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ARTICLE

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‘Look after the staff and they would look after the students’ cultures of wellbeing and mental health in the university setting

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ABSTRACT

University student wellbeing is increasingly seen as a concern, and as demands on university staff time for research, teaching, leadership and pastoral support also increase, this is mirrored in concerns about staff wellbeing. Dominant sectoral narratives frame student and staff wellbeing as oppositional, with initiatives to support student wellbeing positioned as creating additional practical and emotional demands on staff time and resources. Using a large qualitative dataset collected in the UK, including staff and students, this paper argues that that this does not have to be the case. Instead, there is a need to look beyond the provision of reactive services or isolated individual interventions, to proactively and cohesively embed cultural and structural change across the whole institution to support positive wellbeing outcomes for the whole university community. We report on the intrinsic interconnection between staff and student wellbeing; the importance of formal institutional policies in supporting or impeding staff and student wellbeing; access to training interventions to support staff and student wellbeing as a practical manifestation of these policies; and the impact of workplace culture and the centrality of compassion and community. The paper finds that it is important that institutions within higher education acknowledge and respond proactively to both staff and student wellbeing issues. To do so, institutions should seek to foster a sustainable and effective academic environment with a whole university approach.

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Introduction

Student wellbeing is an established concern across the UK university sector. This paper presents qualitative data collected in 2019 which explored student and staff perspectives on university life and mental health, to consider the intrinsic interconnection between staff and student wellbeing.

Evidence indicates that students are reporting increasing levels of psychological distress, with growing demand for university counselling services (Broglia, Millings, and Barkham 2017; Thorley 2017; Storrie, Ahern, and Tuckett 2010). Individual, social, academic, and financial factors have all been suggested as contributing to student distress, including isolation and loneliness (McIntyre et al. 2018; Richardson, Elliott, and Roberts 2015); academic transitions and anxieties (Jones et al. 2020); financial difficulties and uncertainties (McCloud and Bann 2019; Richardson et al. 2017). It is likely that these factors will have been exacerbated as a result of the COVID-19 global pandemic (Gubic, Badovinac, and Johri 2020).

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Current research on student wellbeing suggests an indissociable and bi-directional relationship between wellbeing¹ and academic performance, wherein positive wellbeing is associated with enhanced cognitive and psychological functioning, including: higher academic engagement; creativity; decision-making; problem-solving; concentration; productivity; retention; outcomes (Pascoe, Hetrick, and Parker 2019; Postareff et al. 2016). Conversely, poor wellbeing negatively impacts upon student experience, wellbeing, and attainment (Salimzadeh, Saroyan, and Hall 2017; Watts and Robertson 2011).

The wellbeing of university staff has also become a growing sector-wide concern. The increasing work and productivity demands brought by the marketisation, massification, and technologization of higher education have consistently been associated with increasing work-related stress, burnout, and mental health difficulties (Fontinha, Easton, and Van Laar 2019; Johnson, Willis, and Evans 2019). Academic staff are also increasingly required to support students with mental health difficulties at university (Gulliver et al. 2018; Margrove, Gustowska, and Grove 2014), particularly amid psychological and practical barriers to accessing university mental health services (Priestley et al. 2021; Macaskill 2013; Storrie, Ahern, and Tuckett 2010). There is evidence that compromised staff wellbeing can lead to not only individual suffering, but also ‘the wasteful loss to the sector of able and experienced personnel’ (Morrish 2019, 45). Furthermore, poor wellbeing negatively impacts upon staff productivity, impacting upon the support they can offer to students.

Dominant sectoral narratives frame student and staff wellbeing as oppositional, with initiatives to support student wellbeing positioned as creating additional practical and emotional demands on staff time and resources (Hughes et al. 2018; McAllister et al. 2014; Margrove, Gustowska, and Grove 2014; Hagenauer and Volet 2014). In contrast, this paper seeks to complement existing socio-ecological and systems theory by exploring how universities could optimise both staff and student wellbeing by taking a ‘whole university’ approach to mental health (Hughes and Spanner 2019).

The paper uses data from consultations with university staff and students conducted during the development of the Student Minds University Mental Health Charter (the Charter) (Hughes and Spanner 2019) to explore the symbiosis or interrelationship between staff and student wellbeing and the challenges posed by existing institutional policies and culture. It argues that there is a need to look beyond the provision of reactive services or isolated individual interventions, to proactively and cohesively embed cultural and structural change across the whole institution in a way which supports positive wellbeing outcomes for the whole university community (UUK 2020; Dooris, Powell, and Farrier 2020).

