A Mental Illness How-to for Waterloo
Navigating the mental health system at the University of Waterloo

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All advice contained herein is current as of April 2019 and is derived from UW student experiences (majority engineering students, some from other faculties). It should not replace or be taken as advice from mental health experts and may not necessarily apply to all situations.
1.0 Health Services

Health Services is part of UW Campus Wellness and is located across the pond from the Student Life Centre. The 1st floor is where all the general practitioners work, as well as most of the services offered at Health Services. The 2nd floor is the Mental Health Office, where the psychiatrists, mental health nurse, and several counsellors work.

1.1 General Physicians at Health Services

A certain number of doctors at Health Services are available to see students who have mental health concerns. You can make an appointment at the front desk; when they ask what it is for, all you have to say is mental health and no other questions will be asked. You will likely be seen in as soon as a few days, depending on the time in the term.

When you see the doctor, they will ask you about your symptoms and concerns so make sure you are ready to talk about them. Bring a list if it makes it easier to remember them. Appointments are usually fairly quick so it is best to get straight to the point. Your mental health symptoms are no different than any other physical health symptoms, and nothing to be ashamed of. They may ask you to fill out questionnaires to gauge the severity of your symptoms. They will then recommend treatment options. They can prescribe medication and likely see you more frequently than a psychiatrist can.

If they feel it is necessary, they will refer you to a psychiatrist upstairs.

Keep in mind that you will need to make separate appointments for mental health and other health concerns.

You are not guaranteed to get a physician who is sympathetic to mental health issues, but those who are seem to be exceptionally helpful. Find the one who works well with you!

1.2 Psychiatrists

A psychiatrist is a medical practitioner specializing in the diagnosis and treatment of mental illness. To see a psychiatrist at Health Services you need to get a referral from a general doctor downstairs. After the referral you can expect to wait anywhere between a few weeks to a few months to have an appointment.

The first appointment will be long, and will go over your history and possibly attempt a diagnosis. It is important that you are completely honest and share as much as possible as this will help the psychiatrist get a full picture of your situation. You may get a diagnosis that day, or they may wait to monitor symptoms over a longer period of time before they confirm a diagnosis. Depending on the diagnosis, they may prescribe medication. Psychiatrists at Health Services typically do not provide any sort of counselling, as they are more doctors than anything else.

Follow up appointments will be to check in, and possibly make changes to your medication. It is important to track your symptoms between appointments so you can update them accurately. You can expect to be seen anywhere between every 2 weeks to every few months, depending on the urgency the psychiatrist sees. If your symptoms are very extreme, you may be asked to come in as soon as the following week to check in. Make sure you bring the appointment paper back to the mental health front desk to schedule your next appointment!

They are also extremely expensive if you miss them! Make sure to remember!

1.3 Mental Health Nurse

The mental health nurse has a number of purposes. If you are released from the hospital for a mental health concern, you may be asked to make an appointment with the mental health nurse to help your transition from hospital to regular life. Follow up appointments can be made to help track symptoms, medications, appointments, and accommodations. They can also do phone safety checks with you, whether you are on co-op or on campus to supplement your appointments with psychiatrists and doctors. The mental health nurse mainly helps people who may be struggling severely with their mental illness.
1.4 Off Campus Doctors
You may also prefer to see a doctor off campus, maybe a family doctor in your hometown, or in the Waterloo community. You may look to off campus doctors for a second opinion.

Family doctors are not always best equipped to deal with more complex mental health issues, but are a great starting point. You can get referred to psychiatrist in the community by family doctor, or walk in clinic.

Psychiatrists and family doctors can recommend psychologists and counsellors in the community.

1.5 Your Rights as a Patient
As a patient, you always have the right to ask questions. This is a super empowering thing; they know the science and you know you, sharing knowledge means you can get the best care possible.

