Final Evaluation Report

Mentally Healthy Universities

Contents

Foreword

Our pilot programme

At Mind, we're proud to have worked with nine universities to test mental health early intervention and prevention initiatives with both staff and students. Supported by Goldman Sachs Gives, the programme aimed to provide support and specialist training to equip these communities with the knowledge, skills and confidence to support their own mental health and that of others.

There is a recognised and increasingly publicised need to address mental health across the university student body and the higher education workforce. Universities have been increasingly investing in new measures, but these have often been reactive in nature, and so we made the choice to focus this pilot on prevention.

In 2019 a survey of almost 38,000 UK students by The 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 needed professional help for (1). Then in 2021 Accenture's Student Mental Health Research report found that 55 per cent of respondents said they felt lonely daily or weekly, and 39 per cent said their mental health had declined since beginning university (2).

For staff, a similar picture emerges from research. Stigma is an issue: The Equality Challenge Unit found in 2014 that 38 per cent of university staff surveyed had not told colleagues about their mental health problems due to a fear they would be treated differently or thought less of (3).

As part of our Mentally Healthy University Programme, over 2,500 students participated in sessions on wellbeing essentials, managing their mental health at university and the transition to the workplace. All sessions were brilliantly delivered by our local Minds in their local universities. We have supported over 450 staff to set up a network of Staff Mental Health Champions and Staff Mental Health Peer Supporters to break down mental health stigma and provide peer support to their colleagues. We also worked with each university as an employer to help them meet the Mental Health at Work Commitment, and published guidance for the wider sector drawing on their learnings.

Nationally we created a student mental health hub, where we collated resources for all students. We also created five animations focused on topics such as loneliness and self-esteem, which are also available for all students to watch.

Adapting to challenges

No one could have foreseen the challenges this programme would face when it launched in September 2019. The coronavirus pandemic meant that our predominantly face-to-face programme needed to be quickly adapted not only for online delivery, but also to address the increased mental health challenges now faced by students.

But this challenge also presented an opportunity for us to learn about online delivery of mental health interventions in higher education. We have collected lots of learning and developed best practice about this, and about our courses in general, which you'll find in this report.

Strong evidence for our interventions

Students and staff who took part in our interventions reported positive improvements in their knowledge, awareness and confidence across a number of mental health outcomes. This report outlines the demographics of our participants, as well as their outcomes collected through our programme evaluation. Case studies from some of our participants are also included which provide a first-hand account of the impact of the programme. In addition, we present process learning and recommendations to inform future interventions.

We hope these recommendations contribute to work in the sector to ensure students and staff are supported with their mental health.

Acknowledgements

We'd like to thank our pilot universities and local Minds, who have worked so hard to deliver the programme. The partnerships who have delivered the programme over the whole two years are:

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

And those who took part in the programme's second year:

- University of Central Lancashire and Lancashire Mind
- University of Sheffield and Sheffield Mind
- Leeds Beckett University and Leeds Mind.

We'd also like to thank:

- all the staff and students who contributed to the creation of our courses and products
- our advisory group of sector organisations who fed into the work of the programme
- all the many staff within Mind who contributed to this programme's success
- Goldman Sachs Gives for funding and supporting the programme.

Paul Farmer
Chief Executive at Mind

Goldman Sachs Gives Foreword

Goldman Sachs Gives is incredibly proud to have supported the Mentally Healthy Universities Programme. When we launched this programme in 2019 no once could have anticipated the Covid-19 pandemic and the significant impact this would have on the pre-existing crisis in student mental health.

When developing this programme, Mind and Goldman Sachs Gives set out to equip students with the knowledge and tools to manage their mental health. We sought to reduce stigma and improve peer support for university staff and to inspire positive change in how universities address mental health.

Since launching, Mentally Healthy Universities has reached over 2,500 students and over 400 staff at nine universities. In response to Covid-19, the programme was also pivoted to create an additional suite of digital resources, which has received over 50,000 views to date. We are excited to see the learnings of the programme and to be able to share these with the wider sector. This report outlines the key findings and recommendations of the programme.

The report also includes moving and powerful testimony from direct beneficiaries. The direct feedback we've received from students and staff alike demonstrates the incredible importance of engaging with mental health and moving the conversation forward.

I would like to thank our partners at Mind and the participating universities across the country for their incredible commitment, particularly in the context of the challenges brought on by the pandemic. Needless to say, there remains enormous work to be done on mental health – and it has been a real privilege to collaborate with an organisation like Mind to help move the needle in this space.

Charlotte Keenan
Head of the Office of Corporate Engagement International

Executive Summary

Background

In 2019, Mind introduced the Mentally Healthy Universities Programme, supported by Goldman Sachs Gives, in response to an increasing need to improve the mental health and wellbeing support provided to both students and staff at university. The pilot programme was delivered in partnership with nine universities in England. It aimed to provide support and specialist training to equip these communities with the knowledge, skills and confidence to support their own mental health and that of others.

The programme aimed to achieve five goals[1]:

- **Goal 1:** Ensure students are equipped to manage their mental health and thrive at university.

- **Goal 2:** Ensure students have the knowledge and tools to manage their mental health and wellbeing.

- **Goal 3:** Ensure students are prepared to manage their mental health in future employment.

- **Goal 4:** Reduce stigma and improve peer support for university staff.

- **Goal 5:** Make positive changes to the way universities think and act about mental health.

To achieve these five goals, a range of workshops for student and staff were delivered:

- Wellbeing Essentials sessions for students.

- Tools and Techniques for Mental Health: a four-week resilience-building intervention for students.

- Looking After Your Mental Health at Work sessions for students.

- A training course and ongoing support for new Staff Mental Health Champions: volunteers whose role is to reduce stigma and raise awareness of mental health.

- A training course and ongoing support for new Staff Mental Health Peer Supporters, whose volunteer role is to provide peer support to their colleagues in their workplace.

We also worked with the pilot universities to support them to embed the Mental Health at Work Commitment. The Commitment is a simple framework with a set of actions for employers to improve and support the mental health of their staff. Practical guidance (5) about implementing the Commitment was developed for the wider sector based on the learnings from the pilot universities.

To develop the programme we built on learning from previous targeted mental health and workplace wellbeing programmes, as well as our extensive catalogue of existing mental health training. University students and staff were consulted to help shape the programme and ensure it has the best chance of meeting their needs.

Over 2,500
students attended our training courses over the two years.

Over 450
Staff Mental Health Champions and Peer Supporters were recruited and trained.

[1] Additional information on the student and staff courses delivered to meet the five goals of the programme is included in Appendix 1

Impact of coronavirus

Soon after the launch of the programme in September 2019, the coronavirus pandemic and social distancing restrictions meant adapting from a predominantly in-person delivery model to going entirely remote. This presented challenges, but also opportunities to learn and be responsive to the mental health challenges faced by students and staff due to the pandemic.

Programme evaluation

Both years of the programme pilot were evaluated using mixed methods. These included short evaluation forms after each session or course, process interviews with local Mind staff and university leads and a small number of interviews with staff and students in year one who took part in the sessions. The evaluation aimed to demonstrate the impact that engagement with the programme had on student and staff's mental health and wellbeing. Findings from the evaluation will be used to inform future work with 16-25 year olds, as well as contributing to sector-wide knowledge of what effective mental health and wellbeing support looks like in higher education institutions.

Key findings

The majority of students who engaged with the programme evaluation were UK/EU students (86 per cent) who were female (73per cent), white (88 per cent), aged 16-24 (77 per cent) with personal experience of mental health problems (42 per cent). For staff, the majority were administrative (36 per cent) or academic (27 per cent) staff who were female (78 per cent), white (88 per cent), with a broad age range, and with personal experience of mental health problems (45 per cent).

Evaluation across both years of the pilot showed that students and staff had a positive experience of the Mentally Healthy Universities Programme, reporting increases in confidence, understanding and awareness across all five of the workshops offered.

Key findings included:

Nearly 90 per cent
(89 per cent, n=710) of students had a better understanding of mental health problems and wellbeing after attending our Wellbeing Essentials course. The majority of attendees (93 per cent, n=658) said they would recommend the course to a friend.

Over 90 per cent
(93 per cent, n=258) 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. The majority of attendees (95 per cent, n=261) said they would recommend the course to a friend.

Over 90 per cent
(91 per cent, n=217) of students were more aware of where to seek help for mental health in the workplace after taking part in our Looking After Your Mental Health at Work course. The majority of attendees (91 per cent, n=215) said they would recommend the course to a friend.

Nearly 90 per cent
(87 per cent, n=92) of staff felt confident tackling mental health stigma in the workplace after attending the Mental Health Champions course, and 97 per cent (n=47) of staff reported they knew more about peer support after attending the Staff Mental Health Peer Supporters course. The majority of attendees of both courses (93 per cent) said they would recommend the training to colleagues.

In course feedback, students and Staff Mental Health Champions told us how helpful they found the non-judgemental and inclusive environment created in the training. This provided opportunities to connect with others and share lived experience of mental health problems. The practical and interactive activities within the courses were well received, and the knowledgeable and supportive course trainers were praised. Attendees also provided useful feedback on how improvements can be made to future versions of the programme. Key suggestions included reducing the length of sessions to better align with student timetables, tailoring the content to be more specific to the context of individual universities, and including more practical activities within the courses.

> "As someone who has not really openly admitted to struggling in the past, the course provided a relaxed, honest space to talk about my problems with a group of likeminded individuals."
>
> Student attendee, Looking After Your Mental Health at Work course

Process interviews with local Mind Coordinator and University Leads focused on the legacy and sustainability of the programme, and identified learning to improve delivery of future versions.

Key suggestions included:

- increasing the flexibility to tailor programme content to the needs of different institutions' staff and students

- increasing resource and capacity for programme stakeholders

- ensuring co-production with staff and students at all stages of programme design and development

- improving integration of programme delivery with universities' existing wellbeing offer and services.

Summary of recommendations

The following recommendations are presented to inform Mind's future work with 16–25 year olds, as well as the sector and government's decision making on mental health and wellbeing support within higher education institutions.

Recommendations for Mind:

1 **Offer a blended model of delivery in future programmes** – Use a blended model of remote and in-person support to retain the accessibility and flexibility benefits of remote delivery while gaining the benefits of in-person learning.

2 **Prioritise engagement from marginalised communities** – Prioritise increasing engagement from participants from lower socioeconomic groups and racialised communities. Key enablers for this will be effective partnership working with specialist community organisations and ensuring programmes of activity are co-produced with these communities.

3 **Ensure future programmes of activity are adequately funded and resourced** – This will ensure sufficient capacity across all delivery partners, especially for stakeholders within higher education institutions where high workloads mean external work is often deprioritised when capacity is low.

4 **Prioritise and improve co-production processes with intended beneficiaries for future programmes** – Co-production with students and staff should be implemented in all stages of service design and development to ensure that programmes are rooted in lived experience and reflect the needs and preferences of those accessing them.

5 **Programme delivery to be two years as a minimum** – When agreeing programme length with funders, request a minimum of two years to enable greater culture change within institutions.

6 **Continuous programme improvement** – Feedback from students, staff, local Mind Coordinators and University Leads outlined in this report should also be used to inform future work.

Recommendations for the higher education sector:

1 **Prioritise supporting staff with their mental health** – Universities should sign the Mental Health at Work Commitment and embed the six standards within their institution.

2 **Invest in providing training and tools for students** – Mental health training, information and support should be provided throughout students' university experience, not just at the start.

3 **Key stakeholders from universities should be identified and informed about their role from the beginning of programmes** – All key stakeholders within higher education settings should be involved when applying to be involved in programmes and from the outset of programme set up. This should include ensuring programmes align with existing mental health and wellbeing services, and that clear roles, responsibilities and accountabilities are set.

4 **Implement Peer Supporter and Mental Health Champion roles** – Support should be provided by higher education institutions to staff to carry out these roles.

5 **Senior leadership prioritise mental health and support future initiatives** – Higher education settings should encourage senior management to prioritise the mental health of their staff and students. Take a look at our guide for senior leaders.

6 **Take a whole university approach** – Apply for Student Minds' University Mental Health Charter and take forward Universities UK's Stepchange: mentally healthy universities.

7 **Review and address the systematic causes of mental health problems for students and staff** – Higher education institutions should review and address the causes of mental health problems within their specific demographic of students and staff.

Recommendations for government and research institutions:

1 Ensure mental health and wellbeing in the education system is prioritised and sufficient funding is allocated for support services, training and resources. This includes staff as well as students.

2 Invest in research on best practise approaches to support the mental health needs of students from a range of backgrounds. This should include international students, students from racialised communities, LGBTQ+ students, disabled students and those with caring responsibilities.

3 Invest in research on the causes of poor mental health for university staff, including those from diverse backgrounds to inform future work.
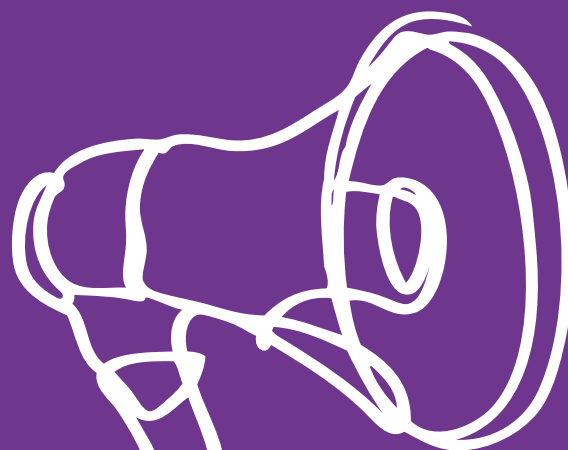
1. Evaluation Methodology

Evaluation of the second year of programme delivery consisted of two key elements:

1 Evaluation forms were given out 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, and the impact of the sessions they attended, to rate the session and provide free text comments on any suggested improvements.

2 Process interviews with University Leads and local Mind coordinators to capture process learning and common suggestions for improvements. These took place over video call and invited participants to provide more detail about their experience of coordinating the delivery and management of the programme as well as any suggested improvements to the session content and/or delivery.

We produced an interim evaluation report (4) after year one. In response to feedback, amendments were made to the student and staff evaluation forms ahead of year two (for example additional demographic monitoring questions added, evaluation rating scale wording amended). Due to the changes made analysis cannot directly compare all evaluation outcomes across both years.

This report summarises evaluation findings from data collected though workshop evaluation forms and process interviews with programme staff in year two, with findings from the year one evaluation cross-referenced where available. We also present conclusions and recommendations to inform ongoing development of Mind's work with 16-25 year olds beyond the current programme pilot, as well as informing broader work across the higher education sector to support the mental health and wellbeing of students and staff.

2. Demographics: Staff and students

All staff (100 per cent, n=1,302) and almost all students (99 per cent, n=1,307) attended the workshops online during the second year of programme delivery due to the coronavirus pandemic. Limited demographic data was collected in the year one evaluation. However, data on student and staff gender and previous experience of mental health problems collected across both years was comparable.

2.1 Evaluation completion rate by workshop

Student engagement rates with the evaluation of the year two courses were 85 per cent (n=276) for the Tools and Techniques course, 67 per cent (n=796) for Wellbeing Essentials and 78 per cent (n=238) for the Workplace Wellbeing session. Staff engagement rate with the evaluations of the workshops were 69 per cent (n=106) for Mental Health Champions, and 48 per cent (n=58) for Peer Supporters. Local Mind delivery staff reported that running out of time to ensure the evaluation forms were completed in the session was a barrier to encouraging all participants to engage with the evaluation.

Table 1: Evaluation completion rate by workshop in year two

Workshop	Evaluation completion rate (number of responses / total attendees)
Student courses	
Tools and Techniques to Manage your Mental Health at University	85 per cent (276/ approx. 325 attendees)
Wellbeing Essentials	67 per cent (796/ approx. 1,185 attendees)
Looking After Your Mental Health at Work	78 per cent (238/ approx. 420 attendees)
Staff courses	
Staff Mental Health Champions	69 per cent (106/ 154 attendees)
Staff Mental Health Peer Supporters	48 per cent (58/ 121 attendees)

Wellbeing Essentials had a significantly higher number of attendees than the other courses as it was delivered throughout the whole academic year, with a focus on early in the 2020/21 Autumn term at Freshers' Week and course inductions.
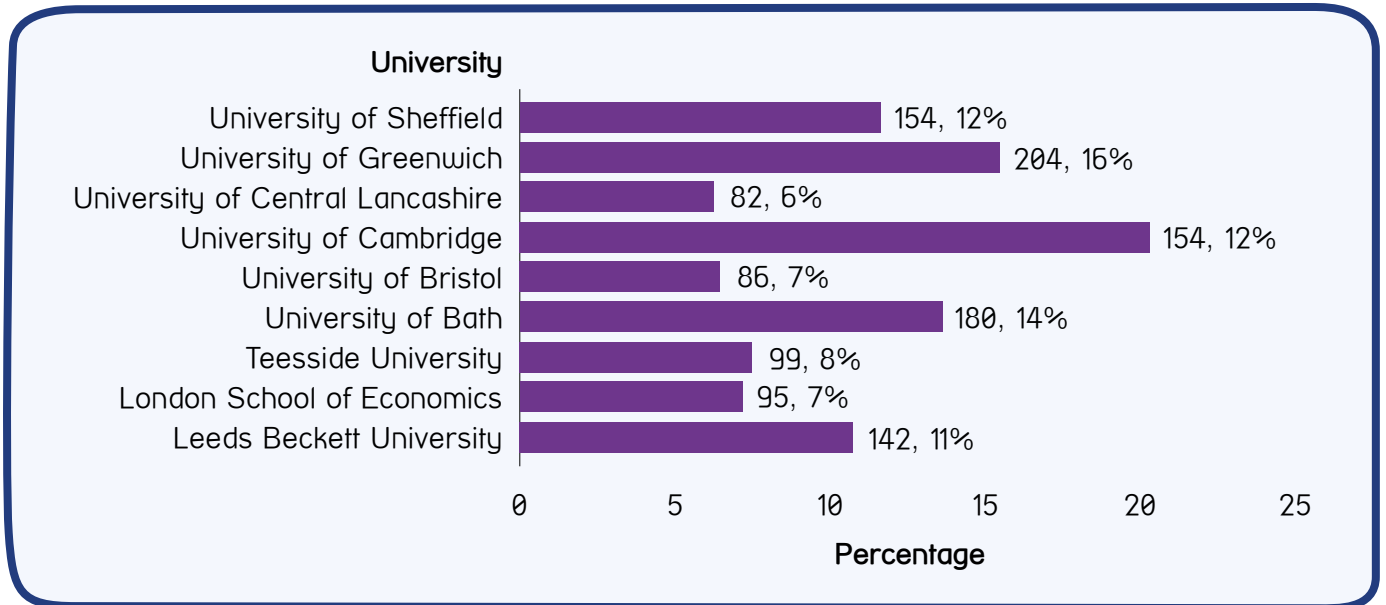
Tools and Techniques had far fewer attendees as it ran across four weeks, requiring a much higher time commitment from students.