Methodology

In 2019, university staff and students across the UK were invited to contribute to six day-long ‘roadshow’ events shaping the direction of the Charter. Over 360 university staff and students from 181 organisations participated in a series of 93 focus groups and 18 student co-creation panels examining different themes around student and staff mental health and wellbeing (Hughes and Spanner 2019).

Roadshows included participants with diverse roles within HE organisations, including academic and professional services staff at all levels, some of whom directly provided mental health support for students. Participation was voluntary. To maintain anonymity and ensure clarity, we refer to data extracts using the host university name only (Strathclyde; Staffordshire; Cardiff; Leeds; Ulster; University of the Arts, London (UAL)). Ethical approval was given by the University of Derby Arts Humanities and Education research ethics committee, and participants were recruited via multiple national and local university communication channels. All focus groups/co-creation panels lasted approximately 60 minutes and were facilitated by an experienced qualitative researcher. They were audio-recorded and fully transcribed for analysis. The co-creation panel format was based on the Student Minds co-production toolkit and gave a structure for imagining ideal future approaches in contrast to current approaches (Piper and Emmanuel 2019).

Table 1. Outline of included focus groups/ topics.

Focus group topic	Acronym	Number of focus groups
Staff wellbeing and development	SWB	6
Student transitions	TR	6
Promoting good mental wellbeing and preventing mental illness	PP	12
Mental health strategy and policy	SGY	8
Student mental health, learning and the role of academics	LT	9
Student co-creation panels	SCC	18

Roadshow topics ranged from the effect of the built environment on mental health to the role of external partnerships in promoting good wellbeing. This paper draws on the large qualitative dataset collected across the focus groups and student co-creation panels, using the six focus groups on staff well-being as a ‘hub’ on which to focus its thematic analysis. As themes under discussion across the events often overlapped, we reviewed and refer to other focus groups and co-creation panels where discussion was particularly pertinent to the aim of understanding the relationship between staff and student wellbeing (Table 1).

The six focus groups focused on staff wellbeing were mainly attended by professional services staff, with individual representation from academic staff in three groups. Focus group size ranged from 3–7 including a facilitator per group. Questions included what training mental health university staff received and what training they needed, what support was available for their own mental health, positive and negative influences on mental health and wellbeing in their work life, and the relationship between staff and student wellbeing.

Transcripts were thematically coded using an emergent structure (Braun and Clarke 2006). Two researchers independently coded the six staff wellbeing focus groups, agreeing a structure that was used to prioritise review of other transcripts, with four researchers reviewing these transcripts and identifying relevant themes for analysis.

Results

The above method highlighted four main themes, namely: the intrinsic interrelationship and inter-connection between staff and student wellbeing; the importance of formal institutional policies in supporting or impeding staff and student wellbeing; access to training interventions to support staff and student wellbeing as a practical manifestation of these policies; the impact of workplace culture and the centrality of compassion and community.

Staff wellbeing as integral to student wellbeing

Both student support and academic staff frequently referred to the practical and emotional demands on their workload and wellbeing created by the responsibility for supporting student wellbeing.

If you don’t have those really strict boundaries in place it is far too easy to cross the line and end up in a bad place yourself. (PP/Cardiff)

This was felt to be particularly challenging given the limited time, resources, and support from community mental health services.

Sometimes you’ll have people in hospital with psychosis, there will be a couple of suicidal students you are chasing and you still have got four appointments each day and it feels rushing actually, because you’ve got no lunch and you’re juggling seven or eight complex cases in your mind at once, and you can’t go home until you know this person is safe, that person is safe. (SWB/UAL)

Academic staff [SWB] also highlighted the practical pressure of balancing student support with the other demands and expectations of their role, and the perception that pastoral support is not valued or recognised institutionally.

Staff perceived that these challenges were compounded because student wellbeing was expected to be prioritised over and above staff wellbeing.

Procedures have been put in place, because they are good for the students. And what we're finding is that actually what is good for the students is sometimes not good for the staff. (SWB/Leeds)

However, when directly asked, there was a consensus that staff and student wellbeing were 'co-dependent' (PP/Ulster, 1). The idea that if staff did not have good levels of wellbeing they could not effectively support students was repeatedly discussed.

