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Mind The Gap (Phase 2)

Meeting the Mental Health Needs of Students at Anglia Ruskin University

Final Report - November 2007

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Introduction

The primary aim of work undertaken with AimHigher funding is to ensure that the outcomes of such work become embedded in the institution concerned, and are taken forward once the funding has ceased. In this regard, MTG2 has been a great success.

Building on MTG1, the Project was designed to start the process of developing staff, and embedding systems of support throughout our University for students with mental health difficulties and/or distress (MHD/D). The Project was identified as a key component of the work our University is undertaking as part of our combined Disability Equality Scheme action plan.

The Project has identified a significant interest amongst staff for training in this area, and INSPIRE shall – in collaboration with the Office of Student Affairs and HR – continue to offer workshops and resources in the future.

This report summarises the key outcomes of the Project. Further information and resources, guidance and more detailed reports on project outcomes, can be found on INSPIRE's website www.inspire.anglia.ac.uk.

Project Objectives

Project Object 1: To audit, co-ordinate and develop systems and inclusive practice across a number of University functions and a sample feeder institution

Through the evaluation of internal policies and strategies, and focus groups held with 'frontline' staff from complementary student-facing functions the Team has been able to establish links between student support functions which in some cases had not existed before, and in others had become broken as a result of the significant restructuring experienced by our University over the past few years. Accommodation, The Office of Student Affairs, and INSPIRE (the centre for learning and teaching) have met to discuss ways of identifying students at risk and making early interventions. 'Cause for concern' arrangements, internal information sharing and links with external agencies have all been highlighted and are being addressed through a range of means.

Visits to a feeder college have identified that tutors assisting students in the completion of UCAS forms are not specifically trained in helping students decide whether to tick the disability box, and thus disclose. We also identified that student support staff in this feeder college were unaware of the extent and nature of support that might be offered to students once they were in the HE environment. Our University widening participation team (via the stakeholder group) has agreed to progress these staff development needs.

Information materials/resources for staff, prospective and current students (and parents), were scrutinised to determine gaps in provision related to the mental well-being of students whilst at Anglia Ruskin. The web interfaces and web-based resources of other Universities were evaluated for benchmarking purposes, and to identify examples of best practice which might be usefully

incorporated into Anglia Ruskin activity. (See Guidance and Other Outputs, below.)

Project Objective 2: To establish the training needs for a range of non-academic staff

Online Questionnaire

We received 70 usable responses from support staff to our online questionnaire requesting information about their experience of students with mental health difficulties/distress, and their associated training needs.

Just over half of respondents indicated that they have encountered students with MHD/D and offered a range of behaviours that they considered to be indicators of possible MHD/D.

Most respondents had taken some action when they had observed a student exhibiting symptoms of MHD/D. Many had talked to the student and/or colleagues or had referred the student to University support services or other agencies. Other actions included; mediating through other students, referring to security or chaplaincy, undertaking staff development and reading,

Respondents identified additional knowledge, information or advice which would have helped them in responding to the student's needs. These included; support for out of hours staff, access to relevant details regarding the student, training on general MHD/D issues and common symptoms, help to avoid making a situation worse, knowing when and where to make a referral and 'anything to help distinguish between what might be called normal behaviour and what actually indicates a specific problem or illness'.

Bureaucracy was identified as an example of institutional processes and procedures which respondents thought might act as obstacles for students with MHD/D, together with lack of awareness and understanding of the issues. One respondent suggested, 'I suspect most of the obstacles lie in our perceptions, rather than the institution'.

Suggestions as to how these obstacles might be overcome included information sharing – ensuring that all relevant staff are aware of students' diagnoses, the use of mentors and advocates, simplified procedures and general training for all staff and better publicity of available support.

Just over half of the respondents indicated how equipped they felt to support students exhibiting symptoms of MHD/D. Of these, almost two-thirds did not feel equipped to identify students who may be experiencing MHD/D, less than one-third of respondents felt that they do not have the skills to adapt their approach to accommodate students with MHD/D; almost half do not know when to refer students to appropriate sources of support and just over half do not know where to refer students.