You can also request other doctors, this is especially important for referrals. Something to keep in mind: a second opinion from another psychiatrist is possible, but a third is not covered by OHIP.
2.0 Counselling Services
A counselor is a person trained to give guidance on personal, social, or psychological problems. Counsellors and therapists are synonyms. In order to be a registered counsellor in Canada, there is a minimum amount of post-secondary education required. The main Counselling Services office is located in Needles Hall, but counsellors may work out of:

- School of Architecture in Cambridge
- Digital Media School in Stratford
- Faculty of Engineering
- Faculty of Math and Computer Science
- McMaster Medical School in Kitchener
- Health Services (2nd Floor Mental Health Office)
- School of Pharmacy in Kitchener
- Mackenzie King Village Residence
- Faculty of Science

2.1 Individual Appointments
You can make an appointment at the front desk in the Needles Hall office. You won’t need to go into detail, just ask to make an appointment with a counsellor. If it helps, bring a friend for moral support! You may be asked to fill in a brief questionnaire about why you are coming in, and to assess the severity of your symptoms. You may be asked to meet with the intake counsellor, who will assess how urgent your needs are and advise how soon you need to meet with a counsellor.

At your first appointment, you will be asked what your concerns are and likely your history. Come ready to talk, don’t be afraid to bring a list of concerns or worries you have and want to talk about. You only get as much out of sessions as you put in. You don’t need to know the exact right words, but should come with a “I want to get help / get better” mentality.

Follow up appointments can be made for ongoing concerns. You can expect to be seen every 2-4 weeks. Depending on how popular your counsellor is and the point in the term (the wait list is always longer towards the end of the term) you may be seen more or less frequently. More urgent cases will be seen more frequently.

There is an “on call list”; if someone cancels and they have a sudden opening they can call you and fit you in. Walk in counselling is available on some days, for a set number of appointments. If you want to guarantee you will be seen, make sure to go early. Engineering Counselling (E2) also has its own drop in hours.

Try not to be late or miss an appointment as there is a $35 missed appointment fee.

They can provide you with resources, but you have to be ready to make changes in your lifestyle or mindset, or be able to explicitly identify to them when you’re not ready to change. Be open to giving them feedback, especially if the resources and methods they’re suggesting aren’t working for you, or if they don’t seem to be relating or understanding your situation. Recording and journaling how you’re experiencing things might also be a helpful thing for you to bring to a session, as there is more data and info for the counsellor. If it helps, ask the counsellor at the end of a session for a concrete take away (e.g. a summary, a to-do item, a resource to tap into).

Not every counsellor will be the right fit for you, it may take some time to find the right one. This can be a trying process, but better than staying with a counsellor that’s not helping. There is nothing wrong with saying to a counsellor that you don’t think they are a good fit and you are going to look into other options.

Counsellors cannot provide a definitive medical diagnosis or prescribe medication, but they can refer you for psychological assessment to address more serious concerns.
The confidentiality agreement is a cornerstone of how counselling works. Anything you disclose during a session cannot be carried forward outside of that room, except for the scenarios listed below. Notes can be taken during sessions, and summaries can be written at the end but those are safeguarded through the entire time you are there. The confidentiality agreement is covered in depth at your first appointment.

The agreement can be voided in four (4) cases:

- You - as the patient - consent or allow the practitioner to void it
- You disclose intent to harm others
- A minor (anyone under the age of 18) is at harm
- You disclose suicidal intent

Practitioners are not out to get you and are not just looking for red flag to report you. If you are suicidal it is safe to disclose that in the session if you are willing to talk through it and create a safety plan. At the end of the day this agreement is in place to help students and protect the service.

There is also a social worker available at Renison University College who offers counselling, but is only available to students at Renison.

2.2 Group Therapy, Seminars, and Workshops

There are a number of open seminars and workshops around coping with stress, as well as symptoms of anxiety and depression. These sessions are free and open to anyone, and sign ups may not be required. You can go as frequently or infrequently as you like.

There are also a number of group therapy sessions available for psychotherapy, including DBT (Dialectical Behavioural Therapy) and CBT (Cognitive Behavioural Therapy). For some of these sessions you may need a referral from your counsellor, as there is a limited number of seats.

All sessions are run by counsellors, and very informative.

2.3 Psychological Assessments

The wait list for psych assessments can be quite long, depending on the severity of your symptoms. Your counsellor might suggest it, if they feel you may benefit from a more sophisticated analysis. Assessments are performed by psychologists and supervised pre-doctoral residents. A psychologist is a professional specializing in diagnosing and treating mental illness, but cannot prescribe medication.

