

# The Future of University Mental Health

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CEO, Student Minds



@StudentMindsOrg  
@rosietressler

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# Student Minds



student minds [www.studentminds.org.uk](http://www.studentminds.org.uk)  
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## collaborative

Teamwork and strategic partnerships help us to achieve better results.



We are respectful, supportive and inclusive.

## innovative



We strive for the best solution and the highest quality, using expert knowledge and evidence.

We learn from our ground-breaking research and data to develop and grow.

## empowering



We invest in people, in the belief that they hold the key to effecting real change.

We listen to and mobilise the student voice.

## courageous

We are willing to challenge the status quo and be decisive to shape a better future.

We are ambitious, optimistic and will push the boundaries.





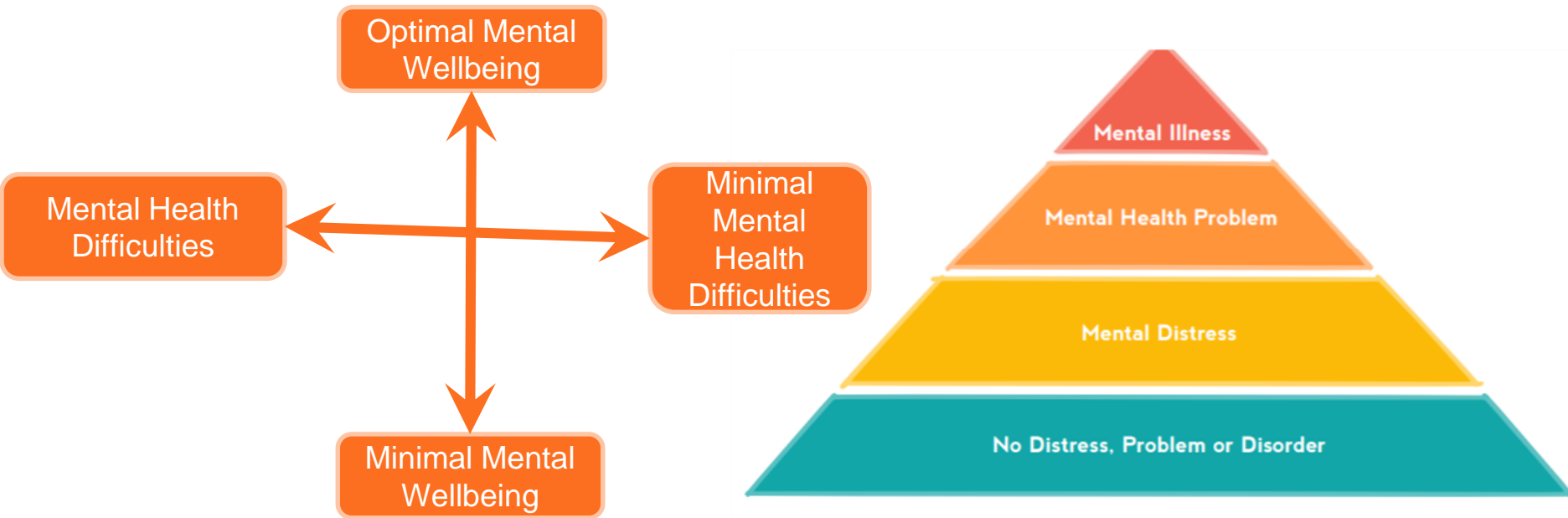
# Today's session

- **Background: Language, data and History**
- **The value(s) of 'GenZ'**
- **What needs to change?**
- **How do we create and sustain positive change?**

# Background: Language, Data and History



# A useful definition?



A state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.

*World Health Organisation*

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# Data: What do we know?

- 75% of mental health problems onset before the age of 24 (Kessler, R.C & Wang, P, 2008)
- The number of students who disclose a mental health condition to their university has increased dramatically in the past 10 years (IPPR, 2017)
- Universities have, over the past five years, experienced significant increases in demand for counselling and disability services (IPPR, 2017)
- Increase in symptoms of depression & anxiety among young women (McManus, S., 2016)
- Young people's mental health: one of the six ROAMER research priorities (Wykes, 2015)
- Almost 50% of young people enter higher education



# Data: What do we know?

## Challenges

- National data doesn't distinguish students from other young people
- We don't have a sense of a student's mental health over time
- Studies are often 'self selective'

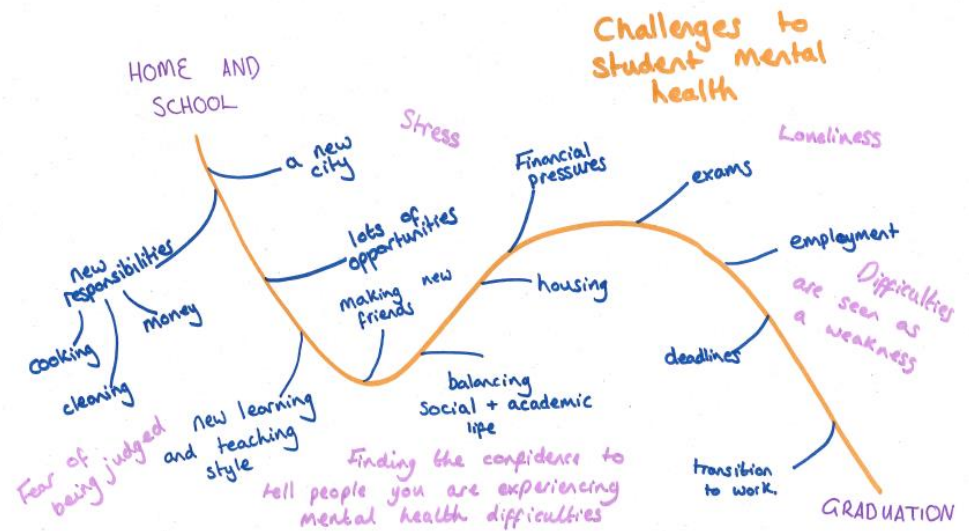
The number of students who **feel** they are experiencing distress is increasing.