Looking After Your Mental Health at Work began delivery significantly later than the other two student courses (in January 2021), so the window for delivery was shorter. Students were also facing the challenge of coronavirus during this time, with many choosing to focus on studying and taking exams in the pandemic.
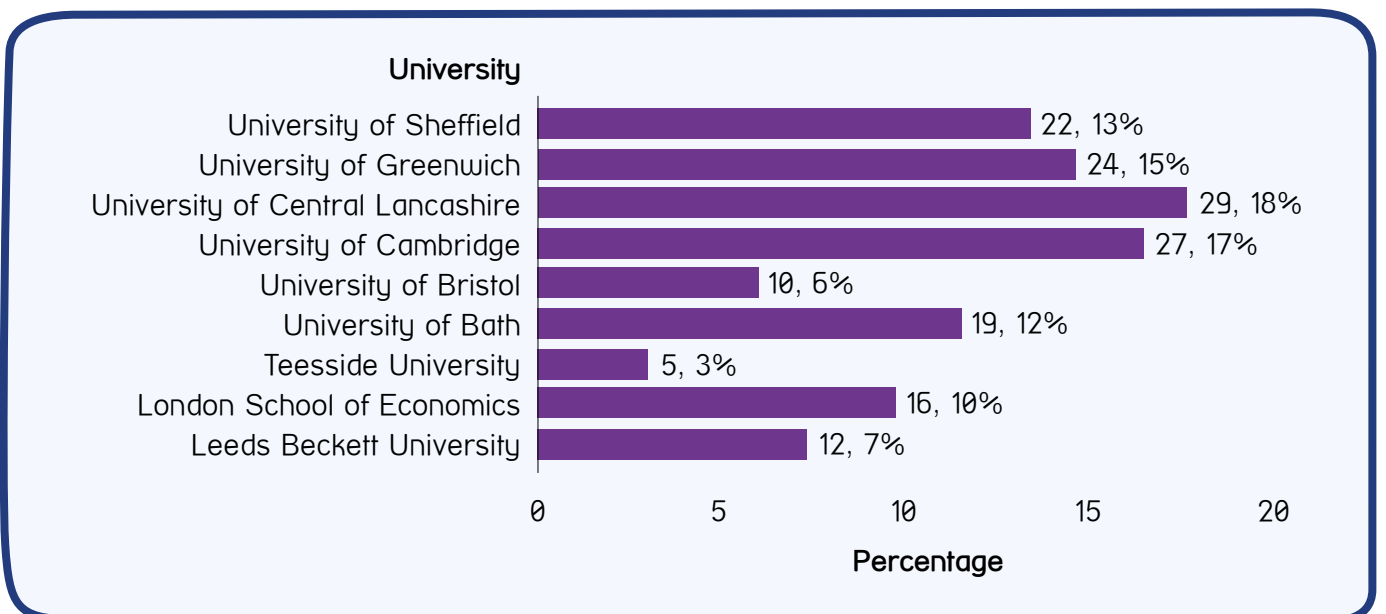
2.2 Student and staff frequency by university

The University of Cambridge had the highest number of students engaging with the evaluation of the workshops, making up a fifth (20 per cent) of all participants. University of Central Lancashire (18 per cent) and the University of Cambridge (17 per cent) had the highest level of engagement from staff.

Figure 1: University attended by students

University

University	Value
University of Sheffield	154, 12%
University of Greenwich	204, 16%
University of Central Lancashire	82, 6%
University of Cambridge	154, 12%
University of Bristol	86, 7%
University of Bath	180, 14%
Teesside University	99, 8%
London School of Economics	95, 7%
Leeds Beckett University	142, 11%

Percentage (0, 5, 10, 15, 20, 25)

Base size=1,310

Figure 2: University staff employed by

University

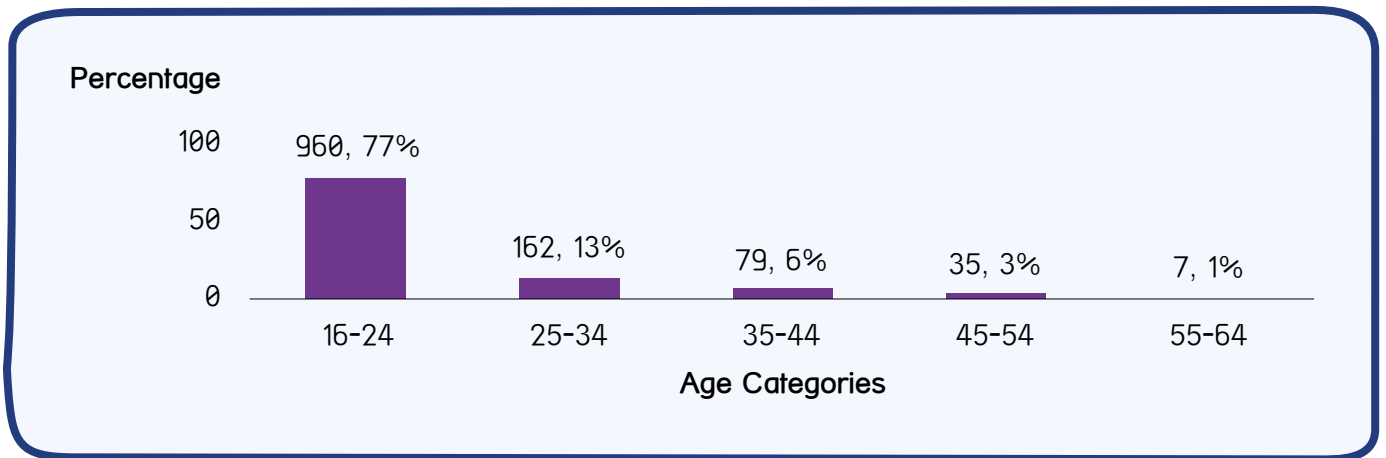| University	Value
University of Sheffield	22, 13%
University of Greenwich	24, 15%
University of Central Lancashire	29, 18%
University of Cambridge	27, 17%
University of Bristol	10, 6%
University of Bath	19, 12%
Teesside University	5, 3%
London School of Economics	16, 10%
Leeds Beckett University	12, 7%

Percentage (0, 5, 10, 15, 20)

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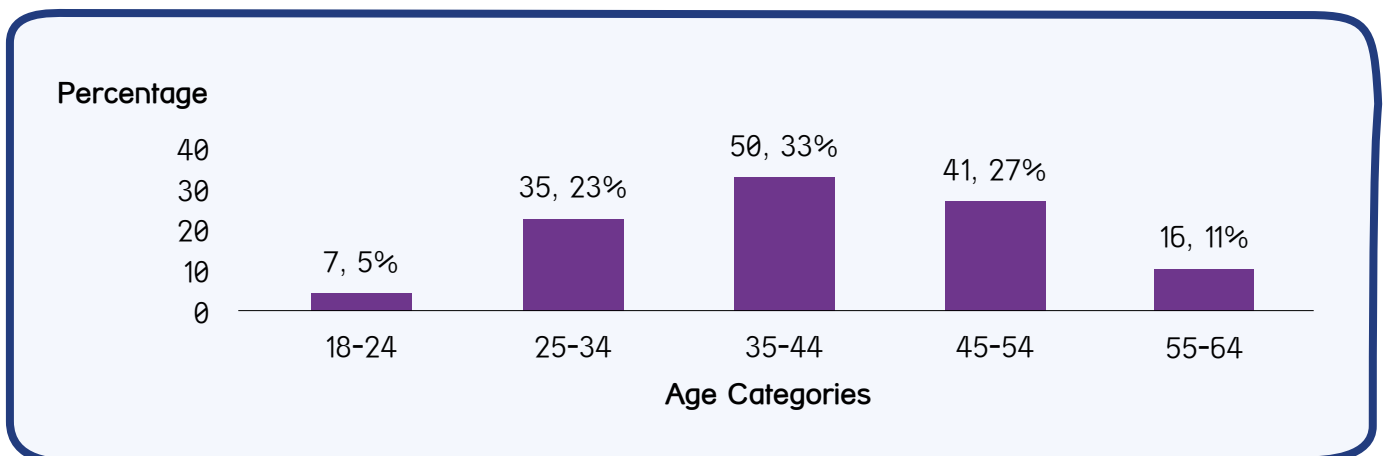
2.3 Age

The majority of students (77 per cent) were aged 16-24.
The most prevalent age categories for staff were 35-44 (33 per cent) and 45-54 (27 per cent).

Figure 3: Age of students

Percentage

960, 77%	162, 13%	79, 6%	35, 3%	7, 1%
16-24	25-34	35-44	45-54	55-64

Age Categories

Base size=1,237

Figure 4: Age of staff

Percentage

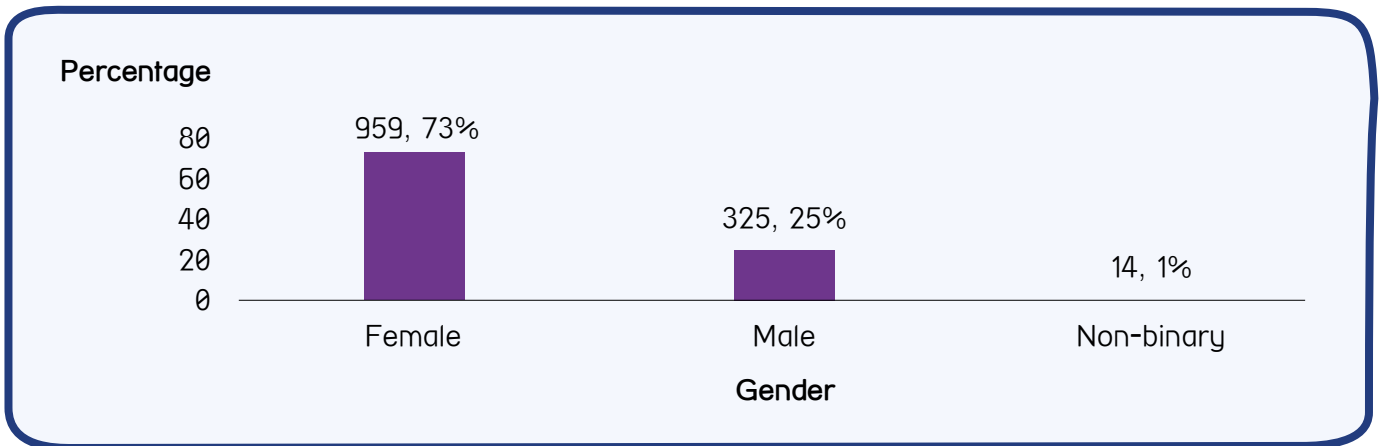|				
7, 5%	35, 23%	50, 33%	41, 27%	16, 11%
18-24	25-34	35-44	45-54	55-64

Age Categories

Base size=150

2.4 Gender

The majority of students (73 per cent) and staff (78 per cent) were female.
A quarter of students (25 per cent) and a fifth of staff (20 per cent) were male.
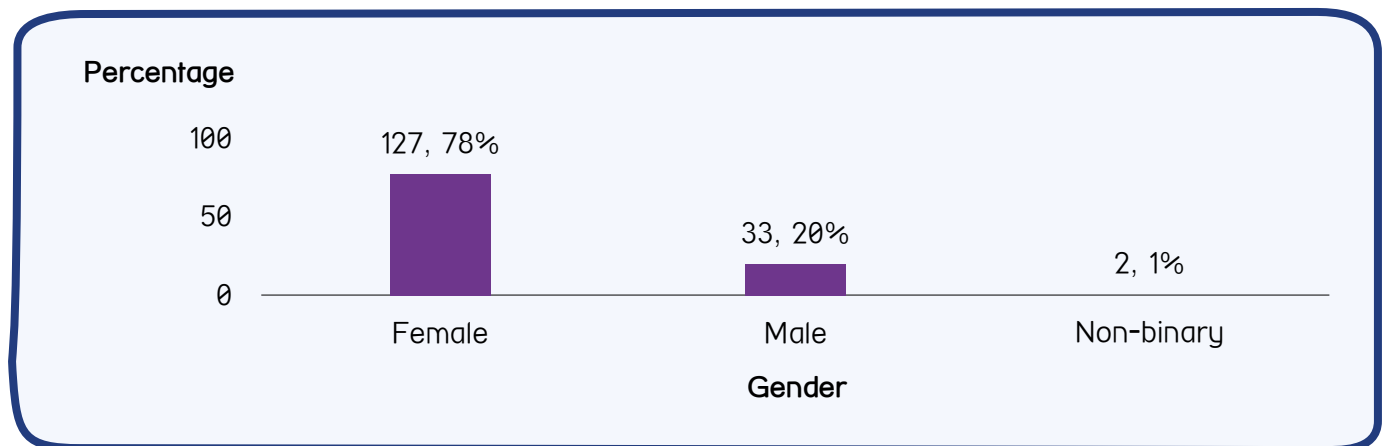
Figure 5: Gender of students

Percentage

959, 73%	325, 25%	14, 1%
Female	Male	Non-binary

Gender

Base size=1,308

Note: Students also preferred to self-describe (n=4, 0.3 per cent) or preferred not to say (n=6, 0.46 per cent). 1 per cent (n=13) identified as Trans.

Figure 6: Gender of staff

Percentage

|		
127, 78%	33, 20%	2, 1%
Female	Male	Non-binary

Gender

Base size=163

Note: Staff also preferred not to say (n=1, 0.6 per cent). No staff identified as Trans.

2.5 Sexual Orientation

The majority of both students (74 per cent) and staff (80 per cent) identified as heterosexual. A slightly higher proportion of students (17 per cent) than staff (11 per cent) identified as Bi or Gay/Lesbian.
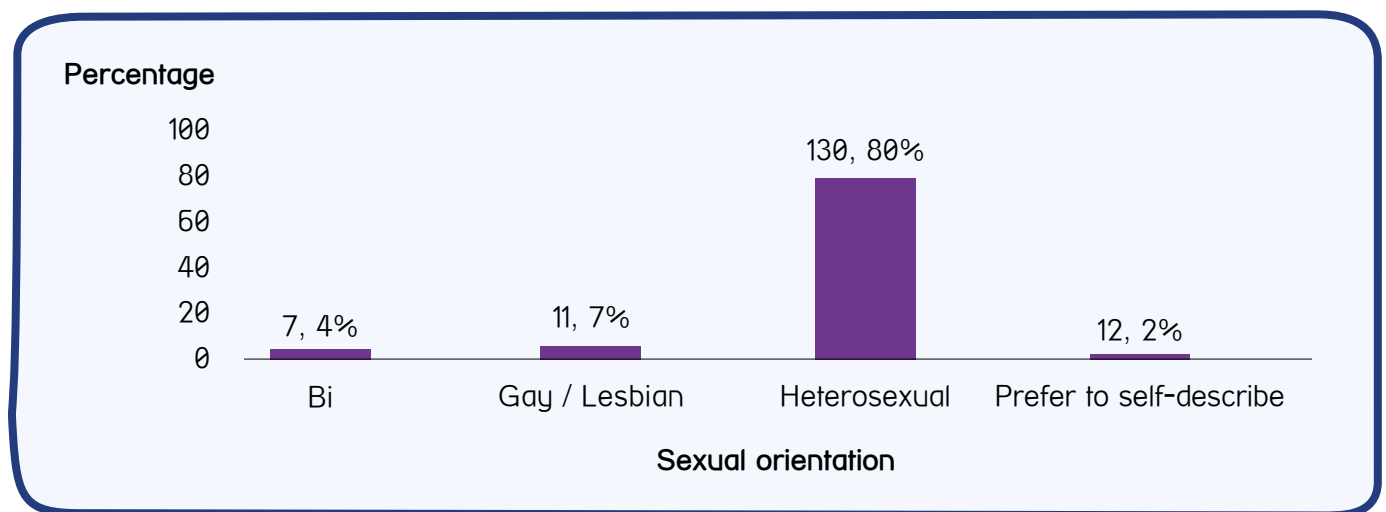
Figure 7: Sexual orientation of students

Percentage

	Bi	Gay / Lesbian	Heterosexual	Prefer to self-describe
	166, 13%	49, 4%	968, 74%	74, 4%

Sexual orientation
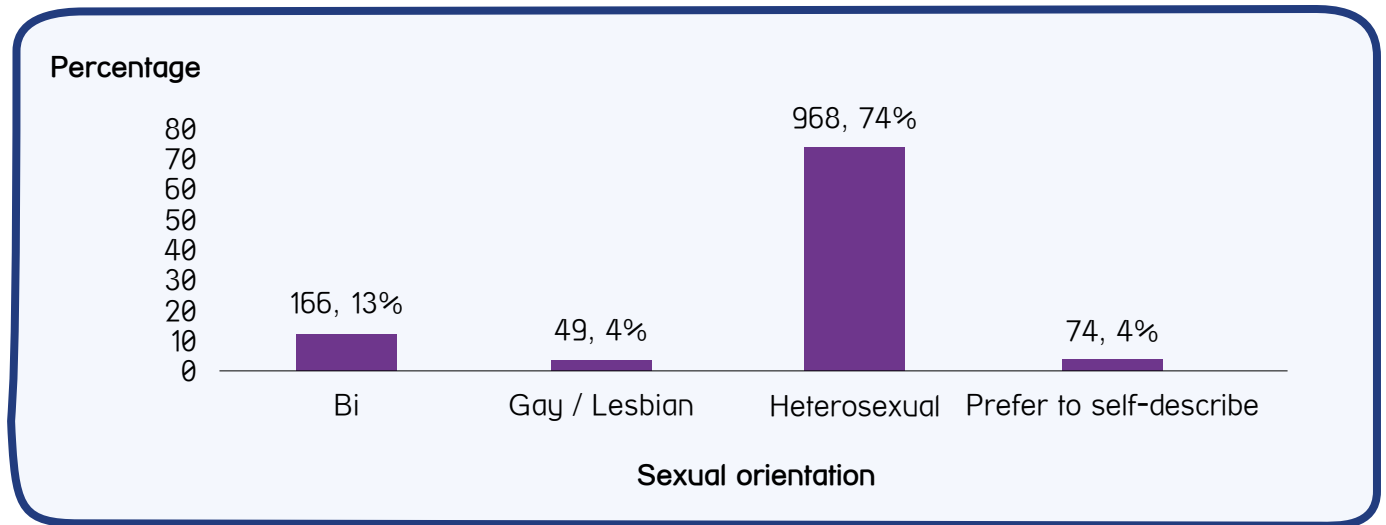
Base size=1,304

Note: Students also preferred not to say (n=74, 6 per cent)

Figure 8: Sexual orientation of staff

Percentage

	Bi	Gay / Lesbian	Heterosexual	Prefer to self-describe
	7, 4%	11, 7%	130, 80%	12, 2%