You can't really be there for your students if you're struggling yourself and don't have support yourself. (SWB/Strathclyde)

There was definitely a relationship between the wellbeing of staff, and the satisfaction of the students. (SWB/Leeds)

Indeed, improved staff wellbeing was associated with being better mentally, emotionally, and practically equipped to respond to student wellbeing needs. Conversely, poor staff wellbeing was identified as having a negative impact upon the ability to provide effective pastoral support; student panels highlighted the effect this could have.

If you're a student and you've taken a serious problem to them, and they brush you off or they say, "I can't help you deal with that." Then, where do you go from there? (SCC/Strathclyde)

The panels also identified that the quality of teaching, communication, and pedagogical practices is affected by staff wellbeing, impacting upon students' educational experience and outcomes, and levels of stress and anxiety.

Surely the quality of teaching is already affected by staff satisfaction and that affects your students. If you've got really unhappy lecturers or, for whatever reason, they're not being paid enough, they're working really long hours, they've not got the support network that they need, that's going to directly affect their quality of teaching for students. They need to be supported just as much as the students do, really. (SCC/UAL)

In the focus groups there were also examples of how supporting student wellbeing could have a positive effect on staff wellbeing. When asked about factors contributing positively to their wellbeing, 'making a difference' through the provision of pedagogical and pastoral support to students was perceived by staff as contributing significantly to their overall role satisfaction, fulfilment, and wellbeing.

But my favourite day of the year is graduation, because I go to graduation and it's like, I'm looking at my children. My children have grown up. They've actually learned something. They've achieved something. They've value added. (SWB/Leeds)

I still feel incredibly privileged to be doing a job I love. And the difference I can see in a student coming to see me, who might be thinking about dropping out, really struggling, and then seeing an improvement. That's not all cases, because sometimes you need to get worse to get better, but that makes a difference for me. I still feel I'm incredibly lucky to come in and do the job that I enjoy, and I get paid. (SWB/UAL)

These findings emphasise that staff and student wellbeing are not oppositional, but instead are integral to each other. If one group's wellbeing is affected there will be clear and significant consequences for the other group's wellbeing. Therefore, there is a need to consider whether the formal policies and wider culture within higher education acknowledge and build upon this inter-relationship.

The importance of formal institutional policies in supporting or impeding staff and student wellbeing

In broad terms, focus groups noted that all policies, along with their implementation, have the potential to influence wellbeing. There was a strong feeling that there needed to be a 'top down' approach to wellbeing, as well as a 'grassroots' implementation (see later section on culture).

I think the whole thing about staff wellbeing, I think it needs to come from the institution, from senior management. (SWB/UAL)

Throughout the SWB focus groups, formal institutional structures and policies were identified as impacting on both staff and student wellbeing and, on occasion, contributing to the sense of oppositionality between the two. In terms of staff wellbeing, policies on staff absence were cited in several groups, with the potential for absences to lead to formal interventions and even dismissal. Another group's discussion centred on the benefits of being able to take days off for wellbeing purposes, but the difficulties of doing so in practice because of demands on staff time. Others highlighted the importance of ensuring that the aims of the policies, including referral to appropriate services and taking regular breaks were mirrored in practice.

That's why it's imperative that it gets written into those localised practices a lot and policies where there's checking mechanisms on staff. (SWB/Leeds)

There was relatively little discussion of formal staff wellbeing policies, but in contrast, the indirect impact of wider institutional policies increasing staff stress was frequently mentioned. The most commonly raised issue in relation to staff wellbeing was that of workload, for both academic and professional support staff.

There is all of this pastoral care going on, and it's not acknowledged, it's not in promotions discussions, it's not in workload. (LT/UAL2)

The volume of work was discussed including: issues with under-staffing; lack of clarity around roles; the impact of restructuring; the use of temporary staff; unrealistic schedules and deadlines; issues with rates of pay; limits on resources; financial pressures and the resultant level of expectations upon individuals and teams. For academic staff, the need to adapt teaching and learning to support students was also seen as effortful, time consuming and under-acknowledged in workload allocation (see Jones et al. 2020 for a full discussion around assessment). The pressures of the Research Excellence Framework were also acknowledged. Sometimes, staff commented that the elements of their job that they really valued were not seen as the priority within the institution.

