Welcome to Hertford!

We hope you’ll have a wonderful time here, but we know that sometimes people can struggle – academically, socially, mentally – for a whole variety of reasons.

This handbook covers the wide range of support, advice and resources available both in and outside college.

If you have a problem or just want a chat, do not hesitate to get in touch with any of us.

2018 - 2019
# Wellbeing Handbook

## CONTENTS

Meet the Welfare team ........................................... 2  
Junior Deans ......................................................... 4  
Undergraduate student support ............................. 5  
Graduate student support ...................................... 6  
Physical and mental health ................................... 7  
Supporting a friend .............................................. 9  
5 steps to safe sex ............................................... 10  
Sexual assault ...................................................... 13  
Dealing with harassment ...................................... 14  
Recreational drugs .............................................. 15  
Drinking alcohol .................................................. 17  
Women* & gender minorities ................................. 18  
LGBTQ+ students ................................................ 19  
International students ....................................... 20  
Diversity & equal opportunities ........................... 21  
Faiths & cultures at Hertford ............................... 21  
Support for disabilities ....................................... 22  
Academic affairs ............................................... 23  
Where should I go for... ..................................... 24  
Glossary .............................................................. 25

*With grateful thanks to Somerville and Christ Church JCRs for the permission to adapt their original material.*
Meet the WELFARE TEAM

GILL SHREIR
Welfare & Wellbeing Coordinator

Gill’s role is to coordinate and offer welfare support for students. She is available to talk to about any problem, large or small. She can point you towards other sources of help and advice, both inside and outside college. She liaises with the Disability Advisory Service in order to be able to assist those students who have disclosed a disability.

Asking for clarification or help is a sign of getting things sorted out. It is never a sign of weakness. We know that adjusting to life at Oxford brings all sorts of challenges and it is likely that you may need some help and support along the way. So do come and see me if you would like to discuss an issue. My room is NB 1,2 and I have both “drop-in” times and individual appointments available.

ALISON NICHOLLS
College Nurse

Alison is in college during ‘full term’ - 0th to 9th week. Her office hours are posted outside NB 1,3, in the glass notice boards outside the lodge and on the health and welfare part of the Hertford Intranet. The college surgery phone number is 01865 279401.

Alison is an experienced nurse who has worked for a number of years both as a college nurse and in the NHS as an Emergency nurse. She can help confidentially as a first point of contact and has extensive knowledge of support available for physical, mental and sexual health, as well as many other issues.
THE REV. MIA SMITH
Chaplain

Mia is responsible for the life of the Chapel, and also has a role in pastoral care as part of the college’s welfare team. Her office is located in Room NB1/4. Mia is happy to meet with members of the college community for any reason, regardless of their faith. In all pastoral conversations she is bound by both the college and University Confidentiality Policy, and Professional Guidelines for Clergy.

So, if you need a safe space to offload, or to talk things through, please do get in touch. She can point you to someone who can help you if further help is needed. Or you might just like a cup of tea, a general chat, a good moan, or use of a box of tissues. She is impossible to shock. She won’t talk about faith unless you do.

ALISON WOOLLARD
Welfare Dean

Professor Alison Woollard is a Tutorial Fellow in Biochemistry and has oversight of welfare provision in college. She meets regularly with other members of the welfare team.

LYNN FEATHERSTONE
Registrar & Director of Admissions

Lynn is in charge of the Academic Office in college (OB 1) and is part of the Welfare Team. She takes particular responsibility for academic issues. As well as emailing her directly, you can also get in touch with the Academic Office team by emailing academic.office@hertford.ox.ac.uk
Junior Deans provide welfare support to students, mainly outside office hours. They are specially trained graduate students who live in each accommodation area. They are able to provide guidance and support to students experiencing difficulties and will also help if you have complaints about excessive noise.

**AHMED AHMED**
*Main Site Junior Dean*

- **Mobile:** 07342169586
- **Email:** ahmed.ahmed@hertford.ox.ac.uk
- **Room:** OB Quad 3,14

**HEATHER MANN**
*Main Site Junior Dean*

- **Mobile:** 07846709855
- **Email:** heather.mann@hertford.ox.ac.uk
- **Room:** OB Quad 3,15

**JI BAEK**
*North Oxford Junior Dean*

- **Mobile:** 07908151692
- **Email:** ji.baek@hertford.ox.ac.uk
- **Room:** 10 Winchester Road, Basement

**GABRIEL GAVRIILIDIS**
*South Oxford Junior Dean*

- **Mobile:** 07413553557
- **Email:** gavriil.gavriilidis@hertford.ox.ac.uk
- **Room:** Graduate Centre, Room 368
Hi everyone! We are Kez and Ahmed, your JCR female and male welfare officers. We are friendly faces around college, here to help with anything related to your personal wellbeing. Between us, we have Peer Support and First Responder training, as well as a good knowledge of other welfare support services in and around the city.

Going to university is often a really exciting and memorable experience, and Hertford college is a great place to be (there is a lot of love here!). However, we know that it can also be daunting and that things might not always be smooth and stress-free. This is where our welfare roles come into play - whether you know us well or have only seen us about, we are here (alongside a team of Peer Supporters) as confidential and judgement-free listeners. If you need to chat about any worries or concerns you have, you can contact us via email, social media, or face-to-face. We can also be the interface between the JCR and the college welfare staff.

Our role also extends to the provision of welfare supplies (condoms, lube, pregnancy tests, dental dams, attack alarms and earplugs) which can be ordered for free through the JCR intranet form or via email or social media, and the organisation of welfare events like Welfare Teas which happen 3 times a term.

If at any point you want to contact us, you can drop us a message on Facebook (Kez Smith; Ahmed Alhussni) or email us at kerris.chappell-smith@hertford.ox.ac.uk and ahmed.alhussni@hertford.ox.ac.uk. We are both living in college for Michaelmas Term, so you’ll see us around a lot too - don’t hesitate to stop us for a chat!

We look forward to seeing familiar faces again, and meeting any newcomers!

Welfare love,  
Kez and  
Ahmed xx
The MCR

Hertford has a large and vibrant MCR (Middle Common Room) with students studying on a variety of programmes. It provides a great opportunity for interaction with students studying different subjects. People may be doing a one or two year Masters programme or a DPhil. Visiting students from other universities doing a one year matriculated programme are also eligible to join the MCR.

Students come from all over the world and as such may not be familiar with either how Oxford University works or indeed how living in the UK differs from their home experiences.

We hope that the information in this booklet is helpful in terms of health and wellbeing.

Your MCR welfare rep will be able to answer specific questions and you are always welcome to ask any member of the welfare team for help, advice or guidance.

The one year master’s courses are demanding and it is sensible to seek help early so that any additional support can be put in place.

Studying for a DPhil can feel very different from a taught course and students do sometimes report feeling a bit isolated.

Please do come and talk to any member of the welfare team if you would like support. That is why we are here!

