Mental Health and Wellbeing

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Contents:

Introduction and Methodologies

This report looks at mental health (MH) and wellbeing at Goldsmiths, from both a staff and student perspective, and looks at the services that are currently available.
Mental health and wellbeing are crucial aspects of the student experience, and have an impact not just on the individual but on the entire Goldsmiths community. This includes academic staff members (personal and senior tutors, heads of department), and the work of professional support services (such as wellbeing, counselling & disability services, as well as the chaplaincy).

The mental health and wellbeing of higher education (HE) students has been increasingly studied, in light of findings that student wellbeing is lower now than in previous years, with an increased demand on universities to provide counselling and disability services. [1]
A report by the Institute for Public Policy Research (IPPR) named stigma towards mental health issues as the reason why a significant number of students do not disclose MH issues to their HE institution. This is an issue as these students then do not access the necessary support services and as a consequence may perform worse academically[2]. In response to this report, the IPPR highlighted the importance of focusing on MH in HE, suggesting that there should be 'whole-university' approaches which are subject to audit and quality assurance.

This report is one in a long line of reports looking at mental health and wellbeing at Goldsmiths, and aims to investigate student mental health and wellbeing within the Goldsmiths community, as it stands at present. Data was obtained through several methods: questionnaire data from the Annual Survey was employed, using both scaled response questions and open-ended questions. Interviews were conducted using a semi-structured style to further investigate our topic areas. Background research was also conducted, utilising previous Annual Reports.

A breakdown of annual survey responses is provided, along with an in-depth study of three topics: student experience of mental health and wellbeing at Goldsmiths, staff experience of mental health and wellbeing at Goldsmiths, and finally an in-depth exploration of the support services available at Goldsmiths.
We present findings about mental health and wellbeing at Goldsmiths, and make a number of recommendations.

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[1] Thorley, C. (2017, September 04). *Not by degrees: Improving student mental health in the UK's universities* (Rep.). Retrieved https://www.ippr.org/publications/not-by-degrees
[2] *Ibid.*

Goldsmiths Annual Survey: an overview

An annual survey was developed and sent out to all students, receiving 1219 responses. Questions relating to mental health and wellbeing were included, asking students to respond to statements using a 5 point response scale:

Current State of Mental Health
When asked to indicate their current state of mental health, 23% of students responded that their current mental health is 'bad' or 'really bad'; 48% said it was 'good' or 'really good'; and 27% said neither good nor bad. Interestingly, this was higher for postgraduate students than undergraduates, (UG = 3.1, PG = 3.5). 15 respondents rated this question as not applicable to them and 120 respondents skipped.
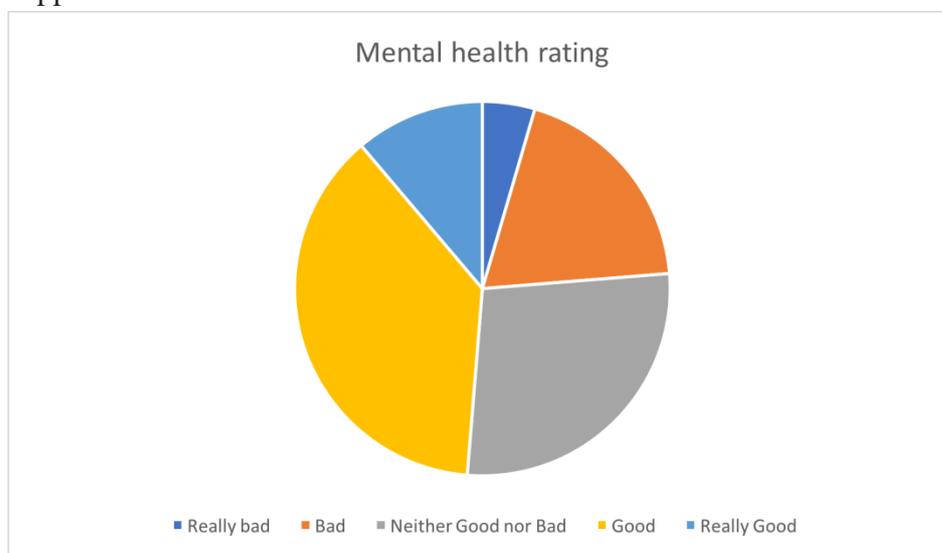

Changes to Mental Health since starting at Goldsmiths
Almost an equal proportion of student responses stated that their mental health had either 'stayed the same' or 'deteriorated' (37% and 38% respectively). 20% said that their MH had 'improved' and 6% said they 'prefer not to say'. 120 respondents skipped this question.

