

# Mentally Healthy Universities Programme: Year One

## Interim Evaluation Report



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# Executive Summary

## Background

In 2019 a survey of almost 38,000 UK students by Insight Network found that 21.5 per cent had a current mental health diagnosis, and a further 33.9 per cent had experienced serious psychological issues, which they felt they needed professional help for. However, the majority of students experiencing problems do not receive any support (Office of National Statistics, 2018). Furthermore, there is growing concern that university staff are also facing increased pressure and mental health difficulties. A recent report by the Higher Education Policy Institute (HEPI) found a 77 per cent rise in referrals to counselling and a 64 per cent rise in referrals to occupational health were observed in 59 higher education institutes between 2009 and 2015 (Morrish, 2019).

The Mentally Healthy Universities (MHU) programme was developed by Mind in summer 2019 to help support both student and staff mental health and wellbeing at university. The programme consists of the following core elements:

- 'Introduction to Managing Mental Health at University': interactive sessions for students
- 'Tools and Techniques to Manage your Mental Health at University': a four-session resilience-building intervention for students
- 'Preparing to Manage your Mental Health at Work': interactive sessions for students
- A two-part training course and ongoing support for new Staff Mental Health Champions, whose volunteer role is to reduce stigma, raise awareness and provide peer support in their workplace.

Universities taking part in the pilot have also been supported by Mind to adopt the Mental Health at Work commitment standards.

The first year of the programme was evaluated using a mixed methods approach consisting of short evaluation forms, administered after each session or course, process interviews with local Mind staff and university leads, and a small number of interviews with staff and students who took part in the sessions.

## Key Findings

The interim evaluation shows that both staff and students have had a positive experience of the Mentally Healthy Universities programme, reporting high levels of satisfaction and increases in confidence and understanding across all four of the courses/sessions.

- Over **85 per cent** of students had a better understanding of mental health problems and wellbeing after attending our 'introduction to managing your mental health at university' course.

- Over **90 per cent** of students who took part in our ‘tools and techniques to manage your mental health’ course said they were more confident looking after their mental health and **100 per cent** said they would recommend the course to a friend.
- Over **90 per cent** of students were more aware of mental health in the workplace after taking part in our ‘preparing you to manage your mental health at work’ course.
- Both the staff champions and staff peer support training courses were rated above **9/10** by those who took part and over **90 per cent** of participants said they would recommend the training to colleagues.

In interviews, students and staff champions told us how helpful they found the practical content of the sessions and reflected on the benefits of having an open space to discuss mental health with their peers. They also provided useful feedback on how improvements can be made to future iterations of the programme.

Process interviews with local Minds and university leads identified some challenges in engaging particular groups of students and staff in the programme – particularly academic staff and those without existing experience and knowledge around mental health. This was compounded by the COVID-19 pandemic which meant that some courses were unable to be delivered or completed in full. The evaluation also identified some improvements that could be made to enable greater levels of communication and stronger relationships between local Mind staff who delivered the programme and their partner universities. Recommendations for development of the programme in the immediate and longer term are summarised below.

## Key recommendations

- Targeted marketing and promotion to reach those who may benefit most from the course content, including those who are less engaged. Longer lead in times and greater levels of buy in at a senior level within universities would also assist with recruitment of a more diverse range of staff and students.
- Strengthen relationships between participating universities, local Mind delivery partners and Staff Champions, to ensure this model is as effective as possible in raising awareness and tackling stigma in the workplace.
- Develop the course content to include more diverse voices and be more inclusive of all levels of mental health knowledge/experience, as well as enabling participation online, given new ways of working that are likely to be in place for some time.
- Consider increasing evaluation resource to maximise learning about particular groups who are benefitting more or less from the programme and in what ways.

## Introduction

In 2019 a survey of almost 38,000 UK students by Insight Network found that 21.5 per cent had a current mental health diagnosis, and a further 33.9 per cent had experienced serious psychological issues, which they felt they needed professional help for. Even in those students not experiencing a mental health problem, wellbeing scores are lower than the general population. This is reflected in the huge increase of students accessing counselling services (Thorley, 2017). However, the majority of students experiencing problems do not receive any support (Office of National Statistics, 2018). Furthermore, there is growing concern that university staff are also facing increased pressure and mental health difficulties. A recent report by the Higher Education Policy Institute (HEPI) found a 77 per cent rise in referrals to counselling and a 64 per cent rise in referrals to occupational health were observed in 59 higher education institutes between 2009 and 2015 (Morrish, 2019).

The Mentally Healthy Universities (MHU) programme was developed by Mind in summer 2019 to help support both student and staff mental health and wellbeing at university. The first year of the programme involved the following universities and local Mind delivery partners:

University	Local Mind
University of Bath	Bath Mind
University of Bristol	Bristol Mind
University of Cambridge	Cambridge, Peterborough & South Lincolnshire Mind
University of Greenwich	Bromley, Lewisham & Greenwich Mind
London School of Economics	Brent, Wandsworth & Westminster Mind
Teesside University	Middlesbrough & Stockton Mind

A further four universities will be joining the programme for 2020-21 delivery.

The Mentally Healthy Universities Programme consists of the following core elements:

- ‘Introduction to Managing Mental Health at University’ sessions for students
- ‘Tools and Techniques to Manage your Mental Health at University’: a four-session resilience-building intervention for students
- ‘Preparing to Manage your Mental Health at Work’ sessions for final year students
- A two-part training course and ongoing support for new Staff Mental Health Champions, whose volunteer role is to reduce stigma, raise awareness and provide peer support in their workplace.

Universities taking part in the pilot have also been supported by Mind to adopt the Mental Health at Work commitment standards.

Local Minds experienced various challenges in recruiting participants for the programme in the first year of delivery, with the most notable of these being the outbreak of COVID-19 which led to the cancellation of face-to-face sessions in March 2020 and meant that some courses were unable to be delivered as planned. In spite of this, the sample size is sufficient to draw conclusions about the impact of the programme on staff and students so far.

This report summarises these impacts and process findings into an interim report which includes some initial recommendations for the development of the programme as it moves into its second year of delivery.

## Methodology

The evaluation consists of three key elements:

- Evaluation forms administered at the end of each session or course. These invited staff/students to indicate how much they agreed with several statements relating to their experiences, the impact of the sessions they attended, and to rate the session and provide free text comments on any suggested improvements.
- Interviews with staff and students who participated in the sessions. These took place over video call and invited participants to provide more detail about their experience of taking part in the sessions as well as any suggested improvements to the session content and/or delivery.
- Interviews with university leads and local Mind coordinators to capture process learning and common suggestions for improvements.

## Demographics

### Staff Champion Evaluation Forms:

129 members of staff completed an evaluation form at the end of their first Mental Health Champion’s training workshop. As can be seen from Table 1, the majority of these were female, non-academic/professional staff, with prior experience of mental health. 27 members of staff completed an evaluation form at the end of their second workshop. Numbers were low for this workshop as many universities were unable to run the full training programme due to the outbreak of COVID-19.