Demand for support is increasing.

# Why is this happening?

Academics have linked this to;

- Student experience adjusting to independent living e.g. sleep
- Debt
- Bullying (online or otherwise)
- Sexual violence
- Social media
- Loneliness
- Re-labelling of everyday emotional problems
- Changes in parenting style
- Increased exam stress and pressure to achieve high grades,
- Demographic changes (rising student numbers and wider participation)
- parental changes
- Incentives (e.g., adapted assessment conditions)



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# Who do we go to for support?



**Brown et al.,  
(2014)**

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# Student views

I've had so many assessments from different care providers and repeated my story several times unnecessarily. Its just exhausting!

Amy from Manchester

Communication was very poor between services. I was left for a significant amount of time with no support despite my care coordinator from home contacting and arranging a care transfer before I began uni..... Every uni service I saw told me I needed the support of NHS secondary services, however these refused to see me so I was very much stuck and felt like I could not be helped

Anonymous from Bristol

I felt like the support I needed was being organised quite well until a member of staff went on leave and clearly hadn't passed things over to anyone else, the uni tried to follow up for me but this took ages as no-one knew my situation and what had been agreed. We got it sorted eventually but I had to go through a lot of undue stress to get there

Jack from Liverpool

I just don't think services talk to each other effectively, I've been passed from service to service, rehashing my problems each time and I don't think they understand how distressing that is

Elliot from London

The response and availability has been quick, helpful and very responsive. My only real critique would be the confusing amount/diversity among services and ways of contacting them which makes it hard to know where to go and who to contact

Anonymous from Bristol

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# A mini 'mental health' contextual history

- Passive v. Active
- Recipient v. partner
- Silenced v. Decision maker
- Un-informed v. informed



# The value(s) of Gen Z



# Gen Z



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# Reconnecting with the purpose of universities

## A UNIVERSITY FOR SHEFFIELD



THE PROPOSED UNIVERSITY BUILDING.

### You should support the University because:

1. The UNIVERSITY will be for the people.
2. The UNIVERSITY will bring the highest education within the reach of the child of the working man.
3. The UNIVERSITY will help the local industries.
4. The UNIVERSITY will be the centre where the treatment of accidents and diseases will be studied.
5. SHEFFIELD is the only large City in England without a University. Sheffield cannot afford to remain in this position.
6. The UNIVERSITY will not only benefit this district, it will assist the nation in its trade competition with other nations.

*Ask at your works or shop for a copy of the Pamphlet on the University Movement.*

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What needs to change?

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# Prevention

## One integrated model of mental health



### BIOLOGY

Our genes and the ways they are expressed

### ENVIRONMENT

The places we live and work, and the relationships we have

### EXPERIENCES

The things that happen to us - especially in our early life



Mental Health Foundation

“We have to ask: What makes us stressed? What increases the chances that we’ll be discriminated against? What shapes our opportunities to be active or sleep well? What determines our choices of what we eat? What exposes us to a higher chance of experiencing trauma?”

1. **Primary prevention:** preventing problems before they emerge
2. **Secondary prevention:** prevention for people exposed to inequality
3. **Tertiary prevention:** prevention that goes to a deeper level

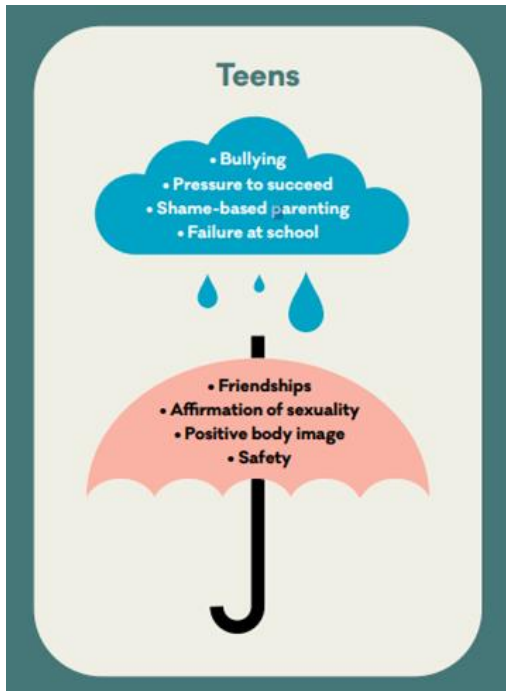
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Dr Antonis Kousoulis, *Prevention and mental health: Understanding the evidence so that we can address the greatest health challenge of our times*, Mental Health Foundation, 2019