MEET YOUR MCR WELFARE OFFICER

Hello! I am Ranjamrittika, a second year DPhil student in Oriental Studies. This is a position that is close to my heart, as it allows me to care for your wellbeing. I would love to create a space where everyone feels equally represented and I promise to listen to all your welfare related concerns- big or small!

I currently work as the president of UNICEF on campus and have also been closely working with an NGO for rehabilitation of rural youth in India for four years. I am a music and Yoga enthusiast (and practitioner).

Mental and physical wellbeing of every MCR student as well as concerns related to mental and sexual health are going to be the priorities for the MCR welfare team in the upcoming year.

I will be organising fortnightly welfare tea and termly Yoga classes. I look forward to working for a healthy, happy and blissful year in the MCR! Please don’t hesitate to get in touch!

Ranjamrittika

Find out more on the MCR website:

hertfordmcr.org/welfare
PHYSICAL & MENTAL HEALTH

Your college GP

28 BEAUMONT STREET

Our College Doctors – Dr Chloe Borton, Dr Matthew Easdale, Dr Rachel Allen and Dr Adam Prewett – are based at the 28 Beaumont Street Surgery, which is a short walk from college.

They can be contacted on 01865 311811 between 08.00 and 18.00 if you would like an appointment. Appointments can be made urgently but are normally 48 hours to a week ahead. There is a Hertford student-only clinic on Tuesdays from 12 noon to 1pm but you are able to book appointments at other times as well. Please make it clear to the receptionist if you need an urgent appointment. They may arrange for the doctor to telephone you back to clarify issues and gain more information so make sure you keep your phone available!

GPs are able to help with mental health problems as well as physical health issues. It can feel daunting to ask a doctor for support but rest assured that they have been working with students for many years and will do their best to put you at ease. You can request to see a particular doctor if you wish and can take someone with you if you need more support. At night and at weekends call 111 for medical advice. Please tell a Junior Dean or Porter if you are advised to attend the out of hours clinic or to go to hospital.

WHAT TO DO IN AN EMERGENCY

Call 999 or 112 for the emergency services. The main site postcode is OX1 3BW. Go to the John Radcliffe Hospital, Headley Way, Oxford OX3 9DU.

Oxford SU (Students’ Union)

STUDENT ADVICE SERVICE

The independent student advice service is an advice, information, and advocacy service run by a full-time manager, and two part-time advisors. They are happy to listen and advise you on any matter, including wellbeing, money, academic work and accommodation.

You can contact them on their website. During term time, they hold drop-in sessions every Wednesday between 2pm and 4pm at their offices at 4 Worcester Street, OX1 2BX.

www.oxfordsu.org/wellbeing/student-advice
The Counselling Service

The Counselling Service provides free and confidential support to students in line with the Ethical Framework for Good Practice produced by the British Association for Counselling and Psychotherapy. They can be accessed a lot faster than NHS counselling. Typically, the first appointment will be within 2 weeks. Counselling Service staff are professionally trained and widely experienced in helping students with a range of problems - from specific mental health problems to stress or difficulties in relationships with others.

www.ox.ac.uk/students/welfare/counselling
counselling@admin.ox.ac.uk

Where to go anonymously

NIGHTLINE

Nightline is an anonymous, confidential listening and information service run by students, for students. It’s open from 8.00pm until 8.00am every day from 0th-9th week. There are always two people in the office, one male and one female, who take hundreds of calls every year from Oxford students who need some external, impartial support. You can share any problem with someone who has been specially trained in sensitive listening and support and who has an understanding of what it is like to live and study in Oxford.

Skype: oxfordnightline   |   01865 270270

SAMARITANS

The Samaritans is an anonymous, confidential listening service which is available 24 hours a day, 365 days a year. You can share any problem with someone who has been specially trained in sensitive listening and support, who will provide a space for you to talk through your problem and explore your options.

jo@samaritans.org   |   01865 116123
60 Magdalen Road, OX4 1RB
(usual in-person hours 8am-10pm)
SUPPORTING A FRIEND

HAVE THE CONVERSATION

Students normally talk first to their friends when they’re having a hard time. Don’t be afraid to start the conversation about your friend’s difficulties. Pick a private place where you will both be relaxed and a time when you’re both free. Listen actively and try explaining your friend’s problems back to them to check that you understand. Ask open questions such as “What was that like?” and “How did it feel when...” but avoid “why” questions as they can sound aggressive.

AVOID GIVING ADVICE

This can make your friend feel trapped. Respect your friend’s confidentiality. The exception is if they are in danger of hurting themselves or others – then it is important to tell a member of the welfare team or a healthcare professional.

TRY TO UNDERSTAND

People with mental health problems often have experiences or behaviours that are difficult for others to understand. You can help overcome this by learning about your friend’s mental health problems on sites such as NHS Choices or Mind. Appreciate that unhealthy behaviours such as drug or alcohol misuse, self harming or disordered eating could be your friend’s way of coping with other problems.

KNOW WHERE TO GO

For further help, you or your friend can talk to our peer supporters, a Junior Dean, The Welfare Coordinator, Chaplain, College Nurse or the University Counselling service.

If your friend has a mental health problem, they can also speak to a GP who can help them get treatment. If they are contemplating committing suicide imminently – i.e. they have a clear suicide plan and the means to carry it out, even if they say they won’t – do not leave them alone at any point. Call 999 or escort them to A&E and remove anything dangerous from their vicinity, such as pills, knives, razors, scissors and cords of any sort. Tell someone what you are doing or ask a Junior Dean or Welfare Officer to join you.

If your friend has suicidal thoughts but no clear plan, encourage them to talk to a counsellor, a GP, the Samaritans helpline (116 123) or CALM helpline for young men (0800 58 58 58 from 5pm-midnight). If your friend starts to express irrational beliefs (delusions) and/or hallucinate, they may have a condition called psychosis. If this happens, make sure they see a doctor soon as they could hurt themselves and early intervention is important. Ask for advice from a member of the welfare team. Junior Deans are available at night and it is possible to see a GP out of hours by calling 111.

TAKE CARE OF YOURSELF

It’s important to maintain boundaries. Help your friend find other supporters if they are depending too much on you or want to talk about topics you aren’t comfortable discussing. If you are worrying about them, you can talk about it to someone you trust, protecting your friend’s confidentiality by maintaining their anonymity and speaking to someone who doesn’t know the friend. Any member of the welfare team is able to listen in these circumstances.

www.nhs.uk/conditions/stress-anxiety-depression
www.studentminds.org.uk/startingaconversation
Safe sex means becoming informed about the risks of sex so that you can avoid putting yourself or your partner at risk of unwanted pregnancies (for heterosexual pairings) or STIs.

To help you start getting informed about how to practice safe sex, we’ve made a 5-step guide...

1. BE INFORMED

Safe sex starts with getting informed by doing your own research on topics relevant to your own sexual health. This is important because sexual health risks are different for different genders, sexualities, races and local areas. We recommend using the NHS Choices website as a starting point at: www.nhs.uk/live-well/sexual-health/

2. USE CONTRACEPTION

Most people having heterosexual sex need to use contraception if they don’t want the biologically female partner to become pregnant. Biological females should read up on the different types of contraception and discuss the decision with their GP or College Nurse to make an informed choice.

