

# CHAPTER IV

## Stage 4 Interpreting the School Health Profile

*Objective: Review the School Health Profile that results from the Needs Assessment Questionnaire and analyse it for the major issues within each path.*

### 4.1 A Comprehensive Report

Once the School Health Profile has been printed, the School Health Committee must analyse the findings and develop a plan based on the results.

The *School Health Profile* is a report on the results of the recently completed Student Needs Assessment Questionnaire. It contains information on the needs, preferences, and attitudes of the various student groups within your school. The School Health Committee must study and understand the results before moving on to develop priorities and plans. The Profile will be the primary resource for the development of the School Health Plan. The design of specific programs should be driven first by student needs and a distant second by all other considerations. Your committee should draw conclusions concerning student needs based on the responses to the *Needs Assessment Questionnaire* that are shown in the *School Health Profile*, and then decide on priorities.

The Profile presents results in easy-to-understand graphs and tables. You may be surprised at the amount of information it contains. This chapter will help you deal with the material contained in the profile to enable you to get the most out of it. General discussions on program implications and suggestions about comparing questions with other data are provided in the Profile.

A series of questions have been included in Appendix 4 - B (*Framework for Examining The School Health Profile*) that will further assist you in analysing the Profile and in the development of the School Health Plan. These questions have been supplemented with a series of worksheets (Appendices 4 - C to 4 - F) that will help you identify needs and priorities on the way to developing your School Health Plan.

The School Health Profile comes in two parts:

1. School Health Profile - Part A: Grade and Gender Breakdowns
  - ◆ Includes tables and graphs containing the response rates with grade and gender breakdowns.
2. School Health Profile - Part B: Selected Comparisons
  - ◆ This part of the School Health Profile will help your committee to compare the data resulting from the Needs Assessment in three ways:
    - ✓ to the aggregated data from other schools,
    - ✓ to national data from the Health Behaviours in School-Aged Children Study, and
    - ✓ as cross-tabulations among key questions within the questionnaire.

Part B of the School Health Profile comes in different formats depending on the type of comparison you wish to access.

*Part A: Grade and Gender Comparisons* and *Part B: Selected Comparisons* are not necessarily meant to be used together. Schools can develop their School Health Plan without needing to compare their data with national data, or that of other schools, or examining cross tabulations. However, often when presenting the data from the School Health Profile, the School Health Plan, or the individual action plans, the questions are asked: “*How do we compare with other schools like us?*” or “*How do we know that this is what we should be doing?*”. The comparative data has been made available in aggregated form, without the participating schools being identified, to help answer these questions. Cross tabulations are available for selected questions only, and can help schools to better target programs and activities that will be designed (Stage 6).

## 4.2 Backgrounder

### 4.2.1 Grade and Gender Breakdowns

The School Health Profile is organized into sections using the five **Voices and Choices** paths. The paths are based on what research shows are the major influences on student and school health and well-being. These influences affect not only the health of **individual students** but also the health of **the school itself**. The health of the school is, in a sense, a product of the health of the individuals within the school community (students, teachers, administrators, and staff), and is also affected by factors in the broader community. Since individuals shape, and are shaped, by their environments in a repeating cycle of events, the health of individual students both affects and is affected by the health of other members of the school community.

These influences interact as a system that we refer to as the five paths to school and student health and well-being (Introduction). They are:

- ◆ psycho-social environment,
- ◆ physical environment,
- ◆ personal resources,
- ◆ personal health practices, and
- ◆ support services.

The School Health Profile provides a snapshot of this cycle from the students' perspective. It attempts to show how the health of the school and students is, in significant ways, **produced** by these interactions. The profile is a valuable planning tool to help improve the health of students in your school.

The Profile has been designed to fit with other existing health-related initiatives, such as school improvement activities, safe and caring school programs and student democracy, leadership and empowerment initiatives. The Voices and Choices paths and principles and the School Health Profile are meant to support a Comprehensive School Health approach (See Appendix Introduction - A).

### 4.2.2 Selected Comparisons

Three types of comparisons can be made after the school's Needs Assessment data has been entered and the School Health Profile produced.

Your Committee can **compare the data from your school's Needs Assessment Questionnaire with the data from other schools of similar size, same province and same community type**. No schools are ever identified in the data set. Only aggregated data is used. These comparisons are presented in graphical format and are linked to the question of interest within the dynamic School Health Profile report.