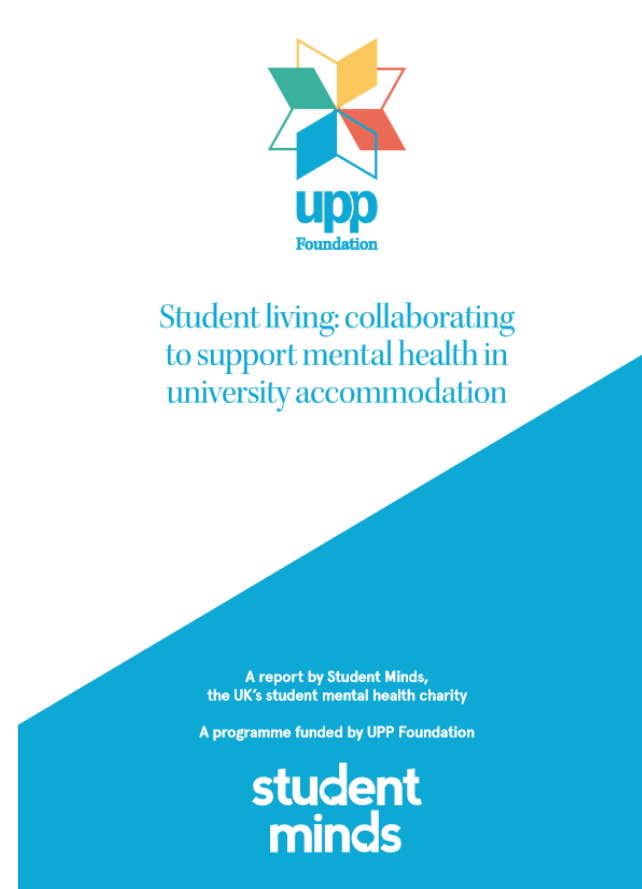
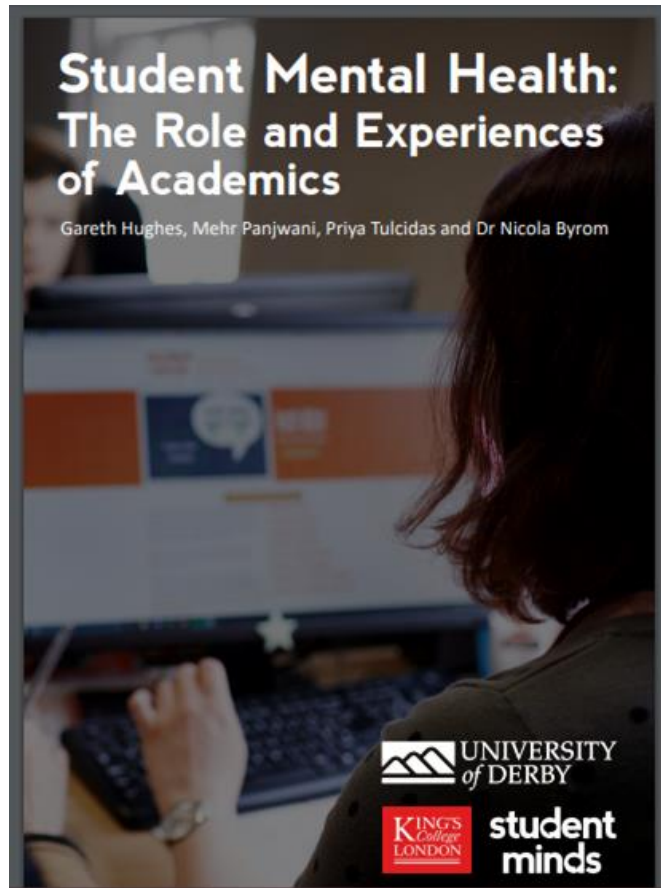
# Risk and Protective Factors



Dr Antonis Kousoulis, *Prevention and mental health: Understanding the evidence so that we can address the greatest health challenge of our times*, Mental Health Foundation, 2019



# Staff Experiences



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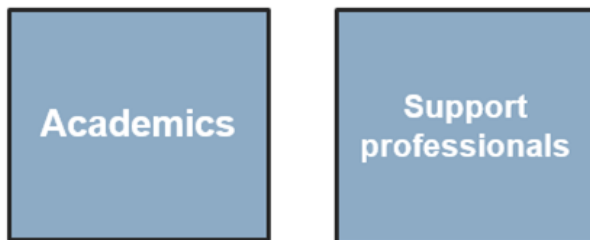
# The role of academics?

Boundaries • **Signposting** • Relationships

**Signposting  
is a nuanced  
and complex  
task:**

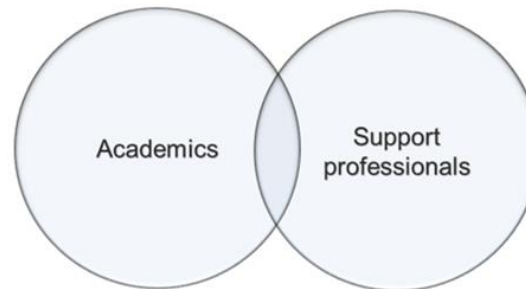
1. Be able to identify when a student is experiencing problems that would benefit from support;
2. Be aware of and able to identify services to students and explain how they can be accessed;
3. Be able to outline how and why a service could help a student and encourage enough hope to motivate the student to access support.