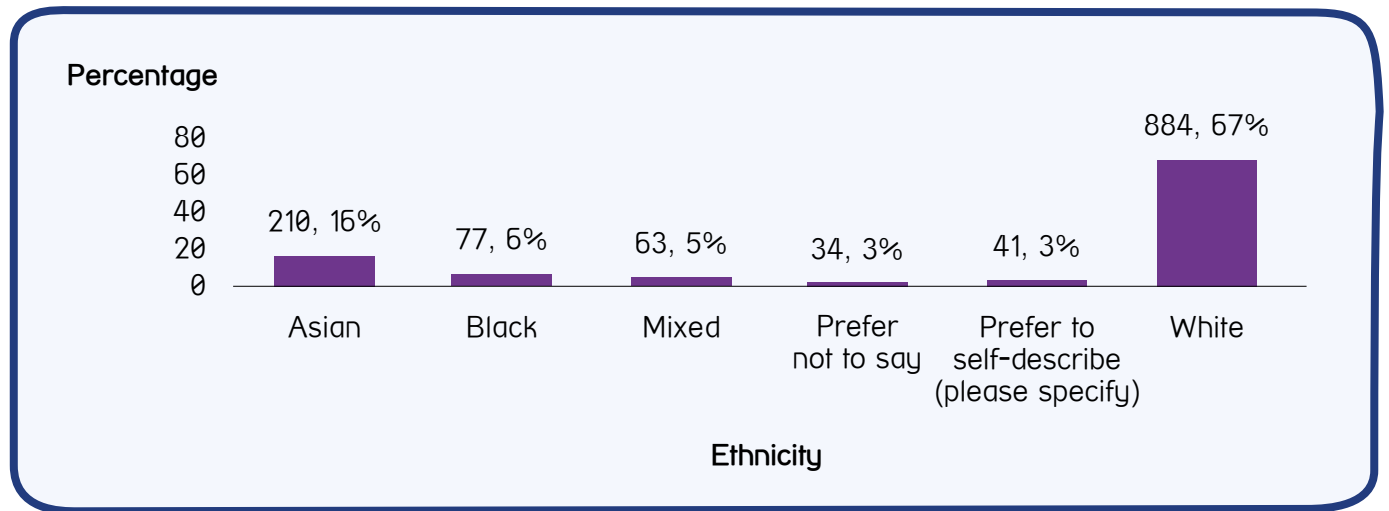Sexual orientation

Base size=163

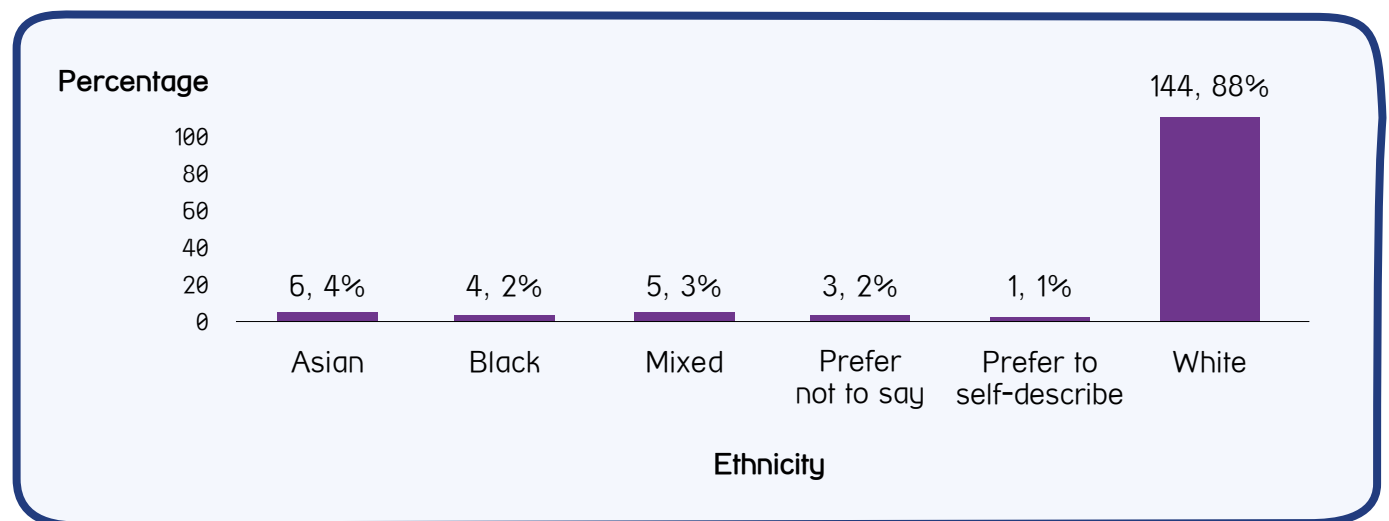Note: Staff also preferred not to say (n=12, 7 per cent)

2.6 Ethnicity

The majority of both students (67 per cent) and staff (88 per cent) were white. Just over a quarter of students (27 per cent) and just under a tenth of staff (9 per cent) were black, asian or mixed heritage.

Figure 9: Ethnicity of students

Percentage

210, 16%	Asian
77, 6%	Black
63, 5%	Mixed
34, 3%	Prefer not to say
41, 3%	Prefer to self-describe (please specify)
884, 67%	White

Ethnicity

Base size=1,309

Figure 10: Ethnicity of staff

Percentage

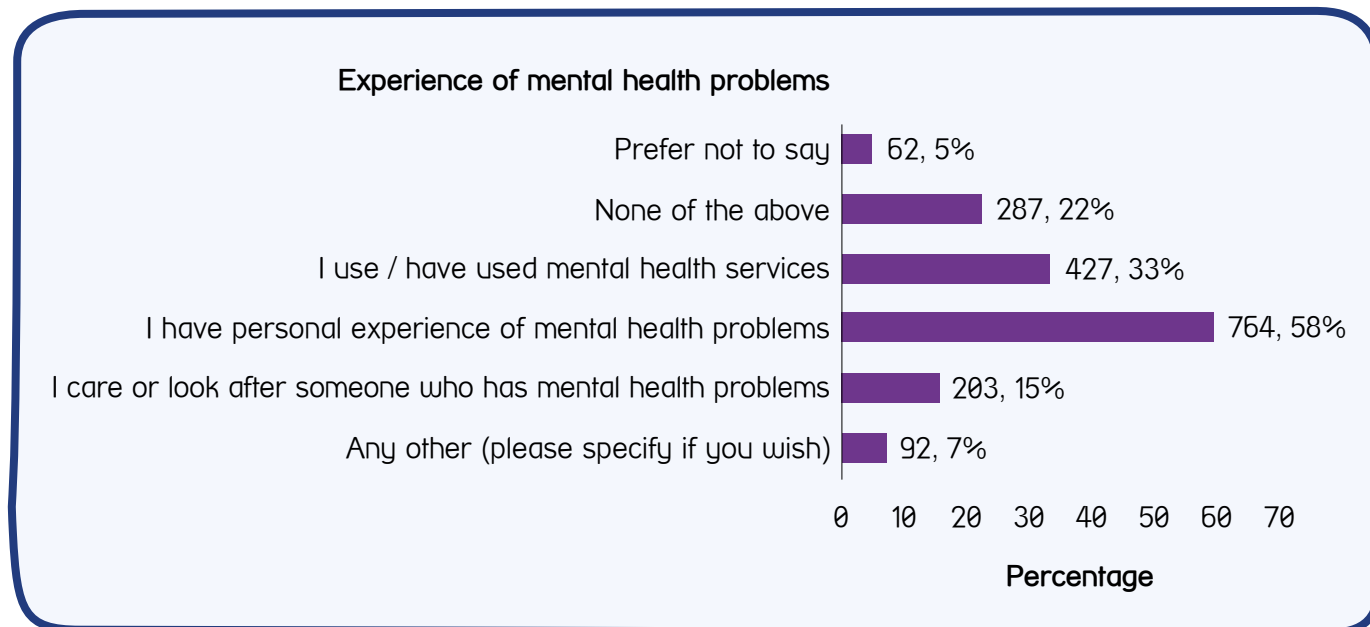|	
6, 4%	Asian
4, 2%	Black
5, 3%	Mixed
3, 2%	Prefer not to say
1, 1%	Prefer to self-describe
144, 88%	White

Ethnicity

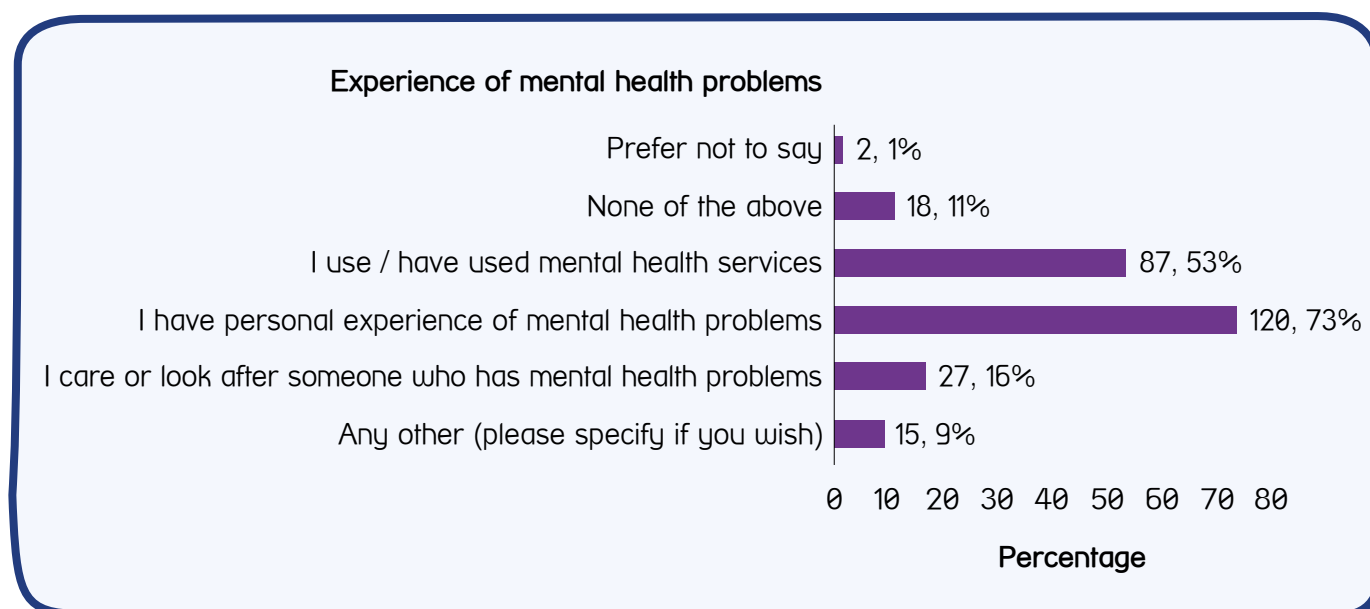Base size=163

2.7 Experience of mental health problems

Just under three-fifths of students (58 per cent) and 73 per cent of staff had personal experience of mental health problems. A third of students (33 per cent) and over half of staff (53 per cent) used or had previously used mental health services.

Figure 11: Student experience of mental health problems

Experience of mental health problems

Response	Value
Prefer not to say	62, 5%
None of the above	287, 22%
I use / have used mental health services	427, 33%
I have personal experience of mental health problems	764, 58%
I care or look after someone who has mental health problems	203, 15%
Any other (please specify if you wish)	92, 7%

Percentage

Note: Participants could select multiple response options so percentages do not equal 100 per cent
Base size=1,310

Figure 12: Staff experience of mental health problems

Experience of mental health problems

| Response	Value
Prefer not to say	2, 1%
None of the above	18, 11%
I use / have used mental health services	87, 53%
I have personal experience of mental health problems	120, 73%
I care or look after someone who has mental health problems	27, 16%
Any other (please specify if you wish)	15, 9%

Percentage

Note: Participants could select multiple response options so percentages do not equal 100 per cent
Base size=164

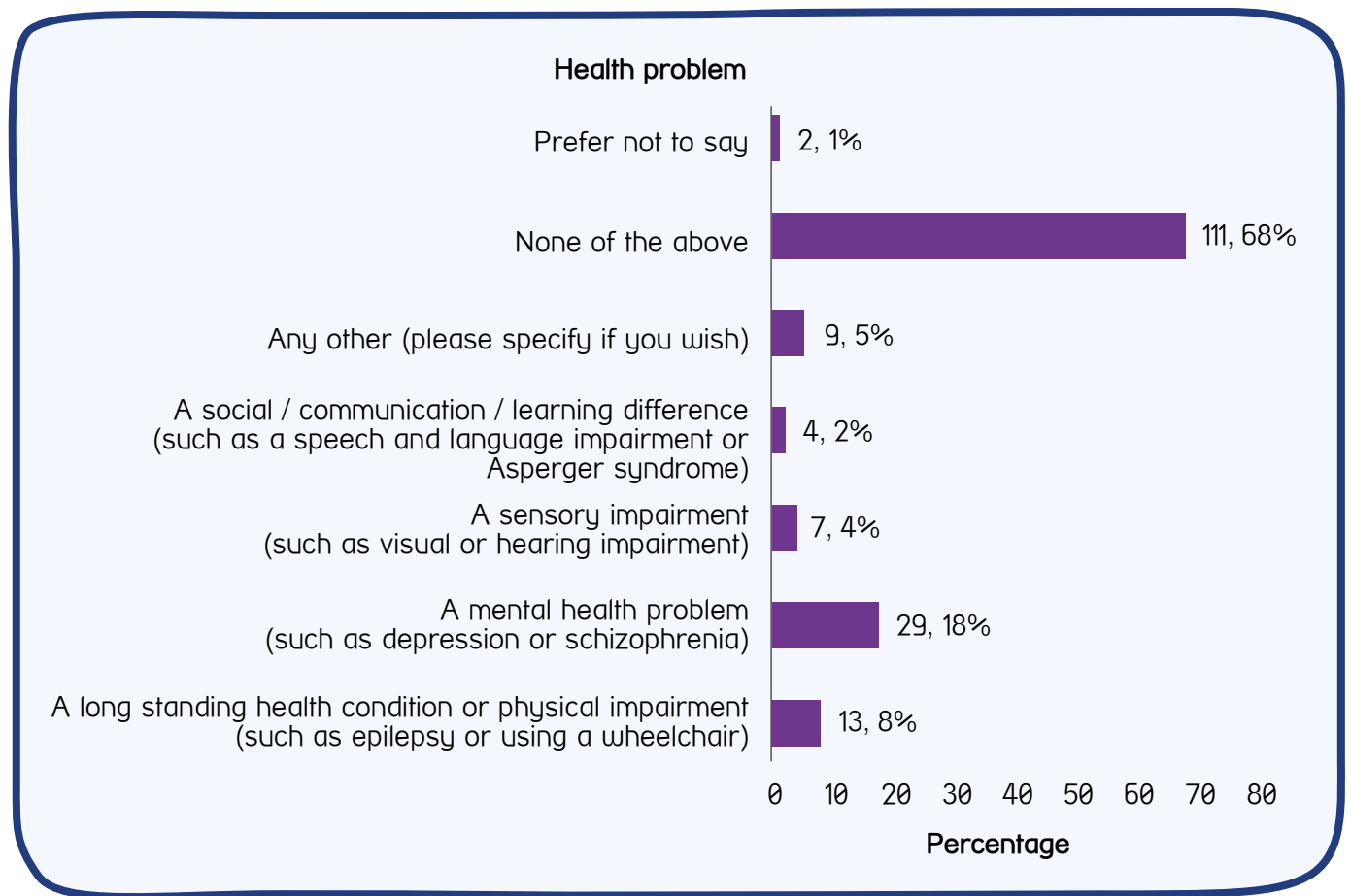## 2.8 Long-term health conditions and/or disabilities

Over three fifths of students (65 per cent) and staff (68 per cent) did not have a long-term health problem or disability. The most prevalent health condition reported for both students and staff was mental health problems.

Figure 13: Students long term health conditions
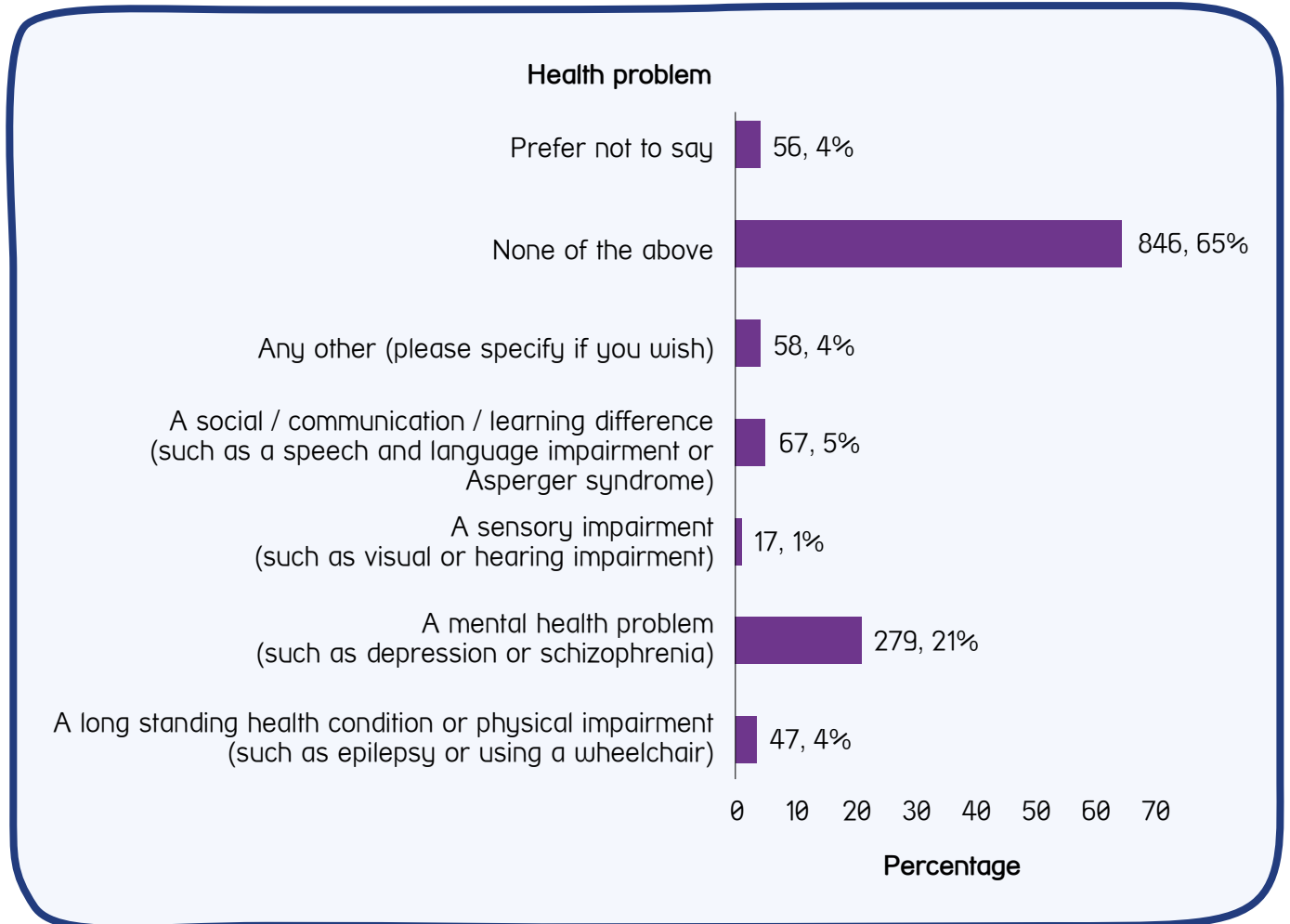
Note: Participants could select multiple response options so percentages do not equal 100 per cent
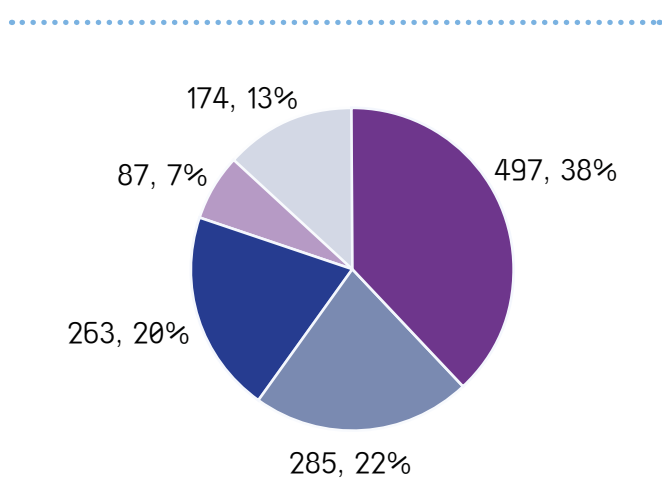Base size=1,310

Figure 14: Staff long-term health conditions

Health problem

Percentage

- Prefer not to say: 2, 1%
- None of the above: 111, 68%
- Any other (please specify if you wish): 9, 5%
- A social / communication / learning difference (such as a speech and language impairment or Asperger syndrome): 4, 2%
- A sensory impairment (such as visual or hearing impairment): 7, 4%
- A mental health problem (such as depression or schizophrenia): 29, 18%
- A long standing health condition or physical impairment (such as epilepsy or using a wheelchair): 13, 8%

0 10 20 30 40 50 60 70 80

Note: Participants could select multiple response options so percentages do not equal 100 per cent
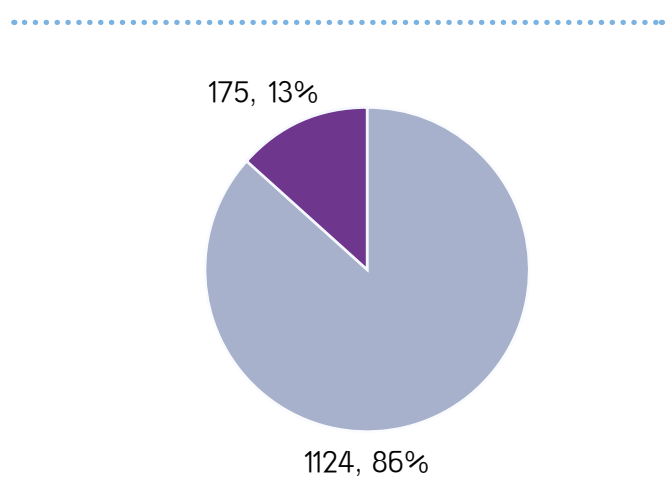Base size=164

2.9 Student year of study and status

Nearly two fifths of students (38 per cent) were in their first year of study, and the majority (86 per cent) were UK/EU students.

