Introduction

Fall 2022 has held a lot of uncertainty for many Queen’s University Faculty Association (QUFA) members. While the administration has advocated a return to business as-almost-usual, and QUFA’s pandemic Letter of Understanding with the university has expired, many of us on the Political Action and Communications Committee (PACC) have been hearing that the pandemic continues to affect many of our members in myriad ways. PACC decided to gather some data about how faculty are continuing to experience the pandemic.

The idea was to conduct a very general survey to capture faculty experiences across four main categories:

- Faculty/Archivist/Librarian Accommodations
- Physical Environment
- Research and Workload
- Physical, Emotional, and Mental Health Management

Inspired by a similar survey conducted by the University of Ontario Institute of Technology Faculty Association, our purpose was to understand if and how some faculty continue to be marginalized by the ‘return to normal’. Our goal was therefore not to document a majority concern of QUFA; we acknowledge that many of our faculty may not be experiencing continued effects of the pandemic. However, as our results in this report reveal, a significant number of respondents are still experiencing negative ramifications associated with COVID-19.

We present the results of the survey, by section, in the following pages. We highlight some of the open-ended responses members gave as they reflected on their experiences. We also point out areas where members identified shortfalls of both QUFA and the administration. The survey ends with our reflection on potential avenues of action to continue to represent the interests of our members in this pandemic climate.
1. Faculty/Archivist/Librarian Accommodations

The purpose

We wanted to understand if our members have been asking for accommodations; if so, how onerous they felt the process was; and if they were not able to access accommodations for whatever reason. Responses ranged from our members finding appropriate supports, to great frustration that members find existing accommodations policies and informal flexibilities inappropriate for their needs. Please note that we have edited down a few comments to protect confidentiality and avoid accusations of defamation.

“I was granted some accommodations due to COVID and my health situation. The process was quite arduous. I do get, to some degree, why for administrative reasons there had to be a process that was at least somewhat involved, but it seemed excessively burdensome given everything I and my family were going through at the time...COVID is a potentially deadly airborne pathogen. I don’t understand why people have the right to exhale it into the breathing space of other people. I was hoping for a work situation that was somewhere between lockdown and status quo ante, but the administration has made it pretty clear that they’re not interested in people in situations of any kind of complexity.”

“Dropping the masks actively excludes community members with disabilities.”

“COVID has meant incredible amounts of parenting (kids home sick, kids home self-isolating, kids home etc etc) and I’ve been doing my work on top of it all, because there isn’t a straightforward process for requesting some kind of break or acknowledgment”
We also wanted to find out if our members had difficulty securing accommodations, and if they had concerns that were not being addressed through the accommodations process.

Almost 18% of our respondents believe they have issues not addressed by current accommodations processes.
Concerns raised

We asked our members to elaborate about anything they’d like us to know with respect to their experiences with accommodations. The raw data is compiled in the appendix at the end of this report. Here we outline some of the common themes alongside representative quotes.

1. Numerous conditions and concerns exceed those formally accommodated

Multiple respondents reported concern that formal accommodations processes and informal flexibilities don’t capture the variety of challenges people are encountering during the pandemic, such as having immunocompromised family members, medical procedures that could be delayed indefinitely if one were to contract COVID, and ongoing difficulties with having young children who are unvaccinated and/or home due to illness or school closures.

2. Differential supports exist across departments

QUFA members have taken a variety of steps to apply for formal accommodations and ask for flexibilities from their departments. Some respondents mentioned that they have turned to their department for support on the advice of the administration or because they were unsuccessful securing a formal accommodation. Responses indicate that our members have had quite diverse experiences across disciplines/departments/schools, with some receiving significant support from their department and others not. A few expressed frustration that QUFA was not as helpful as they had hoped.

3. COVID is disabling

Some of our members voiced concern that COVID itself is disabling and will likely require accommodations and flexibilities in the future that the institution is not set to deal with.

4. Mandates are not seen as uniform

Many respondents advocated for the return of a mask mandate, while a few voiced concern about vaccine mandates and that there needs to be better accommodations for those not wanting the vaccine.
Representative Comments

• “I am immunocompromised, but haven’t bothered trying to get accommodation, as I didn’t want to burden other faculty who might have to pick up more work.”

• “I am immunocompromised and am starting to get sick regularly again.”

• “Having an unvaccinated infant in the pandemic is very stressful.’