Clearly defined boundaries



Create gaps students can fall into

Overlap of interests, practices and principles focussed on learning



But still with clearly defined boundaries

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# The role of peers?

- 44% of supporters felt that they were the primary source of social support for the supportee.
- 73% of supporters helped arrange formal treatment for the supportee.
- 55% of supporters wanted information from or the opportunity to speak to the professionals supporting the supportee.
- 47% of supporters were experiencing mental health difficulties.

“On the one hand, when both of us have not been our best, we have clashed due to the different ways we deal with stress. On the other hand, my help with her difficulties, and her help with mine, have helped us form a stronger bond of friendship.”

Supporting a friend, housemate or partner with mental health difficulties: The student experience

Nicola C. Byrom 

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# The role of learning?

## Deep learning

Focus on subject

High achievement

Good wellbeing

More satisfied with teaching and learning

Focus on intrinsic motivation

## Surface learning

Focus on grades

Lower achievement

Poor wellbeing (high anxiety)

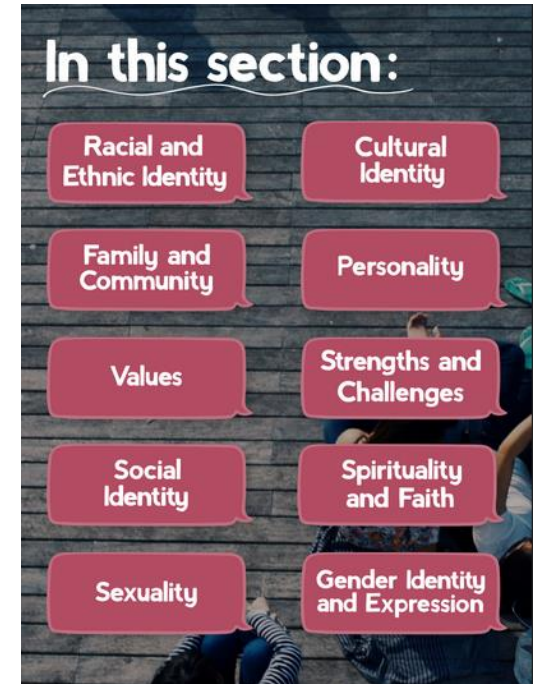
Less satisfied

Focus on extrinsic motivation

# Transition: The role of induction?

- **Belonging;** Well-designed activities that raise motivation, sense of belonging and helped to integrate socially seen as helpful
- **Expectations;** Many students have vague or unrealistic expectations of university, difficulty in visualising the future and are often unrealistic in their beliefs.
- **Exposure to new environment;** Quick, effective familiarisation with the new environment helps.
- **Skills building;** Issues of time management, resilience, managing relationships and budgeting, recur in the literature. Needs theories suggest distress generally occurs when people are unable to keep their underlying physical and emotional needs in balance.

*(G. Hughes, Transition distress: a psychological process, University and College Counselling magazine, September 2016)*



Know Before You Go,  
Student Minds website

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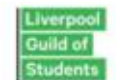
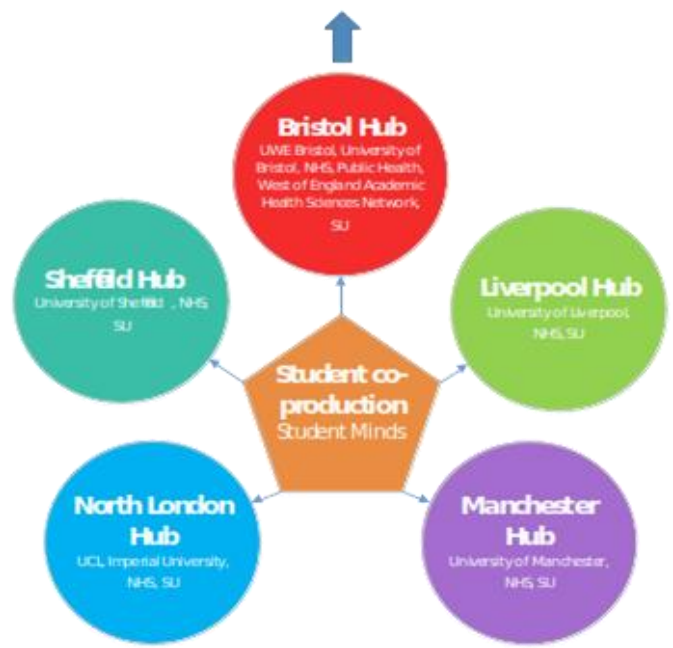


# The role of the NHS?

## Student Mental Health Partnerships



**National Learning Collaborative**  
UUK, NHS Confederation MHNetwork, Public Health England, Student Minds, Academic Health Sciences Network, UWE Bristol, University of Bristol, University of Liverpool, University of Manchester, UCL, Imperial University, University of Sheffield and other local partnerships



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Type of university

Region

Postgrads

Ethnicity

Leave of  
Absence

Refugees  
& Asylum  
Seekers

Current  
students  
/ Recent  
grads

Gender  
identity

Disability

Part-time  
students

There's lots to consider...