The (male) condom is 98% effective with perfect use but only 82% effective with typical use as people often use or store them incorrectly. The condom is the only contraceptive method which also protects against STIs. You can order condoms from the JCR website – for free! The combined pill and progesterone-only pill are also highly effective with perfect use (99%), but much less effective with typical use (91%) as people often fail to follow the instructions. It is prescribed by your GP.

Long-acting reversible contraception (LARC) is contraception which is administered by a doctor or nurse and then works for a long time – this is by far the most effective in terms of actual use. Types of LARC include the implant, injection, IUS and IUD. These can be prescribed by your GP or a Sexual Health clinic. To get the maximum efficacy of contraception, it must be used consistently and correctly every time you have vaginal or anal intercourse. You can increase the efficacy further by using dual protection – a condom plus one other form of contraception.

Check out the Family Planning Association’s (FPA) fantastic, thorough guide to contraception at www.sexwise.fpa.org.uk/contraception
3. **USE PROTECTION AGAINST STIs**

A sexually transmitted infection/disease (STI/STD) is an infection transmitted by exchange of bodily fluids such as semen, physical contact with another person’s genitals or even skin-to-skin contact. They are very common among young people – over half of the 435,000 STIs diagnosed in heterosexuals in England in 2015 occurred in 16-24 year olds. STIs can cause anything from mild itches to permanent disability and even death. However, most STIs are easily preventable by using protection. This means using condoms and/or dental dams during sex where body fluids could be exchanged which includes oral, anal and vaginal sex. Even if you are using another form of contraception, you and your partner will need to use protection until you have both tested negative for STIs. Many people do not like using condoms or dental dams for oral sex; in this case, you may consider avoiding oral sex with partners who have not been tested for STIs.

4. **TEST REGULARLY FOR STIs**

You should get tested for common STIs every time you change sexual partner or at least once a year – even if you are having safe sex. This is because STIs often do not cause obvious symptoms. You may want to test more frequently if you are in a high risk group such as men who have sex with men (see FAQs). Additionally, you should test after taking part in unsafe sexual activity or if you experience symptoms of an STI. You should also encourage any regular partners to get tested.

To arrange an appointment, call the clinic at 01865 231231 between 8.30am and 6pm (4pm on Friday). You can also get chlamydia self-test kits from www.sexualhealthoxfordshire.nhs.uk/chlamydia-screening – they are sent to you by post and returned to the laboratory by post.

For information about what to expect from your sexual health appointment, check out the NHS Choices guide at www.nhs.uk/live-well/sexual-health/visiting-an-sti-clinic

5. **MANAGE YOUR RISK**

All sexual activity carries some level risk. Further steps you can take to reduce you and your partner’s risk include:

- Making plans for keeping sex safe in advance if you are going to drink alcohol
- Reducing your number of sexual partners
- Asking your partners to be exclusive with you (not have sex with anyone else)
- Avoiding higher-risk activities, such as anal sex
- Avoiding physical sexual activity altogether

Of course, not everyone will want to take all of these steps. Getting educated can help you make informed decisions and manage your risk.
**SAFE SEX QUESTION & ANSWER**

**Q: What do I do after an unsafe sexual encounter?**

**A:** After a sexual encounter where protection failed or was not used, it is important to either take a chlamydia test or go to a sexual health clinic to get tested for both chlamydia and gonorrhoea.

However, if you are in a high risk group such as gay and bisexual men, you should get a full test at a sexual health clinic. If there is a risk you may have been exposed to HIV, you should contact sexual health services or go to A&E as soon as possible to access post-exposure prophylaxis, a treatment which can greatly reduce your risk of contracting HIV.

If you are a biological female who had an unsafe heterosexual encounter without contraception or where contraception failed, you can take the morning after pill or have an IUD inserted to prevent pregnancy occurring.

**Q: How do I get the morning-after pill?**

**A:** The morning after pill can prevent pregnancy from occurring after an unsafe encounter. It is more effective the sooner it is taken and must be taken within 72 or 120 hours of the sexual encounter (depending on the brand).

The morning after pill can be prescribed by a GP or alternatively purchased from a pharmacy. The Boot’s pharmacy on Cornmarket Street and the Woodstock Road Chemist are part of a scheme to offer it free to under-21s. The JCR can reimburse you if you keep the receipt.

The IUD needs to be prescribed and inserted by a specially trained GP or at a Sexual Health Clinic.

**Q: How do you put on a condom?**

**A:** We recommend this fantastic guide by Planned Parenthood, whose website also has lots of useful info about safe sex: www.plannedparenthood.org/learn/birth-control/condom/how-to-put-a-condom-on.

**Q: Is safe sex the same for LGBTQ+ people?**

**A:** LGBTQ+ people have different safe sex needs from heterosexuals. In particular, gay and bisexual men (often called men who have sex with men or MSM in healthcare) have much higher incidences of HIV and other STIs than other groups. MSM make up only a few percent of the male population yet represented 72% of gonorrhoea, 88% of syphilis and 69% of HIV cases diagnosed in males in England in 2015. The NHS has good LGBTQ+ health information at: www.nhs.uk/live-well/sexual-health

**Q: What services do Sexual Health Clinics offer?**

**A:** The Oxfordshire Sexual Health Clinics offer confidential walk-in clinics and other useful sexual health services. They provide emergency contraception, testing and treatment for STIs and advice on safe sex. They can also provide contraception fitting and pregnancy/termination advice. www.sexualhealthoxfordshire.nhs.uk
First and most importantly, make sure you talk to someone, when or if you feel ready to. Remember that you have done absolutely nothing wrong! Whatever you are feeling is completely normal.

Your friends, family, the Peer Supporters, College Welfare Team, Counselling Service, GP and the sexual assault/harassment dedicated services are all there to support you! We also have trained First Responders to sexual assault in college, and they will be best equipped to support, help and advise you. The whole Welfare Team are there to listen in a safe, non-judgemental way, and anything discussed will remain completely confidential. They will also be able to find resources and help you decide how to proceed, should you wish to.

If you choose to report an assault there are many options open to you. You can report to the police (999/101, Thames Valley Police, St. Aldates - 01865 841148), but this may be a little daunting. You can instead or also contact a Sexual Assault Referral Centre (SARC), a government service providing support to survivors of rape or sexual assault, such as interviews, examinations, counselling and advice on making an informed decision about what you want to do next, regardless of whether you report the offence to the police or not. The centres are in Swindon, Slough or Bletchley, and the college will provide a taxi directly there paid for by the college. Just ask the Porters’ Lodge (you can also take a friend or someone from the Welfare Team with you).