• “While I was able to receive limited [flexibilities] from my department (which has been helpful) they are not able to contravene university policy, which allows my large lecture course students to remain unmasked. While I am masked in that classroom, the undergraduates are uniformly choosing not to mask.”

• “There are too many of them [i.e. accommodations]. We should continue to follow public health guidance, and some of the union members are not interested in doing that anymore.”

• “The [accommodations] process was extremely difficult, verging on condescending and humiliating.”

• “I have just had my first bout of COVID, and had had the full 4 vaccinations. I was surprised how much it affected me over the past 14 days... congestion, headaches, dry cough, muscular pain and very low energy. I have low teaching – 2 classes per week that I managed to keep running (online), and running other responsibilities at skeleton-mode bares bone level. But am still not better. In summary, I am amazed how much the infection has reduced my productivity and energy for work.”

• “When I tried to get assistance from QUFA, none was provided other than general info... I did get accommodations in the end but only after enduring harassment from the administration person for several weeks.”

• “The process was terrible and antagonistic during an awful and challenging time, adding stress to an already extraordinarily difficult time. Unlike those who choose not to mask, requesting accommodations was met with skepticism about our need, many requests that put a burden of proof on us and treated us as greedy or whiny, etc.”
The purpose of this section was to determine how comfortable members are within their physical environments, and if they feel they have adequate resources to be confident in the health and safety of their workplace.

“I was unhappy that most students are not masked. I suspect that this is the reason why I caught COVID... [I]t’s frustrating to receive floods of emails from students from the class when I’m sick, unhappy with my slow response time.”

“I do not like that I need to ask my students to put on the mask. I carry extra masks to my classes and I can offer that only because I am teaching seminars this term. I think this will have a negative impact on my course evaluations.”
“We were advised that students cannot be asked to mask in halls or classrooms. That is why I have not asked. I do not think the university takes the risk very seriously. I am glad in person teaching is back for students sake but I also think requiring masks in classrooms is a trivial imposition that should be embraced to lessen risk.”
QUFA has been sending out information about classroom ventilation and air filtration through QUFA Voices, and the university has set up a ventilation website: https://www.queensu.ca/facilities/our-services/operations-maintenance/ventilation. We were interested in hearing whether or not faculty have engaged with these communications about ventilation numbers, and if members had a desire to learn more about the environments in which they work.

Only 24% of respondents know how to look up eACH numbers, while the majority are at least somewhat concerned about ventilation.

"The CO2 levels in the classroom where I teach suggest that the air exchange info [of] the university... is [inaccurate]."

"I purchased a hepafilter out of my own funds for my office and laboratory to compensate for very poor ventilation, and for my students and research participants to feel comfortable working in the space"
Concerns raised

We asked our members to elaborate about anything they’d like us to know with respect to their experiences with their physical workplace environment. The raw data is compiled in the appendix at the end of this report. Here we outline some of the common themes alongside representative quotes.

1

Uncertainty exists over asking students to mask

Some of our respondents have asked students to mask, but others have said they didn’t think they were allowed to and/or were uncomfortable doing so. Some concern was raised over seemingly shifting and ambiguous messaging with respect to masking from the university. There were worries about both job security and student evaluations. Asking or recommending students to mask has had very mixed results, from compliance/understanding to inaction.

2

Using CO2 monitors

Some faculty have been using CO2 monitors as a way to measure air filtration. Those that reported their measurements in the survey have registered high numbers. It’s not clear if these respondents have followed up with the administration or joint health and safety committees. The majority of respondents, however, do not know how to find the eACH numbers for their work environments. Some felt more confident in their classrooms and less confident in their own offices and/or laboratories.

3

Ventilation is a problem: but not just for COVID

There were many comments about poor ventilation and/or distrust in air filtration systems. Many respondents voiced concerns beyond COVID, mentioning asbestos, black mould, perfumes, and lab chemicals.

4

Members taking individual responsibility for filtration

Just as some respondents are taking individual responsibility to monitor their own air, more than a few respondents said they had bought their own portable air filtration systems and one person felt like they were responsible for taking care of/checking on the air purifiers in common spaces.
Representative Comments

- “I often have multiple students unable to attend class due to being COVID positive or ill and with masks being worn by less than 5% of students, it seems likely that COVID is simply making its way through the student population. It affects their ability to learn and be fully present for learning.”