At the assessment they will have you go through your history and symptoms. They will ask you a lot of questions and you will be expected to talk a lot. It is important to be as thorough and give as much information as possible to help them see the full picture of your mental health; bring a list of concerns if you can. This appointment will be over an hour. They may ask you to fill out several long questionnaires later on that can gauge your symptoms and patterns as well.

From that assessment they’ll make a report, which can include everything from a diagnosis to recommendations for coping strategies to a request for a temporary accommodation. There will likely be a follow up appointment, where they can explain the report and let you ask any questions. The last section of the report is next steps (ie. Investigate medication, seminars or support groups you can attend). Handling the information in an assessment can be difficult, so make sure to talk to your counsellor about it if you are having trouble processing it.

The entire process from initial appointment to the report can be quite lengthy. However, it is something you will only have to do once.
2.4 Off Campus Counsellors

There are a number of counsellors off campus in the Waterloo community that will likely be able to see you sooner than counsellors on campus at Counselling Services. They can be expensive, but a lot of them have student rates. They may also be covered under the FedS undergrad health plan or your parents’ insurance if you fall under it.

You can find an off campus counsellor by researching independently. Psychology Today is a good resource, as well as the Off Campus Resource Bank on the Engineering Society website. Calling or emailing to make an appointment can be intimidating, but all you need to say is a brief introduction, why you want to see a counsellor, and your availability. You can look up sample emails online if you’re nervous!
3 Crisis Situations

A crisis situation can look different for everybody. It may look like the urge to harm yourself or others, making plans to harm yourself or others, having strong feelings of paranoia, feeling extremely disconnected from reality, or the feeling like you cannot control your body or your actions. It is always better to be safe than sorry; if you feel like you may be in a crisis situation it is likely best to take immediate action.

3.1 Emergency Resources

You can always go to Counselling Services or the Mental Health office in Health Services for an emergency. If you tell the front desk you think you are in a crisis situation or you really need to see someone urgently, they will do their best to accommodate. There are a few emergency counsellors whose sole job is to see people same day. At Counselling Services, you will be seen by an intake counsellor to assess the urgency. If you have suicidal or homicidal intentions, safety plans will likely get made. It will involve a procedure that you will follow to calm down. They will ask for an emergency contact or two (parents, friends, siblings) you can call if you are in trouble.

If you in a crisis situation after hours, there are a number of helplines you can call:

- Here 24/7 - 1-844-437-3247
- Good2Talk - 1-866-925-5454
- Crisis Services Canada - 1-833-456-4566 or by text 45645

They can talk you through the situation, and may recommend you seek immediate medical attention.

If a friend or family member is concerned about your situation, they may call the police or an ambulance. Unless a person is very seriously at risk of harming themselves or others, it is often better to call an ambulance. The procedure for police in crisis situations involves handcuffs and escorting the individual through the hospital and may be traumatizing for some people. If this happens to you, it is important to remember you are not a criminal and it is simply procedure.

3.2 Hospitals

There are two hospitals in the KW area: Grand River Hospital and St Mary’s General Hospital. If you are checking yourself in, you can go to the emergency department and will be seen by a triage nurse to assess what should be done.

If you are taken in by the police, they will take the handcuffs off once you are with the triage nurse. The police officer with you will accompany you until you are admitted.

You will likely be seen by a mental health nurse, and then a doctor or psychiatrist. If you go in at night, you will likely have to stay the night, as most psychiatrists work day hours. In the meantime you will likely be seen by a doctor or two. If you need something while you’re there, it is ok to ask a nurse. They can get you water, juice, some food, a blanket, etc. They are busy, so you may not get the most compassionate care.

If a doctor signs a Form 1 for you, you can be held for up to 72 hours in order to undergo a psychiatric assessment. A Form 1 is also referred to as an Application by Physician for Psychiatric Assessment.

You may leave with a new prescription, a new diagnosis, new recommendations, or not much of anything.

You may have to stay longer than a day if they want to check on you longer, and admit you to the psychiatric ward. Being admitted for a mental health concern is no different than being admitted for a physical health concern, and there is no need to feel ashamed. You may meet with psychiatrists, counsellors, doctors, social workers, and nurses. The length of time you will need to stay is dependent on how long they want to monitor you for. When you are released from the hospital, you will not be left on your own! There are social workers and nurses who can help you transition back into regular life.
4.0 Student Run Services

4.1 MATES

MATES (Mentor Assistance Through Education and Support) is a one-to-one student peer support program offered by the Federation of Students in consultation with Campus Wellness. MATES volunteers go through an intensive selection process and receive extensive training in mentorship by counsellors from UW Counselling Services.