To access these comparisons, simply login to the Voices and Choices on-line database at <http://www.HealthCanada.ca/VoicesandChoices> and select "School Health Profile". Then, go to the question of interest in the profile, locate the table entitled "Compare your school to other schools of:" and select the type of comparison you wish to make. The on-line database will then perform the necessary calculations and produce a graph to which you can compare your school's data. This information can be accessed for all of the questions in the Needs Assessment Questionnaire.

Your committee can also compare **the data from your school's Needs Assessment Questionnaire with the data from the Health Behaviours in School-Aged Children (HBSC) Study**. The HBSC data result from a nationally representative sample of students in Grades 6 to 10/Secondary 4 in Canada. Comparable HBSC data is available for 32 of the Voices and Choices questions. For your convenience, this data has been organized by Voices and Choices question according to the layout of the School Health Profile report. Each Voices and Choices question has been linked to the appropriate HBSC question and table, broken down by grade and gender. To access the national data, simply login to the Voices and Choices on-line database (same website address as above) and select "HBSC National Data". Scroll down to the Voices and Choices question of interest and select the underlined HBSC table.

Finally, your committee can **examine the data from your school's Needs Assessment Questionnaire more closely by requesting cross tabulations for a limited number of questions**. This enables your committee to compare responses between selected key questions. The questions selected for cross tabulations have been selected based on the Voices and Choices paths and principles and what a school can do. The data is presented in table format and organized in a separate report that can be accessed at the website address mentioned above.

#### 4.2.3 Tips for Success

Use the rate of response to ensure an accurate and complete picture of student needs. The greater the participation in the completion of the questionnaire, the more accurate and complete the picture of student needs.

#### 4.2.4 Are the Responses Representative of the School?

The School Health Committee can feel confident about the reliability of the data presented in the profile as long as the response is representative of the organization as a whole. For example, if the School Overview shows that the organization has groups that vary by:

- ✓ age,
- ✓ sex,
- ✓ grade,
- ✓ language, and
- ✓ ethnic background.

The committee should ensure that these groups are identified in the School Health Profile. If the results are not representative, your committee should use a follow-up means for validating questionnaire results. One method is a focus group or feedback session. This will not be a problem if your school administered the Needs Assessment Questionnaire as a census, but may be a problem if it was administered to a representative sample of the school population. A biased sample will likely occur when a school administers the Needs Assessment Questionnaire on a voluntary basis. Focus groups or feedback sessions are used to:

- ✓ validate results, particularly for groups that were under-represented by the survey response,
- ✓ obtain greater detail on issues, student suggestions, and barriers to specific ways of improving health,
- ✓ involve students more in the overall process. A series of feedback groups may result in a variety of ideas concerning how to implement programs, and
- ✓ send a positive message to students informing them that their response to the questionnaire is having an immediate effect.

### **Census**

If the Needs Assessment was conducted as a census, the response rate should be as close to 100% of the student population as possible to ensure maximum inclusion of all student groups.

### **Sample**

If the Needs Assessment was conducted as a sample survey of the school population, the response rate should be as close to 100% of the sample as possible to ensure the School Health Committee has the most accurate picture of the school. If too much of the sample is missing, your committee will need to replace the sample that is missing with a matched sample.

### **Voluntary**

To ensure results will be useful, at least 65% of the students from all grade levels should complete the questionnaire. This will ensure that all grades are appropriately represented.

## **4.3 Interpreting the Grade and Gender Report**

The School Health Profile presents a detailed picture of the school, using charts and graphs to illustrate grade and gender differences in the students' responses. The report describes how students feel about their health, what they would like to do to improve it, what's stopping them, and how the school can help them. By using the profile's table of contents, you can move easily through the different parts of the report to find the information you need to begin developing your School Health Plan.

The School Health Profile report is divided into seven parts:

1. General Demographic Profile
2. General Health Profile
3. Psycho-social Environment (both School Climate and Family)
4. Physical Environment
5. Personal Resources or (Mental Health and Coping Skills)
6. Personal Health Practices and Conditions
7. Support Services

The seven parts partially correspond to the five Voices and Choices paths. They also provide general information that may be useful in your planning.

