

Student living: collaborating to support mental health in university accommodation

A report by Student Minds, the UK's student mental health charity

A programme funded by UPP Foundation

student minds



The UPP Foundation is a registered charity that offers grants to universities, charities and other higher education bodies.

In recent years, as higher education has expanded, the burden of paying for a degree has shifted towards the individual. This naturally presents difficulties in terms of maintaining the 'University for the Public Good', as well as ensuring there is greater equity in terms of going to, succeeding at and benefiting from the university experience. We believe the UPP Foundation can make a small but significant contribution in helping universities and the wider higher education sector overcome these challenges.

The UPP Foundation was created in 2016 by University Partnerships Programme (UPP), the leading provider of on campus student accommodation infrastructure and support services in the UK. UPP is the sole funder of the UPP Foundation.

The UPP Foundation is an independent charity and all of its grants are reviewed and authorised by its Board of Trustees. The Foundation is supported by an Advisory Board.

More information is available at the UPP Foundation website: www.upp-foundation.org

## student minds

This report was authored by Rachel Piper (Policy Manger) with support from Rosie Tressler (CEO), Eleanor Gale (Training Officer) and the Student Minds team.

Student Minds is the UK's student mental health charity. We empower students and staff to develop the skills, knowledge and confidence to look after their mental health, support others, and create change, so that all in higher education can thrive.

Website - Studentminds.org.uk

Twitter - @StudentMindsOrg

Facebook - /studentminds.org.uk

 ${\bf Blog-student mind sorg. blog spot. co. uk}$ 

## Table of Contents

4	accommodation providers in supporting student mental health
5	Defining our terms
7	Executive Summary of Recommendations
8	The Student Living Project
8	Methodology
9	Contributors
10	A snapshot of the issues connected to student mental health and accommodation
12	Pathways, policies and practice
24	Workplace wellbeing for accommodation staff
28	Mental health & welfare training for accommodation staff
34	Information, support and resources for students
40	Community building, peer support and social networks
46	Student wellbeing and building desig
52	Conclusion
54	Further resources
56	Endnotes/ Sources
60	Bibliography

# Introduction: The role of accommodation providers in supporting student mental health

Student mental health has risen up the Higher Education (HE) policy agenda in recent years. In 2015, the Higher Education Funding Council for England (HEFCE) reported that student support services were seeing a 150% increase in appointments! Wellbeing in the student population has been found to be lower than the same age group not in Higher Education? Approximately 29% of students experience clinical levels of psychological distress<sup>3</sup> associated with increased risk of anxiety, depression, substance use and personality disorders.<sup>4</sup>

Cultivating environments and communities that are supportive of mental health, and providing timely access to support services, is the most effective approach to reducing mental health difficulties in our society. In response to the rising demand for services and the profile of the issues, various sector bodies have recommended an emphasis on a holistic wholeuniversity approach to student mental health, which will be supported by an upcoming strategic partnership programme led by Universities UK.5 This report considers the role of the university accommodation sector within this agenda. It focuses on purpose built or student only accommodation, halls of residence as opposed to private landlords, although certain themes may be transferable. These recommendations may be considered in shaping relevant codes of practice for HE Accommodation in the future.

"There was a student that lost her dad, I've also lost my dad so we opened up to each other. We chatted. Then we ended up joking together."

Cleaner

With over 336,000 students in institution-maintained halls and more than 132,000 students in private sector halls in the 2015-16 academic year,<sup>6</sup> accommodation providers have a unique role to play in caring for the student population. This role exists on a practical level as staff are often at the coalface of these issues. Fundamental to a student's experience is the team working in their halls of residence; staff can often support referrals, signposting to further support and basic community care, and responding to students experiencing a range of mental health difficulties.<sup>7</sup>

Accommodation providers also have a role to play on a strategic level in terms of creating a community that promotes positive wellbeing. There is also a clear retention case, since students who feel they are integrated into their flat with other students are less likely to consider dropping out of university. Furthermore, accommodation providers are required to adhere to both health and safety requirements and legal requirements under the Equality Act.

One of the difficulties in supporting students with mental health difficulties and/or disabilities is in coordinating the shared responsibility, between academic, pastoral, Students' Unions, chaplaincy, wardens and accommodation staff, especially if accommodation staff are not sufficiently supported and integrated into support systems, and their skills are underutilised. This report aims to increase the confidence of all parties involved in supporting students in accommodation. For universities and accommodation providers who are not in partnership, they may consider each other an inhibitor to strengthening student engagement. However, we would advocate for a more joined up

and open relationship between different student accommodation providers and their local universities. Through collaboration, universities and providers can play a part in supporting the doctors, teachers and business leaders of the future to leave university thriving, equipped with the skills to manage the ups and downs of life and go on to play a part in creating a stigma-free society. The student accommodation sector has the opportunity to make a difference on this crucial issue.