However most respondents feel that they can deal with students' emotional distress and or challenging behaviour in their working environment.

Those who offered suggestions for further training asked for general information regarding MHD/D and how to recognise the signs. Some respondents requested additional advice on how to deal with specific conditions and information about where to refer students for further help.

Focus Groups

Two focus groups were held with support staff. Staff with roles in security, registry, finance, careers,

work placement, marketing, student union, library and administration attended focus groups to discuss organisational development and training needs for support staff. These meetings allowed staff to share their experiences and learning. They stated that all front line staff need some training and know what to look for and how to respond effectively eg to understand the needs of students with autism. Role and context specific difficulties were identified eg Security staff are trained to deal with aggression in ways which might not be an appropriate response if a student's behaviour is the result of MHD/D. Further, staff in security roles are often contracted and the responsibility for training rests with the employing organisation.

Issues of duty of care versus confidentiality were also raised. Staff needed to know where rights to privacy cease and actions to ensure personal safety may take priority. Who should be notified when a student loses their judgment? What permissions are required?

Staff appreciated the opportunity to meet each other and the need for improvement of communication across services was identified as a key area that needs to be addressed. For example, staff involved with students in widening participation activities stated that they had no idea what happens once students start at university. Finance identified that they are often the last straw for a student in crisis. They appreciated that terse letters and raising sensitive finance issues could exacerbate distress, particularly if these were experienced on a Friday and the student was left without support over the weekend.

Staff also identified that there should be support and a debriefing process for staff and students who've been involved in a crisis.

Project Objective 3: Deliver staff development to academic and non-academic staff

During MTG1, academic staff reported their need for further development on how they could adjust practice to support both students with MHD/D and their classroom peers. Mind the Gap team members, the Office of Student Affairs and INSPIRE team members piloted staff development for academic staff which themselves gave rise to further areas in need of work.

Subsequent to the MTG2 support staff survey and focus groups, staff development events were designed and delivered in co-ordination with relevant staff in our University, including mental health specialists and colleagues from the Office of Student Affairs, FHSC and HR.

We held three 4 hour workshops which were attended by 29 staff. After introductions and a statement from each person regarding the outcomes they desired from participating, members of staff were provided with some findings from the Project followed by a small group session where staff contributed key case studies from their own experiences. Each group selected one of the case studies to swap with another group. Groups then considered the case studies before bringing them back for plenary discussion.

After a buffet lunch, any remaining questions were listed for further follow up. The discussions were documented and produced as 'collated wisdom' to be circulated to the participants after the events.

Our evaluations of the events demonstrated that staff who attended found them extremely useful. They appreciated the opportunity to share experiences and solutions, and to be made aware of the level of support which was available to them and students in our University. All the evaluations were very positive: 'Would like to know about more courses like this. It was VERY practical and

useful. Thank You'. 'Thank you for arranging this session. Would like more!'

Our staff development workshops will continue to be offered beyond the end of the project. Further, we are developing an 'inclusive practice module' to be delivered via the Staff and Educational Development Association ([SEDA](#)). We shall continue to support the delivery of this which – it is planned – will be primarily web-based.

Project Objective 4: Developing management processes to support staff in meeting the needs of students with MHD/D, and non-traditional students in general

Our experience with equality and widening participation issues demonstrates that – in order to be effective – organisational development through staff training must be underpinned by robust management processes and performance requirements.

Adjustments to CPD are still some way off, however the Team continues to work with HR in this regard this original MTG objective remains an objective our new Equality Proofing the Curriculum Project which is sponsored by the HEA through its 'Developing and Embedding Inclusive Practice' strand.

Guidance and other outputs

Website Review

The team reviewed 92 University websites (English Universities with more than 2000 students) to benchmark their web-based provision for the support of students with MHD/D. This work identified a few examples which informed the design of our new 'inclusive practice' website – "[teachinclusive](http://www.anglia.ac.uk/teachinclusive)". <http://www.anglia.ac.uk/teachinclusive>.