**Table 1.** Frequency and demographics of Staff Champions in each training session

	Frequency	% academic vs professional/other staff	% female vs male*	% with previous mental health experience
<b>Part One Training: Anti-stigma and Awareness Raising</b>				
LSE	18	11% vs 89%	83% vs 17%	89%
Teesside	27	22% vs 78%	57% vs 41%	78%
Bath	25	0% vs 100%	80% vs 16%	84%
Bristol	27	22% vs 78%	59% vs 37%	96%
Cambridge	8	0% vs 100%	75% 25%	75%
Greenwich	24	30% vs 70%	79% vs 21%	88%

Part Two Training: Peer Support				
Bristol	18	33% vs 67%	67% vs 28%	100%
Greenwich	9	44% vs 56%	89% vs 11%	100%

\*Staff also identified as non-binary or preferred not to say.

### Student Evaluation Forms

129 students completed an evaluation form at the end of the Introduction to Mental Health session, 40 students for the Tools and Technique course, and 59 for the Workplace Wellbeing session. As can be seen from Table 2, the majority of these were female and had prior mental health experience. For the Introduction to Mental Health session, there was a more even distribution of male and female students in attendees from Cambridge, as well as more students without prior mental health experience. This is due to the workshop being made compulsory for students in particular colleges, whilst the programme was voluntary in all other institutions.

**Table 2.** Frequency and demographics of students completing sessions

	Frequency	% female vs male*	% with previous mental health experience
<b>Introduction to Managing Mental Health at University</b>			
LSE	11	73% vs 27%	64%
Teesside	2	100% vs 0%	100%
Bath	13	39% vs 31%	92%
Bristol	8	88% vs 13%	100%
Cambridge	87	51% 49%	53%
Greenwich	8	100% vs 0%	75%
<b>Tools and Techniques to Manage your Mental Health at University</b>			
LSE	9	67% vs 33%	100%
Bath	3	67% vs 33%	100%
Cambridge	18	67% 33%	78%
Greenwich	8	100% vs 0%	88%
<b>Preparing to Manage your Mental Health at Work</b>			
LSE	21	81% vs 19%	62%
Teesside	3	100% vs 0%	67%
Bath	20	50% vs 35%	80%
Bristol	4	25% vs 75%	100%
Cambridge	5	80% 20%	100%
Greenwich	6	100% vs 0%	83%

\* students also identified as non-binary or preferred not to say.

### Qualitative analysis:

- **Staff:** Eight Staff Champions agreed to take part in interviews lasting approximately an hour about their experiences. This included three males and five females, who came from the University of Bristol, University of Bath, the

University of Greenwich, and London School of Economics. All staff had attended the first session. However, only two had attended the second.

- **Students:** Eleven students agreed to be interviewed, including four males and seven females. Students came from the University of Bristol, University of Cambridge, Teesside University, University of Greenwich, and London School of Economics. Six of these had attended the Introduction to Mental Health session, three had taken the Tools and Techniques course, and two had attended the Workplace Wellbeing session.
- **Process interviews:** Nine process interviews took place, with six local Mind coordinators and three university leads. There was representation from each university participating.

## Staff Champion Findings

### Part One Training (Tackling Stigma and Awareness Raising)

Respondents indicated on a five-point scale ranging from 1 'not at all' to 5 'extremely' how confident they felt before and after in managing their own mental health, discussing mental health, and tackling mental health stigma in the workplace. As can be seen from Figure 1, there appears to be an increase in confidence on all three items.

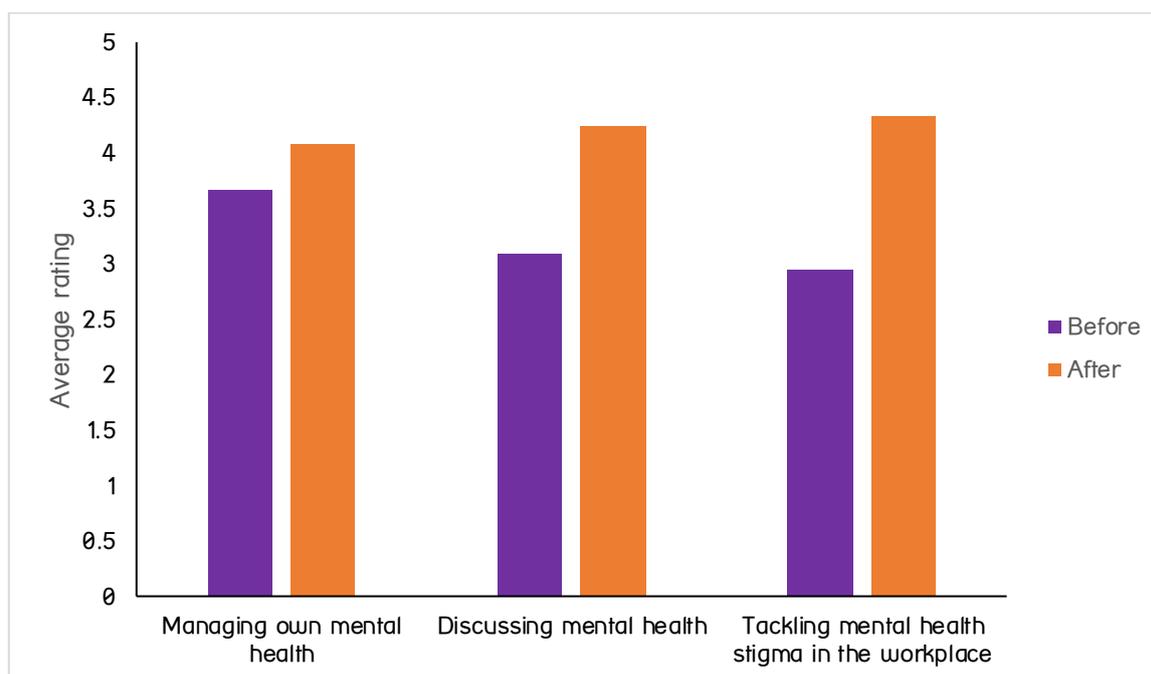
Scores on all three items were summed together for each respondent, revealing a mean score of 9.71 (SD = 2.42) when respondents were asked how confident they felt before the workshop, and 12.65 (SD = 1.49) on how confident they felt after the workshop. A paired samples T Test revealed that this was a statistically significant difference<sup>1</sup>, indicating that confidence levels did improve for staff champions after completing the workshop.

However, it should be noted that the evaluation forms were not filled in by respondents prior to the workshop taking place, and instead participants were asked to answer in retrospect how confident they felt before and after the workshop. This may have led to mis-scoring confidence before the workshop, although it does still indicate that respondents felt more confident overall.

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<sup>1</sup>  $t(127) = -13.229, p < .001$

**Figure 1. Staff Champion confidence before and after the first workshop**



The majority of respondents felt they received all the information they needed about mental health support services (61.4 per cent), and only 5.5 per cent said they would have liked a lot more information. Almost all respondents said they were likely or extremely likely to recommend the training to a colleague (98.5 per cent), and the average rating of the workshop was 9.1 out of 10. There were no differences in ratings when comparing across institutions. When asked on the evaluation form what improvements would make this training worth a ten out of ten rating, several common themes emerged amongst the 53 short comments provided.