Mental Health whilst at Goldsmiths
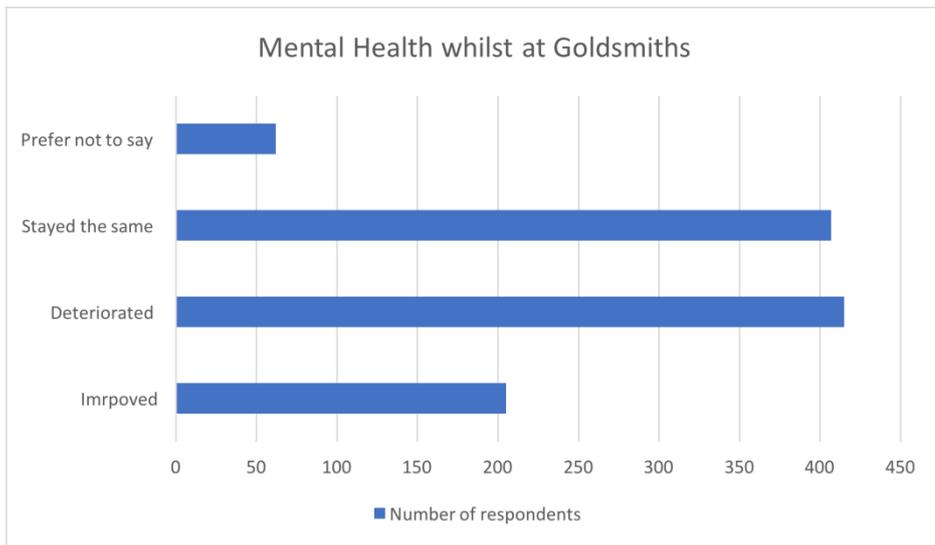
Experience of Stigma

When asked, the vast majority of responses (82%) indicated that students had not experienced or witnessed stigma towards MH issues whilst studying at Goldsmiths. 14% said they had, followed by 5% who said they 'prefer not to say'. Strikingly, however, within the population of students who report having a disability (17% of the survey population), this figure increased to 25% who had experienced or witnessed stigma towards MH issues, compared with 11% in their non-disabled peers.
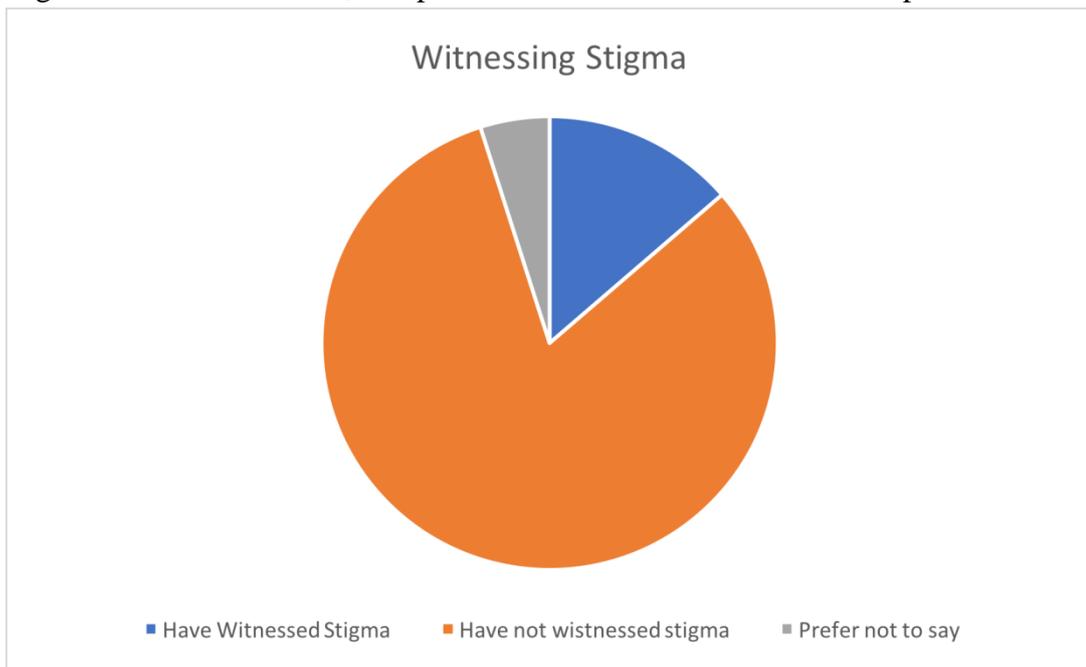
Awareness of University Support