They offer peer to peer support to those who are struggling with:

- stress
- academic issues
- social and relationship difficulties
- mental health challenges
- transitional challenges to university life
- challenges in adapting to culture

Their office hours and locations from term to term vary, so check the website! There are both appointment options and drop in sessions. Appointments can be made using their online form, and any questions can be sent to mates@uwaterloo.ca. One of the advantages of MATES is the short wait time on appointments and many drop in hours available, which usually means you can be seen same day or have recurring weekly appointments.

Volunteers are trained to know the services on campus and are able to refer you to the resource that can help you the most if they are not the best resource for you at the time. They cannot suggest therapies or treatments, and are trained to not use clinical language with you. While they cannot address any diagnoses you have, they are able to provide support with how it may affect your academics, social relationships, and general health. This is definitely a casual resource and can be a great first step or can supplement other resources with its high availability.

Things talked about in the appointment are confidential to MATES, except in cases it violates the standard confidentiality agreement. The appointment summary sheets will also be read by the lead director, or if an appointment was in a residence it will be read by the residence coordinator.

4.2 GLOW, Women’s Centre, RAISE

Glow is the oldest queer and trans student organization in Canada. Run entirely by dedicated student volunteers, it offers a wide variety of discussion groups, social events, advocacy opportunities, awareness campaigns, resources, and information. Their office is located in the SLC.

The Women's Centre aims to provide a female-positive and supportive environment on campus for women and trans* folks. Run entirely by dedicated student volunteers, it holds workshops, film screenings, and guest lectures. Their office is located in the SLC.

"Racial Advocacy for Inclusion, Solidarity and Equity" (RAISE) is a student-led Federation of Students service. RAISE serves to address racism and xenophobia on the University of Waterloo campus. They are located in the SLC.

All three services offer confidential peer support hours, provided by trained volunteers. This can be a great resource if you’re having challenges related to sexuality, gender, or race.

4.3 Peer Mentoring

There are a number of peer mentoring services typically offered on campus. In the past they have been run by the Engineering Society, Women in Engineering, Accessibility Services, and Living Learning Communities.
5.0 Academic Accommodations

Students dealing with mental illness face additional challenges in a university environment, and can often benefit from academic accommodations. It’s important to remember if you need these, it is not you cheating the system! It is often putting you on the same playing field as the rest of your classmates.

5.1 AccessAbility Services

AccessAbility Services provides academic support for University of Waterloo students who have both permanent and temporary disabilities. They support full-time, part-time, graduate and undergraduate students as well as students completing a degree fully online.

To register with AccessAbility Services, the University of Waterloo Verification of Disability form must be prepared by an appropriate licensed medical professional (such as a family doctor, psychiatrist, psychologist or psychological associate). Depending on who fills it out, there may be an associated cost. There is a specific verification form for mental health issues. The verification of disability form must provide evidence of the functional limitations due to the disorder or medication that restricts the student's ability to perform daily activities necessary to participate in post-secondary studies. Counsellors from the university can also request temporary accommodations based on psych assessments.

Students presenting with mental wellness conditions need only confirm that the diagnosis is within the area of mental health. This condition may be classified as suspected, temporary, permanent and/or chronic. Although, specifying your diagnosis may help your accommodations consultant figure out what accommodations would be best for you.

After registering, you will meet with an accommodations consultant to figure out what will work best for you. This is usually processed pretty quickly (1-2 weeks), but can take longer depending on the term.

Some accommodations that they can provide include:

- extra time on exams
- alternate location for exams
- permission to record lectures
- access to notes taken in class by volunteer note takers
- flexible deadlines

Some conditions are not well understood and they won’t have a good idea on how to accommodate you. If you have accommodations in mind that are not on the list, let them know and they may be able to help.

You can also meet with your accommodations consultant on an as needed basis, for any adjustment in accommodations or advising on academic issues related to your mental illness.

5.2 Verification of Illness Forms

VIFs can come from a doctor (including walk in clinics), a counsellor, or a psychiatrist. If you are experiencing a period of illness heading into an exam or big assignment, alternate accommodations can be made for you. It is important to see someone as quickly as possible to get the VIF. Once you have the VIF, you should find out how your department or faculty processes them. In most cases, the best person to start with is your academic advisor.