Within the School Health Profile, you will find that each question is included and is followed by a brief explanation of why it is important to the **Voices and Choices** planning process. This is followed by a description of what other questions relating to this question need to be considered in the analysis. The data is presented in table format, followed by graphs, both illustrating the differences among the grades and between the genders.

### **1. General Demographic Profile**

The *General Demographic Profile* section of the **School Health Profile** presents, as its name implies, a picture of the general profile of your school. It includes: the response rate for the questionnaire, the age, gender and grade breakdown, and the results of the questions on family composition; length of time living in Canada, part time employment, absenteeism, and reasons for absenteeism. While much of this information will already be known to you within the school, it is valuable in validating the results of the questionnaire and in creating a profile of your school. This is important information for parents and the community or other professionals or agencies who become engaged in developing the School Health Plan.

The responses in this section should be compared to the School Overview that the School Health Committee has been preparing since Stage 3 prior to receiving the results of the Needs Assessment Questionnaire (The School Health Profile).

### **2. General Health Profile**

The *General Health Profile* section illustrates the general health of the students and your school. It shows how students feel about their health; whether or not students have a disability, minor physical ailments, difficulties sleeping, hunger, and fatigue, what they would like to do to improve their health, and the barriers they perceive to making these changes. The results of these questions are presented first in table form with a description of why they are important, followed by graphs, broken down by grade and gender.

When analysing these results, keep in mind that some of these responses relate more to physical environment and health, psycho-social environment and health, or development of knowledge and coping skills that are necessary in order for students to take action. In some cases, the school may play a role, while in other cases it is outside the scope of the school and requires community or family resources.

### **3. Psycho-social Environment**

The *Psycho-social Environment* section of the School Health Profile contains information on both the school and family climate. The school climate section focusses on how students feel about school, teachers, and classmates, what types of grades they usually get, their future aspirations, and school-related bullying. The section that focusses on life outside school deals mostly with family atmosphere or climate, and includes a description of family style or type, and support within the family for the young person as a student.

This section talks about the extent to which things that go on at school and at home help or hinder students in their attempts to stay well, or become well. Once again, some of these issues may be beyond the actual scope or responsibility of the school. However, collaboration with community agencies and organizations or parents may lead to creative solutions to addressing the expressed needs.

### **4. Physical Environment**

The *Physical Environment* section discusses the students' concerns with their physical environment in the school. Some of these concerns, such as fear of weapons, may have a more psycho-social basis than

others, but all of them are important.

## **5. Personal Resources**

The *Personal Resources* section discusses how students see themselves in terms of their self-image, self-confidence, competence, whether or not students have someone to count on, what causes student worry, nerves or stress both at school and outside school, what students would like to do to cope with stress, barriers they see to those actions, how students perceive their sense of control over their health and their work, their sense of coherence and confidence, and the amount of positive social support available to them. In other words, it addresses how they cope.

## **6. Personal Health Practices**

The *Personal Health Practices* section talks about the current health status of students as judged by their physical activity, eating, smoking, drinking, drug use, physical and social activities, as well as risk-taking and health protective behaviour patterns.

## **7. Support Services**

This section focusses on how the students feel that the school can help them to improve or maintain their health. This question is strongly linked with all the other sections of the School Health Profile.

## **4.4 Interpreting the Selected Comparisons**

There are three types of comparisons available to help the School Health Committee and the school community to more closely examine the data from the Needs Assessment Questionnaire that is presented in the School Health Profile.

### **Other Similar Schools**

- ◆ Your Committee can compare your school's data with the data from schools of similar size, same community type and/or province. This information is useful when presenting both the School Health Profile results and the School Health Plan to key decision-makers, such as the administration, school council, and school board. It is often useful to be able to illustrate how your school is the same or different from other schools of similar background.

### **National Data**

- ◆ Your committee can compare your school's data with the data from the Health Behaviours in School-Aged Children (HBSC) Study. Not all questions on the Needs Assessment questionnaire are drawn from the HBSC Study, therefore data is only available for questions where there is comparability. This information can be useful when presenting both the School Health Profile results and the School Health Plan to key decision-makers, such as administration, school council and school board. There may be a need to illustrate how different or similar your school is to a national representative sample of students. The behaviour or issue may more likely be exhibited by students in a certain type of school or may vary from province to province. Some patterns of behaviour may be fairly universal. This may change the type of program to be planned.