- “Last year one of my classrooms had three air purifiers in place, as part of the response to better ventilate our work spaces. Now they are all gone. Not sure why they were take away; head of department has looked into it, but no one seems to know. And they have not been replaced. “

- “The university continues to cram students into classrooms – my class of 60 is in a room that barely seats 60, so it’s not safe at all.”

- “Covid is here to stay, and we should just move on with normal life.”

- “Ventilation in the older buildings is horrible”

- “I did bring a CO2 monitor to class and the numbers were around 1100-1300ppm”

- “Ventilation in old buildings is a concern---not principally because of COVID. This is a particular concern in buildings where chemicals which pose potential health risks may be in use.”

- “The room I teach in has some windows that are operable only because my department has repeatedly lobbied Facilities to repair them. Queen’s refused to put a HEPA filter in the room, claiming the ventilation is good. I have a CO2 monitor; the ventilation is decent only with open windows. A small minority of faculty in my department are aware of COVID best practices, but most seem oblivious.”

- “I have brough in my own HEPA filtered air purifiers for my office and lab space... Teaching in a not well ventilated class room with 200+ students is aweful. I feel incredibly uncomfortable, my family and myself are high risk for complications due to COVID”

- “Portable air purifiers were placed in the library some time ago, which was great, but they keep getting unplugged and it seems to be up to us (library staff) to check on them, make sure they’re plugged in, etc. No one seems to be checking on them, making sure they’re working properly and in the right places.”

- “Everything has been perfectly fine.”
3. Research and Workload

The Purpose

The purpose of this section was to determine if and how our members’ workloads are still affected by the pandemic, across research, teaching, and service.

"The administration has made massive accommodations for students—too many, in my view, that will absolutely not serve them as preparation for the work force, for future studies, or for life in general—while they have concomitantly demanded that faculty work at least 20–25% harder to put in the time to create extra texts, extra exam sittings, special assignments for accommodated students, countless emails with students who have accommodations and offer far, far "too much information" to their professors. The accommodations unit at Queen’s is NOT helping, and is only adding to faculty burden in all of this. Faculty burn out is very real, and we are being pushed beyond our maximums in terms of stress, workload, and emotional labour."

"The amount of time spent dealing with students emails, absences, illnesses is enormous"

"The modality of teaching remains as an issue. Students have valid reasons to miss the class and they want to join online. I cannot offer this as an option as it is extra work and my courses this term are not designed for hybrid. However, I hear other instructors offer that alternative and I hate to keep saying no."
"Right now, the utter chaos in central administration, caused by staff turnover, illness, and medical leaves is the biggest impediment to my work…. I am also witnessing the burnout and disillusionment of my colleagues, even among those who more typically identify with the institution. People are angry about the lip service paid to their wellness and the gaslighting that characterizes the present moment as we are asked to carry on as if everything is normal even as mass disablement and death continues apace.”

“Students are burnt out. It is very difficult to support them and also front the energy to get them excited about a topic while I am also still burnt out. Teaching takes much more time, which means even less time for my active (and grant-funded) research, which means my funding will expire before I finish.”

“I had difficulty choosing between a lot and being unable to complete my research program for the research question. I do a lot of international research and have been unable to safely travel. I've 'pivoted' a lot of my research, but am unable to continue with some research projects I had started before the pandemic.”
Concerns raised

We asked our members to elaborate about anything they’d like us to know with respect to their experiences with COVID-related workloads. The raw data is compiled in the appendix at the end of this report. Here we outline some of the common themes alongside representative quotes.

1. **Inability to catch up**

A few respondents say their workload has returned to normal, but the majority who responded to these questions are still experiencing overwork due to backlogs associated with initial COVID lockdowns and with ongoing service and teaching overwork.

2. **Faculty with young children continue to experience difficulty**

Faculty with young children are continuing to face time constraint burdens when their children are home from school due to closures and/or illness, especially in light of the ongoing pediatric crisis in Ontario.

3. **Research continues to be impacted by COVID-19**

While much of the discussion of overwork is focused on student accommodations, some of our respondents mentioned that their research programs continue to be impacted, whether it’s because they conduct significant amounts of international fieldwork or they are trying to catch up from previous closures. A few respondents pointed out that overwork in teaching continues to depress their research outputs.

