tutors, but even then they see quite a number of people through their tutorials ... and some of them are kind of intimidating as well. Like, I mean it's probably the same in other subjects but they are a really kind of well renowned international experts on a particular topic I feel so silly walking up to them about my frivolous complaints. (Student)*

Making expectations clear was also identified as being important:

*I think for some people it feels like it's a bit of an unknown about what's expected and what you're supposed to do over the course of that paper. And just the particular paper I've just done has been really good because it's been clear from the start about like, exactly what we're going to be doing and how long it is and what you're expected to do for each thing and we know what's in the exam, and I like knowing this stuff because then I can kind of mentally prepare myself and it somewhat reduces the stress I think. And if I obviously do other papers at the same time I think it would help me structure, well attempt to structure on time. (Student)*

One student explained how a more traditional teaching approach impacted negatively on her ability to learn:

*As a student you sort of have an expectation that you come ready prepared to learn and to, you know, and actually be actively involved and all that. The reality is that for someone like myself I will have times when I haven't slept well; I'm struggling to stay awake, I'm struggling to focus on what's been said. If the room is feeling closed in and it's sort of hot and close and there's not much variation in how something is being delivered then I just tune out, I just lose concentration. But in saying that I think the tutors have done a reasonable job in how they were presenting material and did vary some of how different things were being done; stuff*

*from using overheads and what-have you but also other exercises where you get into groups and do things... (Student)*

Students advised other students with mental health impairments to ensure that support structures were in place to support their learning and to carefully consider workloads:

*The main thing I've said to [other students who have experiences with depression or other mental health issues] is to make sure they gets lots of support and balance ... Because it is a constant balancing struggle really between how much you look after yourself, when looking after yourself feels like going to bed for two weeks, and how much you push yourself. So you need somebody there who's going to help with the pushing but will keep you focused and keep reminding you that actually you came into this for a really good reason and the purpose of this is to get you finished. But also at the same time some people who are going to notice things for you, that it's time to take a break, that you might need an extension-something like that. So that's what I have said to them, get some balance... (Student)*

*I know a young person who has dropped out this semester ... I'm not sure if it was because she was changing meds or if mental health stuff came up too much. And I feel it's kind of a pity and a bit sad I mean, like if she'd had support and whatever it would have been beneficial for her ... I did a couple of semesters in under grad where one semester I did one paper and one semester I did two papers and just having that reduced work load was really helpful. So I mean I guess that I would give my advice to some people like part time. Like yeah, and a little bit of work on the side or whatever. (Student)*

## **5. References**

Tertiary Education Commission and the Ministry of Education. (2004). *Kia Orite: Achieving Equity, The New Zealand Code of Practice for an Inclusive Tertiary Education Environment for Students with Impairments*.

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