### **Cross Tabulations**

- ◆ Cross tabulations can help your committee study the school and student needs in more depth. These tables let the committee compare responses between selected key questions. For

example, students feelings on safety at school (Q 31) can be compared with whether or not they have been bullied (Q 32), their concerns regarding the physical environment (Q 27 f, h), what stresses them at school (Q 40, 20, 21, 22, 25), and what the school can do to help (Q 75 10, 7, 8, 24, 25, 31, 35). Another example could be, comparing students feelings about school (Q 22) with parental support and pressure (Q 21 c, d), being bullied (Q 32), school atmosphere (Q 28 a, b, c, e), teacher support(Q 29 a, b, e), student support (Q 30 a, b, c), school stress (portions of Q 40) and what the school can do to help (Q 75). Studying these cross tabulations can help to tailor the School Health Plan and the resulting programs and action plans.

- ◆ The questions selected for cross tabulations have been chosen based on the Voices and Choices paths and principles and what a school can do.

## 4.5 The Process of Analysis

This is a natural place for dividing the work among the School Health Committee. It is suggested that smaller sub-groups be created to address the main paths, reporting back to the larger committee. As the areas are inter-related, some coordination would be required.

Since *Personal Resources* are relevant to both *Personal Health Practices* and to the *Psycho-social Environment*, it is important for the whole committee to read the sections relating to them. Therefore, the subgroup studying and reporting back on *Personal Health Practices* would try to explain to the whole committee how *Personal Resources* (sense of control and capacity to cope) affect, and are affected by *Personal Health Practices*. Similarly, whoever reports on the *Psycho-social Environment* would try to explain how this affects and is affected by students' perceived social support and their *Personal Resources*.

Each group should keep in mind the responses in the Support Services section to questions 75 and 76, 'How do you think your school could help you improve or maintain your health?'. This is a key question and relates to most of the other questions.

To help you with this process, there are questions in Appendix 4 - B *Framework for Examining The School Health Profile* and in the School Health Profile report to guide your review. In addition, worksheets included in Appendices 4 - C can help you summarize the grade and gender differences.

*\* Each group should pay particular attention to figuring out where grade and gender make a difference.*

From this exercise, you will acquire information concerning the health status, needs, concerns and risks of the students in your school. You will be well on your way to establishing the priorities that will form the basis of the School Health Plan (Stage 5).

### Validation of Conclusions

When analysing the results, keep in mind that the School Health Profile can tell you the students' opinions and feelings, and their expressed needs and preferences, but can't really tell you why they feel this way. In order to validate your committee's conclusions, it is important to communicate the results to the school community as a whole (students, parents, staff, and administration) at every stage. The committee may wish to verify their conclusions through focus groups or discussion groups that allow for a more in-depth view of the major issues identified for the school.

Focus or discussion groups can also be a great way to gain more input on what the priorities need to be for the school. Some of the questions (especially those from M to Q) contained in Appendix 4 - B *Framework For Examining The School Health Profile* and the information from the analysis of the School

Health Profile contained on the worksheets in Appendix 4 - C can be used with the worksheets in Appendix 4 - D to F to lead these groups through a priority identification process. These groups can also be a source of brainstorming ideas for the recommendations and the development of the Program Action Plan. It can also be used to validate the vision for a safe, healthy, caring school that was proposed by your School Health Committee in Stage 2.

Leading and facilitating a focus or discussion group can be a very powerful leadership and learning experience for the members of your committee.

## 4.6 Communicating the Results

Quickly following up with a commitment to action ensures that the momentum is not lost. Students, parents, and teachers will be anxious to hear about the results of the Needs Assessment Questionnaire. Once the results have been reviewed by your Committee, there must be a follow-up communication to all students, parents, and teachers. This follow-up may take the form of a newsletter, announcements, an assembly, a note on the school web site, presentations at staff meetings, student council meetings, school council meetings, a special school community meeting, special issue bulletin, or some other appropriate medium. In all communications, the students involved in your committee need to be front and centre, both presenting and facilitating the communication.