Figure 15: Student year of study

497, 38%
285, 22%
263, 20%
87, 7%
174, 13%

Base size=1,306

Figure 16: Student status

175, 13%
1124, 86%

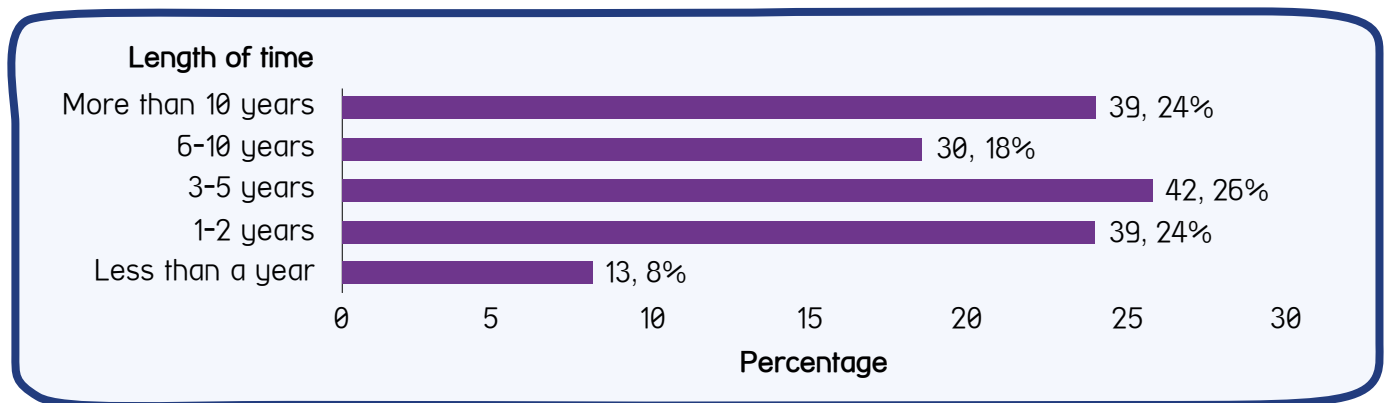Base size=1,309

2.10 Parent/carer attendance at university

The majority of students had parents/carers who attended university (57 per cent, n=746).
Just over two fifths had parents/carer who had not attended university (41 per cent, n=539),
2 per cent (n=19) were unsure.

Base size=1,306

## 2.11 Staff role and time worked at university

The most prevalent roles for staff who engaged with the evaluation were administrative (36 per cent) or academic (27 per cent). There was a fairly even split in the amount of time staff had worked at the university, with the vast majority (92 per cent) having worked there for more than a year.

Figure 17: Staff time worked at university

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Figure 18: Staff role at university
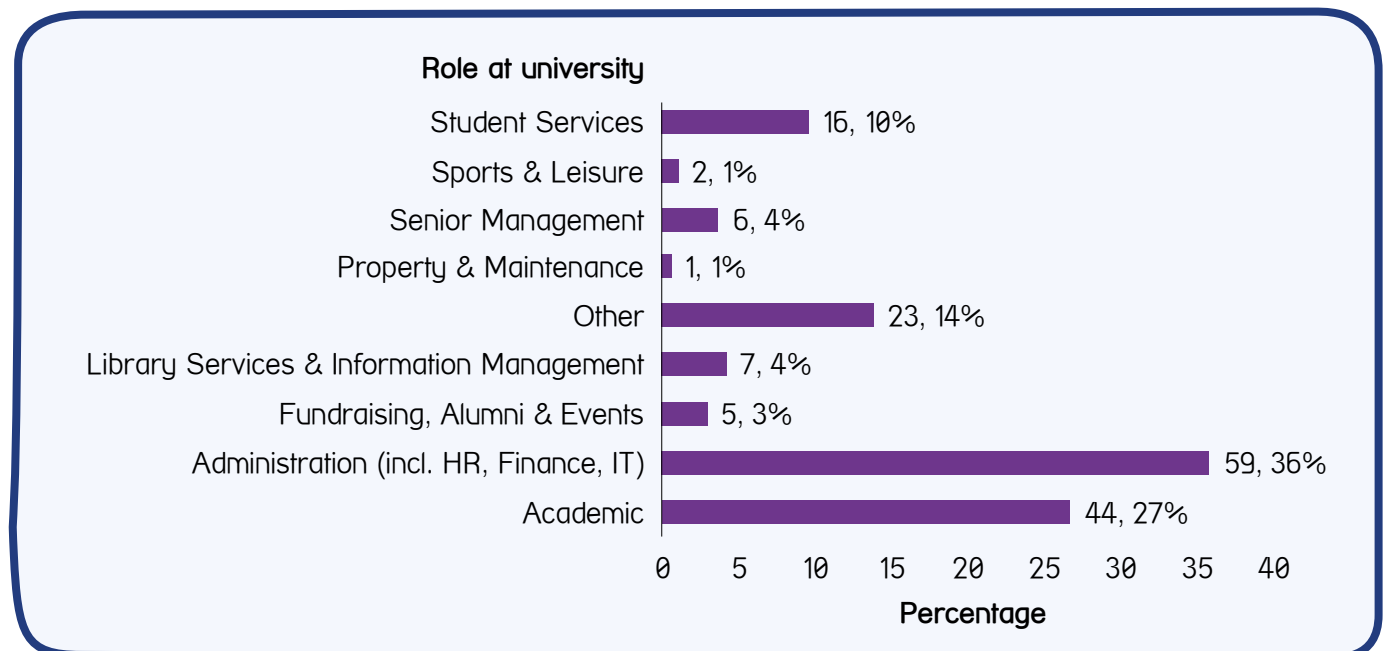
Base size=164

3. Evaluation Outcomes

3.1 Student findings

3.1.1 Key findings:
outcomes across student courses

The three student workshops delivered in the second year of the Mentally Healthy Universities Programme had a positive impact on students. The majority of students self-reported improvements in their understanding, confidence and awareness across a number of key mental health and wellbeing outcome areas after attending the training. A summary of outcomes across the workshops is presented below, with additional detail on each workshop presented in following sub-sections of this report:

Wellbeing Essentials:

- **89 per cent (n=710)** had a better understanding of mental health problems

- **82 per cent (n=425)** were more confident in looking after their mental health

- **90 per cent (n=714)** were more aware of where to seek support from their university

- **85 per cent (n=680)** were more aware of where to seek support outside their university

Tools and Techniques:

- **95 per cent (n=162)** had a better understanding of mental health problems

- **93 per cent (n=258)** were more confident looking after their mental health

- **61 per cent (n=167)** were more aware of where to seek support from their university

- **67 per cent (n=185)** were more aware of where to seek support outside their university

- **96 per cent (n=266)** were more confident in their own strategies and resources to improve and maintain their mental health

- **76 per cent (n=214)** were more confident seeking mental health help from others

- **91 per cent (n=262)** had a better understanding of the impact of university on mental health

Looking After Your Mental Health at Work:

- **87 per cent (n=207**) were more confident looking after their own mental health

- **92 per cent (n=218)** were more aware of mental health in the workplace

- **91 per cent (n=217)** were more aware of where to seek help for mental health in the workplace

- **88 per cent (n=210)** were more aware of where to seek help for mental health outside of the workplace

The vast majority of students would recommend the courses to a friend.

Course rating

The average course rating across the three student workshops was **8.5/10**

Course recommendation

The **vast majority of students (87 per cent)** across the three workshops were likely or extremely likely to recommend them to a friend

3.1.2 Wellbeing Essentials

Session outcomes

The Wellbeing Essentials workshop was a standalone two-hour session. Participants indicated on a five-point scale ranging from one 'strongly disagree' to five 'strongly agree' how much they agreed that after doing the workshop they:

• had a better understanding of mental health problems and wellbeing

• felt more confident looking after their own mental health

• were more aware of where to seek help from their university

• were more aware of where to seek help externally

The percentage of students who either strongly agreed or agreed can be seen in Figure 19. The evaluation rating scale used for this course was amended ahead of year two so a comparison cannot be made across both years.

Figure 19. Self-reported improvements from the Wellbeing Essentials session
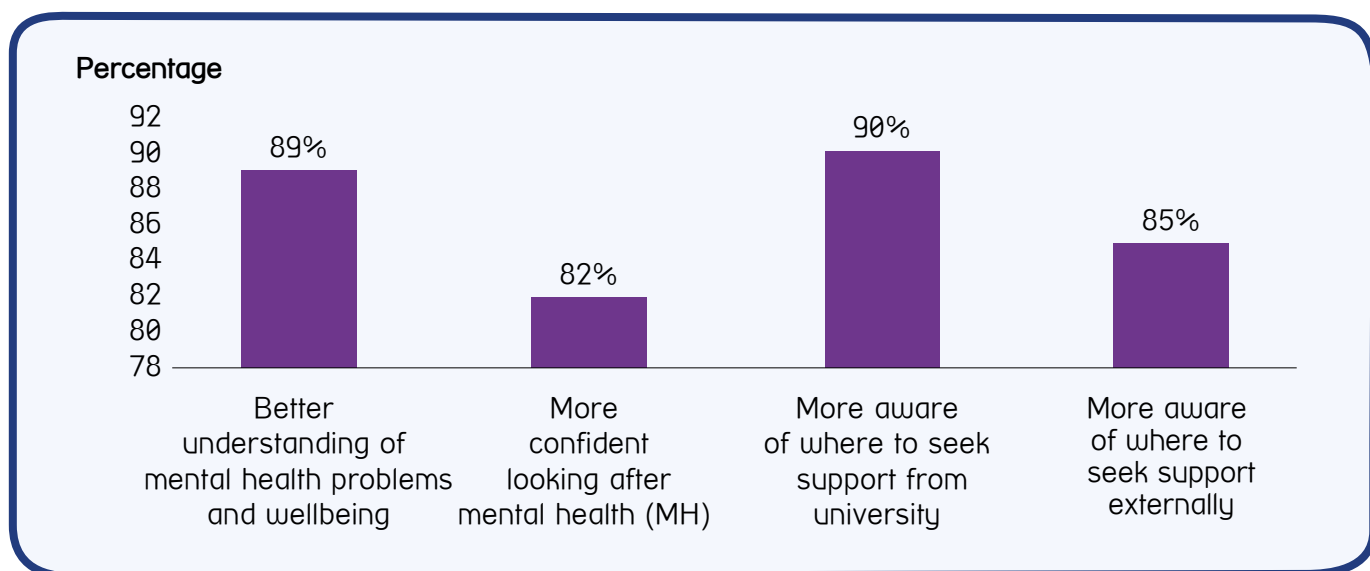
Base size= 796

In-line with Mind's strategic ambition to become a proudly anti-racist organisation we ran analysis to compare outcomes by participants' ethnicity. One notable difference[2] was shown for 'More aware of where to seek support from university' with black, asian and mixed heritage participants reporting a six per cent higher level of awareness (94 per cent, n=208) than white participants (88 per cent) after completing the workshop. However, there were considerably fewer black, asian and mixed heritage participants (n=221) than white participants (n=526) and caution should be applied when drawing conclusions from these findings.

Session feedback

The majority of participants said they were likely or extremely likely to recommend the workshop to a friend (83 per cent, n=658), and only four per cent (n=29) said they were extremely unlikely or unlikely to. The average rating of the workshop was 8.4 out of 10 (n=789).

When asked what they liked about the course, the following themes were seen in the 646 short comments provided. Key themes in feedback on this question were largely consistent across three student courses in year two. Comparison with year one cannot be drawn as this question was newly introduced for year two.

- **Opportunity to connect and share lived experience with others in a small group setting**

    Participants valued the opportunity to connect with peers, share lived experience of mental health problems and gain support. One participant shared that: *"People were very welcoming and understanding. I felt less alone and more connected. It was nice to talk openly about mental health."* Another participant stated: *"It was nice that there [wasn't] too many people in the call as it means I didn't feel as anxious about talking because it was a smaller group."*

- **Broad range of topics covered**

    The broad range of topics covered during the workshop was well received. One participant stated: *"It covered a lot of different topics and related the mental health problems with the current pandemic."* Topics that were particularly liked included five ways to wellbeing, how to support others, Wellness Actions Plans and breathing techniques. Another participant stated: *"I felt really thought about and as though it was really tailored towards us as students."*

- **Knowledgeable and supportive trainers**

    Participants felt the course trainers were knowledgeable, supportive and able to run an effective and impactful training session. One participant shared *"It felt like a safe environment to chat and share experiences and get resources for yourself and others"* and another participant stated: *"Instructors create a comfortable environment to speak about personal experience."*

- **Interactive and varied activities**

    Participants liked the inclusion of interactive and varied activities that were suited to a range of learning styles, such as breathing exercises, group discussions and break out rooms as well as activities involving videos and online whiteboards. One participant shared that: *"I appreciate the additional videos and materials [it] provides a really nice change of pace compared to just a PowerPoint"* and another stated that they liked that the sessions were: *"Interactive, [I] enjoyed topics and [the] diverse ways of learning."*

[2] All other variables differed by five per cent or less when outcomes were compared by ethnicity

- **Supportive and open environment**

  Participants valued the training environment as a safe and non-judgemental space in which to share and learn. One participant shared that: *"I felt 'heard' and unjudged when I spoke which is really important and helpful."* Another participant stated the session was *"Mindful of people's potential situations (not assuming anyone in the session is free of their own issues, and also super inclusive in terms of acknowledging things like gender and race)."*

When asked what improvements would make this training worth a 'ten out of ten' rating, several common themes emerged among the 498 short comments provided. All three of these key themes were consistent with feedback received in year one of delivery. We've clarified what we changed as a result of year one feedback.

- **Shorter workshops**

  A key recommendation in year one was that the workshop should be shorter. This feedback was taken on board and the workshop was reduced from three hours to two as part of the redevelopment process between year one and two. However, in year two a significant amount of students still felt the workshops were too long and would have preferred shorter sessions. Some students felt that the sessions could be split into multiple shorter sessions, and that the length of workshops was a barrier to participation. One student stated: *"I feel like two hours is a long time for university students to commit to and this in turn makes the idea of coming to this session less appealing".*

- **More activities**

  Feedback from year one face-to-face delivery highlighted a desire for more activities in the session. This feedback was taken on board during the redevelopment process ahead of year two delivery, and an instructional designer was consulted to increase the amount of active learning in the sessions. However, the requirement to deliver sessions entirely remotely in year two due to coronavirus restrictions placed a limitation on the range of activities we could offer. Feedback from year two requested more interactive activities within sessions (for example increasing use of Zoom quizzes/polls/discussion in small groups), but participants acknowledged the limitations of remote delivery. One student stated *"Maybe a little game or activity to get people involved, especially with the online experience it might feel a bit less personal."*

- **Increased level of mental health detail**

  Feedback from year one highlighted that students felt the level of mental health detail included in the workshop was at times too basic, as the majority of attendees had their own lived experience of mental health problems. This feedback was taken on board during the redevelopment process ahead of year two. Through consultation with student peer designers we decided that mental health detail, particularly around diagnosis, should be reduced in the session and focus on activities and reflection should be increased to aid engagement with the online course. However, year two feedback highlighted that some students still felt the level of detail on mental health was too basic. One student stated: *"Too generic, had basically the same style and structure as all the mental health presentations I've had in previous schools, so it feels like I already know what they are going to say".* This is likely due to the high percentage of students with prior mental health experience taking the course, as well as students' previous engagement with similar work on mental health. Some students also felt the content could have been more specific to their experience as students, as well as more specific to their own university culture. One student suggested to: *"...have different levels or training around specific areas and include more on what we can do as students".*

Impact case study

The following case study from a University of Bath student highlights the impact of their learning from Wellbeing Essentials for Students.

"Being kind is helping your own wellbeing"

Second-year University of Bath student Niamh attended a Wellbeing Essentials workshop with Bath Mind

"Like everyone else in the UK, I'm currently 'stuck' in a lockdown.

One of my biggest challenges that I have faced during this time is missing family and friends. This takes a toll on your wellbeing, and like many people I sometimes feel overwhelmed. I think the first thing to remember is that it's completely normal to feel like that in these strange times. Other people are also feeling the same, something that became apparent to me when I attended the workshop. It showed the importance of taking notice, and this resonated with me in terms of taking notice of how I'm feeling.

In the workshop we explored a lot of important wellbeing tips both for yourself and for supporting others. I really enjoyed that it was a small interactive group as I felt like I took more from the session and contributed more in discussions. I would recommend this course to anyone – lockdown is undeniably challenging in a lot of different ways and finding out how to look after yourself mentally can be so helpful and important at this time!

It made me realise I needed to continue and make more effort to 'connect' with people I don't live with. For me, it's always been harder to connect over the phone or over text and I was allowing this to stop me from chatting with the people I cared about.

Being kind to yourself is the beginning of helping your own wellbeing – and that was one of the other take-home messages."

## 3.1.3 Tools and Techniques for Managing your Mental Health

Session outcomes

The Tools and Techniques course consisted of four two-hour weekly workshops and short online self-directed learning between sessions. Participants indicated on a five-point scale ranging from one 'strongly disagree' to five 'strongly agree' how much they agreed that after completing the course they:

• had a better understanding of mental health problems and wellbeing

• felt more confident looking after their own mental health

• were more aware of where to seek help from their university

• were more aware of where to seek help externally

• had a better understanding of the impact university can have on mental health

• felt more confident seeking help from others close to them about their mental health and wellbeing

• 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 20. The evaluation rating scale used for this course was amended ahead of year two so a comparison cannot be made across both years.