This report was informed by the Student Living project, a pilot project between Student Minds, University Partnership Programme (UPP) and Nottingham Trent University in 2016, funded thanks to the UPP Foundation, as well as a review of existing literature and interviews with a range of sector experts.

### This report includes:

- Recommendations for accommodation providers and university staff, informed by observations of work delivered at UPP Accommodation at Nottingham Trent University.
- Suggested ways of working to promote positive student mental health.
- Discussion of the challenges of cross-university/ cross-organisational work, and ways in which collaboration can create an embedded approach.
- Case study examples informed by interviews with sector experts.

Student Minds would like to thank UPP and the charity, UPP Foundation, for all of the support, both financial and in staff resource that has been allocated to ensuring the success of this project.

For accommodation providers or university colleagues that are interesting in exploring partnership opportunities or undertaking projects related to the recommendations in this report with Student Minds, please contact info@studentminds.org.uk.

### **Defining our terms**

### For the purpose of this report:

Accommodation Staff – For the most part, in using this term, we refer to staff on the ground (cleaners, residence managers, facilities officers etc.) as opposed to management, although they also have a significant role to play.

Student Support Services – This refers to the wide range of support at universities, which includes health centres, mental health support, counselling, student support officers, faith and spirituality, self-help and other health programmes or interventions.

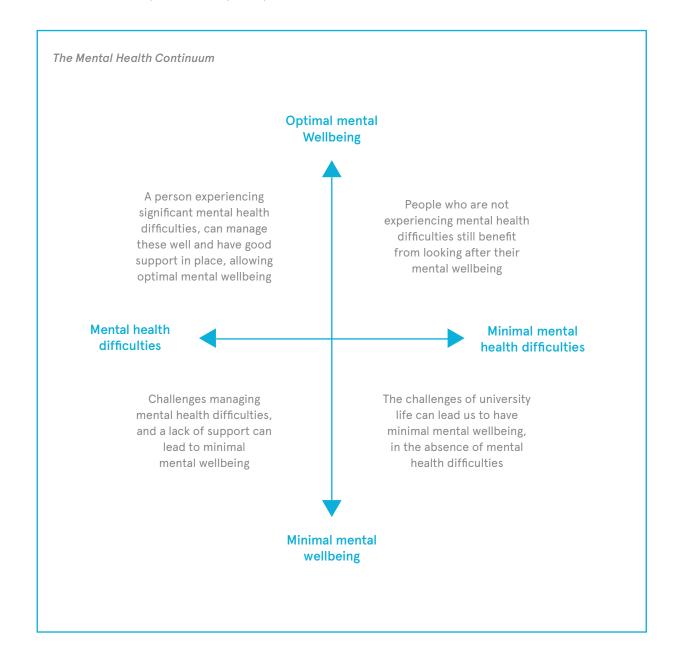
University Accommodation Services – Some universities will have a service set up to support students with housing, in partnership with private accommodation providers.

Mental health difficulties – Mental illness is protected under the umbrella of disability under the Equality Act, and certain support will only be available to students with medical evidence. Our definition of mental health and wellbeing exists on a continuum and fluctuates day to day. We look at mental health according to a social

model, whereby external factors in your environment affect your wellbeing. For example, a student with a medical diagnosis of Depression may have very good wellbeing if they have the right treatment plans in place for them, a strong support network of friends and family, and helpful adjustments to their university course. Equally, a student without a medical diagnosis of a mental health difficulty may be stressed by exams, feel isolated and unsupported by those around them, and feel unable to cope with the day to day stresses of

university life, and may therefore have low wellbeing. When we say a student is 'experiencing mental health difficulties' we mean that they are unable to cope with day to day life.

We all have mental health and have a part to play in creating a healthy community, and normalising the ups and downs of life, whilst acknowledging some people may really struggle at university.



## **Executive Summary of Recommendations**Pathways, policies and practice

A substantial challenge to supporting student mental health is the fragmentation of care. Ensuring that an institution's service referral pathways and crisis policies are accessible to accommodation providers (university and non –university owned) can ensure the right information is shared between teams and that students get support as early as possible. A range of structures can be used to support joint-working, audit current practice and clarify the roles and responsibilities of all involved.

