Enhancing Mental Health and Emotional Well-Being for Students and Staff: A Working Framework for Integrated Support

ANCA ALBA *

Kings College London, London, UK

A preamble

Recent years have seen an increase in the number of students reporting mental health problems. Distinctions have been made between diagnosed mental health conditions and mental health difficulties that are not diagnosed and support and treatment may therefore vary for these different groups of students. In this context, universities are seeing large numbers of students registering with specialist counselling and mental health services, with some universities reporting between 10 to 12 per cent of their entire student population applying for counselling every year.

One of the challenges universities face is that the evidence base for mental health interventions delivered in university settings to student populations, particularly remotely/online, is still limited. Most of the research distinguishes between clinical and non-clinical populations and a large proportion of studies focus mainly on common mental health disorders such as anxiety and depression. A recent meta-analysis of randomized controlled trials has found that e-mental health interventions can improve depression and anxiety symptoms, although the effect of these interventions on academic performance was discovered to be small and statistically non-significant (Bolinksi et al., 2020). The findings suggested that very few studies measure academic performance. Other research has

Corresponding author: Anca Alba. Email: anca.alba@kcl.ac.uk

similarly found that app-supported interventions, although not replacing professional clinical services, can be effective in alleviating depression and anxiety symptoms in university students (Linardon et al., 2019). However, less is known about the mental and emotional well-being of students in a broader sense and about interventions for serious mental health disorders in students in higher education.

The message professional services seem to send is that the disparity between demand and capacity means that not all students can be supported by counsellors at universities. Aside from the limited capacity of counselling services, some students may require specialist treatment that is not available at university, in which case the students can be signposted or referred to external services. It is not uncommon for students to be open to multiple providers simultaneously in statutory services and at university and may be advised to access support with one service at a time.

Universities need to be transparent about the support available for students at university and its limitations. Universities could provide information to students about existing support elsewhere and make referrals to external services that provide the recommended or required support.

Student communication around mental health difficulties

Professional counselling services are not the only forum in which students talk about and share their experiences of mental health difficulties while they are at university. Regardless of whether students are directly asking for help for their mental health, they sometimes communicate distress or the experience of suicidal thoughts in many other ways and in many different forums: a) to their personal tutors in tutorials; b) to faculty staff including administrative staff; c) to other students and friends; d) to residential wardens; e) when completing mitigating circumstances forms when applying for coursework or exams extensions or other academic adjustments; f) via Twitter and other social media platforms such as Facebook and Instagram; g) in emails to university leadership staff; h) in applications

for funding (such as hardship funds); i) in appeals or complaints; j) to advisors or mentors in other student services (for example, money, housing, international students advisors etc.); k) admissions, funding offices, library services or security staff etc. Anyone in the university community, regardless of role, may become aware of a student who is experiencing and sharing difficulties related to their mental health and may need advice about how to support that student.

Moreover, students can formulate their mental health needs and distress using terminology that only a few years ago would have been found mainly or exclusively in clinical settings in the description of symptoms and pathologies. The content shared by students through all these channels, which often is shared online and not always with the explicit intent to seek help, can raise serious concerns about their safety and risk to self or others as well as their well-being and may need an urgent response from the staff reading or hearing of these concerns.

Serious concerns and information sharing

This reality requires universities to be prepared at all levels to be able to identify and sensitively and compassionately respond in a timely fashion to such concerns. It seems important that universities have in place reliable cross-service processes and systems that work together to allow information sharing regarding students' mental health where there is a serious concern or identified risk to self or others. This information sharing would be on a need-to-know basis and in confidence with specialist services who can assess the students' needs and advise them of support available to them at university or elsewhere.

Many universities already have in place a central or single point of access for student referral and access within 24 to 48 hours to a mental health practitioner who can offer specialist assessment and advice. It is important that everyone at the university is made aware that such processes exist and encouraged to discuss concerns they may have about a student with a senior colleague or a line manager in the first instance.

Remote and online working in the context of a world-wide pandemic has brought new challenges for universities teaching and providing support to students who are not based in the UK. These students may not have access to crisis support, to a GP or to specialist mental health treatment. Moreover, legal limitations mean that university professional services are not able to provide the same level of therapeutic or clinical input to students who do not reside in the UK. Universities have had to adapt existing processes to consider these changes and propose alternative sources of support that all students can access remotely.

Integrated systems of support

When thinking about the mental health support students might request or need, one often thinks about speaking to a counsellor, a psychologist or a psychiatrist and having counselling sessions. Whilst students seem to be more open to speaking to a professional about their problems than perhaps their parents or grandparents, counselling or psychological therapies are not always the first line of support needed or requested by students. The student might face practical problems that are directly impacting their well-being and mental health and may need assistance and advice around financial and housing worries, social isolation, difficult relationships with supervisors or other students, experiencing racism, harassment, discrimination and abuse or needing additional academic skills support.

One might argue that it is self-evident that an integrated approach makes sense, as mental health is directly linked to the material, social and other resources students have available to them including self-reliance and self-efficacy. However, translating the theoretical principle of integrated support in practice in a university setting is far more difficult given that university services, systems and processes have not been designed for that purpose. Existing systems of support such as pastoral support can vary greatly from faculty to faculty within one university, and pastoral support is often provided independently from other support services. Student services may themselves have different recording systems and no

other processes in place for joint working or sharing support plans for students with complex or multiple needs that are affecting their mental health and well-being.

An integrated approach to supporting students' mental health would allow all these separate systems and levels of support to connect, communicate and work together to support the student at all levels including academic, pastoral and specialist support level.

What universities can do to ensure an integrated approach to student support:

- create opportunities to connect professional services with academic support through regular meetings, faculty visits, shared online forums, shared training, cross service events
- provide guidelines and training to all staff regardless of role around supporting students experiencing mental health difficulties; rather than burdening staff with additional roles or tasks, the training could help them feel more confident in having a conversation with a student disclosing mental health difficulties, being aware of available support at university and signposting students to professional support
- > provide clear information on their website from professional services about what is on offer and what service are not available to students
- include mental health practitioners with clinical experience in university settings in the decision-making process around organisational structures and development
- encourage professional services to participate in research, service evaluation projects and sharing good practice

References

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