4. **Significant overwork due to student accommodations**

While a few respondents rightly pointed out that it’s difficult to know if student accommodations/considerations are related to COVID (as this information is confidential), there was a general sense that accommodations and considerations have increased substantially since the pandemic began, which has increased the administrative and pedagogical labour of faculty. There were also comments about graduate student issues such as the large amounts of work required to support students pivoting mid-research and experiencing burnout.
"Students needs have grown exponentially in the last 2.5 years and many require significant amounts of support. International students in particular have been isolated and negatively affected by COVID. Research takes longer, especially in person research which means that publications cannot happen at the same level. However that doesn’t seem to be understood by admin. There is pressure to attend conferences despite many being COVID super spreader events."

"It is settling down now, but 2021-22 school year was stressful. It was not the workload, it was the stress of constantly thinking about COVID that was exhausting."

"The amount of time spent dealing with students emails, absences, illnesses is enormous"

"The main impact is from faculty, grad students and staff who don’t want to work in-person. They’re slowing everything down for others."

"Students are overwhelmed, frequently sick and far behind thanks to covid driven interruptions and lack of covid prevention measures"

"I got Covid in late September, and then had a very bad Covid-related cough for five weeks, which made teaching very difficult."

"The institution is not doing anything to help!"

"My experience during the lockdown was horrible and I hope that we will never see this again. It was all unjustified."

"the administration has taken for granted that faculty will always take up the slack when workload balloons. The workload is no longer tenable and I am strongly considering leaving academia because of it"

"The impact of Student mental health spills over to faculty workload."

"The workload over the pandemic increased substantially, and much of my research has ground to a halt. This is only now starting to improve."

"We are in a constant state of catch up and overload with student needs, delayed projects and heavy amounts of admin tasks that could be completed by someone else (e.g. emptying our garbage, locating paper for the copier). The workload feels never ending and being pre-tenure, pulling back or "leaning out" is not optional"
The Purpose

We wanted to take a holistic approach to understanding how our members’ wellbeing continues to be affected by the pandemic. We asked members to reflect on their physical, mental, and emotional health during this time.

“I got COVID – along with my family – and barely got a half-week reprieve from my intense workload to be sick. The work just piled up and required me to work twice as hard afterwards, contributing to more high stress and illnesses shortly after.”

If you’ve had COVID-19, do you feel like you had enough time away from work to adequately recover?

Answered: 337  Skipped: 40

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If you are a caregiver for someone who has had COVID-19, have you had enough time away from work to fulfill your care obligations?

Answered: 229  Skipped: 29

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Have you tried to access benefits for pandemic-related reasons?

Answered: 229  Skipped: 29

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<td>30.82%</td>
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Readers appreciate accurate information

Most of our respondents' mental and emotional health has been affected by the pandemic

“I feel like my students can get accommodation for being stressed, but I can’t and I am drowning here. The expectations for pretenure faculty while I am just trying to survive the semester keeps me up at night”

“I am currently sipping my free coffee blessed by our Principal as a "gesture of appreciation" of my work. This is the only ‘resource’ offered to me to "thrive". How about I buy my own coffee and there is mental health support for ALL faculty and staff in this fine institution?”

How has your mental and/or emotional health been affected by the COVID-19 pandemic?

Answered: 328    Skipped: 39

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<th>A LOT</th>
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Concerns raised

We asked our members to elaborate about anything they’d like us to know with respect to their experiences with physical, emotional, and mental health. The raw data is compiled in the appendix at the end of this report. Here we outline some of the common themes alongside representative quotes.

1

Ongoing grief, frustration, anger

A perhaps an under-acknowledged ongoing pandemic concern is that some of our members continue to experience grief caused by losing family members due to COVID-19. Many are also experiencing frustration and anger with the sense that they’ve been abandoned by an institution that does not appear to put health and safety first, especially for more vulnerable members of the Queen’s community.

2

Mental, physical, and emotional health burdens are unevenly distributed

Many of our respondents’ concerns demonstrated that particular groups of people are being marginalized through the ‘return to normal’ practices of the university: those who are immunocompromised, those with young children, those who care for others who are immunocompromised, those who are precariously employed (i.e. adjuncts), those who provide emotional labour for students, and those who are racialized and/or live far from caring support networks.