Figure 20. Self-rated improvements from the Tools and Techniques Course
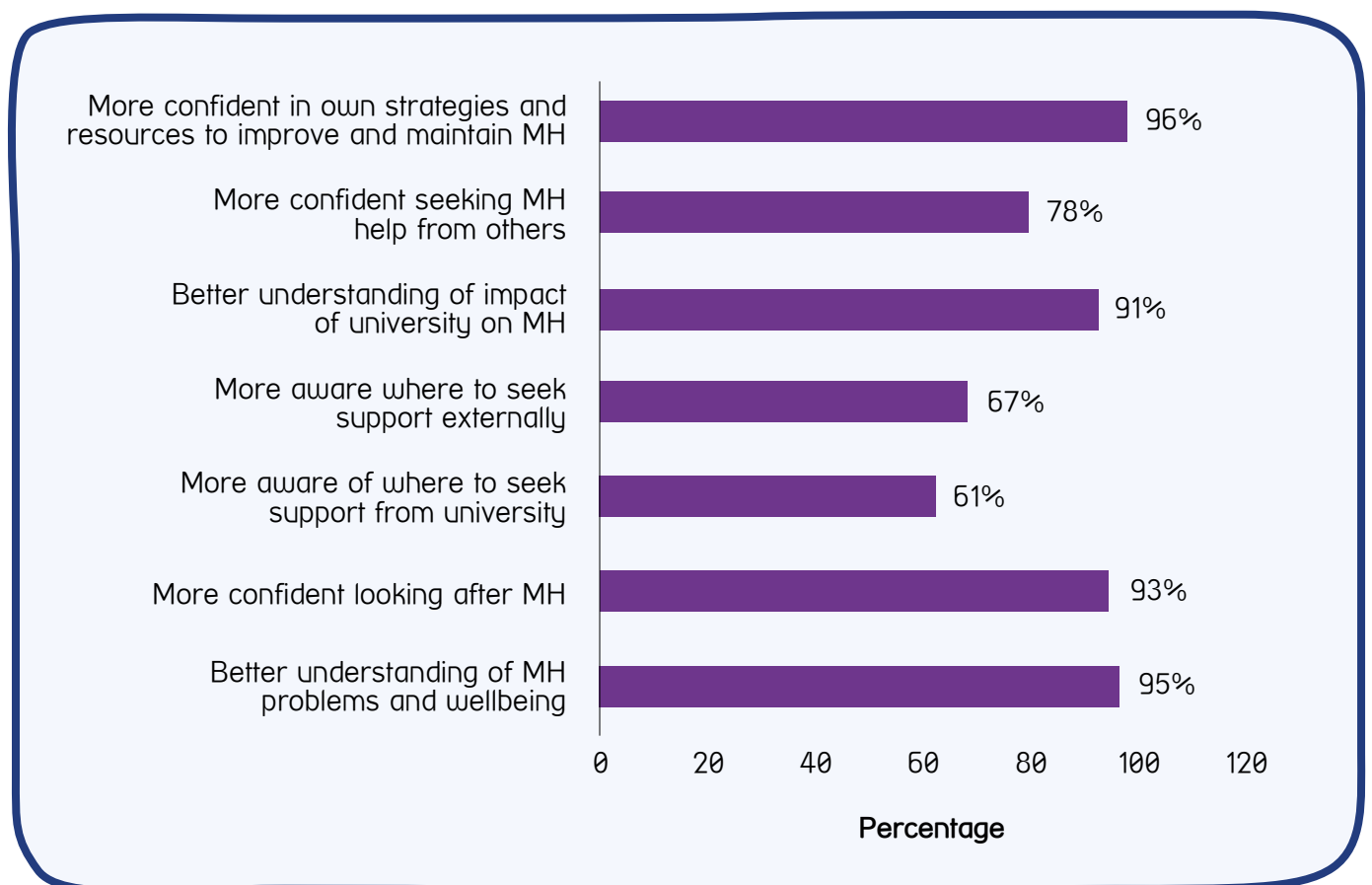
Base size=276

In-line with Mind's strategic ambition to become a proudly anti-racist organisation we ran analysis to compare outcomes by participants' ethnicity. Black, asian and mixed heritage participants showed notably higher levels of improvement across four of the seven variables[3]:

- Better understanding of mental health problems and wellbeing': Black, asian and mixed heritage participants reported a six per cent higher level of awareness (100 per cent, n=60) than white participants (94 per cent, n=187)

- More aware of where to seek support from university': Black, asian and mixed heritage participants reported an 18 per cent higher level of awareness (75 per cent, n=45) than white participants (57 per cent, n=113)

- Better understanding of the impact of university on mental health': Black, asian and mixed heritage participants reported a seven per cent higher understanding (97 per cent, n=58) than white participants (90 per cent, n=180)

- More confident seeking mental health help from others': Participants from racialised communities reported a 12 per cent higher level of confidence (89 per cent, n=52) than white participants (76 per cent, n=152)

However, there were considerably fewer black, asian and mixed heritage participants (n=60) than white participants (n=199) and caution should be applied when drawing conclusions from these findings.

Session feedback

The majority of participants said they were likely or extremely likely to recommend the workshop to a friend (n=261, 95 per cent), and only one per cent (n=2) said they were extremely unlikely or unlikely to. The average rating of the workshop was 8.7 out of 10 (n=275). Course rating and recommendation was comparable across both years of programme evaluations.

When asked what they liked about the course, the following themes were seen in the 254 short comments provided. Key themes in feedback on this question were largely consistent across three student courses in year two. Comparison with year one cannot be drawn as this question was newly introduced for year two.

- **Opportunity to connect and share lived experience with others**

    Participants valued the opportunity to connect with peers, share lived experienced of mental health problems and gain support. One participant shared that: "This course made me really realise and think about the fact that I'm actually not the only person experiencing this, and it boosted my self-confidence. One thing I loved is that this course was a type of catharsis for me, and an escape from all the worries and stresses of university life and daily life in general." Another participant stated: "I liked the personal side of having the same group week on week as I felt we developed together and supported one another in the sessions."

- **Inclusion of practical real-world information and tools**

    Participants liked that the information and tools shared in the course were practical and applied to their real-world experiences. One participant stated: "All the tools we learn in this course are directly applicable to university life. I liked how practical this training was because it encouraged me to make incremental changes." Tools that were particularly well received included Attention Training and the weekly take-away tasks between sessions.

[3] All other variables differed by five per cent or less when outcomes were compared by ethnicity

- **Knowledgeable and supportive trainers**

  Participants felt the course trainers were knowledgeable, supportive and able to run an effective and impactful training session. One participant stated: "The trainers were lovely, approachable and very considerate of our own personal experiences around mental health and seemed very compassionate." Another participant stated that: "The trainer and co-host were really friendly and answered lots of questions. They had a great amount of knowledge."

- **Interactive and varied activities**

  Participants liked the inclusion of interactive and varied activities that were suited to a range of learning styles, such as group discussions and break out rooms as well as activities involving drawing and use of videos. One participant shared that: "I enjoyed the interactivity of the learning programmes and how they are not just a passive experience, [they] engage[d] me through both text and video. I thought it was really beneficial that I was able to save a copy of my answers after the session. I think that the weekly group calls following the online training were very helpful as we were able to share our experiences and benefit from hearing the support given towards others."

- **Supportive and open environment**

  Participants valued the training environment as a safe and non-judgemental space to share and learn in. One participant shared that "We were able to speak without feeling uncomfortable or nervous and it felt like I was speaking to a group of my friends" and another stated "I felt like it was a non-judgemental area where I could speak my mind and I felt less alone with my problems as the other participants faced issues similar to mine."

When asked what improvements would make this training worth a 'ten out of ten' rating, several common themes emerged among the 202 short comments provided. The first two of these key themes were consistent with feedback received in year one. We've provided clarification on the changes made in response to year one evaluation feedback:

- **Length of course**

  Feedback received in year one on the length of the course was mixed, with some students reporting that the time commitment for the course (four weeks) was too long. The course was based on Mind's evidence-based resilience course[4], and we took the decision not to amend the length of the course during this pilot. This theme emerged again in year two with some slightly different responses. Students would have liked a longer series of workshops, where the individual sessions were shorter. They felt that the length of individual sessions was too long, especially when delivered remotely. Students stated: "Maybe make it longer so there are more sessions. Or spread out the current content over a longer period of time so each session is a bit shorter" and "Make the Zoom sessions a bit shorter because the pre-training material was the most useful."

- **Practical techniques**

  Feedback across year one and two was consistent with students requesting the inclusion of more practical techniques in the session, and having more opportunities to practice what they had learnt. For example, one year two student said: "More exercises in terms of breathing and tensing. Only because I found these very beneficial in the sessions and less beneficial on my own" and "More activities in the online sessions, because most of the time the course leader was speaking". However, the limitations of remote delivery in terms of making the sessions more practical was acknowledged by attendees. Unfortunately, limited time and capacity during the redevelopment period ahead of year two delivery meant this feedback could not be addressed during the programme pilot.

- **Provision of additional resources**

  Students would have liked a standalone summary of relevant resources and signposting material after the sessions to explore in their own time. One student suggested: "To have a compiled list of resources/training at the end of the course to give a list of specific strategies – going through each prep training to find these is a bit annoying."

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[4] Mind introduced a Building resilience in the emergency services training course which Tools and Techniques was based on

Impact case study

The following case study from a student studying at Teesside University describes how the Tools and Techniques course they attended helped them talk more openly about their mental health:

"I was surprised and glad to see that I was not alone in the struggle"

Tools and Techniques participant experience

"I didn't realise how my life experiences had scarred and moulded me until it progressed to a stage where I struggled to cope with everyday life. I was forced to acknowledge my inability to sort it all by myself. I observed how I ruminated on the past and how it was crippling my present.

In early 2020, I came across the Tools and Techniques for Student Mental Health [session] advertised in the university newsletter. By then, I admit I was feeling relatively low and decided to register. The first session was eye-opening: I was surprised and glad to see that I was not alone in the struggle. The students assembled, and the welcoming, warm environment created by the trainers from Mind put me at [an] ease I hadn't felt in over a year. The sense of 'we are all in this together' made me think that I didn't have to struggle alone with the unease within me.

The attention training component of the first session stayed with me long after it [was over]. I was extremely anxious during the national lockdown and struggled to cope. I recalled the attention training and decided to practice it as much as I could. Within six months, I managed to put a handle on my stress eating and even managed to be aware enough to catch myself ruminating or binge-watching. I shudder to think how much worse it could have been if not for the skills I learnt at the course.

I subsequently distributed the tools provided by Mind during the course to my friends and family, who greatly appreciated it. I even attended the Mental Health at Work course before starting my first job.

Today I openly talk about mental health with everyone. I am finally comfortable talking about my feelings. I have become an advocate for mental health now and tweet about the importance of acknowledging mental health struggles in academia. None of this would have been possible if not for the fantastic work the staff of Mind do with such incredible warmth and friendship. My mum says I look happier now."

# 3.1.4 Looking After Your Mental Health at Work

Session outcomes

Participants indicated on a five-point scale ranging from one 'strongly disagree' to five 'strongly agree' how much they agreed that after doing the workshop they:

• felt more confident looking after their own mental health

• felt more aware of mental health in the workplace

• felt more aware of where to seek help for mental health in the workplace

• 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 21. The evaluation rating scale used for this course was amended ahead of year two so a comparison cannot be made across both years of delivery.

Figure 21. Self-reported improvements from the Workplace Wellbeing session
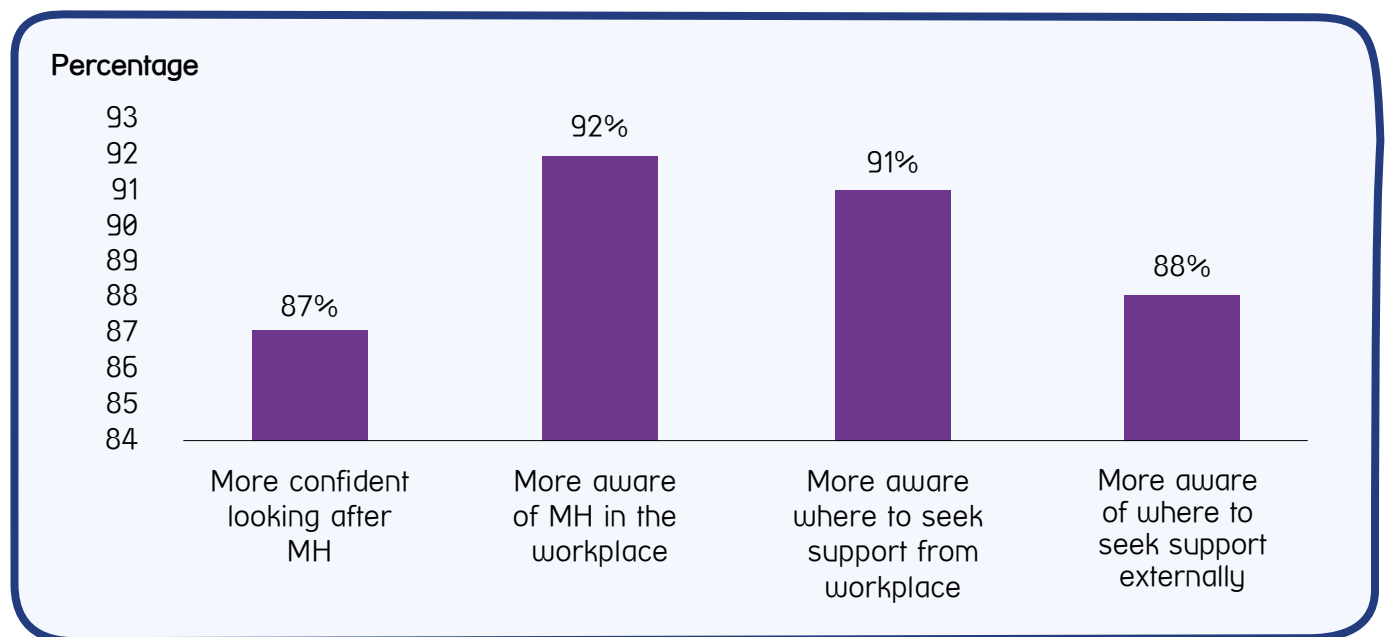
Base size=238

In-line with Mind's strategic ambition to become a proudly anti-racist organisation we ran analysis to compare outcomes by participants' ethnicity. White participants showed notably higher levels of improvement in one of the four variables[5]:

• 'More confident looking after own mental health and wellbeing': White participants reported a six per cent higher level of awareness (89 per cent, n=140) than black, asian and mixed heritage participants (83 per cent, n=57).

However, there were considerably fewer black, asian and mixed heritage participants (n=69) than white participants (n=159) and caution should be applied when drawing conclusions from these findings.

[5] All other variables differed by five per cent or less when outcomes were compared by ethnicity

Session feedback

The vast majority of participants said they were likely or extremely likely to recommend the workshop to a friend (91 per cent n=215). The average rating of the workshop was 8.6 out of 10 (n=237). Course rating and recommendation was comparable across both years of programme evaluations.

When asked what they liked about the course, the following themes were seen in the 206 short comments provided. Key themes in feedback on this question were largely consistent across three student courses in year two. Comparison with year one cannot be drawn as this question was newly introduced for year two.

- **Opportunity to connect and share lived experience with others**

    Participants valued the opportunity to connect with peers, share lived experienced of mental health problems and gain support. One participant shared that: *"As someone who has not really openly admitted to struggling in the past, the course provided a relaxed, honest space to talk about my problems with a group of like-minded individuals."* Another participant stated that: *"I felt less alone as [I] know other people have similar experiences."*

- **Inclusion of practical real-world information and tools**

    Participants liked that the information and tools shared in the course were practical and applied to their real-world experiences. One participant shared: *"This course has provided me with a set of tools to deal with my problems using helpful practical real world examples to demonstrate how I can use these in my day to day life".* In particular, the Wellness Action Plan, Circle of Influence and information on how to discuss mental health with a line manager were particularly well received. One participant stated *"Wellness Action Plan – I am going to complete one ASAP. I love the idea of being able to look at the plan and remind myself of prompts I have created, rather than stressing myself out and not being able to think clearly about how to recover."*

- **Knowledgeable and supportive trainers**

    Participants felt the course trainers were knowledgeable, supportive and able to run an effective and impactful training session. One participant stated: *"The trainer made this training so enjoyable and welcoming, he really made you feel like you really matter and his enthusiasm, positivity and caring nature made this training as amazing as what it was. He is a credit to Mind and I can't thank him enough for changing my outlook and improving my mental health."*

- **Interactive activities**

    Participants liked the inclusion of interactive activities such as group discussions and break out rooms. One participant shared that: *"I enjoyed the breakout groups that gave me an opportunity to be more open and honest regarding my mental health, which has made a massive impact on my mental health in a positive way".* The session's activities were well received with one participant stating: *"We got to discuss our mental health in relation to the workplace. Often we just get by and plod on and not realise the full impact of how the workplace can affect our mental health inside and outside of work."*

- **Supportive and open environment**

    Participants valued the training environment as a safe and non-judgemental space to share and learn in. One participant shared that they liked that the sessions were *"Friendly, inclusive, open.".* Another participant stated: *"The presenter was very understanding and non-judgemental."*

When asked what improvements would make this training worth a 'ten out of ten' rating, several common themes emerged among the 168 short comments provided. The first three of these key themes were consistent with feedback received in year one. We've provided clarification on the changes made in response to year one evaluation feedback:

- **Length of course**

  A key recommendation from students in year one was that the workshop should be shorter. As part of the re-development process after year one, the workshop was reduced from three hours to two hours. However, as with the Wellbeing Essentials workshop in year two, a significant number of students still felt the sessions were too long and would have preferred shorter sessions or for the sessions to be split. One student stated: *"Whilst two hours may be OK face-to-face, over Zoom it is too long. I think an hour and a half is about the maximum as I was quite tired by the last half an hour and did not engage as much as in the beginning. Either a shorter session or splitting the course into two sessions would be better."*

- **Practical application**

  Students expressed a preference for more real-life scenarios and case studies, to help them more practically with employment. One student suggested: *"More of a focus on work and information, perhaps with examples and case studies, of what happens when talking to HR/managers about mental health"*. This theme was consistent with year one, and was responded to in the re-development of this workshop by creating activities relating to conversations with managers and a case study. However some of the trainers found that there was too much content in this course so sometimes the case study wasn't covered in depth in year two.

- Additionally, students requested more information on working abroad. One student stated in year two feedback: *"It is perfect for those based in the UK, but it does not clearly address issues taking place in other parts of the world where students/job holders might be connecting from"*.

- **Larger groups**

  Students commented that they would have liked to have taken the workshop in a bigger group of students. Students said: *"Maybe a bigger group just so you could hear more people's views"* and *"I think it would have been more interesting if a lot more people turned up. However, it was extremely interactive and positive."* This feedback was raised across student courses in year one. Despite increased efforts to recruit and engage more student across the partnerships, this reflects a broader point around difficulties increasing student sign up and attendance rates.

- **Increased level of specificity to university context**

  Students would have preferred the content to be more specific to their experience as students, and of the context of their individual universities. For example, students said: *"I would focus more specifically on how the process works for LSE students"* and *"More targeted to university experience, not enough awareness"*.

3.2 Staff findings

3.2.1 Key findings: outcomes across staff courses

In year two, the Staff Mental Health Champion role was split in two so that staff could apply to be either a Champion or a Peer Supporter (in year one the Champion role was made up of anti-stigma and peer support elements). This decision was made in recognition of high workloads and to allow those without lived experience of poor mental health or mental health problems to apply for the Champion role (as peer support is founded on lived experience).

The two staff workshops delivered in the second year of the Mentally Healthy Universities programme had a positive impact on staff. The majority of staff reported improvements in their confidence and awareness across a number of key mental health and wellbeing outcome areas related to the workplace after attending the training. A summary of outcomes across the workshops are presented below, with additional detail presented in following sub-sections of this report:

Staff Mental Health Champions:

- **87 per cent (n=92)** felt confident discussing mental health with colleagues

- **87 per cent (n=92)** felt confident tackling mental health stigma in the workplace

- **84 per cent (n=89)** felt confident signposting colleagues to appropriate information and support services

Staff Mental Health Peer Supporters:

- **91 per cent (n=49)** felt confident discussing mental health with colleagues

- **82 per cent (n=47)** felt confident supporting a colleague with poor mental health

- **97 per cent (n=56)** reported they knew more about peer support

The vast majority of staff would recommend the courses to a colleague.