All the HEI's websites were visited to determine the nature and extent of the provision of information relating to students with MHD/D using the following five indicators:

1. Is the term "Mental Health" mentioned on the website?
2. Is there a link to a Mental Health page on the home page?
3. Is there a link to a Disability page on the home page?
4. Is there a link to a Student Support Services page on the home page?
5. a) Was a Mental Health page located, and if so how?
b) How many clicks from the Home page was the Mental Health page?

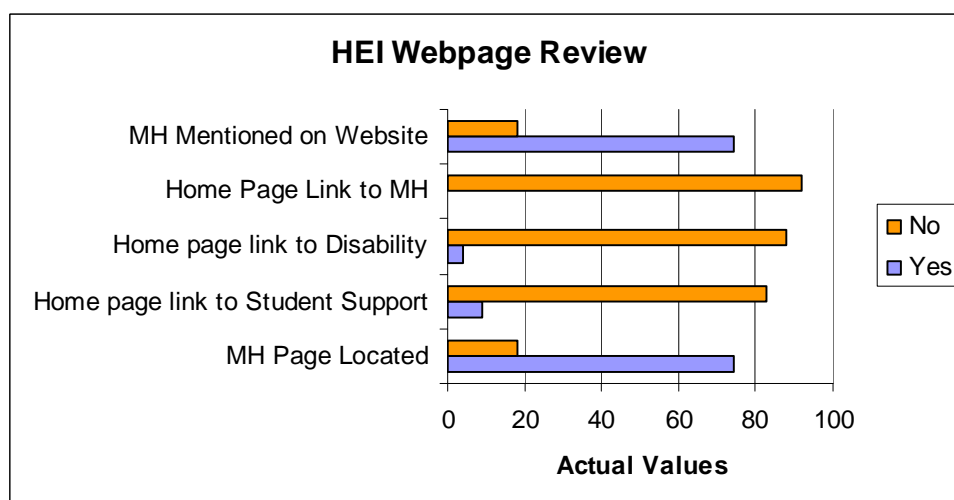


Figure 1: Indications of support for MHD on HEI Webpages

Eighteen institutions do not refer to Mental Health anywhere on their website and none had a direct link to a Mental Health page from its home page. In the absence of a direct link to a Mental Health page, it was felt that students with MHD/D may opt to look for support via the student support service's disability page. However, only four of the HEIs involved in the study offer a direct link to their disability page from the home page.

The third most likely entry path for a student looking for information about support for MHD/D is via the Student Support Services pages. Just less than one in ten of the HEIs in the survey offer such a link.

In addition, only two of the HEIs offered links to both Disability and Student Support Services pages. Furthermore, as noted below (see Indicator 5), other links – particularly to Current Student content – were successfully followed to locate MHD/D web content.

With or without a direct link to a page containing information for students with MHD/D, the HEI websites were explored to discover if such a page existed. Three different methods of locating web pages were employed, in various combinations, by the HEIs:

- Site Search Engine
- Following Links (i.e. Disability, Student Area, Student Support Services, and so on)
- Site A-Z

Thus, if links were available, these were followed until a page concerning MHD/D was located. If such a page could not be located using this method, or if no such links existed, the Site A-Z page was explored. In the absence of links or an A-Z option, the site search engine was employed. The terms used to explore the A-Z pages and the search engines were 'mental health' and, should this be ineffective, 'disability'.

It is possible, therefore, that appropriate sites may have been identified using some or all of the above methods but searching was terminated once the page had been located by whichever method proved successful.

The most effective method for tracking down information was the site search engine. Only one HEI

does not include a search engine on its website. However, many HEIs omit an A-Z option that, in part, accounts for the low success rate displayed in the table.

Another indicator of HEI concern for access to information for students with MHD/D is the number of clicks away from the home page the appropriate web page is located. The number of clicks recorded, however, reflects the number of links followed either directly followed from the home page, or via the search engine or via the A-Z. The number therefore should only be considered indicative.