To gain a better understanding of student needs and preferences, your committee may establish "special feedback groups" following the release of questionnaire results. These groups should be representative of all parts of the school and should include students, parents, teachers, and administration. Their role is twofold: to **send** and to **receive** messages on the results of the questionnaire. Program implications identified in the School Health Profile can also be discussed with these feedback groups, ensuring that your committee will be in an even better position to make recommendations for the School Health Plan (Stage 5) and Program Action Plans (Stage 6).

The Glossary of Terms (See Appendix Introduction - B ) contains a brief description of "Special Feedback Groups" and outlines their role.

## 4.7 Evaluation

There are several aspects to consider when evaluating this stage in the **Voices and Choices** planning process.

The first issue to consider in a process evaluation is how accurate and representative the data is of the school population. Comparing the basic demographic data with the School Overview will help determine this.

The second issue to consider is how thoroughly the profile was reviewed. How was the work broken up and then reintegrated into a complete picture? How were the connections among the various paths examined, and how were they integrated into the process of arriving at the list of priorities for action and recommendations that resulted? Was the process student led? Was the process inclusive of all of the various groups within the school community? Was the process inclusive of the school as a whole? Was the process accepted by the groups within the school community? Were the conclusions accepted by the school community? How were the results communicated to the school community? Were all the key partners or players reached? Were the students on your committee involved in the processes? Did the students use the school resources at their disposal?



## **Stage 4 - Interpreting the School Health Profile**

Following the School Health Committee's review of the School Health Profile, complete the checklist to determine whether the organization is ready to move to Stage 5.

- How does the School Overview compare with the School Health Profile?
- Is there a good return rate from all student groups?
- Do we feel that the Questionnaire results are complete enough for them to proceed to Stage 5 (School Health Plan) and Stage 6 (Program Action Plans)?
- If not, did we gather supplementary data to fill the gap?
- Did we establish a means of communicating the results to students, including feedback groups to discuss program implications?

## **Framework for Examining the School Health Profile**

- A. What changes would students like to make to improve or maintain their personal health (question 11 in the School Health Profile)?
- In their personal health practices?
  - In their coping skills?
  - In their physical environment?
  - In their psycho-social environment?
- B. What are the students perceived barriers to making these changes (question 12 in the School Health Profile)?
- Are they related to their personal health practices and coping skills?
  - Are they related to their psycho-social environment?
  - Are they related to their personal resources?
  - Are they related to their physical environment?
  - Are they related to the availability and accessibility of support services?
- C. How do the students think that the school can help them make the desired changes (question 75 and 76 in the School Health Profile)?
- Are these related to their personal health practices?
  - Are these related to their coping skills?
  - Are these related to their psycho-social environment?
  - Are these related to their physical environment?
  - Are these related to the availability and accessibility of support services?
- D. What do students say causes them excess "worry, nerves, or stress" at school (question 40 in the School Health Profile)?
- Are these related to their personal health practices?
  - Are these related to their coping skills?
  - Are these related to their psycho-social environment?
  - Are these related to their personal resources?
  - Are these related to their physical environment (see question 27 in the School Health Profile)?
- E. What do students say causes them excess "worry, nerves or stress" outside of school (question 41 in the School Health Profile)?
- Are these related to their personal health practices?
  - Are these related to their personal resources?
  - Are these related to their physical environment?
  - Are many of these related to school?

- F. Do the students have the support of their families? Significant others?
- At home? (question 17, 20, 21 in the School Health Profile)
  - At school? (questions 29, 30 in the School Health Profile)
  - Elsewhere? (question 39 in the School Health Profile)
- G. What do students say that they want to do to cope better with excess "worry, nerves or stress" (question 42 in the School Health Profile)? Their personal health practices?
- Are these related to their coping skills?
  - Are these related to their psycho-social environment?
  - Are these related to their personal resources?
  - Are these related to their physical environment?
  - Are these related to support services?
- H. How do these responses relate to the responses for Question 11 in the School Health Profile "maintaining and improving their own health" and question 75 "What the school can do to help"?
- I. What are the students perceived barriers to making these changes (question 43 in the School Health Profile)?
- Are these related to their personal health practices?
  - Are these related to their personal resources?
  - Are these related to their physical environment? What is the availability and accessibility of support services?
- J. How do these responses relate to the responses for question 12 in the School Health Profile "maintaining and improving their own health" and question 75 "What the school can do to help"?
- K. Which of the personal health practices are problematic for this student body?
- L. Which of the identified needs and issues can be addressed primarily through instruction?
- formally (in class)?
  - through which curricula?
  - informally (extra curricular)?
  - through which clubs or activities?
- M. Which issues can be addressed primarily through the Psycho-social Environment?
- Formally:
- students on committees?
  - policies (e.g. zero tolerance of violence)?
  - conflict resolution programs?
  - peer helper programs (tutors, mentors, mediators)?
- Informally:
- extra-curricular activities?