When asked about services available to students, responses indicate that students were most aware of the 'Wellbeing Service and Drop-In', and 'Counselling Service'; they were least aware of 'Campus Support Officers' and 'None of the above'.
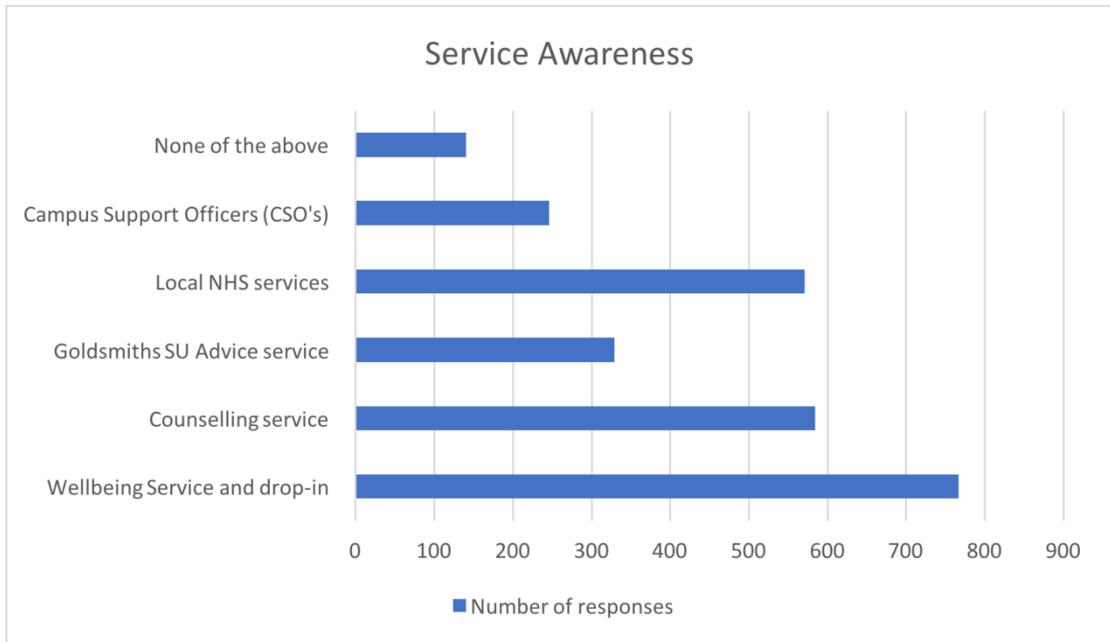
What can Goldsmiths do to offer more support?