Once you have a valid VIF (indicating you are in a condition you are unable to do something), it cannot be refused. For exams, an equivalent test will be made for you that you can write at a later date or the weighting of your marks may be shifted. Keep in mind that if you are trying to defer a midterm, they may shift the weight to the final (which can add extra stress to finals).

It is very unusual that a VIF will be accepted after the exam is written or an assignment is submitted. If you are really not in a state to be doing school work, it may be best to defer it to a later date.
5.3 Reduced Course Load and Other Accommodations

Depending on your program and term your course load will obviously vary. Taking less courses at a time can greatly reduce your stress and lessen the impact your mental illness has on your education. In some faculties it is very easy to adjust to a reduced course load by just talking to your academic advisor. Typically in engineering you will need a doctor’s note to explain that you would benefit medically from a reduced course load to be allowed to reduce the number of courses you take at a time. This will likely have to go through AccessAbility Services, who will then advocate to your advisor that you would benefit from a reduced course load. The best place to start is by asking your academic advisor.

There may be other accommodations available to you as well through your department that your academic advisor can advise on. Don’t be afraid to ask what your options are!

5.4 Petitioning

If you believe that you were affected by extenuating circumstances during a term, you can petition for your academic status to be reviewed. You are essentially asking for an exception to academic regulations due to your circumstances at the time. This may be necessary if you are not able to advance to the next term for whatever reason (failed courses, term average not being high enough). The best place to start is with your academic advisor. Typically you write a letter explaining your case and gather any documentation that is proof of your extenuating circumstances (prescriptions, doctor’s notes, etc).

You can also talk to professors who noticed the absence and the assistant chair undergraduate if you are an upper year. They can speak to your behaviour qualitatively and provide support.

There is a committee that will review your case and decide whether to alter your academic status. In Engineering, both the Engineering Society President and several Engineering counsellors sit on this committee. It is a great idea to communicate your case (especially if it is mental health related) to the engineering counsellors and the EngSoc President, as they can help advocate for you. You don’t get to sit in the hearing to fight for your case so the documentation and support from the committee needs to be good.

5.5 Your Rights as a Student

When explaining your situation to professors or staff, you do not have to disclose your mental illness or diagnoses (although you certainly can if you are comfortable). It is often enough to say you have been dealing with health concerns.

With a doctor’s note, professors must accommodate you where possible. They cannot deny your doctor’s note. They cannot go against any accommodations set up by AccessAbility services either.
6.0 Treatment Options

6.1 Medication

Medication is not right for everyone (and not always necessary) but for some people it is life-changing and required to treat their mental illness. There are several categories of medications used to treat mental illness. Antidepressants are commonly used to treat depression, and may also be used to treat anxiety, pain, and insomnia. Anti-anxiety medications (commonly benzodiazepines) are used to treat anxiety, such as panic attacks or extreme worry. Stimulants are used to treat ADHD. Antipsychotics are used to treat psychosis, most commonly seen in schizophrenia, bipolar disorder, and psychotic depression. Mood stabilizers are used to treat mood swings most commonly seen in bipolar disorder, but may be used to treat depression as well.

A prescription will come from a doctor or psychiatrist, and can be picked up from any pharmacy. There is a pharmacy in the basement of the SLC and one in the plaza, but the one in the plaza is often faster. You will likely have to get re-fills every month. If you ever forget to refill or get a new prescription and you run out of medication, you can get an emergency prescription from a walk in clinic. You can also go to your normal pharmacy and they can give you a few days’ worth until you get your prescription refilled. Most generic medications are covered under the FedS health plan, and may be covered under your parents’ insurance if you still fall under that.

It is very important to take your medication exactly as prescribed. If it is meant to be taken daily, no skipping days! If you’re forgetting, get a pillbox and set an alarm (ie. Make a google calendar events and delete them once you have taken your medication, the app “Round” is also helpful). This is especially helpful if taking more than one medication. Don’t mess with your dose or stop taking them without being advised to by a medical professional. If you start feeling better, that is a sign that the medication is doing its thing and you should stick with it. Be patient as well! You may not see any effects for a while (a few months) depending on the medication. If you’re not feeling any difference, make sure to tell your doctor; they may switch medications or you dosage. Be honest!