3

Student–faculty mental health is relational

Some faculty explicitly stated what is implicit in a lot of the survey data: that the relationship between student anxiety, depression, and burnout is correlated with faculty overwork, anxiety, depression, and burnout. Some faculty discussed how they have nothing left to give and a couple are contemplating early retirement.

4

Harm is caused by isolation

A few members discussed the mental health issues caused by the social isolation that they experienced during the early pandemic years. There was a sense among these respondents that it would very much hurt mental health if we were to isolate again. Yet others expressed ongoing feelings of isolation because they are not protected when they travel to campus.
**Representative Comments**

- “I cannot ignore the danger of catching COVID unlike the majority of folks in the University who appear determined to ignore it. Very challenging to be so left out by such a misunderstood cause.”

- “COVID is just one issue that many of us are dealing with. However, when you add it to other issues and the fact that being safe means often being unable to access those resources and communities that would have previously offered support, the toll is even greater. As a racialized person living far away from family and community, COVID has meant less access to travel to be with those communities that do not exist in Kingston. It means that our families, especially elder parents are struggling those the isolation of COVID by themselves. Workload to accommodate students has increased while our class numbers have not decreased meaning more time spent on this. A lack of mask mandates means that every time I go to teach I feel unsafe and worried that I may end up passing COVID onto immuno compromised friends. Unofficial communications from administration also downplay the importance of masks and often openly question the need for masks making those of us still wearing them uncomfortable and singled out.”

- “Covid-19 has significantly impacted my research (pre-tenure), and with small child and the constant on/off days related to illness is taking a toll.”

- “The social isolation has impacted me and my family. We moved to Kingston during the pandemic, which was a huge adjustment. Till today, we feel the isolation.”

- “My mother died of COVID early in the pandemic and I am still deeply grieving and traumatized by the circumstances of her death. I documented my losses in my annual reports and the response I received was generic with no reference to the fact that I lost my mother. I worked through her illness and death in terms of teaching and service. I feel that these sorts of losses are completely forgotten and ignored by leadership.”

- “Obviously COVID was a major impact the prior two years, but not so much for me now”

- “Mostly I work from home – if everyone masked, I would go to inperson work more”

- “Faculty spent the past 2 years moving Heaven and Earth to convert their courses to online teaching. We have been dealing with an onslaught of student wellness issues, and we are struggling to juggle our commitments at home. Now the University is trying to steal our IP, overwhelm us with additional administrative work, and have departments create "hiring priorities" for faculty jobs that won’t exist because we are in a hiring freeze/slowdown. Can someone remind the powers that be that we have not yet recovered?”
“Frankly, one of the biggest challenges during the pandemic has been watching QUFA abandon its members. Instead of pushing the administration to adopt policies to protect its members back in 2020 (e.g., mask mandates, vaccine mandates), QUFA chose to be a shill for the administration take the approach of trying to convince its members that the administration was right. As a new faculty member, my only interaction with QUFA has been to watch QUFA abdicate its responsibilities. This has led me to have no interest in participating in QUFA events, engaging with QUFA leadership, or supporting QUFA in any way, at least not until the leadership has changed, but even that may not be enough to earn back my trust.”

“The outbreak on campus during exams in December 2021 had a significant effect on my mental health. About a third of my class (a large, >100-student class) was emailing me all at once panicked and saying they did not feel safe taking the exam in the exam hall and I was expressly not allowed to change the exam to a format that would feel safe for them.

“I feel less able to participate in university events than I did when there was more masking and attention to ventilation. I like seeing my students in person but a regular cold can knock me out for weeks and I have a longer isolation period than non immune compromised people do. I feel left out and on edge when I do attend (as I am often the only one in a mask). I want to thank our indigenous students for holding their blanket exercise outside, which allowed me to attend and feel included.”

“This has been an exceedingly difficult three years. I have dealt with sustained anxiety for the first time in my life, precipitated less by the threat of infection and more by watching the abandonment of public health and the rise of a eugenicist logic that is resulting in mass disablement and death. QUFA leadership’s refusal to push in any substantial way to protect the health of its members and the broader community in the latter half of the pandemic period has been especially demoralizing and alienating.”

"the isolation and lack of interaction with other faculty has made work difficult"

“Definite ‘brain fog’ over the past two weeks and ongoing. This is undoubtedly affecting the quality and quantity of my teaching, research and service work... and makes me frustrated and a little anxious given several major looming deadlines.”