Course rating

The average course rating across the two staff workshops was **8.9/10**

Course recommendation

The **vast majority of staff (93 per cent)** across the two workshops were likely or extremely likely to recommend them to a colleague

3.2.2 Staff Mental Health Champions

Course outcomes

Participants indicated on a five-point scale ranging from one 'not at all' to five 'extremely' how confident they felt before and after the workshops. Subjects covered were: discussing mental health with colleagues, tackling mental health stigma in the workplace and signposting colleagues to appropriate information and support services.

Figure 22 presents the percentage of participants who reported they were 'fairly' or 'extremely' confident before and after the workshop. As you can see, an increase in confidence was reported across all three items.

Analysis showed that Staff Champions confidence on all three measures improved after completing the workshop. This finding was statistically significant. This is consistent with findings from year one.

However, evaluation forms were not filled in by participants before the workshop. Instead they were asked to answer in retrospect. This may have led to participants mis-scoring confidence before the workshop, although it still indicates that participants felt more confident overall.

Figure 22. Staff Champion confidence before and after the first workshop
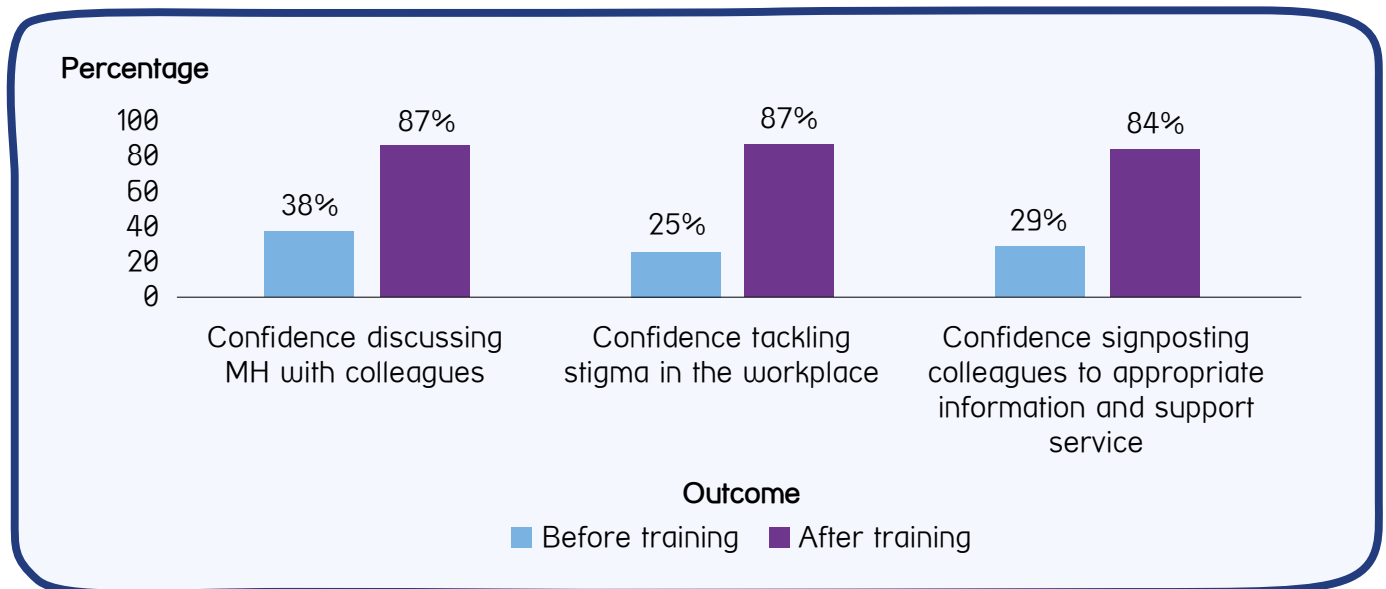
Base size=106

In-line with Mind's strategic ambition to become a proudly anti-racist organisation we ran analysis to compare outcomes by participants' ethnicity. Notable differences in the change between pre and post confidence scores were shown in two of the three variables, with white participants reporting a higher increase in confidence[6]:

- 'Confidence discussing mental health with colleagues': white participants reported a 20 per cent higher increase in their confidence after completing the session (50 per cent, n=93) than black, asian and mixed heritage participants (30 per cent, n=10).

- 'Confidence tackling mental health stigma in the workplace': white participants reported a 12 per cent higher increase in their confidence after completing the session (62 per cent, n=93) than black, asian and mixed heritage participants (50 per cent, n=10).

However, it should be noted that there were considerably fewer black, asian and mixed heritage participants (n=10) than white participants (n=93)[7] and caution should be applied when drawing conclusions from these findings.

Course feedback

The vast majority of participants said they were likely or extremely likely to recommend the training to a colleague (93 per cent n=98), and the average rating of the workshop was 8.9 out of 10 (n=106). Course rating and recommendation was comparable across both years of programme evaluations.

When asked what they liked about the course, the following themes were seen in the 100 short comments provided. Key themes in feedback on this question were largely consistent across two staff courses in year two. Comparison with year one cannot be drawn as this question was newly introduced for year two.

- **Knowledgeable and supportive trainers**

  Participants felt the course trainers were knowledgeable, supportive and able to run an effective and impactful training session. One participant stated: *"Everyone was kind and supportive and the presenters were clear and knowledgeable."* And another shared *"[The trainer] is a likeable person and you feel you can discuss anything with them."*

- **Opportunities for discussion and networking with colleagues**

  The opportunities for discussion and networking with colleagues within the session was well received. One participant shared: *"It was great to meet with a group of peers with whom I hope to be able to build a strong network."* And another stated: *"The group discussions were really beneficial where attendees discussed their own experiences and opportunities for improvement."*

- **Non-judgemental and inclusive environment**

  Participants valued the training environment as a non-judgemental space in which to share and learn. One participant shared: *"I felt free to say anything without judgement"* and another stated: *"It was really inclusive, everyone in the group had the opportunity to talk and share their thoughts/ideas."*

- **Practical and interactive content**

  Participants liked the use of practical and interactive activities such as role plays and case studies. The session activities were well received with participants stating they liked: *"The nice use of breakout sessions which allowed us to have a bit more interaction with some colleagues on the course"* and *"the well balanced mixture of theory and practical tasks in groups".*

[6] All other variables differed by five per cent or less when outcomes were compared by ethnicity

[7] Note: Three per cent of participants preferred not to share their ethnicity

When asked what improvements would make this training worth a 'ten out of ten' rating, several common themes emerged among the 56 short comments provided. All of these themes were consistent with feedback received in year one. We have clarified changes made in response to year one feedback:

- **More clarity around the role**

    Feedback from year one highlighted that staff would have benefitted from greater clarity around what was expected of them within the role. Also, how the role interacts with other roles within their university – for example Mental Health First Aiders. This feedback was taken on board and we created an information pack outlining the role. This was reviewed by university staff and provided to staff. The training content was also revised ahead of year two. Despite information about the scope of the Champions role being included in recruitment materials and within the content of the training, some staff feedback in year two highlighted there was still uncertainty from some attendees around the scope of the role. One respondent said *"A better wrap-around explanation of the expectations of the role (both what it is, and what it isn't expected to be). Towards the end of day two, there still seemed to be some confusion about what was expected of the MHCs".*

- **Length of session**

    Some staff felt the session length was too long and not enough breaks were given, especially when delivered remotely. One respondent said: *"A bit shorter, three hours is a long time to be on Zoom".* This comment was also made in year one of the training, and as a result the training was reduced by an hour and split over two sessions.

- **Practical techniques**

    Staff wanted to learn more practical techniques they could put in place in their roles, through case studies for example. Participants said: *"I would like more specific ideas about what we can do and what others have done as Champions – I still don't feel that confident in this."* and *"More case studies to discuss".* This feedback was also

raised in year one. To address it activities from year one Champions were incorporated into the participant handbook. We also added a video into the training with a Champion sharing their experiences. However, some attendees from year two still highlighted a desire for more practical activities in the training session.

- **Increased level of mental health detail**

    Some staff felt the content presented was too low level, with many outlining their previous mental health expertise and/or lived experience. One respondent stated: *"I felt some of it was pitched as if we knew nothing about mental health (and this might be intentional as some participants may not). However, I think by virtue of the fact that we have all volunteered to be Wellbeing Champions, we will have existing knowledge".* This theme was consistent with year one feedback, and was addressed in re-development ahead of year two by removing the majority of the introductory mental health information from the course and signposting participants to relevant resources if they wanted this information.

Individual impact

Outside of the programme evaluation, staff feedback on the personal impact of carrying out the Staff Mental Health Champion role.

"It's rewarding and also it helps you as an individual pay more attention to your own approach to mental health. You also learn so much from the training and networking events which simply empower you to drive things forward."

Staff Mental Health Champion

"You feel you're part of something, trying to make changes to the place you work. It gives you purpose and an identity beyond your day-to-day work and that's no small thing. You can see the impact you're having and it is really satisfying. Even the smallest action, whether it's a coffee morning or a conversation, can make a huge difference, and I've seen it."

Staff Mental Health Champion

3.2.3 Staff Mental Health Peer Supporters

Session outcomes

Participants indicated on a five-point scale ranging from one 'not at all' to five 'extremely' how confident they felt before and after discussing their own mental health with colleagues and supporting colleagues with poor mental health. Participants also indicated on a three-point scale ranging from one 'I know a lot more' to three 'I know the same amount' how their understanding of peer support had changed as a result of the training. Figure 23 presents the percentage of participants who reported

they were 'fairly' or 'extremely' confident before and after attending the workshop. As you can see, an increase in confidence was reported for both items. In addition to this, the vast majority of participants (97 per cent) reported they knew a little or a lot more about peer support after attending the training.

Analysis showed that Mental Health Peer Supporters confidence on both measures improved after completing the workshop. This finding was statistically significant. This is consistent with findings from year one.

Figure 23. Staff Mental Health Peer Supporter confidence before and after the second workshop
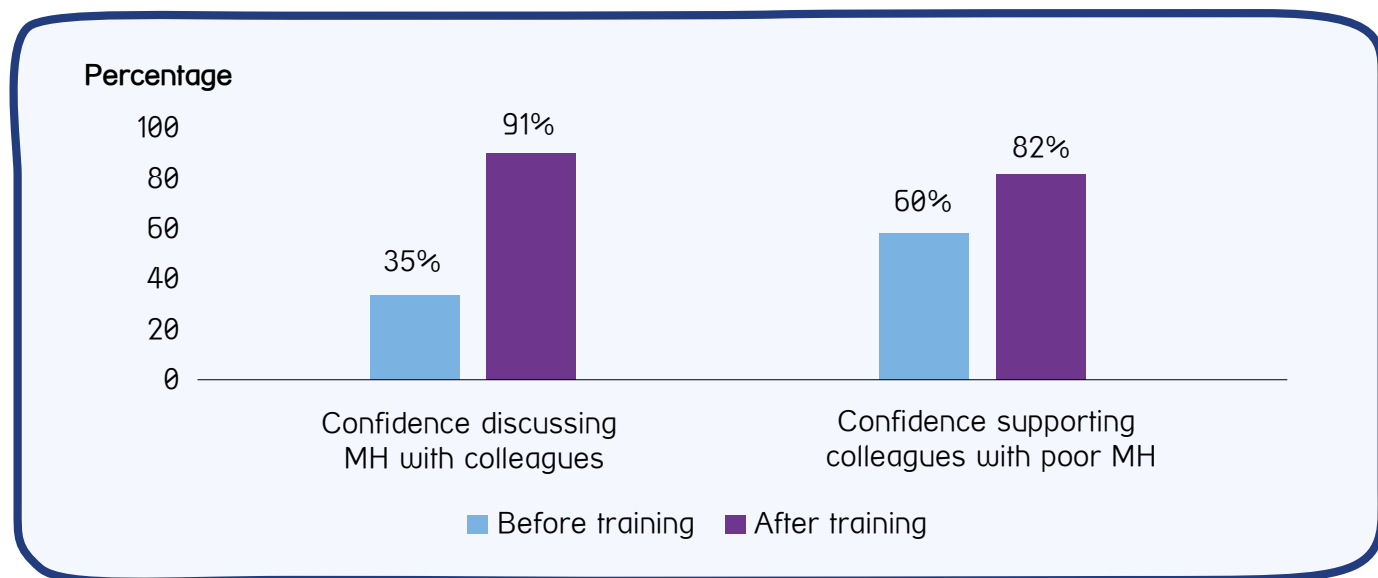
Base size=57

In-line with Mind's strategic ambition to become a proudly anti-racist organisation we ran analysis to compare outcomes by participants' ethnicity. A notable difference in the change between pre and post scores was shown for one of the three variables, with black, asian and mixed heritage participants reporting a higher increase in confidence[8]:

- 'Confidence discussing mental health with colleagues': Black, asian and mixed heritage participants reported a 12 per cent higher increase in their confidence after completing the session (60 per cent, n=5) than white participants (48 per cent, n=48).

However, it should be noted that there were considerably fewer black, asian and mixed heritage participants (n=5) than white participants (n=51)[9] and caution should be applied when drawing conclusions from these findings.

[8] All other variables differed by five per cent or less when outcomes were compared by ethnicity

[9] Note: Two per cent of participants preferred not to state their ethnicity

Session feedback

Almost all participants said they were likely or extremely likely to recommend the training to a colleague (98 per cent n=45), and the average rating of the workshop was 9.1 out of 10 (n=57). Course rating and recommendation was comparable across both years of programme evaluations.

When asked what they liked about the course, the following themes were seen in the 103 short comments provided. Key themes were largely consistent across two staff courses in year two. Comparison with year one cannot be drawn as this question was newly introduced for year two.

- **Knowledgeable and supportive trainers**

    Participants shared that they felt the course trainers were knowledgeable, supportive and were able to run an effective and impactful training session. One participant stated: "The hosts have shared their knowledge and guided the participants in a natural and empathetic way, building our confidence and giving support and reassurance on all topics covered."

- **Opportunities for discussion and networking with colleagues**

    The opportunities for discussion and networking with colleagues within the session was well received. One participant shared: "It was great to be able to network with likeminded colleagues and discuss ideas as well as train together". Another participant said they liked: "Being able to discuss with others and get a better understanding of the variety of views, boundaries and contexts people came from."

- **Safe and non-judgemental environment**

    Participants valued the training environment as a safe and non-judgemental space from which to share and learn. One participant shared: "I felt that the framework for the training gave us a safe and respectful space to discuss the issues that were raised. (...) it also felt like a 'safe space' in the sense that we could step away when needed and knowing the facilitators would check in with us if needed was also reassuring.". Another participant stated that: "You could tell an open environment was created as everyone participated well and it is one of the most interactive meetings I've been to with people really getting involved and contributing. It felt safe to contribute."

- **Practical and interactive session**

    Participants like practical activities such as case studies, as well as interactive elements such as break out rooms. Participants shared the following: "I liked all the tips to deal with other colleagues' support but also how to support ourselves." And "The exercises to make us think how we would deal with a certain situation, especially the impact of trigger points for our own wellbeing."

Too few feedback comments were left in relation to what participants felt could be improved about the course to present a summary of themes.

Individual impact

Outside of the programme evaluation, staff feedback on the personal impact of carrying out the Staff Mental Health Peer Supporter role.

"What is so great about this scheme is it allows people to get in contact with Mental Health Peer Supporters to get that support in work, whether it be just a friendly ear to off load to or someone who can advise a little on where that person can get additional help and support. Sometimes just having someone tell you it's OK to feel as you do and listen is enough. A little can make a big difference."

Staff Mental Health Peer Supporter, University of Greenwich

"Helping others is incredibly rewarding, just to know that you are helping them to feel better and know that they have some support but also, it is self-gratifying when you find yourself knowing and imparting useful information which you really did not know you had! Additionally, you are constantly learning and adapting as no situation or person is the same, so it builds on your own life skills."

Staff Mental Health Peer Supporter

4. Extended student delivery

During the programme, a number of approaches were put in place by Mind, local Mind Coordinators and University Leads to increase engagement and raise awareness of the student courses. Some of these approaches are presented below, along with feedback:

Approach	Stakeholder responsible	Explanation	Feedback and/or impact
Student ambassadors Throughout year two	Local Mind Coordinators	Student Ambassador roles were created by some local Mind leads to increase student engagement through peer advertising, awareness raising and word of mouth.	Local Mind coordinators shared feedback that they felt the roles were beneficial for building relationships with the student body and increasing general awareness of the programme. See section 5.1 'benefit for students' for further information.
Student animations January 2021	Mind	A series of three-minute animations on student mental health[10] were designed to increase Mind's national reach for students. The animations were reviewed by student reviewers before being created.	The animations were promoted in the pilot universities to encourage students to attend the workshops. There have been over 12,000 views of the animations.
Student Mental Health Hub January 2021	Mind	A comprehensive hub[11] for all of Mind's student content was created. This aimed to create a curated space for trainers to sign post to and for students beyond those attending the partner universities to access.	This has been met with positive feedback and has created an easy place for local Minds to signpost students to after their attendance on the Mentally Healthy Universities courses. The hub has been accessed 40,000 times since its creation in January 2021.
Mentally Healthy Universities Innovation fund Autumn 2020	Mind	The fund was launched to provide funding for local Minds to help improve their student engagement and attendance rate. Three projects were funded across three local Minds: 1. Cambridge, Peterborough and South Lincolnshire Mind: Social media/ influencer campaign and incentive trial 2. Bath Mind: Taster sessions and co-host resourcing for extra evening sessions 3. Bromley, Lewisham and Greenwich Mind: Extra promotional materials, evening sessions and extra training on mental health awareness days	The Cambridge, Peterborough and South Lincolnshire Mind campaign gained a lot of engagement through Instagram and increased the recognition of the programme but unfortunately not sign-ups to the courses Incentives and training on mental health awareness days didn't appear to be an effective way to engage students Extra materials and resources for taster and evening sessions were well received and helped the local Mind increased their attendance rate.

[10] See: mind.org.uk/studentvideos

[11] See: mind.org.uk/students

5. Process learning

Process learning interviews were conducted with University Leads and local Mind Coordinators in year two. The interviews aimed to gather feedback on what had worked well. Also, what could be improved for future programme delivery, what had changed from year one and the impact, as well as sharing insights to inform the sustainability and future of the programme beyond the pilot.

A number of key themes emerged in relation to the impact of the programme, programme set up, programme delivery, programme content, as well as legacy and sustainability of the programme. Both positives and negatives of the programme were reflected, as well as suggestions for improvements. These key themes are presented in the following sections of this report (6.1–6.5), supported by quotes from local Mind Leads and University Coordinators.

The majority of the learning highlighted during year two interviews was consistent with the feedback provided during year one. However, several new themes emerged, largely focused on the impact of the coronavirus pandemic on programme delivery as well as considering sustainability and legacy of the programme after the programme pilot. In addition to this, themes were consistent with the feedback given in section five. In particular, around the length of the workshop sessions, mental health literacy of participants and the preference for content more tailored to their specific institution.

5.1 Impact of programme

Benefits for staff

Several key benefits for staff training to be Staff Mental Health Champions and Staff Mental Health Peer Supporters were identified, including the following. These were consistent with findings from year one interviews:

- both roles encouraged open discussions around mental health:

  "Often this was the first time staff were properly talking about their own experiences of mental health in a very honest way and really opening up."

  Local Mind Lead

- developing a better work-life balance and putting workplace boundaries in place to improve wellbeing:

  "The most important thing that they [Staff Champions] did at an institutional level was push[ing] for the university to introduce something called 'It's Okay To' and that was all about how we promoted our wellbeing during this pandemic, and the 'It's Okay To' was things like, 'It's okay to switch off your computer, go outside for a break'. 'It's okay to have meeting-free days'."

  University Lead

- both roles made proactive contributions to tackling stigma and changing culture within their institutions.