- ***More clarity around the role***

Despite information about the scope of the Champions role being included in recruitment materials and within the content of the training, some staff commented that they would have benefitted from greater clarity around what was expected of them and how the role interacts with other roles within their university, for example the role of Mental Health First Aider.

*“[I] would like there to be more information about expectation of the role. [There was a] little bit of a blurred line between Champions and MHFA role”.*

Some staff who attended the workshops also did not appear to have realised that the scope of the role was limited to supporting colleagues and not students.

- **More practical guidance**

Staff valued the practical examples and guidance contained in the sessions and some commented that they would benefit from more of this to enable them to more effectively fulfil their roles, for example by including *“more specific examples of how to implement support”*, and a greater focus on action planning. Understanding the university’s specific procedures appeared as a common theme, with many suggesting they wanted more information and help for their specific university. For example, one respondent said *“I would like to have information about institutional processes (i.e. who you refer people to etc.)”*

- **Length of Session**

The length of the session was mentioned by staff. Some felt it was too long, for example one respondent said *“A few parts could have been a little bit more concise. 10am to 5pm is a long training day...”*, whilst others felt it could have been longer, for example one respondent said *“More time – due to the nature of the subject, there’s a lot of conversation and there’s so much information – thus more time would have been great.”*

- **More activities**

It was apparent in the comments that more activities would have been welcomed. For example, one respondent said *“We could have had more group exercises”*, and another said they would have liked *“more practical/hands on parts of the session”*.

- **Changes in group**

Staff would have appreciated being moved around more, so that they could interact with more people, and also having larger groups to interact with. For example, one respondent suggested *“move us to speak to different people more”*, and another said they would have liked *“more participants”*.

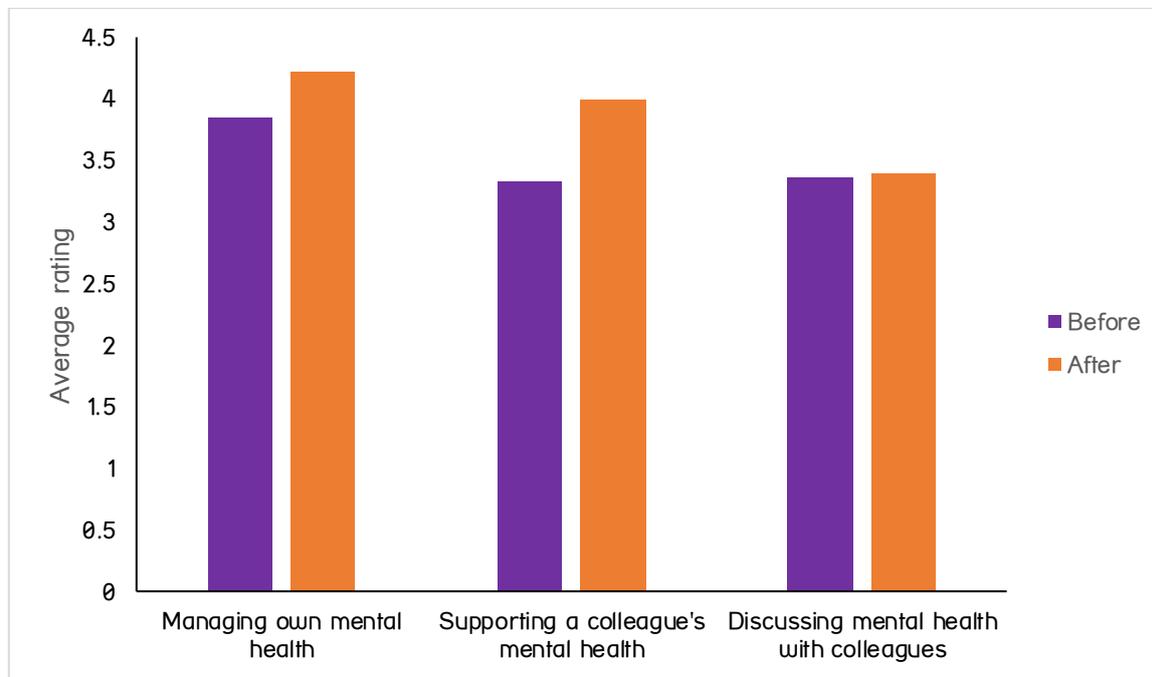
## **Part Two Training (Peer Support)**

Respondents indicated on a five-point scale ranging from 1 ‘not at all’ to 5 ‘extremely’ how confident they felt before and after in managing their own mental health, supporting a colleague with their mental health, and discussing their own mental health with colleagues. As can be seen from Figure 2, there appears to be an increase in confidence on all items except for confidence in discussing mental health with colleagues.

Scores on all three items were summed together for each respondent, revealing a mean score of 1.56 (SD = 1.50) when respondents were asked how confident they felt before the workshop, and 12.15 (SD = 1.29) on how confident they felt after the workshop. A paired

samples T Test revealed that this was a statistically significant difference<sup>2</sup>, indicating that confidence levels did increase for staff champions after completing the workshop. These results should be taken with caution, given the low numbers who took part in this workshop.

**Figure 2. Staff Champion confidence before and after the second workshop**



Almost all respondents said they were likely or extremely likely to recommend the training to a colleague (92.5 per cent), and the average rating of the workshop was 9.2 out of 10. There were no differences in ratings when comparing across institutions. Too few comments were left in the second workshop to include.

### Interview Findings

Several key themes emerged from the qualitative interviews with staff champions, many of which were supported by the process interviews with local Mind staff and university leads.

- ***Personal experiences and peer support***

Many of the Staff Champions mentioned personal experience of mental health and discussed how the role of a Staff Champion allowed them to channel this and realise that they were not alone, whilst still acknowledging the difference in mental health experiences across individuals. Positive peer support was a common theme across the majority of Staff Champions. Many described it as being inspirational and uplifting, this ties in with the role of personal experience and disclosure of mental health amongst the Staff Champion network. Peer

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<sup>2</sup>  $t(26) = 6.799, p < .001$

support and disclosing mental health was perceived as a huge benefit to the programme.

*“Doing it in a group as well helps you to recognise that not everyone is the same, which is also helpful I think.”*

- ***Staff Champions role***

Staff Champions reflected on how they would have valued more time in order to ask more questions and get to know each other further in order to go more into depth with the sessions. Further, a common theme across Staff Champion interviews was that additional wellbeing channels had been set up to maintain the positive and beneficial atmosphere.

*“It’s enabled them to make new connections with other members of staff within the university, other champions across different parts of the university”*

Some staff members expressed a misunderstanding that the role of a Staff Champion was to support students. For next year it should be clearer that this is not the role of a Staff Champion, alongside acknowledging that students still need support, and that this is already being accounted for within the programme.