Sexuality

Distance  
learners

Year of  
Study

First  
generation

Experiences  
of MH  
difficulties

Course &  
Faculty

Carers

Religion  
& belief

Mature  
(age)

International  
(EU / Non-  
EU)

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How do we best create and sustain change?

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# University Mental Health Charter



6 university campuses

4 countries

Bringing together **360** staff and students from **181** unis, SUs, and organisations

**2274** respondents to staff/student surveys

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# University Mental Health Charter

## Purpose

To reward and recognise universities for excellent work

To provide evidence informed guidance and structure to the whole sector for further improvements and debate

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# Part of a whole sector approach



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# University Mental Health Charter

The Charter will:

1. Embody a whole-university approach.
2. Not be prescriptive.
3. Recognise diversity.
4. Be designed so every institution can apply for and gain charter status.
5. Be underpinned by a robust evidence base and iterative.
6. Be open and transparent.
7. Recognise the value of co-production with diverse range of voices.
8. Draw on the experiences of key developments in the sector.
9. Be robust and challenging, not simply require box ticking.

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#UniMentalHealthCharter

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**Pre-entry**

**Transition in  
and first year**

**Residential  
Accommodation**

**Policies**

**Academics**

**Staff training +  
mental health**

**Socialisation**

**Families**

**Transition through and  
out**

**Research, innovation +  
dissemination**

**Support for ongoing  
mental health needs**

**Various areas of  
Investigation**

**Physical environment  
and culture**

**Student groups  
potentially vulnerable to  
mental health problems**

**Eternal pathways and  
healthcare pathways**

**Learning, Teaching and  
Assessment**

**Reactive support  
services**

**Student voice and  
participation**

**Support services  
cohesiveness**

**Proactive interventions  
and prevention**

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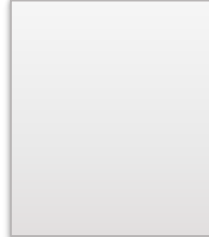
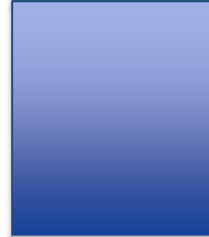
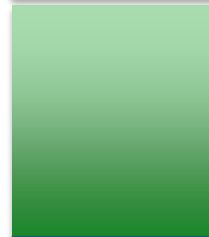
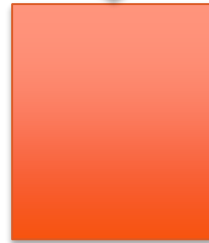
# Student Services

Pre-existing  
workload =



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# Current demand



NHS retreating behind

higher thresholds  
+

Increase in complexity  
and risk  
+

Pre-existing workload  
+

Increase in numbers  
of students needing  
support

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# Other headlines

A significant number of universities are already working towards a genuine whole university approach to mental health

A clear need to better define the role and boundaries of universities in this area

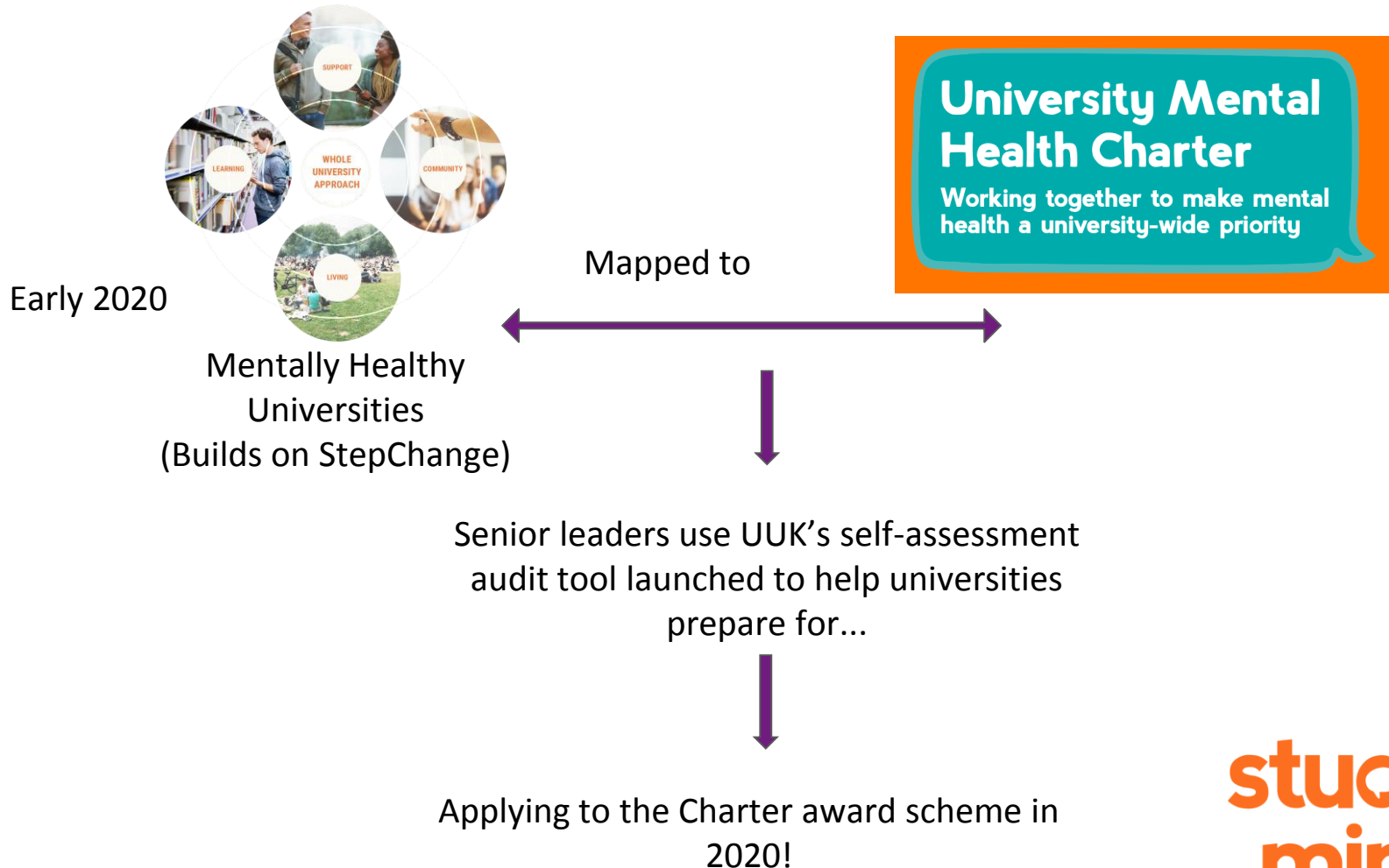
Staff and students see clear links between learning, teaching and mental health