When given an open-ended question about what the University could do to better support student wellbeing and mental health, from the 579 responses, the following themes arose:

- ○ *Improvements to the counselling service; increased funding, longer term counselling and* **reduced wait times**
- ○ *Have a more accessible wellbeing service e.g. by making it available throughout the day instead of for a short period at a specific time.*
- ○ *Increased advertisement of support services available for mental health and wellbeing*
- ○ *Provision of an isolated relaxation area*
- ○ *A more active approach to checking on the wellbeing of students*

Section 2: Student Experience

Background Research

A literature review was conducted on previous Goldsmiths reports pertaining to student MH (spanning 2015-2017). This highlighted many recurring concerns, including issues such as a lack of awareness of the services the university offers, stigma surrounding mental health, and the limited opening hours of support services. Additionally, a lack of support towards postgraduate students, mature students and student parents is reported, suggesting that there is no standardised approach across all departments in tackling mental health and wellbeing – lacking the 'whole-university approach' mentioned by the IPPR report.

It is evident that changes have been implemented following conclusions and recommendations for the future of students' mental health and wellbeing, regarding their student experience, such as the Wellbeing team now being separate from Student Services, internal services being developed by students for students such as Dedicated Listeners and an external service called Student Minds, both run by student volunteers. However, there is more to be done.

Interview findings

An important insight into the support offered at Goldsmiths was gained through consultation with students themselves.

We devised a series of questions based on the recommendations of previous reports, to understand the current student perspective on these. Nine open-ended questions pertaining to the perceived successfulness of support services were placed in an anonymous survey, allowing for qualitative data to be collected. These can be found in appendix 1.

Survey responses included points regarding the student experience of mental health and wellbeing, along with a number of recommendations. Students told us that the timings for the Wellbeing Drop-In were too specific, leaving students unavailable at the drop-in times unable to access support. Other students noted that despite the best efforts of the college, drop-in times are not well-publicised. A reason for this may be the large amount of information directed towards students regarding college services, leaving some students overwhelmed – especially those who may be looking to access mental health support.

On the question of staff training and awareness of mental health and wellbeing, the response was varied, indicating an inconsistency in levels of awareness across staff throughout college. Students identified the prospect of a more varied therapeutic program (perhaps involving arts therapies/group therapies) alongside the existing college offering as a positive measure that would enhance wellbeing for students. However, the students also indicated that the Wellbeing Service can feel underfunded and overstretched, and that students feel there is a need for extra staff to manage the services it already has, due to the increased number of students admitted to the college.

On the topic of inclusion, responses were varied, again indicating an inconsistency in students recognising Goldsmiths as an inclusive environment. There was a similar response to questions around whether Goldsmiths fosters a sense of community – clearly there is work to do in making sure that a consistent positive response can be gathered in the future.

The issue of space is often brought up across college and this survey proved no different. Students noted a number of issues: lack of appropriate study space; inappropriate use of study space; lack of social space; small/cramped seminar rooms. These problems are noted as having gotten worse due to the recent influx of students at the beginning of this academic year.

Further to the issue of space, it is noted that there is a lack of quiet space for students, previously provided informally by the Security team and their first aid room near the front of the RHB. Students have raised this issue as one which has had a serious impact on mental health and wellbeing, as well as physical health as students that need a quiet area to rest in have been denied this provision.

It is clear from the above that students are impacted greatly by the lack of investment and awareness around mental health and wellbeing. In an environment where over 37% of students report that their mental health has deteriorated since starting University [Student Voice Survey] it is clear that changes need to be made; therefore we propose the following recommendations:

Recommendations:

- Invest in mental health support services in line with the increasing need on campus and rising student numbers
- Increase availability of wellbeing drop-in or booking ability to cover all college opening times.
- Increase wellbeing/counselling offerings to include more varied types of therapeutic activity, for example group counselling or arts therapies.
- Allocate spaces on campus for secular, quiet, individual rest immediately. These spaces should be accessible, always open during college hours (not just during exam time) and monitored for misuse. The spaces should also be publicised so that students in crisis know where to go with ease.

Section 3: Staff Experience

Aims

This section aims to gain insight into the state of Mental Health and Wellbeing at Goldsmiths from the perspective of lecturing staff, to hopefully identify issues, so that this might be amended.