- ***Recruitment***

There were some difficulties in recruiting academics to take part in the Staff Champions initiative. One suggested solution was using a “top-down” approach, with Deans promoting the programme across departments. Many Staff Champions, who were professional staff, felt that the lack of academics could primarily have been a result of higher workloads amongst academic staff and a greater reluctance to engage in programmes around mental health and wellbeing.

- ***Selection process:***

Staff Champions wanted to be more aware of the selection process. Having a transparent recruitment process could also be beneficial to getting more staff involved in the Staff Champions role.

*“I wasn’t quite sure if it was a selection process, I mean, because it was by application. It was a little bit strange actually thinking about it.”*

- ***Local Mind contact:***

University staff across all institutions would like more frequent and personalised communication from Local Mind contacts. Themes of collaborative meetings and communication also emerged in the process interviews with the local Mind staff, indicating that more regular communication would be beneficial at all levels.

*“I think, now you have mentioned the contact from the local branch, something just like a personalised email maybe once a month or something to come out, rather than us having to sign up to the website and get updates, just something that came out on a regular basis saying, 'Don't forget to do this,' or, 'Have you thought about checking this out?' Just a little gentle reminder to bring us back to some of the basics. I think at the moment we are all desperate for resources, so anything and everybody who can put resources our way or alert us to places where we can go and find them, that's really helpful.”*

Due to COVID-19 the majority of Staff Champions had been unable to receive the second part of the training which focused on peer support. Staff who attended part one reflected that they understandably did not feel equipped to support their peers after attending the initial session and felt that this was an important part of the programme that they would benefit from.

## Student Findings

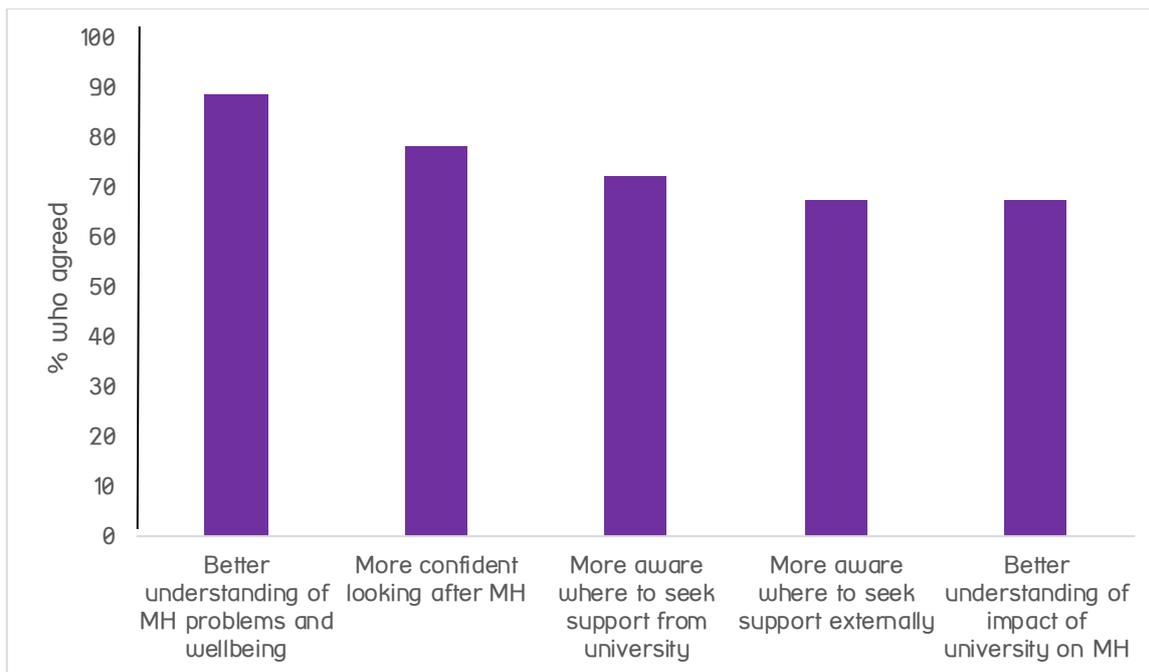
### Introduction to Managing Mental Health at University

Respondents indicated on a five-point scale ranging from 1 'not at all' to 5 'extremely' how much they agreed that after doing the workshop they:

- a) Had a better understanding of mental health problems and wellbeing
- b) Felt more confident looking after their own mental health
- c) Were more aware of where to seek help from their university
- d) Were more aware of where to seek help externally, and
- e) Had a better understanding of the impact university can have on mental health.

The percentage of students who either strongly agreed or agreed can be seen in Figure 3. No students selected 'strongly disagree' for any of the questions.

**Figure 3.** Self-reported improvements from the Introduction to Mental Health session



The majority of respondents said they were likely or extremely like to recommend the training to a colleague (71.3 per cent), and only 5.2 per cent said they were extremely unlikely or unlikely to. The average rating of the workshop was 8.15 out of 10.

The evaluation examined the differences between the University of Cambridge versus other universities, as Cambridge made the course compulsory for some students, and therefore had a larger turn-out and a more balanced group of males and females, as well as those with and without past mental health experience. Overall the course had a significantly lower impact on Cambridge students than it did others<sup>3</sup>. Whilst the mean differences are small (21.10 versus 19.55 overall), the effect size of the difference was moderate<sup>4</sup>, indicating that the magnitude of that difference was substantial. This may have been the result of students who did not voluntarily choose to take the course being less interested and thus not enjoying it as much others, which may have resulted in lower self-reported impact scores generally. Cambridge students were also significantly less likely to recommend to a friend<sup>5</sup> (62 per cent versus 90.5 per cent) and rated the workshop significantly lower than the other universities<sup>6</sup> (7.9/10 versus 8.7/10).

When asked what improvements would make this training worth a ten out of ten rating, several common themes emerged amongst the 87 short comments provided. A summary of the key themes is included below. Due to the differences in delivery between the University of Cambridge and the other universities, these were considered separately for both groups. However, it should be noted that only 18 comments were left from other universities as a smaller number of students attended these workshops. Some of the themes presented from the Cambridge students may also represent wider themes across all universities. However, some will be very specific to the University of Cambridge, and relate

<sup>3</sup>  $t(126) = 3.363, p = .001$

<sup>4</sup> Cohen's  $D = 0.62$

<sup>5</sup>  $t(126) = -4.165, p < .001, d = 0.82$

<sup>6</sup>  $t(125) = 4.051, p < .001, d = 0.56$

to the compulsory nature of the workshop and also the fact that more students did not have prior experience of mental health.

Key themes across all universities were:

- *Shorter workshops*

Students commented that they would have liked the workshop to be shorter. For example, one respondent suggested it could be *“possibly a bit shorter, e.g. 2 hours”*, and another said *“The course could be more compact, it’s easy to lose focus after 3 hours”*. Students suggested that the session could be broken down into multiple shorter sessions. For example, one respondent suggested it could *“possible [be] done as 2 sessions so that [it’s] not such a big time commitment in one go”*, and another said *“Have it shorter and a further session to cover cut out content”*.