- 1.1 Audit current policies, procedures and practice around student mental health support within accommodation and at the university, to develop a comprehensive mental health and suicide prevention policy.
- 1.2 Develop cross-organisational understanding of information sharing and data protection.
- 1.3 Ensure consistent reporting practices, to align all halls of residence with the University's student support services.
- 1.4 Review referral pathways and escalation procedures to align all halls of residence, not solely a University's own accommodation with the University's student support services.
- 1.5 Establish or join a university-wide mental health strategic working group.
- 1.6 Establish case working groups through which to manage individual cases regarding student support.
- 1.7 Disseminate a comprehensive and accessible mental health resource to guide practice for staff across the institution and accommodation.
- 1.8 Consider the appointment of a role dedicated to student support and welfare in halls.
- 1.9 Review accommodation staff roles to ensure that job descriptions and contracts recognise the pastoral aspects of staff roles and set clear expectations.

### Workplace wellbeing for accommodation staff

Inseparable from supporting students is ensuring the mental health and wellbeing of staff. Accommodation staff may be experiencing, stress, bereavement or long-term mental health difficulties and need more support debriefing difficult situations involving students. Accommodation providers with workplace wellbeing strategies, for which a range of tools exist, will see benefits both for their employees and the students they interact with.

 2.1 – Develop a Workplace Wellbeing Strategy where one has not been implemented.

- 2.2 Support managers to feel confident about talking to the staff they manage about their mental health, and protect time for this in supervision sessions.
- 2.3 Provide immediate follow up debriefing and supervision for staff managing difficult scenarios.
- 2.4 Universities and/ or their accommodation providers should consider a review of overnight and out of hours practice and provision including the roles of any security staff, porters etc., ensuring that they are linked to adequate welfare/student support services.

### Mental health & welfare training for accommodation staff

Few staff in accommodation will have a background or training in mental health. Training is required in order for staff to be equipped to follow the right protocols, respond adequately to distress, understand the boundaries of confidentiality, and consider the positive things they can do to create a supportive culture. There are various considerations when commissioning training to ensure it is relevant, secure buy-in from frontline staff, and ensure a joined up strategy on related welfare issues.

- 3.1 Invest in compulsory mental health training, tailored for front-line staff to support appropriate early intervention, timely signposting to support and clarity on boundaries.
- 3.2 Provide additional training on other related welfare issues, which is aligned to training for university academic and pastoral staff.
- 3.3 Review the conflict management training that is currently offered to accommodation staff.
- 3.4 Encourage staff to introduce their roles and remit to students.

### Information, support and resources for students

Whilst universities typically provide students with a range of pre-entry information and materials to adjust to university life, there are opportunities to work with colleagues in accommodation to ensure messages are delivered at timely points and to proactively support students to manage their own mental health and support others without this negatively impacting upon their own wellbeing.

- 4.1 Universities should provide pre-entry materials to prepare students for their university experience, and collaborate with accommodation providers on a joint dissemination strategy.
- 4.2 Universities and accommodation providers should provide students with information about disclosing their mental health.

- 4.3 Universities, with support from accommodation providers should consider how they can empower students with the knowledge, confidence and skills to support themselves and others with mental health difficulties.
- 4.4 Provide support and resources for students supporting housemates/flatmates.
- 4.5 Accommodation Providers should consider their response, and draw up necessary policies on procedure if a student's behaviour is adversely affecting others in the flat
- 4.6 Provide information, advice and guidance about housing to students.

### Community building, peer support and social networks

Structured peer support schemes, Residence Assistant roles and collaboration with Students' Union and student groups to deliver student-led health promotion activities can help to build a sense of belonging. These schemes require adequate training, supervision and development work to clearly define roles and boundaries.

- 5.1 Build supportive communities by establishing networks of safe peer support within halls, for example through Residence Assistants.
- 5.2 Empower students to develop and lead campaigns and social contact events including health and wellbeing programmes.
- 5.3 Support provision of workshops on practical skills for students.

### Student wellbeing and building design

The design of student accommodation can significantly impact many aspects of our wellbeing; sleep hygiene, nutrition, and our ability to form communities. New builds present an opportunity to optimise the environment and even in older sites some simple changes can create a more positive living environment. It may be appropriate to make adjustments, or provide quiet blocks for students with specific diagnoses, and it is important these adjustments are made in consultation with students and student services staff.