The findings of our interviews have confirmed the survey data results that mental health declarations have increased dramatically over the past four years. The interview questions focused on the systems and processes of Extenuating Circumstances (EC) applications and Reasonable Adjustment Student Agreements (RASA's), from an administration perspective, in addition to the increased pressure on academic staff to fulfil pastoral roles alongside their teaching and administration roles.

Findings

Nine members of staff were interviewed, including heads of departments, senior tutors, personal tutors and an exams officer. They were each asked 7 open-ended questions relating to their role within the University's support system. The full list of these questions can be found in Appendix 2.

When asked about training, it appeared that a lack of training amongst staff was a major issue, with current mental health training limited to online resources, and courses which are unpaid and during term time. This makes it difficult for all staff to attend. There were suggestions that training should be rolled out to all staff (and students by choice), along with sexual harassment training. In the Anthropology department, all senior tutors have received some official training, whereas in the Theatre and Performance (TAP) department senior tutors have received none. Comparisons found that TaP students were 10% less likely to feel like they could go to their tutor for help. This highlights the importance of training for staff.

In response to questions about extensions and EC, it was felt that bureaucratic processes for EC, RASAs & alternative assessments were futile, overly complex and stressful. Specifically in relation to alternative assessments, it was the arrangement of a meeting, evidence required for alterations and receiving updates on students' MH which all need to be made simpler. It was highlighted that these processes are inconsistent between departments. For example, TaP reported that they have saved administration and processing time for EC by having a single person in the role of department senior tutor and chair of exams. Staff also added that this means that this staff member knows the history of the student, which gives the requests more context. However, this example is particular to TAP and wouldn't necessarily be an effective solution in all departments. It was suggested by staff to appoint a school level Senior Tutor who could assist with the administration of extension and EC requests.

When asked about the impact on staff mental health, staff reported that their role as personal or senior tutors has had a negative effect on their mental health. This is due to the increase in

students declaring mental health problems to academic staff as well as requiring additional support and advice.

When probed about the provisions of support staff, it was suggested by a Head of Department to appoint a department counsellor/ pastoral support person for one day a week in each department. This point was echoed by the majority of the interviewees.

Staff said that they have noticed an increase in mental health problems in students, especially over the last 4-5 years; in line with recent research present in the IPPR Report, Sept 2017. Generally, staff know what resources are available and can signpost students to relevant services. However, students do not always follow this up and staff feel they spend a lot of time helping students access these services e.g. taking students to the wellbeing drop in.

Recommendations:

- Appointment of a mental health and wellbeing professional within departments- at least one day a week to provide pastoral care or counselling. Departments, such as anthropology, are already exploring the possibility of this.
- Someone above Senior tutors in each department to manage and handle extenuating circumstances applications. We suggest within the 'schools', i.e. Arts and humanities.
- Additional (compulsory) training for senior tutors and personal tutors, and any other staff interested.
- An update of crisis flow charts needs updating within departments and across the university.

Section 4: Services at Goldsmiths

Wellbeing, Counselling, and Disability services at Goldsmiths have experienced a number of changes. The team has grown from 14 members in 2015/16 to 19 members in 2017/18, to keep up with the increasing number of students using support services (from 542 students to approx 1200 over this time period).

Available services at Goldsmiths currently include:
- Wellbeing drop-ins and appointments
- Counselling
- Disability
- Multi-faith and wellbeing space
- Sexual violence liaison officers
- Campus support officers (CSOs)
- IAPT (Improving Access to Psychological Therapies) practitioner
- Substance misuse support
- Academic staff training

In this section we look at student mental health trends, Goldsmiths mental health support service provision, and focus in on the RASA process in place.

a) Student Mental Health trends, upcoming changes & the Goldsmiths Mental Health Strategy

Background

By speaking to Professional Services at Goldsmiths, we aimed to acquire a broader understanding of what our services are currently providing, and intend to provide in the coming academic year. We conducted interviews and asked a range of questions informed by previous research in HE as well as the results from the Goldsmiths Annual Survey. The list of questions can be found in appendix 3.