Often there will be side effects from medications that your doctor or the pharmacist will warn you about. Many side effects go away after the first few days or weeks of being on a medication. If your side effects are unbearable, you can call Mental Health services or health services to see someone ASAP. Telling someone is not admitting defeat, medication sometimes takes a few iterations to fine-tune. If you want to switch medications and are denied or your doctor is not listening to you, you can always see another doctor.

Going on medication does not mean that you are weak at all. Remember: if you have a broken arm, you need a cast! People accept that medicine is needed for physical health issues, and mental health is no different. You probably know a lot of people on meds, but don’t know that they are because they don’t talk about it.

The length of time you will be on medication is different for everyone. It’s like physical illnesses. Some people need to be on meds for a short amount of time, for others they’ll need it for longer. In some cases, you may be on medication to treat your symptoms while you are dealing with the underlying issues with other treatments (psychotherapy). In other cases, medication may be for maintenance and you may be on it for years. Everything is different for everyone, but everything is valid and all depends on what you need.

6.2 Psychotherapy

Psychotherapy aims to improve an individual's well-being and mental health, to resolve or mitigate troublesome behaviors, beliefs, compulsions, thoughts, or emotions, and to improve relationships and social skills. You can get treated by a counsellor/therapist or psychologist (both on campus and off campus), through individual counselling or group therapy. Many people benefit from psychotherapy, and in some cases (ie. Personality disorders) it is the main method of treatment.
There are a variety of types of psychotherapy, and your psychotherapist may employ one type of therapy or aspects from several therapy types.

Cognitive Behavioural Therapy, or CBT, helps people learn to identify, question and change how their thoughts, attitudes and beliefs related to the emotional and behavioural reactions that cause them difficulty. It can help people identify distortions in their thinking, see thoughts as ideas about what is going on, rather than as facts, and stand back from their thinking to consider situations from different viewpoints. It can be used to treat bipolar disorder, eating disorders, generalized anxiety disorder, obsessive-compulsive disorder, panic disorder, posttraumatic stress disorder, specific phobias, substance use disorders, and more.

Dialectical Behavioural Therapy, or DBT, helps people learn and use new skills and strategies so that they build lives they feel are worth living. There is a focus on acceptance and change: regulating intense emotions, mindfulness, tolerating distress, and interpersonal effectiveness. It was originally developed for people with borderline personality disorder, but can be used to treat suicidal behaviour, self-harm, substance use, posttraumatic stress disorder, depression and eating disorders as well.

Eye Movement Desensitization and Reprocessing (EMDR) is an integrative psychotherapy approach that has been extensively researched and proven effective for the treatment of trauma and other health problems including panic attacks, grief, phobias, anxiety, addictions, body dysmorphic disorders, and personality disorders. It is based in processing the difficult experiences and trauma that are causing problems, in order to remove negative emotions, beliefs, and body sensations.

There are many other forms of therapy that are used and if you are interested you can find a lot of information online!

Talking is the first step! Being ready to make changes in your life is another step. There are lots of approaches, and it is important to find someone that works for you. They won’t take it personally if you want to look for someone new.

Even if you “think you’re all better”, it may be helpful to schedule less frequent check-ins with your counsellor if you already have one. If you relapse and all of the sudden need immediate help, it’s easier to get help faster when you suddenly need it.

6.3 Self Care

Self-care is the practice of taking an active role in protecting one's own well-being and happiness, in particular during periods of stress. Self-care refuels you, rather than draining you. Self-care looks different for everyone!

Meditation and breathing exercises can be great to add into your regular routine, as well as keep in your back pocket for times of distress. There are many online resources as well as apps (ie. Headspace) that can help.

Grounding exercises can also help during feelings of emotional dysregulation. A great one is to focus on your surroundings, noting 5 things you can see, 4 things you can physically feel, 3 things you can hear, 2 things you can smell, and 1 thing you can taste. This can really bring you back into the present moment.

Self-care may look like spending time on your own and taking time to be introspective. It may also look like spending time with friends or family and being social. This is different for everyone, and what works for you one day may not work the next. Listen to what your mind and body need! If you are spending excessive amounts of time alone, be careful of isolation behaviours and try to go outside at least once a day.