- 6.1 When developing new accommodation, create communal space for social interaction and to enable activities to run that build a sense of belonging.
- 6.2 Consider the design and amenities of new accommodation to support good wellbeing and sleep hygiene.
- 6.3 Consider providing the option of quiet blocks or corridors.

- 6.4 Universities specifying new accommodation should consider allowing for a range of catering options within accommodation if demand is considered sufficient.
- · 6.5 Co-design with students.
- 6.6 Consider what types of room adjustments might be made for students experiencing difficulties.

### **The Student Living Project**

Students have a unique experience at university and in accommodation, and this can pose challenges for supporting students' mental health and wellbeing. In response to this, Student Minds were commissioned by the UPP Foundation to deliver the Student Living project.

### What did the Student Living project involve?

- Training for UPP Accommodation Staff & Nottingham Trent University (NTU) staff – Between September and November 2016 Student Minds delivered a bespoke training programme, 'Supporting Student Mental Health in Accommodation' to 124 members of staff in 13 three-hour long workshops – see Recommendation 3.1 for further details.
- Training for Residence Assistants We trained 46
  Residence Assistants to ensure they are familiar with
  the same processes, and work in a joined up way
  with UPP staff.
- Training for Freshers teams We delivered a tailored version of our Look After Your Mate training to 39 student Welcome Week volunteers to enable them to spot the signs of a fellow student experiencing mental health difficulties, to engage in a supportive conversation and help the student to get the support they need.
- Peer support We have trained a group of students to deliver our Positive Minds Peer Support Programme at NTU.
- Production of this report to share learning with the sector.

### **Methodology**

The recommendations in this report have been shaped through a range of methods.

### Facilitation of a steering committee of key players in student mental health at NTU:

Membership included staff from the UPP managerial team, UPP's residence staff, NTU Accommodation Service, the Student Support Service and representatives from the Students' Union and Student Volunteering department. The sessions gave an opportunity to discuss the best approach to student mental health at the University, establish the remit of

the project, give and receive feedback, and to gain an understanding of the landscape of NTU.

### Semi-structured interviews with staff and students at NTII and LIPP:

Interviews were conducted with 21 individuals, including 11 UPP staff, 2 Student Support Service staff, 2 University Accommodation Service Staff, 2 Wardens and 3 Residence Assistants (students). The interviews aimed to identify staff's key concerns and questions through qualitative research, including:

- · Gathering case studies to inform the training;
- Finding out how staff interact with students currently;
- Gauging staff understanding of the support structures, referral systems, student support issues and student mental health specifically;
- Identifying other prevalent welfare issues (e.g. drugs, sexual assault on campus, LGBT+ experiences, BME experiences, and disability experiences).

## Discussions with staff during training sessions about their experiences of supporting students:

The training sessions provided an opportunity for staff to discuss their interactions with student mental health.

### Review of the landscape of student support at NTU:

To support partnership working between NTU and UPP we scoped out the range of ways in which students are supported on campus and in accommodation. This scoping included:

- · An overview of NTU policy, procedure and practice;
- · Mapping out referral/signposting pathways at NTU;
- UPP and NTU sharing any documents provided to staff on supporting and signposting students with Student Minds;
- An overview of staffing structures across the organisations involved.
- · Review of prevalent welfare challenges:
- The primary focus of the research was mental health, however in order to inform training development we conducted a review of literature, policy and practice concerning broader student welfare issues, including alcohol use, drug use, sexual consent, LGBTQ+ and BME-specific experiences.

## Semi-structured interviews with sector leaders, supported by a literature review:

We conducted interviews with 14 sector leaders including heads of Student Services and individuals who have held roles in various university accommodation services. We also consulted The

Alliance for Student-Led Wellbeing and The UPP Foundation Advisory Board. In order to situate our observations within the wider student mental health context we collected case studies from other HE Institutions and accommodation providers.

### Consultations with students and graduates:

We held a focus group on university accommodation with the Student Minds' Steering Group, a group of recent graduates. We also conducted informal interviews with volunteers from the Student Minds network, including Student Minds Press Ambassadors.

#### Contributors

**Student Minds Volunteers** 

The Student Minds Steering Group

**Nottingham Trent University, Student Services** 

Sally Olohan MBE, Alison Bromberg, Sarah Bustard, Ruth Taylor Wykes

NTU Student Accommodation Support Service Tim Woodman-Clarke, Stephen Turner, Mark Simmons, Eleanor Cush, Bill Turner

Residence Assistants at NTU

NTU Students' Union Zarielle Prosser

### UPP

Sam Bailey-Watts, Jon Wakeford, Kiri Charlton, Josie Kiernan, Dr Paul Marshall, Trevor Bonnage

#### **UPP NTU**

Kathryn Brown, Steve Phillips, Colin Gray, Chris Hall, Eddie Kealey, Claire Tow

Thank you to all of the staff who took part in interviews and training to inform this report.