  "I think there is a clear stigma there to talking openly about wellbeing, particularly maybe from academic staff. And so I think that's been so great that it's peer-led in some ways and that they're really trying to reshape that and open those conversations."

  University Lead

- The Staff Champion roles were well received and seen as a key strength of the programme in year two. Feedback highlighted that changes in the recruitment process for these staff roles, in response to year one feedback, had a positive impact on staff engagement:

  "We put much more commitment into that marketing and we implemented an application process. (…) We got way more engaged with Staff Champions this year, who are continuing to come to the meetings and really, like, commit to the programme, and it's just a completely different experience this year compared to last year."

  Local Mind Lead

Benefits for students

Several key benefits for students were identified, the following were consistent with feedback from year one interviews:

- encourages students to be open to discussing mental health:

  "I think just creating the space for students to talk more openly about mental health is amazing."

  Local Mind Coordinator

- promotes a sense of community and peer support, which was felt to be especially valuable during coronavirus lockdowns:

  "We've got these student ambassadors, who are just people who enjoyed the course and want to talk about it. We send them a t-shirt, we send them some social media stuff. (…) One of them has done a podcast, and they're involved in some fundraising. So, that's been a really nice way of building relationships with students, and the local Mind."

  University Lead

An additional theme was present in year two interviews:

- increasing knowledge on where to seek mental health support and sharing lived experience with others:

  "It worked very well as a catalyst to further support as well for a lot of students. So, it might have been that they found other people who felt the same as them, or that they picked up on an idea that they hadn't come across before, and then they went on to seek further support with their mental health or to seek out further information."

  Local Mind Lead

5.2 Programme set up

Marketing

Feedback on marketing, specifically internal promotion, was more positive in year two compared to year one. Universities shared successes, but also reflected on how internal communication could be further improved for future delivery:

- internal communication and promotion improved in the second year of the programme:

  "It flowed a bit better because we knew everyone in the university who we needed to get in contact with, and we worked a lot closer with internal comms this year. I think that was a result, not only of Covid, but of being more established within the university and having those closer links."

  Local Mind Coordinator

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

"I think more engagement with the SU, I met with them in year one and had a great sit down. I met with them again in year two actually, but there wasn't much collaboration then going forward. It was very much they were great, they put it on their website when things were going on. But I think if almost we could really get into the clubs and societies and almost have it as part of, I don't know, an induction to joining or something, which would be really useful."

Local Mind Coordinator

"We at BLG Mind took it upon ourselves to create six promotional videos for it. (...) And we utilised those as a way to promote it virtually."

Local Mind Coordinator

- ensuring buy-in at a senior level within the university from the start of future programme delivery.

Challenges in programme organisation

Challenges were identified across institutions which sometimes resulted in barriers to successful delivery.

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

"Universities are really difficult to work with because there is very little continuity within the different schools and services. It's such a huge network of people. [...] It's just about finding the right people, and just keep trying until you've got the right people interested."

Local Mind Coordinator

- this was consistent with year one findings. Local Minds joining in year two had additional challenges as delivery moved online and university staff were overstretched as a result of the coronavirus pandemic.

In-person operational and practical considerations highlighted in year one feedback (for example room bookings, practical considerations such as space to store materials) were not present in year two. That's because the programme was delivered remotely in response to coronavirus. Reflections on remote working are included in section 6.3.

- in year two interviews, enablers and best practice for effective programme delivery were outlined (like setting clear roles and responsibilities for all stakeholders, regular communication between stakeholders, embedding external delivery staff within internal universities' communication systems and giving external staff physical desk space in universities):

"I think our university has been really great to consistently communicate [with]. I was embedded into their wellbeing team, so I had my own university email address, I could access their portal and set up on all their Teams and things like that. (...) I was even based on the campus three days a week in an office there and it just helped make it flow so much easier and really get to know people I was emailing. I had actually met them in person which is great."

Local Mind Coordinator

5.3 Programme delivery

Remote vs. in person delivery

The move to entirely remote programme delivery had both benefits and challenges in year two:

- benefits of remote programme delivery
  Increased accessibility (for example for disabled students, international students, those with caring responsibilities), increased anonymity, easier to schedule attendance around other commitments, no travel required and less practical considerations such as room booking

  "It was more accessible for students who were abroad (...) it also meant that we were able to do things such as deliver the staff training with the ASL translators, which was really helpful for getting more people involved."

  Local Mind Lead

- challenges of remote programme delivery
  Safeguarding processes, trainer engagement and building rapport with participants, 'Zoom fatigue', less interactive, harder to network and connect with fellow participants, and less confidential

  "In terms of a safeguarding perspective, it is a lot easier when you're face-to-face. We had situations last year where it was quite clear a student at the end of the session was struggling a little bit and we, you know, we couldn't even just walk them over to Student Services and book in an appointment with them. It felt like we were able to hold them through that moment, whereas online it has been trickier."

  Local Mind Lead

A blended model of remote and in-person delivery was felt to be the optimal format for future programme delivery in terms of accessibility, practicality and flexibility, taking into account learning from the past year.

Resource and capacity

A lack of resource and capacity from both local Mind Leads and university coordinators was highlighted as a key barrier in programme delivery and management. This emerged as a new theme in year two interviews, with a number of impacts discussed:

- resource demands on local Minds and universities increased due to coronavirus
  "Most people have ended up doing far more this last year because of Covid-19 and then had this on top has felt like just quite hard going to get it all done."
  University Lead

- resource demands caused issues with clarity around roles and responsibilities for leads and coordinators
  "If we weren't expected to have regular contact with local Mind, then making that clear up front."
  University Lead

- higher level of funding required for future delivery to ensure adequate resourcing and capacity across all delivery partners, especially within universities
  "It does require someone who has the time to lead on it because I think if we were trying to deliver this alongside the services we were already delivering, we would need somebody who can dedicate the time to it."
  University Lead

Session length and format

Length and format of the sessions was a prominent theme. Leads and Co-ordinators made suggestions around the session times. The following were consistent with feedback from year one interviews. All three of the following suggestions were implemented to some degree in year two.

- start the programme earlier in the year to capture Freshers' welcome activities (note: this was implemented across several partnerships in year two):

  "It's a really good resource for introductory Freshers' Week modules."

  University Lead

- shorten the length of sessions further (note: student sessions were shortened from three hours to two hours in year two, however it was felt they could be further condensed):

  "Thinking about how it fits into student timetables. So, a lot of the workshops are quite long and students can't commit to such a long session on a regular basis, or don't feel as though they would like to because they have other things to do."

  University Lead

- hold more evening sessions for placement students and students with caring responsibilities (note: this was implemented across several partnerships in year two):

  "Where you've got students on placement and things like that then evening sessions might be a way forward."

  University Lead

An additional theme was present in year two interviews:

- offer shorter standalone 'bite size' sessions on specific topics to increase accessibility and engagement:

  "Making them more like bite size sessions, you know, about managing anxiety or dealing with low mood. Maybe taking them away from these generic courses and maybe having more of a suite of courses that you can offer specifically to different groups.(...) It's just finding a way to really mould some very basic concept into, actually, what the reality of the student experience is in bite-sized ways."

  Local Mind Lead

Relationship building

Leads and Co-ordinators felt that meeting others in the project had been helpful to them and that they wanted more opportunities for this. The following were consistent with feedback from year one interviews:

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

  "It's been a while since we've had those, sort of, national meetings, when all of the partners meet up and share experiences. And I would really value that as well, so that I can find out what happened elsewhere."

  University Lead

- creating more opportunities to share best practice and programme learning between universities.

    Quarterly meetings for staff leads responsible for taking forward the Mental Health at Work Commitment took place throughout the two years. In response to feedback from year one, time in year two meetings was allocated to discuss the programme more widely. Feedback across the two years highlighted that more opportunities to network with other student leads would also have been appreciated:

    "Talking to the other universities about what they've done (…) it is just that connection with people, so that we're, kind of, aware of what really good practice is."
    University Student Lead

Engagement of staff and students

Various challenges in engaging staff and students were mentioned. A lack of engagement from students was consistent with year one interview feedback. However the reasons underlying this differed in Year Two. For staff engagement, it was felt this improved in year two. Additional positive examples of engagement were also shared in year two interviews:

- low student sign ups and high dropout rates
    Leads and coordinators felt the key reasons underlying this were: workshop sessions were too long for students to commit to, students prioritising assessed work, work/life balance, impact of coronavirus and fatigue with remote engagement.

    "I think students always prioritise their assessed work, and often it's left to the last minute. And also, a lot of our students, because our student body isn't the traditional university at all it's […] a relatively small percentage of the 18 to 21 year olds. So a lot of our students have got children, so therefore have been doing, sort of, home schooling and the like. So it's that work-life balance."
    University Lead

"I also think that we have to acknowledge not only the impact of Covid but also the impact of the changing government guidelines. (...) What we've seen for other students is that even when they're working from home, they still engage but for some of them, engaging from home is more difficult because of confidentiality, their parents might not know, so it might have impacted."
University Lead

- mixed views on whether remote delivery had a positive or negative impact on student engagement:

    "As the year has progressed, students have just got increasingly fatigued with online stuff. They don't want it. They were actually getting quite frustrated with it. I think we really did try this year to be as creative as we could to promote engagement and I just think it was a reflection of the difficult year that a lot of students have had."
    University Lead

    "We had very low turnout in the first year so I was under the impression that obviously moving to online would be another barrier. (…) I don't know if it's because people prefer online or it's just been because we're in lockdown, students have had less time doing the things they really want to do and more time online. Our numbers have really increased over this academic year and we are finding, particularly with students that perhaps don't want to attend a face-to-face course, this has been a really nice way to take away that barrier of participation."
    Local Mind Lead

- most staff and students who engaged had prior experience of mental health problems, meaning that the programme may not be reaching those who might benefit from it the most (see 'content' subsection for further discussion)

- improved engagement with Staff Champion role in year two (as covered in 'benefits to staff' section)

- positive reputation of Mind and independent delivery increased engagement

  "When you know it's with an established organisation like Mind, half your work's done for you, isn't it because people know that it's a good programme."
  University Lead

Mind (as a national body)

Consistent with year one feedback, comments around Mind's support were mostly positive. Leads and co-ordinators felt the team had supported them well in a challenging year for the project:

"It's been a very challenging project, we've still managed to keep a very nice relationship with the MHU and the Universities Team. And they have tried to help as much as they can where they can."
University Lead

However, across both years' feedback it was noted that for some universities the timeline for pilot activity didn't allow for alignment with wider activity around mental health and wellbeing (for example freshers' week and induction activities). For future delivery, consideration should be given to how different institutions could adapt the timing so it complements other initiatives for students and staff.

5.4 Programme content

Flexibility

A key theme in year two interviews was the lack of flexibility for co-ordinators to adapt the programme to their university's specific needs. This was seen as a key barrier to engagement across both years of delivery. For example:

- lack of flexibility in programme content was a barrier for local Minds in gaining buy-in and building collaborative partnerships with universities

  "Because the programme is already so set out it is actually us coming and delivering it, and so I think it's been quite hard to build that partnership where we can't really take any suggestions from the university."
  Local Mind Coordinator

- universities need to be able to adapt the content and delivery to their specific students

  "Each individual university has its own needs and its own culture and I think it would have been great if there had been maybe a little bit more leeway or flexibility around us making changes quickly when we saw the need to."
  Local Mind Coordinator

Content

Certain adaptions to the course content were suggested in year two interviews, the majority of these were consistent with year one feedback including:

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

  "Their (students) mental health literacy is a lot better than it was, say, ten years ago. (…) It felt like we didn't quite get the engagement with it. People, kind of, came and then disengaged with the programme."
  Local Mind Coordinator

- avoid excessive duplication in content with universities other wellbeing activities

  "There's been some duplication, particularly around the action plan, because it didn't take account of the fact that we already had an implementation plan. It was, kind of, assuming that you were starting from nothing, and we weren't."

  University Lead

Leads and coordinators also suggested additional content/topics they felt would be beneficial to staff and students in future programme delivery. These included:

- supporting other people's mental health

  "A big one for students, in particular, is they're worried about their friends, as well, they're worried about their housemates. And I think, if we were running just an hour course maybe on looking after your friend under stress or just doing some basic mental health first aid-esque activities about supporting someone in suicidal stress, in crisis, I think that would be really popular."

  University Lead

- student-specific issues

  "Imposter syndrome, competitive culture and the concept of failure (...) they are very, very high achieving students. And so, [think about] what does happen if we face failure, or we don't get exactly what we want, and how do you deal with that?"

  Local Mind Coordinator

- expectation setting in accessing mental health services

  "Better information around what to do if you can't access support for your mental health. So, we had quite a few students who have self-referred, or their GP isn't open, and they have really long waiting lists, or they can't find the support that they want."

  Local Mind Coordinator

5.5 Sustainability and legacy

Enabling and improving future delivery

A number of suggestions were made in year two interviews to enable and improve future delivery of the programme after the pilot. Many of the factors interviewees highlighted have been discussed in this report. The key factors highlighted were:

Enabling future delivery:

- increased resource and capacity for stakeholder leads (see section 4.3 – 'resource and capacity')
- increased flexibility of programme delivery (see section 4.4 – 'flexibility')
- continued independent evaluation of programme outcomes and impact

Improving future delivery:

- further decrease the length of workshop sessions (see section 4.3 – 'session length and format')
- improve internal communications and marketing of programme (see section 4.2 – 'marketing')
- ensure mental health literacy of students and staff is reflected in programme content (see section 4.4 – 'programme content')
- increase level of co-production with students and staff in future programme content to ensure support is based on lived experience (note: co-design with students was conducted for the current pilot, but future programmes should look to improve and increase involvement of intended beneficiaries within programme design and development)

  "More input from each individual university student, if they could get a selection of students who've been on the programme to say 'OK, these are exactly the changes I would make, based on my experiences being a Greenwich student',"

  Local Mind Coordinator

- increased consideration of the needs and experiences of marginalised groups (for example people from racialised communities, LGBTQIA+ staff and students, disabled staff and students)

    "Looking at our demographic of students, it's really, really diverse. (…) It's around that culture competence piece, isn't it, in terms of having that there and also being aware that different people experience things differently, and have different barriers and different things going on for them as well that contribute to their mental wellbeing and their mental health."

    University Lead

- improve integration of programme delivery with universities' existing wellbeing offer and services

    "It needs to be really clear about what the offer is, and how it sits with the other interventions and stuff that are available within the university."

    Local Mind Lead

- further develop peer support element of programme for students

    "I'd love to develop that peer element of it to actually get students trained up to deliver the courses, because that works really, really well. Especially when you think some of the students who want to be teachers, or they want to work in psychology, so they've, kind of, got this investment to develop themselves but also they have the lived experience of being a student at a really stressful time."

    Local Mind Coordinator

- embed programme long term to enable culture change

    "A year is too short in an academic year for really strong change within the culture. (…) I think it just needs a longer project to really develop those kind of relationships and to keep going from the learnings."

    University Lead

- ensure wellbeing staff working across universities are consulted and involved in programme development

    "All of the interested parties have got to be involved at the early stage. And then we can get the joint working to work effectively."

    University Lead

6. Conclusions

A summary of key learning from the evaluation of student and staff outcomes and feedback in year two is outlined below:
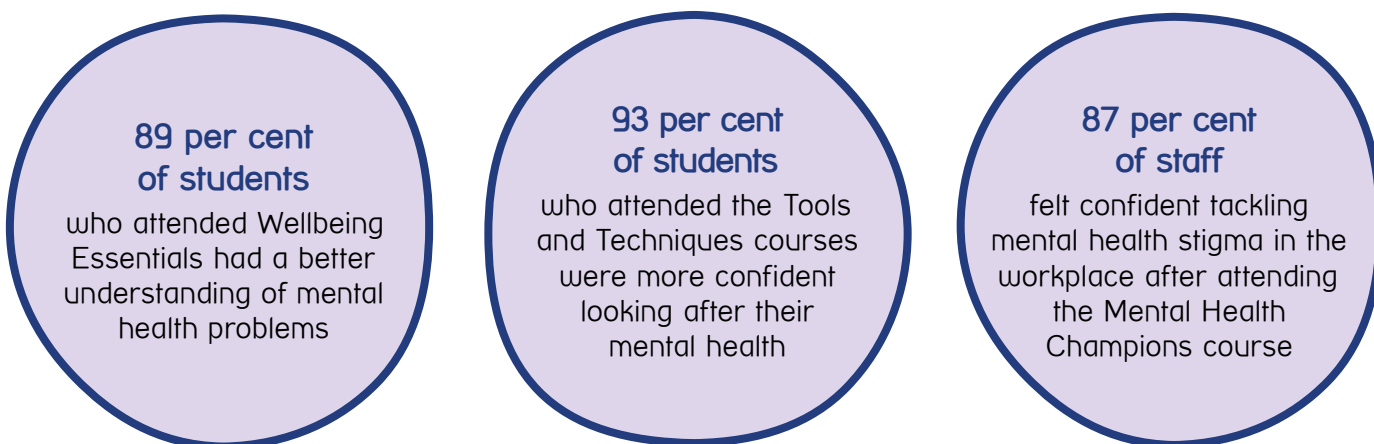
1. Profile of participants

Students: The majority of students who engaged with the programme evaluation were UK/EU students (86 per cent) who were female (73 per cent), white (88 per cent), aged 16-24 (77 per cent) with personal experience of mental health problems (42 per cent).

Staff: The majority of staff who engaged with the programme evaluation were administrative (36 per cent) or academic (27 per cent) staff who were female (78 per cent), white (88 per cent), with a broad age range, and with personal experience of mental health problems (45 per cent).

2. Impact of programme

The majority of both students and staff reported that engagement with the programme workshops had a positive impact on their understanding, confidence and awareness across a number of key mental health and wellbeing outcome areas.

89 per cent of students
who attended Wellbeing Essentials had a better understanding of mental health problems

93 per cent of students
who attended the Tools and Techniques courses were more confident looking after their mental health

87 per cent of staff
felt confident tackling mental health stigma in the workplace after attending the Mental Health Champions course

Local Mind leads and University coordinators felt that key benefits of engagement with the programme for students and staff included:

Students: Encouraging open discussion of mental health and sharing lived experiences, promoting a sense of community and peer support, and improving knowledge of where to seek mental health support

Staff: encouraging open discussion around mental health, developing a better work-life balance, and making proactive contributions to tackle stigma and change culture in their institutions.

The vast majority of students (87 per cent) and staff (93 per cent) were likely or extremely likely to recommend the workshop they attended to a friend or colleague.

3. Need and value of programme

The Mentally Healthy Universities Programme was implemented in 2019 in response to a need to support both student and staff mental health and wellbeing within universities. Process learning feedback in year two of programme delivery highlighted that the coronavirus pandemic had further increased the perceived need for the delivery of mental health and wellbeing support from both universities, students and staff. This highlights the ongoing need to provide mental health support to university staff and students.

The independent support delivered by Mind within the current programme was seen as a key strength, overcoming barriers and concerns students and staff may hold around confidentially accessing mental health support from their institutions. This highlights the strength of external provision in future programme delivery.

4. Remote delivery model

Almost all students and staff attended the programme workshops remotely in the second year of delivery due to coronavirus restrictions. Although some benefits of remote delivery were highlighted, it was felt that the offer of face-to-face delivery remained of crucial importance for the success of future programmes on mental health and wellbeing. A blended delivery model of face-to-face and remote engagement was seen as ideal for increasing accessibility and flexibility, while retaining the benefits of in-person learning.