“The question about adequate recovery seems to only capture the potential of acute infection. I suspect the real stress tests are going to arise from (a likely ever-growing number of ) colleagues dealing with long-COVID. Of course, university–wide policies to help reduce transmission would also play a role in preventing such cases”

“I’m giving so much for the students, I have nothing left to deal with my own mental health issues.”

“I feel pretty isolated by having an immunocompromised family member that I need to protect. I mask, but so few people do, and with activities, meetings, etc. planned for the majority non-maskers, I am feeling more and more left behind”

“The university appears to only care about student physical, emotional, and mental health. There is no support for adjunct faculty.”
Based on the feedback we received from the survey, PACC is making several recommendations to QUFA about how we can support our members and advocate to the administration to protect Queen’s most vulnerable community members. We recognize that there are likely too many recommendations for QUFA to take on; we will present these to Executive where the recommendations will be prioritized based on capacity and other constraints.

### Section 1: Faculty/Archivist/Librarian Accommodations

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| • survey results provide scope for further education of our own members (including Department Heads) and of the administration with respect to accommodations  
= consider an education/awareness-raising campaign, grounded in disability justice, that educates about accommodations and seeks to identify systemic barriers to be addressed  
= conduct a follow-up survey specifically with respect to accommodations; also check with QUFA staff about the nature of accommodations requests |
| • the survey did not provide enough data on what the issues are with respect to accommodations: what concerns people feel are not being covered; what their specific experience with the process has been  
= consider education campaigns that ask faculty members/departments to print out eACH numbers;  
= consider a clean air campaign with posters that have QR code for eACH numbers; book an air quality visit with someone with CO2 monitor  
= continue to push university admin to messages about ventilation ahead of exam period next term |

### Section 2: Physical Environment

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| • the survey demonstrated a potentially greater need for education of our members with respect to ventilation and how to use the Joint Healthy and Safety Committees, and showed that QUFA will need to continue to hold the university accountable for meeting its health and safety duty  
= consider an education/awareness-raising campaign, grounded in disability justice, that educates about accommodations and seeks to identify systemic barriers to be addressed  
= conduct a follow-up survey specifically with respect to accommodations; also check with QUFA staff about the nature of accommodations requests |
| • the survey did not provide enough data on what the issues are with respect to accommodations: what concerns people feel are not being covered; what their specific experience with the process has been  
= consider education campaigns that ask faculty members/departments to print out eACH numbers;  
= consider a clean air campaign with posters that have QR code for eACH numbers; book an air quality visit with someone with CO2 monitor  
= continue to push university admin to messages about ventilation ahead of exam period next term |
- The survey demonstrated ongoing concerns around lack of masking (especially for equity-deserving groups) and concerns with vaccine mandates = continue to push the administration for a mask mandate; leave vaccine mandates aside

### Section 3: Research and Workload

**RECOMMENDATIONS**

- many of the concerns raised in this section are related to issues on the bargaining table (e.g., student accommodations, time for research, etc) = tie survey results in with JAC and bargaining team messaging

- survey results indicate that QSSETs and RTP processes will be member concerns in the near/midterm future = continue to prepare for this and consider how to support our members, especially since the COVID Letter of Understanding between QUFA and the University has expired, but many of the concerns targeted in the LOU remain

### Section 4: Mental, Physical, and Emotional Health

**RECOMMENDATIONS**

- some of our own members aren’t aware that their colleagues are suffering from the pandemic in myriad ways, including grief, anxiety, and continued social isolation (especially for immunocompromised) = consider a disability justice campaign that emphasizes how faculty, staff, and students are still socially isolated because the administration has not assumed protections that will allow everyone to access campus and campus life

- our members both implicitly and explicitly linked their mental health to those of their students = emphasize this relationality to the administration: that many of the students aren’t ok in the classroom, and therefore neither are the faculty

- respondents cited numerous mental and emotional health concerns; some of these issues are being addressed at the bargaining table (with respect to overwork, undervalued work); but some are related to lack of supports for faculty and a toxic work culture = tie survey results into JAC/bargaining messaging

= advocate for: better benefits for psychotherapy and mental health support; benefits for all; in-house counsellor for faculty; mental health days for faculty; supporting faculty switching off work when sick and recovering

= have QUFA’s health and safety committee consider what actions it could take to address mental health concerns