It's the jobs that would make you feel good and you feel like you're getting the value, like bits of research in other projects and things that would enhance your wellbeing as part of your job. They're the things that get pushed down the list to pressing, more important and people demanding things from you. (SWB/Leeds)

There was a strong sense of the potential injustices involved in such workload-related issues. In particular, the number of students being recruited, and policies for recruitment of international and widening participation students were seen to impact upon staff wellbeing.

We're introducing a developing workload model which would then define expectations. It's looking at the feasibility of how could you reduce workload, because with the student focus, customer focus culture of the university that is bringing in more students because it's more money but then at the same time the funding's being cut and financial situations in all universities are not really great so you can't really add more staff but we're getting more and more students. (SWB/Cardiff)

All the universities will be writing their access and participation plans right now ... that has such a bearing on what we then have to do to support students and what we should provide at transition and so on. And if student recruitment policies are about growing the international student base then again there's an immediate knock-on effect to support services and how we look after students. (SGY/Leeds)

The impact of recruitment policies on student workloads and a squeezed academic calendar were described as problematic for both staff and students.

We're struggling against some national policies as well. Things like accelerated degrees. I think they may have value for some particular members of society, but if we start pushing accelerated degrees as the new norm then I have real concerns about the impact of that on student wellbeing and staff wellbeing. (SGY/Leeds)

Acknowledging that all policies have the potential to impact on wellbeing, it is perhaps unsurprising that strategy focus groups suggested that staff wellbeing should be considered whenever policies are being discussed or implemented. The findings here suggest that formal institutional policies currently prioritise student recruitment, retention and progression and fail to consider the wellbeing impacts upon staff. Given that poor levels of staff wellbeing will have a significant impact upon student wellbeing, potentially compromising the teaching and support offered, this omission appears to be both short-sighted and ultimately in conflict with institutions' focus upon students.

Access to training interventions to support staff and student wellbeing as a practical manifestation of policy

Staff across many of the focus groups agreed that a basic level of mental health training should be provided to all staff (to raise awareness and address stigma, identify signs and signpost colleagues and students effectively) with some specific and targeted training for certain roles.

There's no compulsory training for a new academic coming in on what is a reasonable adjustment, on how to provide support to students, on what student support is if you're worried. We're bringing the new academics in and giving them access to a module and cohort of students, but not giving them that backup information. (TR/Ulster)

Contrary to existing literature (Gulliver et al. 2018), most participants had received mental health training such as MHFA (Mental Health First Aid) and ASIST (Applied Suicide Intervention Skills Training). For some professional services staff, institutions now tied wellbeing-related issues to career progression, for example, with a requirement to undertake Mental Health First Aid Training for certain roles. However this may be indicative of the self-selective sample of volunteers for the roadshows, as participants acknowledged that it was always 'the same' people who attended training, rather than being representative of the wider academic and professional staff community.

Staff recommended compulsory role-specific staff mental health training as a formal strategy to ensure safe and appropriate boundaries, sensitive mental health literacy, and early intervention when students or staff presented signs of distress. However, there was a real sense of fear around the expectations this could generate.

People are frightened to do training like that because then if there's a sense of institutional liability and what if I do the training then I'm expected to act and I get it wrong. (PP/Strathclyde)

Others highlighted that some people were naturally more supportive and/or interested in student wellbeing. As a facet of individual skills and interests, some participants thought that not everyone should be trained and have to contribute equally across pastoral roles.

Not everyone has got the skills to be able to do that personal tutoring. So, it's forced upon them that they have to do that with their students, that's like, you know, borderline abuse for the students, with some of the ones I'm thinking of. Let somebody else do it who knows how to do it. (SWB/Staffordshire)

However, this was seen to compound specific pressures and divisions by specifically disadvantaging some staff groups, who would then end up taking the burden of pastoral support, leaving less time for other responsibilities. In particular, women were seen as the care-givers.

Sometimes though somebody will be crying and I work with mostly men and they go, "[female name], this one's crying," as if they can't deal with the crying students, I have to deal with it. (SWB/Cardiff)

The reluctance to access training was not always a question of not wanting/needing training or not seeing it as part of a person's role; instead, the issue was more around time needed to access training.