The local SARCC (Sexual Assault and Rape Crisis Centre) is very supportive and can take you through your options clearly. They can also help supporters of survivors of sexual assault. Your local SARCC can also collect physical evidence should you chose to speak to the police later. The local SARCC is staffed by women and is therefore only open to women: www.solacesarc.org.uk. For male survivors of sexual assault you can get in touch with Survivors UK via their website www.survivorsuk.org and for LGBTQ+ survivors you can speak to Pandora’s Project www.pandys.org/lgbtsurvivors

MORE SOURCES OF HELP AND ADVICE

Male and Female Welfare Officers from the JCR and MCR (see pages 5 and 6).

College Nurse, Alison Nicholls – NB 1/3 (see page 2).

Oxford Against Sexual Violence www.ox.ac.uk/againstsexualviolence

The Oxford SU Student Advice Service and the Counselling Service (see page 7).

Oxford Sexual Abuse & Rape Crisis Centre (OSARCC) www.oxfordrapecrisis.net

Free, confidential advice for survivors of sexual assault, rape, domestic abuse and harassment.

It Happens Here campaign www.oxfordsu.org/campaigns/ithappenshere/
Harassment is any unwanted behaviour that is unacceptable to the recipient of the behaviour and has the purpose or effect of violating the recipient’s dignity, or creating an intimidating, hostile, degrading, humiliating or offensive environment for the recipient. Behaviour that may be acceptable to one person, may be offensive and intimidating to another.

**DEALING WITH HARASSMENT**

**TYPES OF HARASSMENT**

Harassment related to a protected characteristic. Unwanted offensive behaviour by a person towards another based on an individual’s age, disability, gender or gender reassignment, marital status, pregnancy or maternity, race, religion or beliefs, or sexual orientation.

**Sexual Harassment**

Unwanted offensive behaviour of one person towards another of a sexual nature. Examples might include making provocative suggestions, unnecessary physical contact, jokes of a sexual nature, suggestions of sexual contact.

**Bullying**

Bullying is unwanted, aggressive behaviour of one person towards another. Examples of bullying might include making threats, spreading rumours, physical or verbal abuse, or deliberate exclusion of an individual from a social group.

**Stalking**

Stalking is unwanted obsessive or persistent behaviour of one person towards another. The unwanted behaviour may be in person, or via another means such as email or contact via social media. Behaviour that may seem normal can cause distress to a victim if it is persistent, for example, repeated messaging on social media.

**COLLEGE SUPPORT**

If you believe that you have been, or are, experiencing harassment you can contact the Chaplain, Reverend Mia Smith who is the College Harassment Officer.

There is a College Advisory Committee which will meet to resolve issues if necessary. You can find the college’s harassment policy online.

**UNIVERSITY SUPPORT**

If you would like to speak to a trained harassment advisor who is not a member of your college you can contact the harassment line. The Advisors are members of the University Harassment Advisory Network. www.admin.ox.ac.uk/eop/harassmentadvice/advisornetwork. The University Procedure for dealing with harassment can also be found online at: www.admin.ox.ac.uk/eop/harassmentadvice/policyandprocedure/

**EXTERNAL SUPPORT**

Citizens Advice: www.citizensadvice.org.uk
95 St Aldates, OX1 1DA | 03444 111 444
Support Line: www.supportline.org.uk
01708 765200

Support Line is a confidential telephone helpline offering emotional support to any individual on any issue, including advice and support on bullying, stalking and harassment. Look up topics in the list of problems they can help with.
Recreational drugs affect the brain and are taken for pleasure, often socially. This includes nicotine, alcohol and street drugs like cannabis. New drugs which mimic the effects of older drugs are constantly appearing. Previously known as ‘legal highs’ as they evaded legislation which criminalised sale, purchase and possession of older drugs, the Psychoactive Substances Act (May 2016) made all psychoactive substances, including new recreational drugs, illegal by default. Misusing drugs is dangerous and it’s important to be aware of the effects.

**Cannabis**
Cannabis is a plant recreationally smoked, eaten or drunk. Cannabis makes you feel relaxed and happy. However, you can also experience lethargy, anxiety, paranoia and even psychosis (delusions and hallucinations).

**Effects on Your Health**
Cannabis has been linked with mental health problems like schizophrenia. When smoked (particularly with tobacco) it can lead to asthma, heart disease and lung cancer. Frequent use can also negatively affect concentration and fertility.

**Cocaine**
All forms of cocaine are powerful stimulants. It is snorted as a powder or injected. Cocaine makes you feel energised and happy for short time periods. Comedowns (feeling depressed or unwell) often follow cocaine consumption.

**Effects on Your Health**
Cocaine can be fatal if you overstimulate your heart and nervous system, leading to a heart attack. If you have previous or ongoing mental health issues it can increase them or the risk of their recurrence. All forms of cocaine are highly addictive.

**Ecstasy**
Ecstasy or MDMA is a psychedelic stimulant, taken as a pill or as a powder dabbed onto gums or snorted. It makes you feel alert, affectionate and chatty and heightens the senses. It can also cause anxiety, confusion, paranoia and psychosis.

**Effects on Your Health**
Ecstasy can cause overheating, water retention, or dehydration, all of which can be life threatening. Frequent consumption has been linked to mental health problems like anxiety, depression and memory-loss. High doses can be fatal and addictive.

**Speed**
Speed is a stimulant, usually a powder, snorted, dabbed onto gums or swallowed. It’s the name for amphetamine-based drugs. It makes you feel alert, confident and energised. It can also cause paranoia, aggression, confusion and psychosis.

**Effects on Your Health**
Speed can cause dangerously high blood pressure, potentially causing a heart attack. Rick is increased when mixing speed with alcohol. Speed can be highly addictive. Heavy usage can also cause depression and lethargy for extended time periods.
Ketamine

Ketamine is an anaesthetic with stimulant and psychedelic properties. It comes in liquid, pills and powder form and can be injected, swallowed, sniffed or smoked. Ketamine makes you experience an initial “rush” followed by temporary paralysis and out of body experiences. It can also cause vomiting, nausea, slurring of speech, numbness and muscle spasms. Users are less able to feel pain and together with hallucinations this can lead to danger of injury.

EFFECTS ON YOUR HEALTH

Ketamine can cause psychological dependence, psychosis and gradual loss of contact with the real world. There are also reports of long term stomach cramps and urinary tract problems that do not stop when usage stops.

HELP AND ADVICE

Heart or blood pressure conditions make these drugs more dangerous. Snorting any drug in powder form damages nose cartilage. Injecting any drug damages veins and body tissue, and increases risk of overdose. By sharing needles you risk contracting HIV and hepatitis. The main risk when taking illegal drugs is that you cannot know exactly what you’re taking or their risks. If you have consumed these substances and experience their negative effects go to a doctor (don’t worry about being in trouble, doctor – patient confidentiality protects you).