5. Areas for development

Areas for development in future programme delivery highlighted by students and staff were largely consistent across both years. Key themes included:

- increasing flexibility for institutions to tailor content to their cohort of students and staff

- co-producing future programme content with students and staff to ensure support is based on lived experience and reflects the needs and preferences of beneficiaries

- key areas of consideration highlighted in this report include ensuring course content reflects the mental health knowledge and literacy of attendees, and reviewing the length of sessions and courses

- improving integration of programme delivery with universities' existing wellbeing offer and services

- further developing peer support element of programme for students.
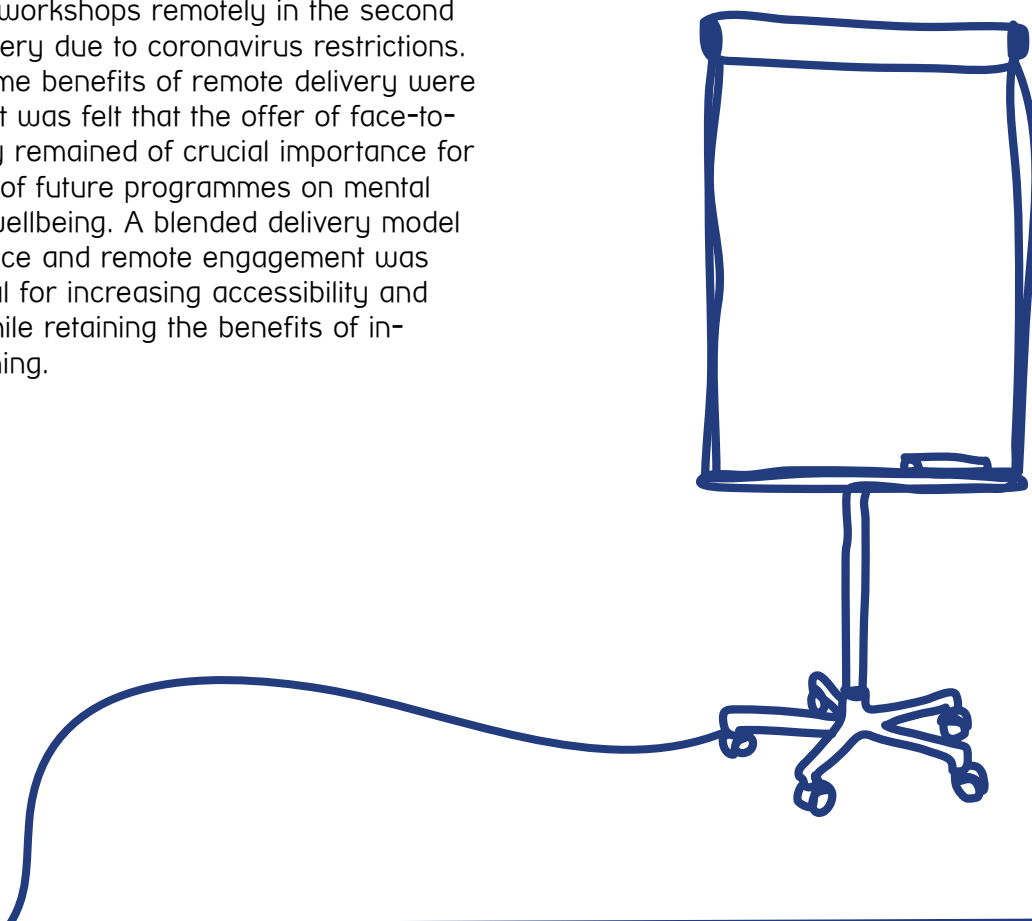
7. Recommendations

Based on the evaluation findings summarised in this report, and taking into account broader learning from programme delivery, the following recommendations are made to inform Mind's future work with 16-25 year olds. Recommendations for the higher education sector and government are also presented.

The recommendations made in the year one evaluation report, and a summary of action taken by Mind to address these during year two of the pilot, are presented in Appendix 2.

Recommendations for Mind:

1 **Offer a blended model of delivery in future programmes**

Use a blended model of remote and in-person support in future programme delivery, in order to retain the accessibility and flexibility benefits of remote delivery whilst retaining the benefits of in-person learning.

2 **Prioritise engagement from marginalised communities**

Linking to National Mind's strategy for 2021-24, and reflecting process learning feedback from the current report, future programme delivery should prioritise increasing engagement from participants from lower socioeconomic groups and racialised communities. Key enablers for this will be effective partnership working with specialist community organisations and ensuring programmes of activity are coproduced with these communities to ensure programmes appeal to, and meet the needs of, those who can most benefit from targeted support.

3 **Ensure future programmes of activity are adequately funded and resourced**

This will ensure sufficient capacity across all delivery partners, especially for stakeholders within higher education institutions where high workloads mean external work is often deprioritised when capacity is low.

4 **Prioritise and improve co-production processes with intended beneficiaries for future programmes**

Ensure adequate time, resource and funding is allocated to conduct co-production with intended beneficiaries to ensure that programmes are rooted in lived experiences and reflect the needs and preferences of those accessing them. Although co-design of course content was carried out with students and staff in the current pilot, there is a need to build and improve processes in future programme development. Co-production should be implemented in all stages of service design and development, from programme design and set up right through to programme evaluation and dissemination of findings.

5 **Programme delivery to be two years as a minimum**

When agreeing programme length with funders, request a minimum of two years to enable greater culture change within institutions.

6 **Continuous programme improvement**

Alongside co-production, use feedback from students, staff, local Mind Coordinators and University Leads outlined in this report to inform continuous programme development and improvement. Standout recommendations include:

- increase flexibility of programme content and delivery. There is a need to provide institutions with the flexibility to tailor the content of courses, as well as the delivery format, to their cohort of beneficiaries

- deliver shorter workshops and standalone 'bite size' sessions tailored to the needs and preferences of students

- further develop peer support element of programme for students

- continue independent evaluation of future programme outcomes.

Recommendations for the higher education sector:

1 **Prioritise supporting staff with their mental health**

Universities should sign the Mental Health at Work Commitment and embed the six standards within their institution. We have produced guidance to support with this which draws on learnings from our pilot universities. The Commitment will support universities to address the 'Work' domain (staff wellbeing and development recommendations) of the whole university approaches mentioned in point six.

2 **Invest in providing training and tools for students**

Mental health training, information and support should be provided throughout student's university experience, not just at the start. Institutions can share our Student Mental Health Hub which has lots of information, videos and animations to support students with learning to manage their mental health.

3 **Key stakeholders from universities should be identified and informed about their role from the beginning of programmes**

All key stakeholders within higher education settings should be involved when applying to be involved in programmes and from the outset of programme set up. This should include ensuring programmes align with existing mental health and wellbeing services, and that clear roles, responsibilities and accountabilities are set.

4 **Implement Peer Supporter and Mental Health Champion roles**

As shown in this report, supporting staff to take up these roles can have huge benefits for staff and universities. Support should be provided to carry out these roles, for example, giving staff dedicated time for the role, providing a quiet and confidential space internally to talk to their peers, and raising the profile of their awareness raising activities or celebrating their achievements.

5 **Senior leadership prioritise mental health and support future initiatives**

Higher education settings should encourage senior management to prioritise the mental health of their staff and students. Take a look at our guide for senior leaders.

6 **Take a whole university approach**

Apply for Student Minds' University Mental Health Charter and take forward Universities UK's Stepchange: mentally healthy universities.

7 **Review and address the systematic causes of mental health problems**

Higher education institutions should review and address the causes of mental health problems within their specific demographic of students and staff. Factors contributing to poor mental health are likely to differ across demographics however key issues for staff could be high workload and fixed term contracts and for students this is likely to cover issues such as workload, finances and accommodation.

Recommendations for government and research institutions:

1 Ensure mental health and wellbeing in the education system is prioritised and sufficient funding is allocated for support services, training and resources. This includes staff as well as students.

2 Invest in research on best practise approaches to support the mental health needs of students from a range of backgrounds. This should include international students, students from racialised communities, LGBTQ+ students, disabled students and those with caring responsibilities.

3 Invest in further research to evidence the causes of poor mental health in university staff, with a focus on marginalised groups where levels of poor mental health are more prevalent (for example staff from racialised communities, and from lower socioeconomic backgrounds).

8. Next steps for Mind

The Mentally Healthy Universities pilot ends on 31 August 2021. Mind has taken the decision that as part of our strategic priority of working with young people with a focus on trauma, we need to take a needs-based approach for 16-25 year olds more generally. This will involve considering not just the university setting but in-employment and in-community settings. Therefore Mind will not continue the Mentally Healthy Universities Programme in September 2021 but instead work with young people directly to explore the mental health needs for this age group more broadly. This work has been invaluable and there has been so much learning from the pilot which will help inform our future work with young people.

We have outlined resources produced by Mind during the pilot that are available for supporting staff and students with their mental health, these can be found in Appendix 3.

The pandemic has sped up a crisis in young people's mental health that was already growing fast. At Mind we have increased support not only for pupils but for parents, teachers and other school staff. Through the Mentally Healthy Universities Programme we've built closer links with universities, helping students look out for their own and each other's mental health. And we've published new information so young people can better understand what they are experiencing and know where to look for help.

But we know this is only the beginning.

At Mind we are committed to stand alongside young people and stand up for their right to better support. Our ambition is to become an influential advocate for young people's rights. We'll fight to ensure that all young people learn about mental health and can easily access trauma informed mental health support, where and when they need it. We'll create more opportunities for young people to lead our work. We know that by working together with young people, we can confront this crisis.

References

(1) The Insight Network (2018). University Student Mental Health Survey 2018. Available at: https://www.theinsightnetwork.co.uk/uncategorized/university-student-mental-health-survey-2018/

(2) Accenture. Student Mental Health Report. Available at: https://www.accenture.com/gb-en/insights/local/student-mental-health-research

(3) Equality Challenge Unit (2014) Understanding adjustments: supporting staff and students who are experiencing mental health difficulties. Available at: https://www.ecu.ac.uk/publications/understanding-adjustments-mental-health/

(4) See: https://www.mind.org.uk/media-a/6105/mentally-healthy-universities-programme-pilot_interim-report.pdf

Appendix 1
Student and staff course overview

Student Course Overview

Wellbeing Essentials for Students

During the two-hour session we worked with small groups of around 10-15 students to explore what mental health is, how to work with the five ways to wellbeing to support ourselves, where to find support from within and outside university, and how to have conversations about mental health. The session allowed space for discussion on these topics, provided opportunities for students to benefit from peer support and to interact with the mental health trainer.

The session covered:

• What mental health and wellbeing are

• The five ways to wellbeing – five evidence-based actions designed to improve personal wellbeing

• Connecting with other students

• Ways to support others and finding support for yourself

• Managing Stress

• Signs and symptoms of mental health problems

• Wellness Action Plans

Tools and Techniques for Student Mental Health

The course was adapted for students from Mind's robustly-evaluated resilience course developed with the University of Oxford. The course was designed to target:

• early warning signs for stress

• vulnerability factors linked to longer-term stress reactions

• social capital – to create an opportunity to build a social network.

The online learning was designed to be a foundation for each interactive group session. The taught sessions then allowed students to practise what they learnt with the support of a Mind trainer and build connections with their peers.

• Week one – It matters what you focus on: attention training

• Week two – Habits and dwelling: how to change them

• Week three – Dealing with difficult emotions: keeping your balance

• Week four – Transforming worries and improving performance

• Online learning was in the form of an approx. 20-30 min interactive online session with videos and activities. These were sent to the students before each taught session

Looking After Your Mental Health at Work

During this two-hour session students learnt about how to look after their wellbeing and mental health at work, ways to manage their mental health as a new graduate, and their employers' responsibilities.

The course and accompanying resources covered:

- What mental health and wellbeing are
- How work and mental health impact each other
- How to stay well at work
- How to look after yourself while looking for work
- Managing uncertainty
- Finding support
- Mental health at work and the law

After all the sessions students were given access to a curated resource hub with additional tools and information to carry on their learning. This included signposting to support for specific groups of students, and more tools and information on a range of mental health topics.

Staff Roles

Staff Mental Health Champions

A Mental Health Champion is any employee who takes action to raise awareness of mental health problems among staff and challenges mental health stigma. Champions are focused on changing attitudes. They create opportunities to start up conversations about mental health, dispel myths, and make it easier for people to seek support. They may or may not have their own experiences of mental health problems.

The Mental Health Champions training covered:

- mental health and stigma
- the Champion role, including activities and signposting
- managing conversations
- boundaries
- confidentiality and safeguarding
- looking after your wellbeing.

Staff Mental Health Peer Supporters

Mental Health Peer Supporters are university staff with personal experience of poor mental health or a mental health problem, who provide support to their colleagues. The role is founded on shared experiences of poor mental health and mental health problems. Peer support can take the form of peer support groups, one-to-one peer support or online peer support.

The Peer Supporter training covered:

- What is peer support?
- The peer supporter role: skills and qualities
- Techniques for supporting your colleagues
- Boundaries and challenges
- Peer support in practice
- Looking after your wellbeing

Appendix 2
Year one interim evaluation report recommendations

The following recommendations were made in the year one interim evaluation report. Action taken by Mind in year two in response to these recommendations is highlighted below in purple. Where recommendations made in year one were directed at other programme stakeholders, this is stated for clarity.

Marketing:

Recommendations for Mind:

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

  Action taken: Comms and recruitment materials were provided in mid-August 2020 for the Staff Mental Health Champion role so universities had longer to advertise. Local Minds were involved in the development of courses over the summer and draft training materials were provided in early September so they could familiarise themselves with the content.

  Action taken: Revised student comms for each course and new social media and advertising assets were provided mid-August to ensure that local Minds could start advertising in freshers'. Local Minds were involved in the development of courses over the summer so were aware of key changes, drafts were provided in early September, and 'train the trainers' were delivered in good time for the start of most delivery.

- Mind's 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.

  Action taken: Over the summer, local Minds gathered insights from university staff about how we could engage a more diverse range of staff to take forward the Champion and Peer Supporter roles. These findings then fed into the recruitment approach and the updates on the communication materials, including the introduction of information packs for staff and their line managers and presentations to communicate the roles. These documents clearly outlined the benefits of the programme for staff including quotes from Champions and Peer Supporters. These were reviewed by local Minds and university staff.

  Action taken: Student marketing materials were revised and expanded with a stronger focus on social media and being adaptable for a range of needs. We used quotes from course attendees to highlight benefits. The communications templates for local Minds to send to students across their journey from enquiry to end of programme were re-written by one of our student peer designers.

- Mind should ensure that the first student workshops are advertised at the start of the academic year and included in fresher's timetables.

  Action taken: The universities that took part in year one were able to utilise their relationships with the universities and start their advertising in freshers' with some universities being able to timetable activities in.

- It should be made 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.

Action taken: Partnerships were given advice on how to select staff including criteria to consider. It was also made clear to staff in the application forms that there are limited spaces and when selecting they would be ensuring a diverse range of staff would be involved.

Recommendations for other programme stakeholders:

- While 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.

- 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 at the universities to communicate the importance of the programme to their staff, encouraging them to participate.

Improving organisation and delivery of programme:

Recommendations for Mind:

- Mind could facilitate more regular meetings of the full cohort of local Mind and university partnerships to facilitate sharing of best practice

Action taken: Local Mind leads were brought together on a six-weekly basis to share best practice. The university leads on the staff side of the programme were invited to quarterly meetings which gave an opportunity to share best practice on taking forward the Mental Health at Work Commitment as well as a space to share learnings on the programme more widely. Networking events were also introduced for Staff Mental Health Champions and Peer Supporters so they could share best practice. In addition to this there was a collaborative review of the student delivery at the end of the autumn term which included workshops to discuss best practice and improvements that could be made. This produced some changes to the Wellbeing Essentials workshop (including changes to timings and running order) and further recommendations for delivery online.

Recommendations for other programme stakeholders:

- 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 it is beneficial to 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 project leads.

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

Content:

- Case studies from previous Staff Champions and more clarity about the role should be included in updated training content.

  Action taken: Over the summer, case studies were provided from previous Staff Champions which were included in the participant handbook. One Champion also recorded a video sharing their experiences which was included in the training slides. Local Minds were also encouraged to invite year one Champions to their follow up meetings so new Champions could hear about their experiences. In addition to this, networking events were introduced, bringing together Champions from all pilot universities to share best practice.

- 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.

  Action taken: Introductory information on the programme and mental health was removed from the training and provided to staff via the participant handbook or a short video. This was optional, but provided for those who wanted to develop their knowledge before attending the training. During the re-development of Wellbeing Essentials it was decided by the local Minds and the student peer designers that pre-reading and work might put students off attending if they didn't do it – and it was likely that they wouldn't. This would then present the same problem in that some people would come into the session with different levels of knowledge. The decision was taken to adapt the course so it was more focused on reflection and activities instead of taught content around mental health problems. They then provided post-session reading and signposting in the form of a resource hub where students could learn more independently.

- A more diverse range of voices and perspectives should be included. For example, developing more content around different cultures and mental health.

  Action taken: For the staff training the following actions were taken:

- Video content and case studies were reviewed in both the Champion and Peer Supporter training to ensure a diverse range of voices and perspectives were included.

- A section was added to the Champions training providing information on the different networks at the university such as BAME networks and LGTBQ+ networks. Staff were encouraged to consider how various groups can participate in and influence their work and how they can reflect everyone's experiences within the activities they offer.

- Recommendations were provided and further reading on diversity and identity in mental health was included in the participant handbook.

- In one of the activities staff planned, they were asked to consider how they could ensure that activity reached all colleagues.

The effects of discrimination and different experiences on mental health was highlighted in the student sessions. The student resource hub had specific sections for LGBTQIA+ students, disabled students and those in racialised communities which detailed culturally sensitive support options specific to these groups. Local Minds were encouraged to highlight and signpost to these sections in all sessions.

- Content and activities should be adapted to reach an online audience.

  Action taken: We worked with an instructional designer and a trainer with experience delivering training online prior to coronavirus to move the programme online. Training content and activities were adapted accordingly. Champions and Peer Supporters were provided with ideas for online activities.

- Timings of sessions should be revised and consideration should be given to making sessions shorter.

Action taken: Staff Mental Health Champion training – in year one the training was a seven and a half hour course (including three breaks and lunch). In the second year, all trainers delivered it in two sessions over separate days amounting to six hours in total including breaks. Staff Mental Health Peer Supporter training – in year one the training was seven hours and 15 minutes (including two breaks and lunch). In the second year, all trainers delivered it in two sessions over separate days amounting to six hours in total including breaks. Wellbeing Essentials and Looking After Your Mental Health at Work were reduced from three hours to two hours but it was felt that the Tools and Techniques course wasn't able to be shortened or altered significantly at this stage.

Evaluation:

Recommendations for Mind:

- 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, for example follow up workshops/focus groups.

Action taken: Demographic questions were included in the evaluation forms. Further evaluation resource was not possible due to capacity but this recommendation will be taken forward for other programmes.

Appendix 3

Mind's resources:

- **Student Mental Health Hub** – In our hub for students, you can read detailed information about how to cope with the challenges of student life and mental health. You can also learn ways to better manage your mental health with our tools, tips, videos and blogs and get support information on mental health for specific student communities.

- **Mental Health at Work Commitment: Guidance for the Higher Education Sector** – This guidance sets out how universities can support their staff with their mental health drawing on best practice from our pilot universities. A summary for senior leaders is also provided along with an action plan template.

Appendix 4

Goldman Sachs Gives – Goldman Sachs Gives is committed to fostering innovative ideas, solving economic and social issues, and enabling progress in underserved communities globally. Through this donor-advised fund, Goldman Sachs' current and retired senior employees work together to recommend grants to qualifying non-profit organizations to help them achieve their goals. To date, Goldman Sachs Gives has made nearly $1.8 billion in grants and partnered with 8,000 non-profits in 100 countries around the world.

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