- *More activities*

Students reported that they would have liked more activities during the workshop to make them more interactive. For example, one respondent said it could be improved by *“Perhaps including a bit more interactive activities”*, and another suggested *“More videos and activities”*.

- *Increased level of mental health detail*

It was noted in the comments that students felt the level of detail was at times too basic, and they suggested more detailed content in certain areas. For example, one respondent wrote that *“sometimes the material was too simplistic”*, and another wrote that *“It’s a good introduction but for those with some experience it may not be adding much that they were not aware of before...”* Another respondent suggested that the content *could “Perhaps [be] made less vague about mental health generally”*, and another suggested there could be *“More detail on the specifics of certain mental health problems perhaps...”* This is likely due to the high percentage of students with prior mental health experience taking the course.

From the University of Cambridge students:

- *More coping strategies*

Students would have liked to have learnt more coping strategies during the workshop. For example, a respondent suggested *“more focus on coping mechanisms”*, another suggested *“Possibly talk about more ways to cope with stress in our daily lives”*, and said *“Maybe include more details on how to help someone once you know there is something wrong”*.

- *Sensitive topics*

Some students reflected on the sensitive nature of the topics covered in the session and reflected that they felt uncomfortable discussing these in a group session. This may be due to the compulsory nature of the course which meant that fewer students in this group were already engaged in or had previous experience of mental health problems and therefore may not have been prepared for the content of the sessions. It is important that, if sessions are to be made compulsory, students are aware of its content and that local Minds continue to be sensitive and responsive to differing levels of experience and engagement amongst attendees.

- *Improve timing and make it non-compulsory*

Some students felt that greater consideration could have been given to the timing of the compulsory sessions, which were scheduled during a mock exam period. Whilst there are clearly some benefits to making training of this nature compulsory, it is important to consider the most appropriate timing in order to increase satisfaction and ensure that students are receiving the greatest benefit.

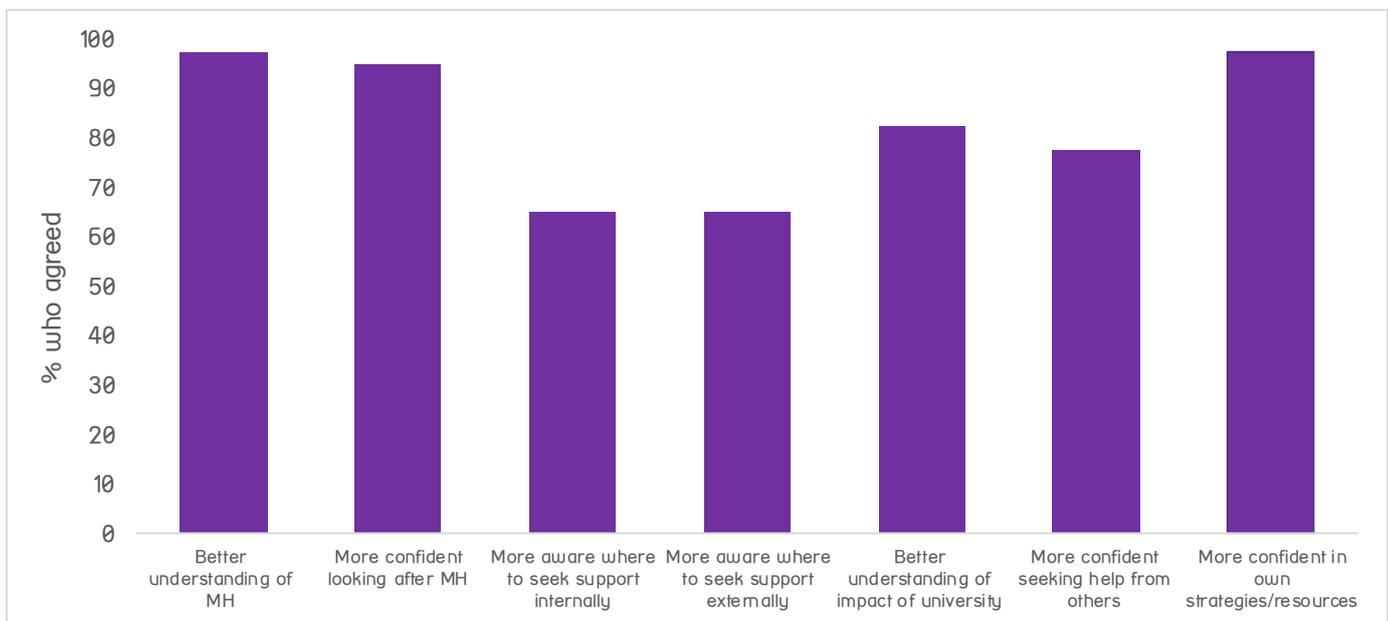
## **Tools and Techniques for Managing your Mental Health**

The Tools and Techniques course consisted of four two-hour weekly workshops and short online learning between sessions. Respondents indicated on a five-point scale ranging from 1 'not at all' to 5 'extremely' how much they agreed that after completing the course they:

- a) Had a better understanding of mental health problems and wellbeing
- b) Felt more confident looking after their own mental health
- c) Were more aware of where to seek help from their university
- d) Were more aware of where to seek help externally
- e) Had a better understanding of the impact university can have on mental health
- f) Felt more confident seeking help from others close to them about their mental health and wellbeing, and
- g) Felt more confident in their own strategies and resources to help improve and maintain mental health and wellbeing.

The percentage of students who either strongly agreed or agreed can be seen in Figure 4.

**Figure 4.** Self-rated improvements from the Tools and Techniques Course



All respondents said they were likely or extremely like to recommend the training to a colleague. The average rating of the workshop was 8.65 out of 10. When asked what improvements would make this training worth a ten out of ten rating, several common themes emerged amongst the 24 short comments provided. Key themes across all universities were:

- *Length of course*

Students commented that they would have liked the workshops to last longer. For example, one respondent said “*if the course was longer we could interact more about personal problems*” and another said “*I would like the course to be longer.*” However, some students did also express reservations about the time required to complete the course. Although the course length was included in marketing materials, it is important that this is reiterated to those who sign up, so that students participate only if they feel able to.