College Nurse

hertfordnurse@nhs.net | NB 1,3

NHS Drugs Overview

www.nhs.uk/live-well/healthy-body/the-effects-of-drugs/

Frank A-Z of Drugs

www.talktofrank.com/drugs-a-z

University Counselling Service

www.ox.ac.uk/students/welfare/counselling

SMOKING AND VAPING

www.nhs.uk/smokefree

Nicotine is addictive. The effects of nicotine, tar, carbon monoxide, and the other harmful substances in tobacco can lead to various health conditions. Smoking causes 96,000 deaths in the UK per year – far more than alcohol, illicit drugs, obesity and road accidents combined. Not smoking is the biggest improvement you can make to your health.

Speaking to and getting support from your GP, college nurse or practice nurse makes you four times more likely to quit. Smoking is not allowed in College except in a designated space in Holywell quad and in designated areas outside other college accommodation. It is only permissible to vape in the smoking areas. For further information and support see: www.nhs.uk/live-well/quit-smoking
Though legal and socially acceptable, alcohol can cause serious short and long term harm. Alcohol intake is measured in units. The NHS recommends not to exceed 14 units of alcohol a week (or if you do, to do so across 3 or more days), and to have a few days a week without alcohol. There is about 1 unit (10 ml of pure alcohol) in half a pint of lager, and a single measure of spirits. A glass of wine contains 1.5 units. This varies depending on the drink’s “alcohol by volume” (ABV).

Alcohol Concern
www.alcoholconcern.org.uk | 0203 8158920

Alcoholics Anonymous
www.alcoholics-anonymous.org.uk | 0800 9177650

NHS Alcohol Support
www.nhs.uk/live-well/alcohol-support

**Alcohol misuse risks**

**Short term** (resulting from reduced inhibition and awareness of surroundings):
- Accidents and injuries
- Being the instigator or victim of crime
- Unprotected sex
- Loss of possessions
- Alcohol poisoning

**Long term** (seriously impacting physical and mental health and social/personal wellbeing):
- Alcoholism
- Heart and liver disease
- Liver, bowel and mouth cancer
- Pancreatitis
- Anxiety, depression, insomnia and hallucinations

**Signs you or someone else may be misusing alcohol**

**You:**
- Feel you should cut down your drinking
- Feel guilty about your drinking
- Drink in the mornings or alone
- Notice other people have commented on your drinking

**They:**
- Regularly exceed recommended amounts of alcohol
- Can’t remember events from the previous night because of alcohol
- Fail to keep commitments because of being drunk or hungover
If you want to find support and advice in college you can speak to one of the JCR or MCR Welfare Officers or the JCR Women*s Rep. You can also speak with any member of the Welfare Team (see page 3).

WomCam (or Women’s Campaign) is “an intersectional campaign that works for feminist justice through protest, discussion groups, and social events.” You can keep up to date with the latest events by following their Facebook page (www.facebook.com/womcam) or contact one of the co-chairs to join the weekly mailing list.

Hi there! I’m Katie, a third-year historian and your current Women*s Rep. I’m here as a friendly face and port of call for anybody who identifies fully or partially as a woman, or is woman-aligned (that’s why we use the asterisk).

I can offer confidential advice and support for any experiences or questions you may have that relate to gender, whether it’s facing discrimination or just wanting a chat. Every term I’ll be organising regular meetings for all women* of Hertford to raise any issues, as well as hosting plenty of fun events such as women*’s only dinners and bar nights!

I’m also a trained Peer Supporter, so am familiar with providing confidential support. You can find me on our JCR Facebook page or the Hertford Women*’s Facebook page, as well as by email, or (most often) sitting on a bench in OB Quad to procrastinate outside of the library - come say hi!

Women*’s love, Katie x
LGBTQIAP+ (LGBTQ+) stands for Lesbian, Gay, Bisexual, Transgender, Queer/Questioning, Intersex, Asexual, and Pansexual. They are descriptive terms chosen by people to describe or define their sexuality or gender identity. However, there are people who perceive these descriptors as constraining and opt not to use them. There are also other sexualities/gender identities not in the acronym; these can be found in the glossary on page 30 and on the LGBTQ+ page of the JCR website.

UNIVERSITY SUPPORT

The LGBTQ Campaign is the political campaigning arm of Oxford’s queer community. It is supported by Oxford SU but is free to form its own policy. Facebook page: www.facebook.com/groups/ousulgbtqcampaign

Oxford University LGBTQ Society (www.oulgbtq.org) runs events including club nights and chilled-out brunches across all colleges. Its committee also includes asexual, bisexual/pansexual and trans Welfare Officers, alongside its women’s and men’s Welfare Officers.

‘Rainbow Peers’ are a group of peer supporters who identify as LGBTQ+ who can support people from their own or other colleges (www.facebook.com/rainbowpeers)

MEET YOUR JCR REPS

Hi! We’re Fenella and Eddie, your LGBTQ+ reps. We’re both in our second year: I study English and Eddie studies History and Spanish. Our role involves supporting queer people at Hertford and making sure our college continues to always be an open, supportive, and vibrant place to be LGBTQ+ in.

Whether you’re out or not, questioning or certain, we’re always going to be available to talk. There’s so much to do as a queer person in Oxford and the University’s LGBT+ scene is a wonderful community to be part of. To keep up to date with events, message me or Eddie so that we can add you to the secret Hertford LGBT+ Facebook page, and you could maybe sign up to LGBT+ Soc’s mailing list too.

We’re committed to making sure you feel safe and accepted here whatever your identity, and Eddie and I will immediately be there to support you if this is ever not the case. You have so much to look forward to as a queer person at Oxford: we can’t wait to get to know you all!

Fenella & Eddie xx

CONTACT OXFORD SU

Vice-President for Welfare & Equal Opportunities – vpweo@oxfordsu.ox.ac.uk

EXTERNAL SUPPORT

Oxford Friend LGBT+ Helpline – www.oxfordfriend.co.uk
Switchboard LGBT+ Helpline – www.switchboard.lgbt
The Metro Centre – www.metrocentreonline.org
Hi, I’m Seb and my primary aim is to ensure that all of you have no disadvantage whatsoever from being an international student. This includes managing your finances (being able to pay your batters and tuition fees easily), integrating into British culture and college seamlessly, and embracing the differences that we have to create a more vibrant and colourful life in college.

There will be loads of events, meals, and entertainment for internationals, but most importantly my job includes serving as your first port of call if you have any problems. I take this very seriously and encourage you to just send me an email (sebastian.bell@hertford.ox.ac.uk) or message me on Facebook if you have any problems at all! I am very much looking forward to welcome all of you to Hertford!

Seb
If you want to find support and advice in college you can speak to one of the JCR or MCR Welfare Officers or the JCR Equal Opportunities Rep. You can also speak with any member of the Welfare Team (see page 3).