There are clear links between staff and student wellbeing

Marketization of HE appears to have created narratives that are not helping the mental health of our communities

# Timeline

December 9<sup>th</sup> 2019



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# Co-production

*“Knowledge of a subject is one thing, **but it is experience that makes someone an expert in their field.** So why don’t we treat those with mental illnesses the same?*

*It is imperative that universities listen to students regarding mental health. Why? **Because we are the ones it affects. We have the experience of what it’s like. We have the experience of what works. We have the experience of what needs changing.***

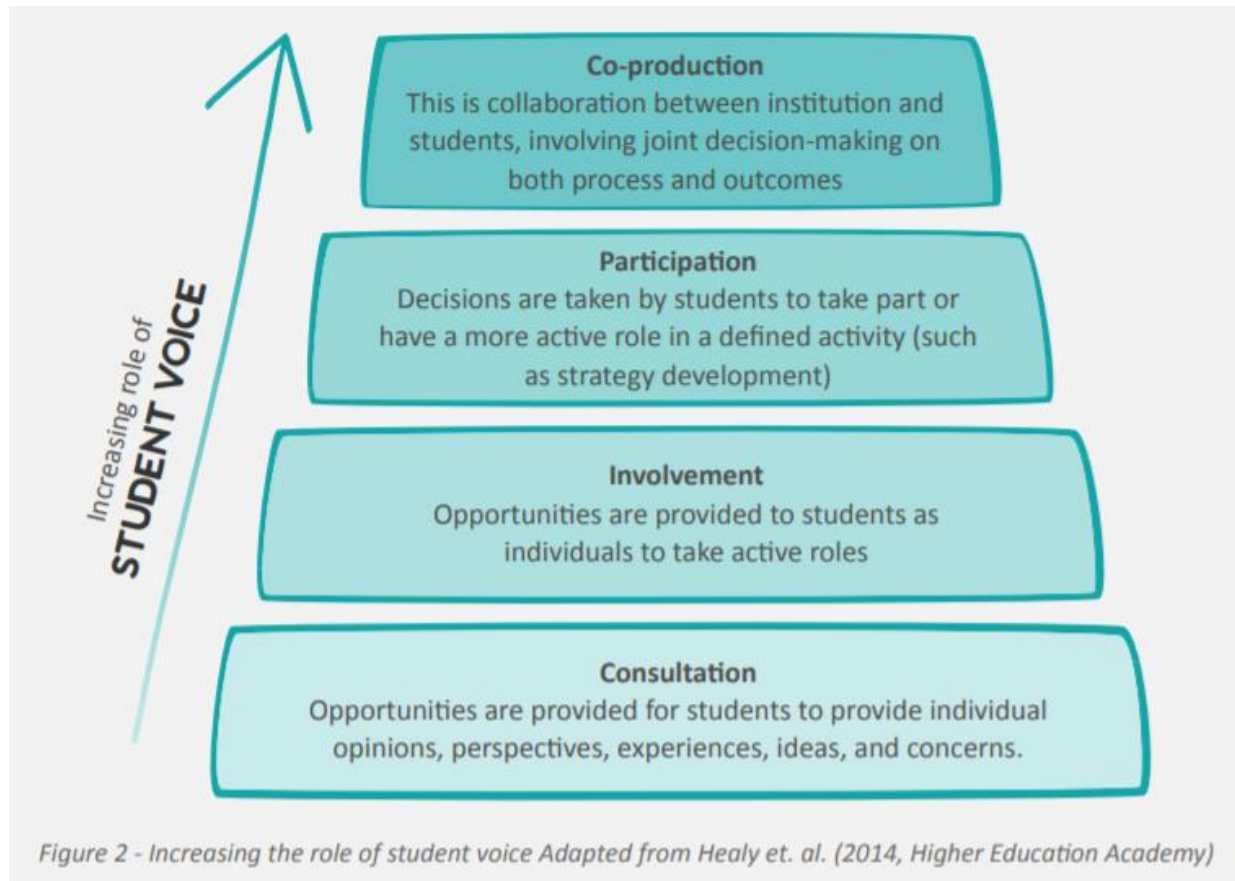
*To ignore us would be to base the future of student’s mental health on historical data and experience. To ignore us would be to denounce our diagnoses, experience and knowledge.”*