One of problems we have is staff were saying [...] "And when are you giving me time to go and do that training?" [...] It is about when do staff fit this training in? And that training in, and that training in, on top of everything else they're doing. And they're saying, "I'm too busy dealing with these students to go and get trained on how to deal with them." (SWB/Leeds)

Participants linked the issue of access to training to an important aspect of the way in which work is organised within an institution. It was identified that student-facing teaching roles (in which staff work with small groups of students or one-to-one) were often taken by casualised staff, such as PhD students and early career researchers. This meant that, even if training was available widely within an institution, it was not always available for those individuals to access because they were not permanent staff members. This is despite such staff members arguably being more likely to identify student issues because of the regular contact involved in their role.

Often, the provision of training was seen as something for staff to help students, rather than being something that was relevant to all. A lack of proactive support for staff wellbeing was noted, with the focus of intervention on talking to line managers and accessing Employer Assistance Programmes or similar services when staff were in 'crisis'. Discussion also frequently highlighted initiatives such as '*yoga, mindfulness and other courses*' (SWB/Ulster), but suggested that the system was '*slow to address*' wellbeing-related issues experienced.

The thing is with mental health training is it's not for you, it's for you to help the student, that's the institutional message, that's what we need to get away from and throw back to the staff, "How do you look after yourself?" If you don't look after yourself, how can you look after this poor student? (SWB/UAL)

These findings indicate that some staff are receiving some training to support student wellbeing. However, the way in which work is organised within an institution may leave them unable to access training, either because of their role or because of more general workload pressures. The lack of training and support specifically relating to staff wellbeing suggests that institutions' failure to acknowledge the integral nature of staff and student wellbeing has permeated policy development and implementation and the allocation and provision of training.

The impact of workplace culture and the centrality of compassion and community

Culture is defined here as the shared assumptions, values, and patterns of behaviour that underpin expectations about how work is conducted in a given setting, encapsulating workload and work-life balance (Schein 2006). Staff participants emphasised that policies and interventions alone, without cultural change, were inadequate to support better student and staff wellbeing. Workplace cultural change was viewed as instrumental to wellbeing, and requiring long-term, holistic, and institutional action.

You need [...] institutional buy-in to license people to actually be like, "Well, I'm not working now." (SWB/Leeds)

Workload intensity and allocation were highlighted as negatively impacting upon staff mental wellbeing.

A big issue is staff mental health, staff wellbeing and staff workload [...] academics are so overburdened in terms of the work that they have to do. (PP/Ulster2)

Everyone is really stressed about workload. (SWB/Leeds)

Increasing workload was attributed to increasing student expectations, increasing numbers of students, and the challenge of balancing teaching, research, and administrative expectations within existing workload allocation models. Both students and staff identified how the marketisation and massification of higher education and tuition fee reforms increased student expectations of staff and support at university.

The fees mindset puts tutors under a lot of unnecessary pressure [...] Something I heard people say a lot when I was a student was, "I'm paying you," you as that tutor, "£9,000 and you're not emailing me back." That attitude is so toxic that you're like, "Oh, I'm paying all this money" [...] It doesn't make it a nice environment of learning and teaching and community. (SCC/UAL)

Thinking cynically, people are standing up to that and saying, "Your son or daughter coming here [. . .] We will try and foster a healthy approach to studies. We make all sorts of provision for when things are going wrong as well." I think that might help in the market, when people are deciding where they want to go to study. (SGY/Leeds)

Staff characterised the culture at university as competitive and prioritising productivity and workload over wellbeing, identifying a cultural expectation to work long hours that was then modelled to students.

Some academics who work 60, 70 hours a week and, you know, they might be fine with that, but if they're expecting that from others within the department or within the team or if they're setting the wrong kind of expectations for students. (SWB/Leeds)

You get no break. You're constantly worried about it. It's really unhealthy. (SCC/UAL)

Management of workload depended on the institution, with examples of bad and good practice. Staff identified the cultural approach to wellbeing in universities is often reactive and targeted at individual actions rather than proactive, strategic and preventative to address structural workload demands.

There's definitely a culture in some areas of when people are struggling with their workload the answer to that is "Improve your time management." That's not always what the issue is. (SWB/Strathclyde)

Normalising staff workload and individualising staff distress, universities tend to implement '*individual things*' (PP/Staffordshire) like one-off lifestyle-focused interventions or workshops, or reactive service approaches rather than '*a coherent well-thought out set of principles . . . about building a healthier culture*' (PP/Staffordshire), reflecting the discussion of training provision above.

Individualisation of wellbeing was problematic; one participant commented that it was not the availability of interventions to support wellbeing that was an issue, but instead the need for supportive structures to enable a positive work environment.