The modal response is 2 clicks. Combining 2 and 3 clicks represents more than half of the websites that host MHD/D web pages. Only eight HEIs locate their MHD/D web pages more than five clicks away from the home page.

The indicators were cross-tabulated by HEI to determine if any pattern emerged showing particular approaches adopted according to status (either actual or presumed). However, no particular pattern of provision by status was found.

Quality of Website Content

The quality of information contained on university web pages offering information concerning students with MHD/D varies widely. The type of the information provided ranges from the inclusion of the phrase 'mental health' on a generic disability web page to lengthy documents offering definitions, policies, contacts, and advice. The Research Team and Stakeholder group arrived at a rough definition of the extent of web based MHD/D information as follows:

- 'Comprehensive' university websites are those that have a dedicated mental health page that includes definitions of mental health issues and have both general and specific advice and (usually) a named contact.
- 'Typical' university websites have a mental health page that has no real depth to it.
- 'Partial' university websites either have no specific mental health page (in most cases the phrase 'mental health' is mentioned as a list of conditions on a disability page) or has a dedicated page that has no useful information on it.

Website Construction

Review of the Anglia Ruskin web resources and discussions with the stakeholder group, identified the opportunity through this project to create a leading web resource at Anglia Ruskin. The Review of other University web based provision highlighted a range of web based support for students with MHD/D and University Staff on which we could base our own resource. The redesign of the Anglia Ruskin University website for students with MHD/D has taken into account the need for a centrally located information resource that is easily accessible by all students.

The final site version was built from scratch by INSPIRE using HTML and CSS, utilising features such as access keys and is optimised for print and screen readers. It uses a design that harmonises the Anglia Ruskin design brief and the direction of the mock-up. The information included in the redesign is comprehensive and pertinent. The tone of the content is welcoming and supportive and does not focus purely on the instrumental aspects of evidence and finance (as is the case at several universities).

The site combines staff and student portals and will provide information, interactive tasks, and student contributions. This site has been designed to be something that enlightens, motivates and inspires staff, and which embraces the use of new technologies (like RSS and interaction) whilst still being as accessible as possible.

The Beta version of the website is available at <http://www.anglia.ac.uk/teachinclusive>.

Brochures

We reviewed brochures and guides issued to staff by other Universities to inform the development of our own staff guidance Supporting Our Students Mental Wellbeing: a guide for staff, a copy of which was delivered to every member of Anglia Ruskin staff, and which is available for download from INSPIRE website www.inspire.anglia.ac.uk. The Guide was illustrated by photographs of students who gave specific consent to appearing in this publication and contains a flow chart which can be pinned to the wall of offices. Out-of-hours staff have been provided with visiting cards with appropriate directions and telephone numbers. As identified through our focus groups, we also printed cards with essential numbers for students for distribution by staff when required.

Case Study Video

One of our stakeholder group members with disclosed MHD/D – provided us with a powerful case study of her experience at an English University. The project team took this as a basis for a staff development resource. The student's account was adapted and fictional accounts were written and attributed to members of University staff. Members of the MTG2 team acted and filmed this to provide a spark for discussion during staff development activities. The video - Hearing the student voice: supporting our students' mental wellbeing - has proved to be a powerful learning and teaching aid and is available to view at INSPIRE's website.

Dissemination

All staff were provided with a copy of the guide at the beginning of academic year 2007-2008.

The MTG findings and outputs were disseminated internally at Anglia Ruskin's Learning and Teaching conference on 15 June.

Further, Jaki Lilly and Tony Brand ran an interactive session at the HEA conference in Harrogate in July where we screened the role play which promoted successful and thought provoking discussion with representatives from other HEIs with regard to their Universities' provision for students with MHD/D, and their Universities' support for staff supporting students with MHD/D.

It is planned to contribute a further session to the SEDA conference in May 2008.

The Mind The Gap 2 Team November 2007

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