Self-care is something that is purposeful, rather than something that just happens. It can be helpful to schedule self-care, especially if you are going through a busy period. Find settings and activities that make you feel comfortable and relaxed, and allow yourself to enjoy them. You can make lists of the things that help you relax (ie. Music, activities, food) so you can easily refer to them when you need to.
Many people find it helpful to journal or write down their thoughts and feelings. This can help identify irrational thoughts and help you process what you are thinking. Some people also find drawing to explain their feelings helpful.

It is also important to keep an eye on your sleep. Try to get a regular amount of sleep each night and stick to a schedule. Getting too much sleep and getting too little sleep are both problems, so make sure you know what a “normal” amount of sleep is for you and try and get that each night. For adults this is typically between 7-8 hours. Exercise also great, as well as eating a regular, balanced diet.

In times of high stress, remember to cut yourself some slack and allow yourself to make mistakes!
7.0 Mental Health on Co-op

Taking care of your mental health is just as important on co-op as during a school term. If you are staying in the Waterloo area, you can continue to see any doctors, psychiatrists, or counsellors you were seeing when you were on term. If you are leaving the Waterloo area, you will likely have to make some preparations.

If you are taking medication, it is usually easiest to make sure you have enough prescription refills from the medical professional you are seeing regularly. Make sure they know you are going on co-op so they can help accommodate you. If you are going out of the province, the prescriptions may not be valid. You can pick up multiple refills before leaving, but you may need to pay for some out of pocket and can be reimbursed later if using the FedS health plan.

The mental health nurse in the Mental Health office can also do phone check-ins with you if you are worried about any of your symptoms or medications. The nurse can communicate any concerns to your doctor or psychiatrist for you, and help you from a distance.

If you think you will need to see a counsellor while you are on co-op, do some research before you leave to find a new counsellor. See the Off Campus Counsellors section! If you are in a remote area, many counsellors offer counselling over the phone or video chat. Some counsellors at UW also are open to phone appointments if necessary.

It is a great idea to know the crisis lines in the area you are in, and have them on hand. You should also know the nearest emergency centers that you can access in a crisis. It can be helpful to have a safety plan, especially if you are away from your usual support system.

If you are worried about isolating yourself, go out and meet other students in the same area as you! It can be helpful to pick up a hobby while you are on co-op; don’t be afraid to try something new, whether that’s yoga, intramural sports, renting and learning an instrument, or learning a new language!
8.0 Helping Others

When it comes to mental health, helping others can look like a lot of different things. The best thing you can be is supportive. Being a good listener, offering to cook with them or help them clean their room, and going with them to appointments can all be helpful. If you’re not sure how to help, you can always ask what they need or what would make their day a little bit easier.

Learn how to practice active listening. Active listening involves paying attention, withholding judgment, reflecting, clarifying, summarizing and sharing. There are very few times where you will say something that will make things better; it’s the act of accepting your friend’s truth and giving them a space to get all their thoughts out. Remember that mental health is different for everyone, and when helping others it is not about you. Or more specifically, don’t assume that other experiences are like your own. Let other people explain what they’re feeling.

If you are really worried about someone in a crisis, you can call an ambulance by calling 911. Calling the police can be very traumatizing for some people due to the procedures they take, and should only be reserved for when you really believe someone is in immediate danger of hurting themselves or others. You may be breaking trust when you make the decision to call an ambulance or the police. Even if it the right call, your friend may be upset with you. Visiting friends in the hospital can also be a really nice gesture to show you support them.

It can be helpful to educate yourself on what resources are available, and be able to explain options to your friend. If you want to get more involved, you can look into volunteering with UW MATES.

At the end of the day, it is important to accept that it’s their mental health since it is almost always going to be their call on what to do. Try to talk through why they might be resisting, and see what they could be scared of. It is always great to offer to go with them to appointments or to make appointments with them.

There are a number of training programs available on campus through LEADS, such as QPR and More Feet on the Ground. There are also a number of coping skills workshops available on Learn as well.
This document has been written and edited by Mariko Shimoda (Engineering Society ‘A’ President, S2019) for the Waterloo Engineering Society, and has been contributed to by many current and former students. All information was gathered during the Winter 2019 term. Thank you to everyone who contributed to and helped proofread this guide!