-Anonymous student

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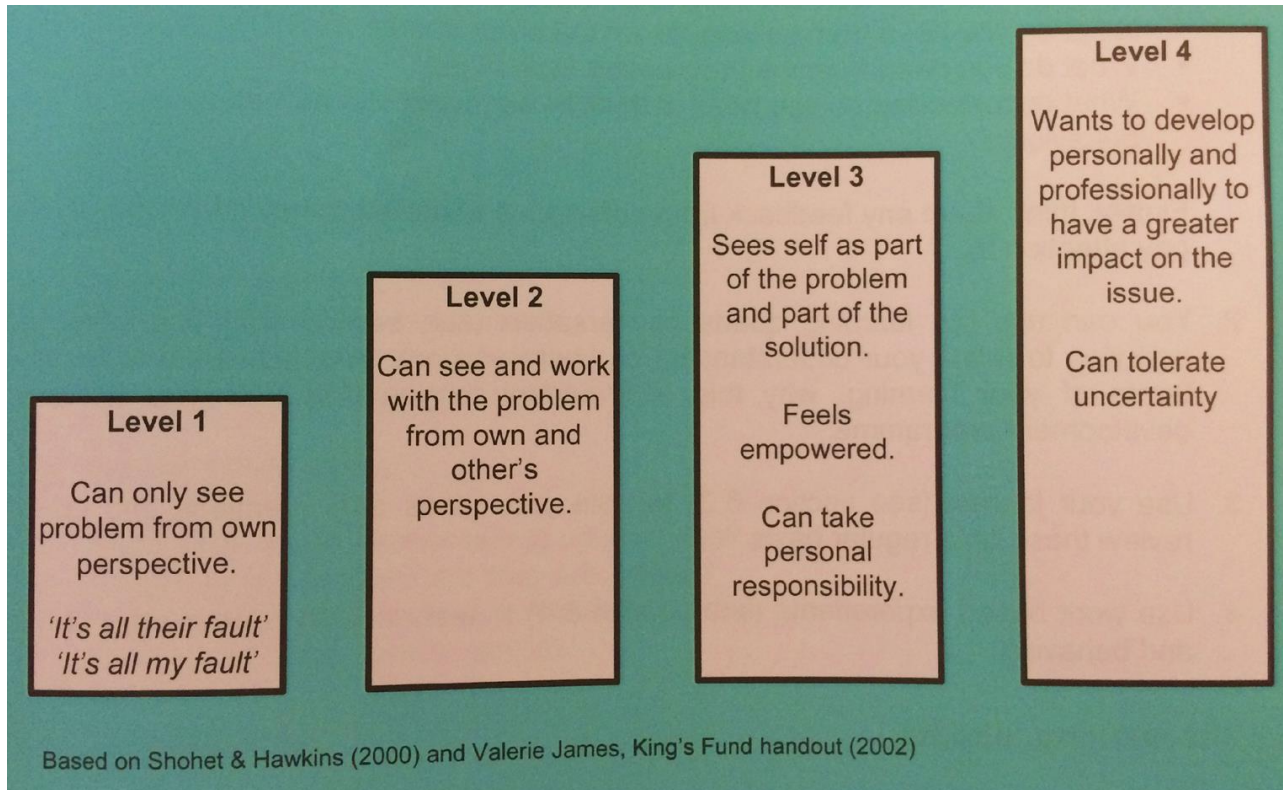