We do have lunchtime activities like yoga. I know some staff that are really keen to go to the yoga, but they've got a new line manager who is now scheduling meetings on lunchtime on a Monday when there is yoga, because she knows the staff are free at that particular time. (SWB/Leeds)

The help that seems to be available at my institution is very much focused on what you can do as an individual. It doesn't necessarily recognise too much what your situation or your environment might be, because sometimes it can be in response to a ridiculous workload or what have you. (SWB/UAL)

As such, there was a feeling that to progress within academia required acceptance of a demanding working culture and disregard for disclosure of difficulties and/or self-care in which staff had to be seen to be coping, even if they were not.

If I say I'm not managing things, then are you going to be promoted, because obviously you don't have any resilience, and it gets so much more stressful. So I think there is probably a culture of internalising, so you just keep quiet and carry on. (SWB/UAL)

Some participants had a clear idea about what a positive culture would look like and how it would affect those who worked and studied in the university setting. For many participants, bringing together a culture of compassion and community could configure staff and student wellbeing as complementary rather than in opposition.

A compassionate culture and community across the whole university. It's about people looking out for each other, noticing when things are going wrong, that's staff and students; community and compassion; and create this sense of belonging for people that they feel part of something and people care about them. (PP/Strathclyde)

There's something about having a shared sense of ownership, you know, a shared understanding of where we are as a sector, as an institution, as a team. There's something about that collectiveness and I don't think we talk about that enough. I don't think we do enough work around that bit of it, that we're in this together. (SWB/Staffordshire)

Culture change was seen as a long-term project, but one that would ultimately positively impact staff and students.

Look after the staff and they would look after the students. The better experience that the staff have in the workplace, how positive and happy they feel, better experience for the students. (SWB/Cardiff)

These suggestions emphasise how culture change, with a focus on compassion and community for all, could help to reframe the oppositionality identified, with a focus on policies, training and culture which encapsulate a whole university approach to mental health.

Discussion

The finding of the staff focus groups and student co-creation panels demonstrate that, at present, there is little acknowledgement of the inter-relationship between staff and student wellbeing within higher education. Instead, institutional policies, training and culture appear to (explicitly or implicitly) prioritise student wellbeing in a way which leads to staff wellbeing appearing to be in opposition to that of students. However, the findings also indicate that there is potential to move away from current conceptualisations of an oppositionality between the two. Identifying how structural and cultural challenges affect both staff and students has started to demonstrate how prioritising an integrated approach to staff and student wellbeing may be beneficial for all. If a positive working culture and environment was associated with staff productivity, purpose, and wellbeing, it could enable greater pedagogical and pastoral support to enrich student learning and wellbeing. Instead, the existing culture and environment in higher education is associated with additional cognitive, emotional, and practical demands on staff that impeded teaching, learning, research, and wellbeing for both students and staff.

Participants consistently affirmed that 'a focus on staff wellbeing is important in and of itself but is also vital in enabling staff to offer effective and sustainable support to their students' (Houghton, in Barden and Caleb 2019, 142). In particular, data analysed here underscores the importance of incorporating staff wellbeing within institutional policy, training, and culture to promote the mental wellbeing and flourishing of the whole university community.

Strikingly, and exemplifying the relevance of a whole university approach, staff across the focus groups engaged in relatively little discussion about specific wellbeing policies for students and staff. Rather, consistent with existing literature, academic staff emphasised the implications of wider institutional policies for workload and wellbeing, such as competitive outcome-based performance management metrics (Berg, Huijbens, and Gutzon-Larsen 2016; Hall and Bowles 2016; Ball 2003; Lynch 2010) and precarious academic contracts and financial pressures (Morrish 2019; Loveday 2018; McGann, White, and Moss 2016). Participants particularly underscored how existing metrics do not acknowledge pastoral student support, which compounds the emotional and practical demands on staff (Morrish 2019).

Staff argued that student support should be formally acknowledged in workload models and promotion criteria. Moreover, staff advocated additional proactive physical, psychological, and social interventions for staff to support wellbeing and prevent difficulties from occurring. Participants noted that all policies have the potential to impact on wellbeing, and that this should be formally considered through impact statements when policies are proposed or amended.

Students and staff also highlighted how national higher educational policy reforms can impact on student wellbeing. Widening participation was associated with a need for additional support to aid transition into university, and staff and students described how tuition fees could also increase student expectations of the support available from staff (Priestley et al. 2021).