We interviewed Sue Tarhan (Associate Director of Student Support Services) and Louise Jennings (Head of Student Support - Wellbeing, Counselling, Disability and Chaplaincy Services), who have been in their current posts for 1 and 2.5 years respectively, and each working in HE for over a decade. They were keen to hear more about student research as well as the Annual Survey results.

Findings

From our interviews, we found that there have been a number of changes across the HE sector, regarding student mental health. There is more awareness, acceptance and openness in talking about mental health; however, a series of factors (including financial concerns) are having an impact on students.

At Goldsmiths, the CSO team was implemented as a response to student feedback. A student mental health and wellbeing working group will be established in conjunction with the SU/student reps as well as external partners. Yearly reports from student reps have been useful to inform strategy, but a longer-term research project would support in understanding student mental health trends over time.

Figures of mental health deterioration at Goldsmiths raise further questions: are students aware of services, are they able to access them, and if not, what are the barriers? The mental health and wellbeing working group will consider potential barriers and how to tackle them.

Establishing data and evidence is key to reviewing services, as well as having a more proactive and creative approach, which can be achieved by working with students. As a response to feedback from personal and senior tutors, departmental business managers, and heads of department, in-house mental health first aid training and guidance on the RASA process will be delivered. Working with the NHS and other providers is crucial where the in-house skillset cannot provide support. Additionally, there is also a plan to support students navigate complex referral processes.

Mental health first aid training will also be rolled out hopefully by the start of the new term in the next academic year. Professional services have many ideas, but they also want to hear student feedback on how to tackle current issues.

b) RASA process

Background

A topic which often comes up is the RASA system at Goldsmiths. RASAs are issued by the Disability Team, whereas ECs are handled by Wellbeing and individual departments.

Students with ECs can be referred to Wellbeing from Disability if the EC is due to disability or long-term health conditions. The provision of ECs varies across departments, with deadlines and processes being a matter of departmental procedure rather than an overall college strategy.

RASAs are provided by Disability after meeting with students, before being sent to the home department of the student concerned. We surveyed students about their thoughts on the RASA process (a response break down can be found in appendix 4), and interviewed Alice Speller (head of Wellbeing Services) to hear her thoughts on this process.

Findings

Student feedback has overwhelmingly focused on the inability of the current system to adequately support students. The findings are separated into two sections for clarity; however there are overlaps in findings and recommendations.

ECs have been mostly criticised for the lack of a singular institutional approach that is adopted across all departments. Variations in wording (mitigating/extenuating circumstances, extensions etc.) as well as in the differing standards of evidence across departments are cited as key areas that cause distress for students. Alice Speller (Head of Wellbeing Services) has echoed the need for ECs to be centrally controlled and administered.

A further area that has attracted criticism is the overly-bureaucratic and "faceless" system that ECs work under, with students citing the EC application process as 'anxiety-provoking', 'impersonal' and 'dehumanising'. Students argue that the system would benefit from a system of institutional guidelines that are adopted across all departments, but that are flexible and cognizant of differences in circumstances. An example of this is in the case of an EC request due to the death of a family member. Students have reported being 'hounded for death certificates and more evidence' at what is already a difficult and emotionally stressful time. A system based around clear requirements for ECs that take into account personal circumstances through face-to-face assessment is the key to making this work.

RASA provision is centrally provided, but there are still issues with this service cited in the survey. Criticism focuses on lack of staff availability and underfunding of the services responsible for the RASA system, as well as what happens to the RASAs once they reach departments.

Students have argued that waiting times are far too long, with some students waiting months to receive their RASA, while struggling without its support. This may be due to severe underfunding and lack of resources in Disability and Wellbeing Services. Students also argue that department responses to RASAs are not consistent, with key staff members (mostly associate or one-time lecturers) teaching without knowledge of student needs. Academic staff and students have identified a need for clarification on the remit of DSA and the Wellbeing Service for services such as mentoring (mental health/dyslexia or similar) and support tutors – due to there being confusion as to who provides these services, which results in academic staff offering incorrect information. Finally, students have identified the need for RASAs to be able to be used as evidence for ECs. This provision is allowed in some departments, but not in all.