**SUPPORT AND RESOURCES**

**CRAE: Campaign for Racial Awareness and Equality**

www.facebook.com/OxfordCRAE

**Equality and Diversity Unit**

www.admin.ox.ac.uk/eop

**Oxford SU Student Advice Service**

The independent student advice service is an advice, information, and advocacy service.

www.oxfordsu.org/wellbeing/student-advice

**Peer Supporters**

Peer Supporters are students who apply and are selected for special training in active listening. Find out more on page 5

**Peers of Colour**

A group of BME peer supporters who can support people from their own or other colleges.

www.facebook.com/oxunipoc

**CONTACT OXFORD SU**

Vice-President for Welfare & Equal Opportunities – vpweo@oxfordsu.ox.ac.uk

Hertford College has a diverse and vibrant community of Christians, as well as a broad range of students from many different faith and cultural backgrounds. If you are looking for a Church, or for worship, community, or support in any faith, please see the Chaplain, who will be happy to help. The College has an Anglican Chapel, where services are held throughout the term, incorporating some wonderful music from our choir (new members always welcome) and some engaging speakers on issues of faith, wellbeing, and the values we share as a College. Whether you are new to College, or have been here a while, everyone is always welcome to any event in Chapel or organised by the Chaplain.

It is more important than ever that we foster goodwill and understanding among faiths and cultures, and to this end we are excited to introduce Feasting for Faiths, when religious and cultural festivals are reflected in our dining options in Hall. This is a great chance to learn about a range of religious and cultural festivals and to celebrate our diversity. Bookings and cost are as usual (You can find these out from the JCR Food and Housing officer). If you have a festival which you would like to be marked, please let the Chaplain know.

The Chaplain is always keen to hear your suggestions for faith or arts events that you would like to see in Chapel.

Please contact her with your ideas: mia.smith@hertford.ox.ac.uk
The first person to talk to about disability is the college’s Welfare and Disability Coordinator - Yo Davies can offer advice about disability support and reasonable adjustments. She can also put you in contact with the DAS, who are the experts in supporting students with disability.

Hertford’s Academic Office can also offer advice and help: academic.office@hertford.ox.ac.uk

**DISABILITY ADVISORY SERVICE (DAS)**

The DAS offers support and advice for students with disabilities, including offering learning support, mental health advice, support for those with sensory and mobility impairments, health conditions, and autistic spectrum conditions.

The DAS may be able to help you apply for funding, such as the Disabled Student Allowance, which might cover costs for specialist equipment: www.ox.ac.uk/students/shw/das

**OSDC**

Oxford Students’ Disability Community is a place for support and everyone will be welcomed. If you are having any difficulties, get in touch – we are a really friendly bunch who have been through our fair share of issues with the Oxford system, so we’ll be able to help point you in the right direction.

---

**MEET YOUR JCR REP**

I’m Abigail a third year English student and your disability rep.

The disability rep represents anyone who identifies as having a disability, whether this is diagnosed or not. This can include physical, sensory, cognitive, and developmental disabilities, mental health conditions, chronic illnesses, and learning difficulties.

The disability rep’s primary roles include supporting the welfare of students who identify as disabled, and working alongside college to improve accessibility.

Disability is such a broad term, and I’m here to help you navigate university life if you have any difficulty while you’re here, whether that’s helping you with the DAS process, talking about reasonable adjustments, or just having a chat.

Abigail x
It can be intimidating coming to Oxford with expectations of a heavy workload. Be assured that your workload will be manageable and you will still be able to have a social life and sleep! If you’re struggling, it’s important to speak to your Tutor, the Registrar, or the Welfare team. If you have underlying health or personal problems that are affecting your ability to satisfy your academic commitments, they need to know about it! It’s the only way they can help.

SUPPORT AND RESOURCES

Oxford SU Student Advice Service
www.oxfordsu.org/wellbeing/student-advice

University academic matters
www.ox.ac.uk/students/academic

CONTACT
OXFORD SU

Vice-President for Access and Academic Affairs – vpaccaff@oxfordsu.ox.ac.uk

SUSPENDING YOUR STUDIES
SOMETIMES CALLED ‘RUSTICATION’

There may be a situation where you think you are unable to continue your studies due to illness or some other problem. Although this is uncommon, it does sometimes happen. The first step if you are considering suspending status (or rusticating, as is the commonly used but rather old fashioned term) is to chat to your friends and family, but also your tutors and the college welfare team.

You can also talk to Peer Supporters, JCR or MCR Welfare Officers, your GP or the College Nurse. Remember that this is a big decision, and there are other options available. Lynn Featherstone, the college’s Registrar, is an expert on suspension of status so she’s the best person to discuss it within college.

Find out more at:
www.ox.ac.uk/students/academic/guidance/undergraduate/status
WHERE SHOULD I GO FOR...

**housekeeping@hertford.ox.ac.uk**
- Guest bed hire
- Student bedding packs
- Guest approval
- Maintenance
- Pest control
- Laundry & laundry cards
- Furniture
- Student storage
- Room cleaning issues

**porters@hertford.ox.ac.uk**
- Lost keys
- Locked out
- Security
- Emergencies
- Welfare
- First aid
- Post and parcels
- General enquiries

**maintenance@hertford.ox.ac.uk**
- General maintenance issues and faults

**help@hertford.ox.ac.uk**
- IT issues and enquiries

**accommodation@hertford.ox.ac.uk**
- Vacation residence
- Rent
- Guest rooms
- Room ballot enquiries

**bursary@hertford.ox.ac.uk**
- Payments to college
- Course fees
- Battels
- Payroll
- Financial enquiries
**MENTAL HEALTH**

**Confidentiality** - a set of rules or a promise that limits access or places restrictions on certain types of information. This means that information cannot be passed on, except in the case where there is immediate danger to the individual or others.

**Counsellor** - a person trained to give guidance on personal or psychological problems.

**Mental disability** - a mental or behavioural pattern that causes suffering or a poor ability to function in ordinary life, where it has a long-term effect on your normal day-to-day activity, e.g. depression, bipolar disorder, schizophrenia.

**Mental health** - the state of someone’s psychological and emotional wellbeing.

**Mental health difficulty/problem** - a pre-diagnosed psychiatric condition for which a person may or may not be receiving medical or psychological treatment, e.g. anxiety, depression, eating disorders.

**Peer Supporter** - people providing knowledge, experience, emotional, social or practical help to each other.

**Psychiatrist** - a doctor specialising in the diagnosis and treatment of mental illness.

**Psychologist** - an expert or specialist in psychology.

A clinical psychologist specialises in diagnosing and treating mental illness (but is not a doctor).

**Psychotherapist** - a person who uses the techniques of psychology or psychiatry to treat mental and emotional disorders, including psychoanalysis, cognitive behavioural therapy etc.

**Rustication** - to temporarily suspend your studies, for welfare or health reasons. *Now called medical suspension.*

**Self care** - looking after yourself in a healthy way, whether it’s taking medicine when you have a cold, doing exercise or making a cup of tea.

**Self harm** - (also known as self injury or self-mutilation). Deliberately causing harm to oneself by causing a physical injury or putting oneself in dangerous situations. This isn’t necessarily synonymous or a precursor to feeling suicidal.

**Suicidal** - feeling deeply unhappy or depressed, and likely to commit suicide. Not the same as thinking about death, and an emergency.