Consistent with existing literature (Hughes et al. 2018), staff indicated that additional guidance and training was required regarding their roles and responsibilities in identifying, supporting and sensitively managing students with mental health difficulties. In particular, staff identified the value of additional mental health training to proactively identify and support mental health challenges,

and increase awareness of mental wellbeing in the university. Interestingly however, there was a lack of consensus as to whether training should be compulsory and universal, with some arguing that this leads to inappropriate responsibility and/or support for some staff, with others arguing that the alternative perpetuates the unequal distribution of emotional labour, particularly along gendered lines:

... [W]omen are disproportionately encouraged to do the 'domestic work' of the organisation, and/ or the care work (e.g. the running of courses, teaching, thesis supervision, pastoral care), neither of which count much for individual enhancement even though they are valuable to the student and the reputation of the university. (Lynch 2010, 6; see also Grummell, Devine, and Lynch 2009)

Staff also identified that training could compound workload pressures and that existing training content does not sufficiently emphasise staff boundaries and wellbeing when supporting students. Moreover, training that focuses on time and stress management dissociated from wider institutional structures can be unhelpful and a barrier to engagement. It was also emphasised that available training tends to focus upon supporting student wellbeing, rather than taking a proactive approach to staff wellbeing.

Exemplifying the importance of a whole university approach to mental wellbeing, participants identified a predominantly reactive mental health culture in higher education focused on individual actions, services, and interventions, and dissociated from proactive, preventative, and strategic change across the whole university system. It was suggested that a focus on culture would help to de-individualise wellbeing, ensuring that the way in which community expectations shape what is possible within an organisational context.

Staff highlighted how the current workload cultures and structures in higher education can impact negatively on staff and student wellbeing, aligning with previous research which identified unhealthy staff working hours and work-life balance (Winefield, Boyd, and Winefield 2014; Currie and Eveline 2011). Existing evidence indicates that academic staff in the UK work an average 51 hours per week (UCU 2016), and undertake more unpaid work and experience higher work-related stress than the majority of other occupational professional groups and the general population (Morrish 2019; Kinman and Wray 2013). Participants echoed sectoral concerns that increasing student numbers, expectations, and administrative duties for staff are driving an unsustainable increase in workload. These pressures may well have been exacerbated as a result of COVID-19 and the 'online pivot' within higher education (Son et al. 2020).

Cultural pressures to perform detrimentally impact on staff and student wellbeing. Lynch (2010) has argued persuasively that New Public Management structures have compounded the Cartesian dissociation of rationality and emotion in academia (Noddings 2003; Nussbaum 2001), promoting a competitive, individualistic, and instrumentalised culture of 'carelessness' that devalues caring responsibilities and self-care which may impede work. By moving towards a change in culture, focused upon compassion, community, connection, and belonging, it may be that better wellbeing can be promoted for all (Hughes 2020).

The strengths of this paper are that it draws on extensive qualitative data analysis using a national dataset of both staff and students from a range of different roles across the university. However, a limitation is that the sample is self-selective and potentially over-representative of staff with a professional interest in mental health. Some of the themes (e.g. training) may be an artefact of the question schedule used within the staff wellbeing focus groups. While the data presented here was collected before the global Covid-19 pandemic, they speak to emergent evidence indicating that oppositional discourses of staff and student wellbeing may have been compounded by the current context and also emphasises the importance of fostering compassion and community within the policies, training and culture of the post-pandemic university.

To conclude, it is important that higher education institutions acknowledge and respond proactively to both staff and student wellbeing issues. To do so, institutions should seek to foster a sustainable and effective academic environment with a whole university approach.

Note

1. The definition of 'wellbeing' used in this paper encompasses 'a wider framework, of which mental health is an integral part, but which also includes physical and social wellbeing.' The emphasis is on students being able to 'fully exercise their cognitive, emotional, physical and social powers, leading to flourishing' (Hughes and Spanner 2019, 9; see also WHO, 2004; Dodge et al. 2012).

Disclosure statement

No potential conflict of interest was reported by MP, LB, EJ, SJW. GH and LS report that they are employed by Student Minds, the charity developing the University Mental Health Charter. GH is content development lead for the University Mental Health Charter; LS is Interim Head of Engagement.

Data availability statement

Due to the nature of this research, participants of this study did not agree for their data to be shared publicly, so supporting data is not available.

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