- *Practical techniques*

It was noted in the comments that students wanted to do more practical techniques within the session, to practice what they had learnt. For example, one respondent said “*I think that doing more specifically on ways of thinking mindfully like meditation?*”, and another said “*The 3<sup>d</sup> session was quite full of information but didn’t then go on to offer constructive ways of dealing with that...*”

- *University-specific information*

Students would like more information that is relevant to their specific university. For example, one respondent said “*More focus on how [my university]*

*specifically can put various stresses on mental health – what is it about [my university] specifically that is bad for your mental health?”, and another said “Activities/games more catered to [my university’s] students. Exploring more specific examples of what a student can face.”*

- *Repetition*

A final theme identified from the free-text comments was that students felt the face-to-face sessions repeated too much of the online content. For example, one respondent suggested *“Less overlapping of material between online and face to face sessions – can go over the same idea in different ways but don’t show the same video etc...”*; and another said *“Slightly less repetition of the online in the face to face...”*

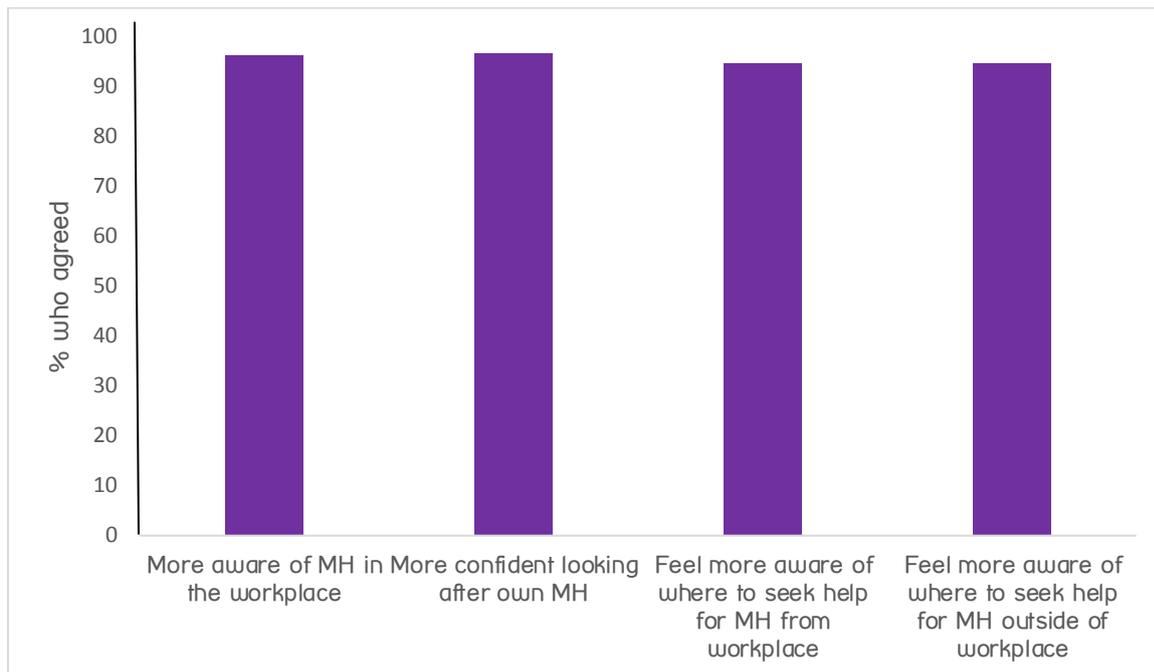
### **Preparing to Manage your Mental Health at Work**

Respondents indicated on a five-point scale ranging from 1 ‘not at all’ to 5 ‘extremely’ how much they agreed that after doing the workshop they

- a) Felt more aware of mental health in the workplace
- b) Felt more confident looking after their own mental health
- c) Felt more aware of where to seek help for mental health in the workplace, and
- d) Felt more aware of where to seek help for mental health outside of the workplace.

The percentage of students who either strongly agreed or agreed can be seen in Figure 5.

**Figure 5.** Self-reported improvements from the Workplace Wellbeing session



The large majority of respondents said they were likely or extremely like to recommend the training to a colleague (93 per cent). The average rating of the workshop was 8.77 out of 10. When asked what improvements would make this training worth a ten out of ten rating, a few common themes emerged amongst the 34 short comments provided. Key themes across all universities were:

- *Length of course*

Students commented that they would have liked the workshops to be shorter, whilst others said they would have liked more sessions like this. For example, one respondent commented *“Length – [I] found I was losing focus after 2hrs”*, and another said *“...but we should have more sessions like this”*.

- *Practical application*

It was noted in the comments that students would appreciate more real-life scenarios and case studies, to help them more practically with employment. For example, one respondent suggested that *“Materials could be a bit more general than specific in cases. Relevant case studies could be useful”*, and another said *“The only aspect I would add is any additional practical advice during day-to-day work (e.g. interacting different co-workers in situations where there may be challenges to mental health)”*. Additionally, students requested more information with working abroad. For example one respondent suggested *“More focus on managing workplace conflicts. Equipping people to go abroad”*, and another said *“I would be interested in further information about cultural assimilation and advice about working in other countries”*.

- *Larger groups*

Students commented that they would have liked to have taken the workshop in a bigger group of students. For example, one respondent said they *“Loved the session – would have been great to have more people in the group!”* This reflects a broader point around recruitment and marketing of the sessions to target more students who would benefit.

## Interviews

From the 11 interviews conducted with students, several key themes emerged, which are highlighted below:

- *Lived experience*

Similar to the Staff Champions, students disclosed personal experience of mental health as being their motivation to participate. Students saw this opportunity as a chance to not feel alone and discuss mental health in a socially connective way.

*“I decided because I’ve got my own experience with mental health problems and, kind of, joining uni, I mean, yes there are some things that lecturers say about dealing with stress and the transition from, whether it’s secondary school, work, or whatever to university can be a big step. But there was no, kind of, real strong focus, and I thought that it would be a really good opportunity to both learn coping skills and see what’s there support wise at the university as well.”*

As some students already had previous experience, the recommendation of having basic information provided in a booklet to read before the sessions commenced was a common theme. This would allow the sessions/workshops to go more into depth regarding mental health.

*“I suppose for me there wasn’t anything, like, hugely ground-breaking in terms of what we covered.”*

- *Peer support*

This included social support systems and friends made during the programme. Especially friendship circles that welcomed the topic of mental health and allowed each other to feel comfortable when disclosing and discussing.

*“I mean, it was quite a small group anyway but it just meant that you could just, like, chat to people a bit more and, kind of, just do activities, just laid back and then we chatted about it.”*

- ***Knowing where to get support from professional sources:***

Students also highlighted that the programme made them aware of the support systems available within the university. This allowed students to book counselling appointments and be aware of their options if needed. These points and common themes make it more apparent that this programme was efficient and effective as a preventative programme. However, comments were made that there seemed to be a lack of awareness about the programme amongst university counselling services and a disconnect between the services available, which indicates that it would be beneficial for universities to ensure their counselling service is aware of the programme.

- ***Great self-awareness***

Students reported better self-awareness. For example:

*“I could go away understanding myself a little bit better and therefore, respond to various different things in my life in a better way.”*

- ***Remembered and applied techniques:***

Some students spoke about how they applied certain tools and techniques from the workshop to help their wellbeing, especially in times of need and in new situations. For example:

*“I think that is something that when I start work in September - I'll be a teacher so I think that having some sort of mental health training in that field, but also others, would be useful. So I think that that's something I've definitely taken away”*

*“It would be good to practise them in everyday life, even when you're not stressed or anxious. Just to, kind of, keep it fresh in your mind. I think I'll definitely try to do that as we're all locked away.”*

- ***Group size:***

Students reported that the size of the groups affected their engagement and confidence in discussing sensitive matters with the group. When groups were very small students would have appreciated more people to talk to, however when they were larger, students preferred to have their discussions in smaller groups.