**Therapist** - someone who treats physical, mental or behaviour problems with the aim of curing or rehabilitating.

**Welfare** - the health, happiness, good fortune and wellbeing of a person or group.

**Wellbeing** - the state of being comfortable, healthy, or happy.
SEXYAL HEALT& ASSAULT

Assault by Penetration - when a person intentionally penetrates the vagina or anus of another person with a part of their body or anything else, without consent or reasonable belief that the other person consents.

Causing sexual activity without consent - when a person intentionally causes another person to engage in a sexual activity, without consent or reasonable belief that the other person consents. This is the legal equivalent to a charge of rape for a female offender.

Consent - a person consents if they agree by choice, and have the freedom and capacity to make that choice. Situations where consent may be compromised include the use of force or threats, being under the influence of drink or drugs, having a mental disability which renders a person unaware of what is occurring or incapable of giving consent, or being under the age of consent (16 in the UK).

Contraception - the deliberate use of artificial methods or other techniques to prevent pregnancy as a consequence of sexual intercourse, e.g. condoms, the contraceptive pill.

First Responder (to Sexual Assault) - the first person to whom a survivor of sexual assault discloses.

GUM - Genito-Urinary Medicine.

Rape - when a person intentionally penetrates the vagina, anus or mouth of another person with their penis without consent or reasonable belief that the other person consents.

SARC (Sexual Assault Referral Centre) - a centre providing services and support to victims of rape or sexual assault

SARCC (Sexual Assault and Rape Crisis Centre) - a centre providing services and support to victims of rape or sexual assault, for women and girls

Sexual assault - when a person intentionally touches another person, where the touching is sexual, without consent or reasonable belief that the other person consents

STI / STD - Sexually Transmitted Infection / Disease

LGBTQ+

Coming out – a figure of speech used to describe an individual’s self-disclosure of their sexual orientation and/or gender identity. Choosing to ‘come out’ is solely the decision of an individual, who may or may not wish to reveal their sexuality or gender identity.

Erasure - the denial, dismissal or refusal to acknowledge the identities or sexualities of people.

Hate crime/incident - any incident, which may or may not constitute a criminal offence, which is perceived by an individual, to be motivated by prejudice or hatred towards someone because of their sexuality, gender or race. A hate incident may be verbal, physical or a perceived threat.

Outing - the process of revealing someone’s sexuality or gender identity without their consent. It is disrespectful to a person’s self-determination to ‘out’ them without consent.

Transitioning - a term used to describe the process of moving from one gender to another, sometimes through hormonal or surgical treatment, or just disclosing one’s identity.
**SEXUALITY**

**Aromantic** - an orientation which falls on the asexual spectrum and is characterised by feeling little or no romantic attraction to others.

**Asexual/ACE** - an orientation generally characterised by not feeling sexual attraction or desire for partnered sexuality. Asexuality is distinct from celibacy, which is the deliberate abstention from sexual activity. Asexuality is reflective of the nature of sexuality as a spectrum and some asexuals therefore may have sex.

**Biphobia** - prejudice, stereotyping, erasure or discrimination against people who identify as bisexual.

**Bisexual** - a person whose primary sexual and affectional orientation is toward people of the same and other genders, or towards people regardless of their gender.

**Demiromantic** - an orientation which falls on the asexuality spectrum, characterised by the need for a strong emotional bond with a person as a prerequisite for developing or experiencing romantic attraction to them.

**Demisexual** - an orientation which falls on the asexual spectrum, characterised by the need for a strong emotional or romantic connection with a partner as a pre-requisite for experiencing sexual attraction towards them.

**Heteronormativity** - the assumption, made by individuals and institutionalised society, that everyone is heterosexual; that heterosexuality is default and superior to other sexualities.

**Heterosexuality** - a sexual identity in which a person is sexually and romantically attracted to a person of an opposite gender, e.g. a man attracted to a woman.

**Homophobia** - this is a wider term used to describe prejudice, stereotyping, erasure or discrimination against people who identify on the LGBTQ+ spectrum.

**Homoromantic** - a romantic orientation characterised by feeling romantic attraction to someone of the same gender.

**Homosexuality** - a sexual orientation characterised by feeling sexually and romantically attracted to a person of the same gender. Includes being gay (a man attracted to men) and lesbian (a woman attracted to women).

**Panromantic** - a romantic orientation characterised by romantic attraction to individuals of any gender.

**Pansexual/omnisexual** - terms used to describe people who have romantic, sexual or affectional desire towards a person of any gender.

**Queer** - for some, ‘queer’ acts as an umbrella term for all sexualities and gender identities, or as a term for those who do not wish to label to their sexuality/gender identity. Someone who identifies with a label in the LGBTQ+ acronym may also use queer, whilst others may exclusively use ‘queer’ to describe their sexuality or gender.

*Use of the word ‘queer’ - the presence of this word within the LGBTQ+ community is contentious, due to its historically derogatory use as a slur. However, for many it is a reclaimed term which means that it can be used only by those who identify as ‘queer’ or LGBTQ+. Use of this word by people outside of the ‘queer community’ can be offensive and appropriative.

**Romantic attraction** - a sense of wanting to be involved romantically with a person. Feelings of sexual attraction are distinct and are not mutually inclusive of feelings of romantic attraction.

**Romantic orientation** - a description of the gender, genders (or lack thereof) which a person experiences romantic attraction towards.

**Sexual attraction** - a sense of wanting to engage in sexual activity with a person.

**Sexual orientation** - the gender, genders (or lack thereof) which a person experiences.
Agender - an individual who identifies as without gender.

Cisgender/cissexual - words used to describe people who are not transgender, or transsexual. It is a simple opposite in prefix ‘cis’ to ‘trans’.

Cissexism - the assumption that gender corresponds to genitalia, leading to discrimination against and erasure of non-binary individuals.

Gender - a social construct, refers to sociological boundaries and signifiers that define people as feminine, masculine or androgynous. Gender can be the appearance and presentation of a person’s identity, but is unrelated to sex.

Gender binary - this is a common system of thought which refers to certain societal ideas that many people hold about gender and sex. The gender binary is not correct, however, as it presumes that only two genders exist and that a person can be only male or female. It implies that trans people do not exist, which is harmful and inaccurate.

Gender discrimination/sexism - prejudice or discrimination based on a person’s sex or gender.

Gender equality - the state in which access to rights or opportunities is unaffected by gender.

Gender fluid - this term refers to the spectrum of gender identity and relates to a person who feels an overlap of, or indefinite lines between, their gender identity. A gender fluid individual may identify with more than one gender or possess no gender (i.e. being agender, non-gendered, genderless), or move naturally between genders and have a fluctuating gender identity.

Gender identity - the psychological recognition of oneself as being a member of a certain gender. Gender identity is self-determined and separate from anatomical sex, i.e. genitalia.