Recommendations:
- Publicise support services at Goldsmiths more heavily
- Commission a larger piece of research (perhaps a three-year report) on student mental health trends at Goldsmiths
- Work to lay out RASA guidelines more clearly
- Improve communication between student services and departments surrounding RASAs

Conclusions

Section one outlined findings from the Annual Survey, highlighting trends in student mental health at Goldsmiths University. Section two looked at the student experience of services at Goldsmiths and highlighted important perceptions that services are under increased pressure with the rising number of students needing support, at Goldsmiths. Section three looked at the staff experience of mental health and wellbeing at Goldsmiths, and an important finding was that academic staff really do want to receive training on mental health and wellbeing, mostly to better support students, but also because the lack of training is stress-inducing. A positive is that section four, looking at service provision, highlighted a desire from the University's support services, to bring in training on mental health first-aid and RASAs at the start of the new academic year.

Of the recommendations listed, one that came up in several areas of this report was for mental health support services at Goldsmiths to be publicised more heavily (to the benefit of staff and students) and for the layout of services to be made more transparent & accessible (for example, providing a service flow-chart). The student experience section made clear that students feel that support services are not being invested, and so increased funding and staffing was another major recommendation. Finally, an important recommendation here was to introduce accessible spaces on campus for students to have quiet time- there is a gap in service provision here.

Appendix

Appendix 1: *Student interview questions, relating to perceptions of university support services*

1. Do you feel that the opening times of the services the university offers regarding mental health and wellbeing are sufficient? If so, why/why not?

2. Do you feel that staff have been properly trained in dealing with issues regarding mental health and wellbeing? If so, why/why not?

3. Do you think you would benefit from any of the following with regards to your mental health and wellbeing: group counselling, interactive self-help resources, links to voluntary agencies (external), signs on campus, involvement of students, art therapies, buddy/befriending system and exercise therapy? If so, what and why/why not?

4. Do you think that more funding should be given towards services, such as the counselling service? If so, why/why not?

5. Do you think that the university is an inclusive environment for all? If so, why/why not?

6. Do you think that all departments should have a standardised procedure with regards to dealing with mental health and wellbeing issues (and workshops?)? If so, why/why not?

7. Do you feel that there is a sense of community in your department? If so, why/why not?

8. Do you feel that the university has enough space to accommodate students? If so, why/why not?

9. Do you think you would benefit from a safe space, a room/rooms which is quiet, where you can unwind/relax and take a break between lessons? If so why/why not?

Appendix 2: *Staff interview questions, relating to support at Goldsmiths*

1. Do you feel you've had adequate training to deal with student mental health problems?
2. How do you feel about the extension and extenuating circumstances processes?
3. Has your role had a negative impact on your own health or mental health?
4. What provisions would you like to be put in place to support you in your role?

5. Have you noticed an increase in mental health problems in students?
6. Do you feel confident in signposting students to the correct support services? Do you follow up with students once signposted?
7. Do you have any further recommendations for improvements of the mental health and wellbeing processes and systems within your department, or Goldsmiths more widely?

Appendix 3: *Support services interview questions*

1. How long have you been in your post? How long have you been at Goldsmiths? Could you comment on improvement/deterioration of student mental health during your time here?
2. The Goldsmiths Annual Survey has revealed that the majority of respondents (37.76%) have experienced a deterioration in their mental health since starting at Goldsmiths. Could you comment on this?
3. Are you aware of any changes being implemented in the future?
4. What recommendations do you have for the new Goldsmiths Mental Health Strategy?

Appendix 4: *Number of responses by department to RASAs and Extenuating Circumstances survey*

Responses Across Departments

Department	Percentage
Visual Cultures	5.3%
Psychology	5.3%
Politics	5.3%
Music	5.3%
History	10.5%
Fine Art	10.5%
STaCS	10.5%
Anthropology	15.8%
Computing	5.3%
ECL	10.5%
TaP	10.5%
Education	5.3%