*“The session that I went to was quite a nice size. I think it was, on average, somewhere around about 10-15 people, maybe twenty people, 10-15 people at once, it was a smallish, intimate group. I have no idea how the session would work in a bigger group, it might be better, it might be more challenging.”*

*“I think all of us were, kind of, disappointed that not as many people turned up. I think there were about five of us, including myself, in total, and I was kind of hoping that more people would come along.”*

## Process Learning

During interviews with university leads and local Mind co-ordinators, several key themes emerged. These reflect both positives and negatives of the programme, as well as suggestions for improvements.

### Preparation

A number of comments were made with regards to challenges around project set up, including difficulties forming relationships with universities and building awareness of the programme with enough time to allow for adequate promotion and effective use of recruitment channels.

*“I think part of the problem was that nobody [at the university] knew about the project or there was very little awareness of the project. So, every time I had to explain what the project was”*

The relatively short lead in time for the programme also made it difficult for local Minds to familiarise themselves with the course materials well in advance which was highlighted as a challenge for delivery.

*“I mean, we had a little bits of details coming through, but we didn't see, you know, the programme in its entirety, really, which is a little unfortunate that it was late in the day before we got that.”*

### Relationship building

Leads and Coordinators suggested that meeting others in the project had been helpful to them and that they wanted more opportunities to this, for example:

- Useful to meet the whole university project team and other university leads together:

*“And I think getting all the sort of stakeholders or, well not really stakeholders, but those who are involved in the delivery of the programme all in one room having a conversation is really helpful.”*

- A need for better connections between universities:

*“And I think that's one of the things that I had hoped we might have had, like, a bit more opportunity to meet with, and talk with other project coordinators.”*

- Improving the use of Slack as a tool for engaging with other local Minds

*“There only seems to be one or two people who actually engage with Slack in terms of the other Minds. If they could do more things to encourage all the local Minds to engage.”*

## Marketing

A mix of comments emerged on the topic of marketing, specifically advertising, with some incurring problems and others sharing successes, including:

- Lack of advertising of the workshops within the universities and a lack of internal communications:

*“No one had advertised and, kind of, trying to get as many people to be aware of the project and to meet up face to face, and that was quite hard for the first couple of months.”*

*“Maybe having a conversation with the internal comms team. Because I think that even though I was having conversations with sort of like the management with internal comms and things, I don't think there was enough weight behind, like I don't have enough authority to be able to say, 'Oh, can we come up with a comms plan.'”*

- Suggested useful avenues for advertising around the university, including through social media, the Students' Union, events and through internal communications:

*“Student services did start advertising it to the students in the end on the internet, emailing about it and it was in the student newsletter, so the university and the Student's Union mostly use it and they put things in about that and put links in of how they could get onto it, and then through individual schools as well. So, kind of, contacting individual lecturers and individual schools to put on the Blackboard site and to make students aware of it.”*

*“So, the main thing we did was to use social media. So, we had our own Twitter page but we also had it to the university Twitter page and the Student's Union.”*

- Being clearer about communicating the benefits of the course and targeting this appropriately to increase participation.

## Challenges in programme organisation and delivery

There were a number of common challenges identified across all institutions which sometimes resulted in barriers to successful delivery of the programme. These included:

- Difficulties in building initial relationships and establishing the most appropriate individual or department within institutions to assist with programme set up and delivery

*“There’s so many different avenues - you always have to go to five or six different people here so I, kind of, end up just going around in circles because people just tend to pass it to someone else and they get passed to someone else.”*

- Operational challenges such as room bookings and emailing systems:

*“I think the main one really was a really practical one around the university never really offering up a single, you know, like, just a key person who could help with the operational side of things from their side. So I really struggled to speak to the right person to get room bookings in, and in the end, you know, [the university is] huge, as you well know, and there’s like multiple faculties and departments.*

- Difficulties in building relationships and joining up with existing university support services.

*“I was talking with the head of counselling and the head of student well-being and they were, kind of, almost apprehensive about a third party coming in to deliver mental health support. They were possibly worried about us taking students away from them or worrying about if it was right for students or worried about not being sure about what the content was.”*

- Practical considerations, such as space to store materials.

*“I don’t think we had any idea of the volume of what we were receiving, and so there wasn’t sufficient space at [the university] for them to store all of the materials.*

- Difficulties coordinating timing of delivery with university teaching schedules.

*“I think we had to deliver most of the programmes within a month and a half to two months, basically because of the schedule of the year.”*

## **National Mind**

Comments around National Mind’s support were mostly positive. However, it was noted that for some universities the timeline for pilot activity did not allow for alignment with wider activity around mental health and wellbeing. In future years consideration could be given to how different institutions could adapt the timing of delivery so it complements other relevant initiatives for students and staff.

## Content

Certain adaptations to the course content were suggested, including:

- All workshops (staff and student) need to take into consideration the varied understanding different people have of mental health:

*“So, from the staff champion's training, a lot of them stayed back afterwards and, actually, a lot of them said it was stuff they already knew. They didn't necessarily get as much out of it as what they thought they would have. Then, there were a few others that said they found it really helpful. So, there was quite a large variety of understanding and awareness of mental health and, I think, for the staff champions training, the ones who had more awareness, they didn't get as much out of it.”*

- Avoid repetition in content:

*“They get it very quickly. And that is true of many of the exercises. The tools and techniques one, some of the exercises were repeated, you know, two or three, one of the tools, there were two or three exercises to show how to do it. They don't need that. One is fine. They just don't need repetition.”*

- Adapt the content for online delivery too:

*“I had some discussions with a colleague who teaches all of her course online, and she would love something that she could embed within that. So, I think it has absolutely huge potential.”*

## Evaluations

Local Minds made a number of comments and suggestions regarding the evaluation approach, particularly around the introduction of a pre and post survey to gather more robust insights around the impact of the programme and the inclusion of more demographic questions in order to establish a greater understanding of who the course is reaching and any particular groups for whom it is more/less effective. These are both areas that were considered prior to delivery of the programme and that it would be beneficial to include in the future if resource allowed.