# Models of co-production



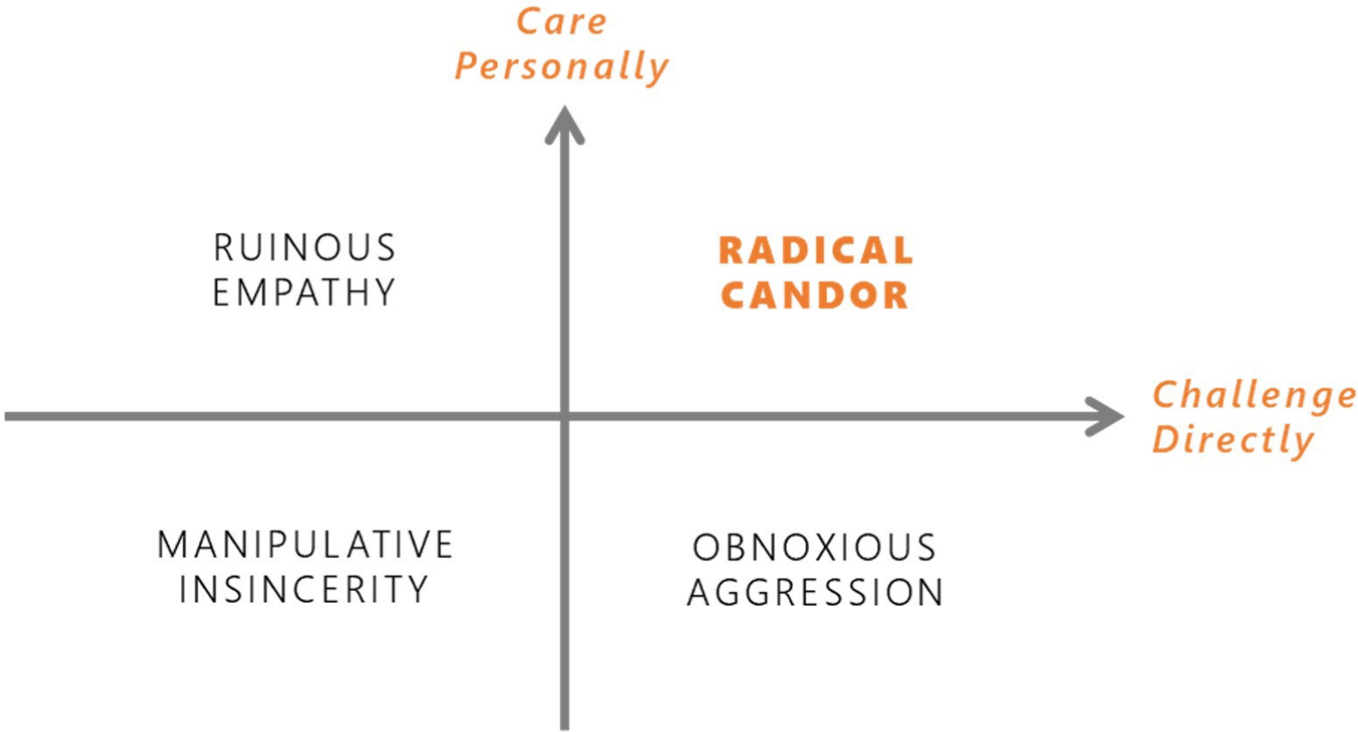


# Developing our reflective practice





# Radical Candour



Concept: Kim Scott, 2017, [www.radicalcandor.com](http://www.radicalcandor.com)  
Image: Takeshi Yoshida, 2018

- **Roots: Purpose:**
  - **Motivation**
  - **Confidence**
  - **Space to Fail**





# Connect...

Connect with the people around you. With family, friends, colleagues and neighbours. At home, work, school or in your local community. Think of these as the cornerstones of your life and invest time in developing them. Building these connections will support and enrich you every day.

# Take notice...

Be curious. Catch sight of the beautiful. Remark on the unusual. Notice the changing seasons. Savour the moment, whether you are walking to work, eating lunch or talking to friends. Be aware of the world around you and what you are feeling. Reflecting on your experiences will help you appreciate what matters to you.



five ways  
to well-being

# Be active...

Go for a walk or run. Step outside. Cycle. Play a game. Garden. Dance. Exercising makes you feel good. Most importantly, discover a physical activity you enjoy and one that suits your level of mobility and fitness.

# Keep learning...

Try something new. Rediscover an old interest. Sign up for that course. Take on a different responsibility at work. Fix a bike. Learn to play an instrument or how to cook your favourite food. Set a challenge you will enjoy achieving. Learning new things will make you more confident as well as being fun.

# Give...

Do something nice for a friend, or a stranger. Thank someone. Smile. Volunteer your time. Join a community group. Look out, as well as in. Seeing yourself, and your happiness, linked to the wider community can be incredibly rewarding and creates connections with the people around you.



# Community Organising

**CITIZENS** UK

<https://www.youtube.com/watch?v=ddBjb-xRPOk>



- Listen
- Empower
- Action
- Debrief

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**W** what works wellbeing

Quality Improvement and Reward Scheme: University Mental Health Charter

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MHHE Strategic Group



TASO



Evidence: Research/ Knowledge Translation



Strategic framework: Step Change / 'Mentally Healthy Universities'



Mission Groups

Think Tanks/ Media

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Activism and movement Building

Relevant Expertise and partnerships



NHS/ City-wide Join up/ Service partners



Specialist Practitioner groups



Wider support networks; family/ guardians

Communities of Practice: Peer Support, Suicide Prevention, International Students, Students' Unions, PGR, Curriculum Design, NHS partnerships, Sports, Accommodation, Data/ Info Sharing, Graduate Wellbeing, Transitions In

External Support: Third Sector/ Private Training/ resources/ digital offers

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# Build your own mentally healthy university



- What are your Values?
- Culture - What is it like to study or work here?

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# Further Information

Student Minds reports / research from the last 8 years:

<https://www.studentminds.org.uk/researchandpublications>

University Mental Health Charter published 9th December 2019:

<https://www.studentminds.org.uk/charter>

Students' Union Support Programme:

<https://www.studentminds.org.uk/studentsunions>

Peer Support Programmes:

<https://www.studentminds.org.uk/universitystaff>

Evidence based health literacy resources adapted from Canada:

<https://www.studentminds.org.uk/transitions>

Student Minds blog, produced (and edited) by students for students:

<http://studentmindsorg.blogspot.com/>

Wellbeing platform specifically for PGR students launches in January:

<https://thewellbeingthesis.org.uk/> [Currently in testing phase]

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