N. Which issues can be addressed primarily through the Physical Environment?

Formally:

policies (smoking, safety, air quality, etc.)?

Informally:

student activities?

yard greening and naturalization?

O. Which issues can be addressed primarily through Support Services?

Formally:

counselling services?

health care referral, treatment and follow-up?

childcare?

meal programs?

smoking cessation programs?

support groups (e.g. Alateen, Alanon)?

Informally:

Recreation activities?

Club activities?

P. Which of these issues are primarily the responsibility of:

the school?

the home?

community groups?

municipality?

recreation?

health care?

social services?

### School Health Profile - Identifying Needs: Physical Environment

IDENTIFIED NEED	STUDENTS *	GRADE **	GENDER ***	POTENTIAL BARRIERS	RESOURCES WITHIN OUR SCHOOL	LINK WITH OTHER PATHS

\* % of Students = % of students who responded to this question  
 \*\* Grade = Grade or grades most affected  
 \*\*\* Gender = Gender most affected

### School Health Profile - Identifying Needs: Psycho-social Environment

IDENTIFIED NEED	STUDENTS *	GRADE **	GENDER ***	POTENTIAL BARRIERS	RESOURCES WITHIN OUR SCHOOL	LINK WITH OTHER PATHS

\* % of Students = % of students who responded to this question  
 \*\* Grade = Grade or grades most affected  
 \*\*\* Gender = Gender most affected

### School Health Profile - Identifying Needs: Personal Health Behaviours

IDENTIFIED NEED	STUDENTS *	GRADE **	GENDER ***	POTENTIAL BARRIERS	RESOURCES WITHIN OUR SCHOOL	LINK WITH OTHER PATHS

\* % of Students = % of students who responded to this question  
 \*\* Grade = Grade or grades most affected  
 \*\*\* Gender = Gender most affected





### School Health Profile - Identifying Needs: Support Services

IDENTIFIED NEED	STUDENTS *	GRADE **	GENDER ***	POTENTIAL BARRIERS	RESOURCES WITHIN OUR SCHOOL	LINK WITH OTHER PATHS

\* % of Students = % of students who responded to this question  
 \*\* Grade = Grade or grades most affected  
 \*\*\* Gender = Gender most affected

### School Health Profile - Identifying Priorities

PRIORITY	PHYSICAL ENVIRONMENT	PSYCHO-SOCIAL ENVIRONMENT	PERSONAL HEALTH PRACTICES	PERSONAL RESOURCES	SOCIAL SUPPORTS
<b>A - PHYSICAL ENVIRONMENT</b>					
A1.					
A2.					
A3.					
A4.					
<b>B - PSYCHO-SOCIAL ENVIRONMENT</b>					
B1.					
B2.					
B3.					
B4.					
<b>C - PERSONAL HEALTH PRACTICES</b>					
C1.					
C2.					
C3.					
C4.					
<b>D - PERSONAL RESOURCES</b>					
D1.					
D2.					
D3.					
D4.					
<b>E - SOCIAL SUPPORTS</b>					
E1.					
E2.					
E3.					
E4.					

**Appendix 4 - E Identifying Common Paths**

## School Health Profile - Identifying Common Points

Purpose of exercise: to determine if/where there are links among the priorities identified by the committee.

Draw lines from each priority in column one to each related priority in column two.

**Column 1**

A1.

A2.

A3.

A4.

B1.

B2.

B3.

B4.

C1.

C2.

C3.

C4.

D1.

D2.

D3.

D4.

E1.

E2.

E3.

E4.

**Column 2**

A1.

A2.

A3.

A4.

B1.

B2.

B3.

B4.

C1.

C2.

C3.

C4.

D1.

D2.

D3.

D4.

E1.

E2.

E3.

E4.

### School Health Profile - Recommendations

PRIORITY	RECOMMENDATION
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16.	
17.	
18.	
19.	
20.	