## Flexibility

Comments were made regarding the lack of flexibility for co-ordinators to adapt the programme to their university's specific needs, for example:

- Universities need to be able to adapt the content and delivery to their specific cohorts of students:

*“So, there are different needs and I do think that some of the project has been focused on eighteen-year-olds living in student accommodation, whereas we're dealing with students who are in existing relationships, with children, with caring responsibilities, or living at home with parents. We have a huge amount of students on the autistic spectrum on particular courses. We have a small, but growing body of international students, but there are particular needs that those students have and we're adapting the workshop to address those particular needs.”*

## Session times

Leads and Coordinators made suggestions around the session times, including:

- Start the programme earlier in the year to capture Fresher's welcome activities:

*“I think the most significant things are the student sessions, and the fact that teaching had already been set up before we started advertising these. So, it's very difficult to find time frames to embed within the curriculum.”*

- Shorten the sessions:

*“Yes. I think the biggest issue is the three-hour sessions, by far the biggest issue. The students have a condensed teaching-learning programme, and I got a lot of interest from academics, but then it was just, like, 'Well, we can't give you three hours.’”*

- Hold more evening sessions:

*“I mean, and one of the things we were looking at for that was to trial some evening sessions. Because we have some students, for example, who are on placement. So, you know, coming during the day it's just not a good idea.”*

## Engagement of staff and students

Various challenges in engaging staff and students were mentioned, including:

- Difficulty recruiting and engaging with academics as Staff Champions:

*“The negative was that there were a lot of academics who expressed an interest, but then didn't engage with the training, because of their workloads, and the particular workload modelling that we have.”*

- Lack of clarity around what the Staff Champions role involved:

*“I think was a little bit confusing at first because, I think that was also because there are lots of different roles at [the university] to do with sort of like, mental health, first aid and safe contact and all that sort of thing. So trying to explain*

*that role to [the university] staff to complement the roles that they already had was a little bit confusing.”*

- High student drop-out rates:

*“So, if we signed up eleven, seven would turn up. If we signed up 124, 85 turned up. Yes, about two thirds of those that signed up actually came. On average but some courses were lower than that.”*

- Most staff and students who engaged had prior experience of mental health, meaning that the programme may not be reaching those who might benefit from it the most.

- Making sessions mandatory was seen by some as positive and by others as negative:

*“There was a bit of an attitude, the people that came on the mandatory one, we did come across a bit of an attitude, ‘Oh, why are we bothering with this thing on mental health?’”*

*“Then in terms of the intro session, we didn’t actually run too many of them, and the main feedback we got was just that it was a great course to give some practical and straightforward information, and that actually lots of the students who came to that one said that it would be great if that could be mandatory for students just to have that awareness of mental health.”*

## **Benefits for staff**

Several key benefits for staff training to be Staff Champions were identified, including:

- Developing a better work-life balance:

*“She said since going on the training she has found the confidence and the ability to put boundaries in place and to leave on time and to say no, which I think is amazing, which is great feedback.”*

- Making pro-active contributions to changing culture within their institutions.

*“I think also the staff champions have been amazingly successful. They’ve really, I suppose, galvanised together with one mission, which was to really change the culture within the university, and they’ve been running great activities and trying to develop a safe space within the department for colleagues to come to them. So, I think they’ve been a real, real success.”*

- Encourages open discussions around mental health:

*“We have had lots of staff say that they feel more able to talk to their colleagues about mental health and to share stories and to bond their team as well, to be honest.”*

## Benefits for students

Several key benefits to students were identified, including:

- Sharing lived experiences with others:

*“There was a guy who didn't know what a panic attack was who suddenly-, I mean, it was like a lightbulb moment, it was like, 'Wow. I never knew such a thing exists.' And then, this woman, in front of him, who explained what it felt like. So, you know, I think that would have a big impact on confidence.”*

- Encourages students to be open to discussing mental health:

*“I also think that just the general feeling in the room sometimes, especially with the resilience sessions, students feel sort of relieved to have that space to talk about mental health and well-being because they don't feel as though they get it anywhere else.”*

- Promotes a sense of community and peer support:

*“I think as well, particularly the four-week courses, there seemed to be a great rapport built up between the students who attended, and some groups have exchanged contact details to continue the peer support going forward.”*

## Impact of COVID-19

The current COVID-19 situation was reflected in the interviews. Leads and coordinators commented on how it had affected their ability to complete the programme and engage staff and students, with one saying *“...we've had to cancel everything which has had a huge impact.”*

## Recommendations

Based on the findings discussed in this report the following recommendations are made for the second year of delivery. These recommendations have endeavoured to take into account the impact of the new ways of working that will be required as a result of continued restrictions around COVID-19.

### Marketing:

- Mind should endeavour to provide workshop materials to leads and coordinators earlier so universities have longer to advertise and local Minds have longer to familiarise themselves with their content.

- Partnership leads should ensure that Students' Union and other student networks are involved early on.
- University leads should encourage senior managers, Deans, and Heads of Department to communicate the importance of the programme to their staff, encouraging them to participate.
- Promotional materials should be appropriately targeted and focus on communicating the benefits of the programme for both staff and students with and without previous experience of mental health problems. Advertising could focus on the wider benefits to participants to encourage a more diverse range of staff and students to take part.
- The first student workshops should be advertised at the start of the academic year and included in fresher's timetables.
- Whilst making the workshops compulsory is not necessarily encouraged, time and resource should be invested in targeting groups of staff and students who are not currently engaging but may benefit most from the programme and targeted marketing should be used to ensure a diverse group of participants.
- Partnerships should make very clear during the sign-up stage what the process is for accepting staff onto the Staff Champions course, and how selection will take place.

#### **Improving organisation and delivery of programme:**

- University leads should help to make all relevant teams within the university aware of the programme as soon as possible to enable smooth delivery.
- Where possible local Mind co-ordinators should be given desk space within the universities, where they can regularly meet with staff members and more easily organise programme delivery from within the university
- Universities should ensure that local Mind Co-ordinators are introduced to key contacts within all relevant teams, to ensure smooth organisation and decision making around the programme
- University Leads have a key role to play in ensuring that local Mind Co-ordinators are able to navigate the complexities of their universities, book rooms, use internal communications and understand different roles and responsibilities within the organisation.
- University senior leaders who are sponsoring the programme should identify key leads who can manage operational tasks and decisions on both the staff and student side of the programme.
- Student Services play a key role in the uptake and sustainability of the programme at universities, therefore university leads should ensure they are involved and on board in the early stages of delivery. Where possible Heads of in-house counselling services would be ideal supports alongside university leads.
- National Mind could facilitate more regular meetings of the full cohort of local Mind and university partnerships to facilitate sharing of best practice
- University leads should encourage a review of academics' work balance models to allow room for the Staff Champions role within their workload.
- University leads should encourage Heads of Departments and Deans to take an active role in supporting their staff to become Staff Champions, and encourage them

where possible to enrol themselves so that a range of seniorities are represented within these networks.

### **Content:**

- Case studies from previous Staff Champions should be included in updated training content.
- Introductory materials should be sent to participants beforehand, which should not then be repeated in workshops, to ensure the session is beneficial for staff and students with different levels of knowledge and understanding about mental health.
- A more diverse range of voices and perspectives should be included. For example, developing more content around different cultures and mental health.
- Content and activities should be adapted to reach an online audience.
- Timings of sessions should be revised and consideration should be given to making sessions shorter in length.

### **Evaluation:**

- Consider increasing evaluation resource to maximise learning about particular groups who are benefitting more or less from the programme and in what ways. This could be done through the addition of more demographic questions, including pre and post measures in the evaluation design or through more in depth qualitative work, e.g. follow up workshops/focus groups.

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