Gender-neutral pronouns - these are used to avoid referring to someone as ‘he/him’ or ‘she/her’. The most common gender-neutral pronouns are ‘they/them’, ‘zie/zim’ and ‘ey/em’.

Genderqueer - this refers to an identity taken on by people who feel that the substance and aspects of their gender exist outside of the binaries ‘male’ and ‘female’.

Intersex - a general term used for a variety of conditions in which a person is born with a reproductive or sexual anatomy that doesn’t seem to fit typical definitions of female or male.

Pangender - this term may fall on the gender fluidity spectrum and describes the non-binary experience of an individual who may identify and move between multiple gender identities.

Sexism - prejudice, stereotyping, erasure or discrimination against people, based on gender.

Transgender - a person who identifies with a gender that does not correspond to the sex assigned to them at birth (AFAB = ‘assigned female at birth’, AMAB = ‘assigned male at birth’). This includes trans men (an individual who was assigned female at birth but identifies as a man) and trans women (an individual who was assigned male at birth but identifies as a women). Being trans is not necessarily identifying with the genders of ‘man’ or ‘woman’, given the diversity of gender identities; whereby someone may be gender fluid or agender.

Transphobia - prejudice, stereotyping, erasure or discrimination against people who identify outside the gender binary. It also includes institutionalised forms of discrimination, such as criminalisation, pathologisation, or stigmatisation of non-conforming gender identities and gender expressions.
**DISABILITY**

**Ableism** - discrimination in favour of able bodied people.

**Access barriers** - an obstruction that prevents people with disabilities from using standard facilities, equipment or resources.

**Accessible** - a facility, activity or resource that can be used by someone, regardless of any disabilities they have.

**Adaptive technology** - a subset of assistive technology which is designed specifically for people with disabilities, and would not be used by those without disabilities.

**Alternative examination arrangements** - examination arrangements which help students with a disability, for example extra reading time or use of a word processor (laptop).

**Assistive technology** - an item, piece of technology or piece of equipment which can improve the functional capabilities of someone with disabilities, e.g. wheelchair.

**BSL** - an abbreviation for British Sign Language.

**Cognitive disability** - a broad concept encompassing various intellectual or cognitive deficits where a person has greater difficulty with one or more types of mental tasks than the average person, e.g. dementia, acquired brain injury, specific learning disabilities, intellectual disability.

**DAS (Disability Advisory Service)** - a department of the university which helps with students who have a disability.

**Developmental disability** - chronic condition due to mental/physical impairments. Can be detected early and persist through an individual’s life, e.g. Down syndrome, cerebral palsy, Fragile X

**Disability** - a broad term that in general describes a difficulty or impairment that may be physical, cognitive, mental, sensory, emotional, developmental or a combination of these. These can be congenital (present from birth) or acquired (occurring during a person’s lifetime).

**Disability hate crime** - crimes that are targeted at a person because of hostility or prejudice towards that person’s disability.

**DSA (Disabled Students Allowance)** - a grant that can be applied for, which helps with funding for support for disabled students.

**Emotional disability** - a disability that impacts a person’s ability to effectively recognise, interpret, control or express fundamental emotions. Also includes behavioural disability.

**Invisible disabilities** - disabilities which are not immediately apparent, e.g. someone who is hard of hearing chooses not to use a hearing aid, someone with visual impairment wearing contact lenses, or someone with a cognitive impairment.

**Limited mobility** - mobility impairment, which could be caused by a number of factors.

**Mental disability** - a mental or behavioural pattern that causes suffering or a poor ability to function in ordinary life, where it has a long-term effect on your normal day-to-day activity, e.g. depression, bipolar disorder, obsessive compulsive disorder, schizophrenia.

**Mental health difficulty/problem** - a pre-diagnosed psychiatric condition for which a person may, or may not, be receiving medical or psychological treatment, e.g. anxiety, depression, eating disorders.

**Mentor** - there are two types of mentor in Oxford, a peer mentor and a DAS mentor. A peer mentor is a student in college who you can talk to. A DAS mentor is a member of the DAS who can help students with a variety of disabilities.
DISABILITY (continued)

Physical disability/impairment - a limitation on a person’s physical functioning, mobility, dexterity or stamina, e.g. loss of a limb, mobility impairment, visual impairment, hearing loss.

Reasonable adjustment - an alteration which could be made to enable a disabled person to carry out work without being at a disadvantage.

SEN(D) - Special Educational Needs (and Disability).

Sensory disability/impairment - sensory impairment where one or more of your senses (sight, hearing, smell, touch, taste, special awareness) is no longer ‘normal’, e.g. visual impairment (including blindness) or hearing impairment (including being hard of hearing or deafness).

ETHNICITY & RELIGION

BME/BAME - Black and Minority Ethnic or Black, Asian and Minority Ethnic, used in the UK to describe people of non-white descent.

ERM - Ethnic and Religious Minorities is the term used in the UK to describe people of non-white descent or non-Church of England descent.

Hate crime - crimes that are targeted at a person because of hostility or prejudice towards that person.

Microaggressions - the everyday verbal and non-verbal slights or insults which communicate hostile messages that target people based solely upon the fact that they are a member of a marginalised group. Microaggressions are often found in jokes and are heavily linked to stereotypes.

PoC - People of Colour is another term used to refer to people of non-white descent.

Prejudice - an irrational bias against members of a particular racial, religious or social background.

Privilege - an advantage or right that is exclusively available to a particular person or group of people.

Racial discrimination - treating someone in a negative way purely because of their race.

Racism - a combination of privilege (see above) and power (occupying a position of social/economic/political power). Racism is the belief that all members of each race possess characteristics, abilities or qualities specific to that race, especially so as to distinguish it as inferior or superior.

Religious discrimination - treating someone differently because of their religion.

Reverse racism - when the racially dominant group in any given society are discriminated against. This term is now largely thought to be incorrect because of the new understanding that power is a crucial element in racism. This is, of course, not to say that the dominant racial group can’t face racial intolerance but this is usually classed as prejudice, discrimination or stereotyping.

Stereotyping - the harmful belief that all members of a specific race, ethnicity, religion or social group possess specific, often pejorative characteristics or attributes.
KEY CONTACTS

PORTERS' LODGE
porters@hertford.ox.ac.uk
01865 279400

WELLFARE & WELLBEING COORDINATOR
welfare.coordinator@hertford.ox.ac.uk
01865 279461

COLLEGE NURSE
hertfordnurse@nhs.net
01865 279401

CHAPLAIN & HARASSMENT OFFICER
mia.smith@hertford.ox.ac.uk
01865 279455

JUNIOR DEAN (MAIN SITE)
ahmed.ahmed@hertford.ox.ac.uk
07342169586

JUNIOR DEAN (MAIN SITE)
heather.mann@hertford.ox.ac.uk
07846709855

JUNIOR DEAN (NORTH OXFORD)
ji.baek@hertford.ox.ac.uk
07908151692

JUNIOR DEAN (SOUTH OXFORD)
gavriil.gavriilidis@hertford.ox.ac.uk
07413553557