### **UPP** Foundation

Richard Brabner

Members of The UPP Foundation Advisory Board

### **Sector Experts**

Gareth Hughes – Psychotherapist at Psychological Wellbeing at University of Derby

Dr Ela Nutu Hall – Residence Life Manager – The University of Sheffield

Rebecca Young – Policy Officer – Welfare & Community, NUS

Thomas Taylor – Assistant Director – Security & Operations, University of Worcester

Professor Jo Smith – Professor of Early Intervention and Psychosis at the University of Worcester and Suicide Safer Project Lead – University of Worcester

Mandi Barron – Head of Student Services – Bournemouth University

Julia Haas – Wellbeing Coordinator – King's College London

Dr Andrew Reeves – Project Director – Students Against Depression, CWMT

Ruth Caleb – Head of Counselling – Brunel University

Nicholas Streatfield - Directorate of Student & Staff Services - York St John

Andrew Wootton - Director - ProtectED Code of Practice

Dr Lucy Winrow - Editor - ProtectED Review

Paul Humphreys – Founder and CEO – StudentCrowd

Ross Renton – Pro Vice Chancellor Students – University of Worcester

The Alliance for Student-Led Wellbeing

Lodestone Communications

## A snapshot of the issues connected to student mental health and accommodation

The links between accommodation and mental health are well documented. The NHS' national '5 Year Forward View for Mental Health' recognises housing as a contributing factor in managing mental health well and recovery, whilst Student Minds' Grand Challenges research recognised housing as a key challenge for student mental health.<sup>11</sup>

### There are a range of connected issues:

- Time of Transition: Transition periods, such as moving to university, can be when individuals are most vulnerable to experiencing difficulties with their mental health. For many students, moving into accommodation at university will be the first time they have lived without their family to help them stick to a routine, prepare healthy meals, and juggle domestic commitments like food shopping, cleaning and laundry.<sup>12</sup>
- Integration between home and university care: For students experiencing mental health difficulties prior to moving to university there are further challenges, particularly with regards to the time lag for referrals to specialist services and the impact of repeatedly moving between home and university support services which affects therapeutic relationships and access to patient records.<sup>13</sup>
- Lack of pastoral support systems: Most students will move away from their pre-existing support networks of family and friends. This can be isolating, especially if it is the first time they are away from home. 70% of students cite friends & family as being the most important factors in contributing to their wellbeing.<sup>15</sup> Being away from

family and friends may make coping with everyday tasks, and keeping mentally and physically healthy in a new environment challenging. Students have identified that "counselling services, the ability to talk to wardens, and information about where to find someone to talk to and talking to staff in their accommodation" are the four most valuable services for supporting them when they are experiencing difficulties in accommodation.

- Living with strangers and making friends: Sharing housing with people that students haven't previously met and may not have chosen to live with can cause conflicts due to personality clashes and issues around managing sleeping and eating.<sup>18</sup>
   Social support networks, be they housemates, friends or members of student societies, can be a protective factor in improving students' wellbeing.
- Homesickness: Students are likely to feel homesick at university; in one study, 73% reported this was the case.<sup>19</sup> By creating a sense of home in halls through community activities, capacity for students to personalise their space, and supportive networks, students may be more likely to feel at home.<sup>20</sup>
- Security and safety: Students are more likely to be victims of crime than people in the local community: Students can be victims of hate crime, targeted due to their gender, sexuality, race, faith or disability.
- Drugs and Alcohol: The majority of students know about the risks associated with drinking, but it is a part of the university culture.<sup>23,24</sup> Students who abstain from drinking report feeling excluded from social activities and sports.<sup>25</sup> Students report that they are most likely to drink to celebrate and increase their positive feelings.<sup>26</sup> However, alcohol use is also associated with depression, stress and anxiety<sup>27</sup> and drinking can exacerbate physical and mental health difficulties. Studies show that people with high levels of stress and anxiety will drink alcohol more frequently as a way of coping with experiencing mental health difficulties, and/ or negative emotions.<sup>28</sup> Students in university-based accommodation are more likely to go out to student club nights than those living at home. They are also more likely to 'pre-load' by drinking before going out clubbing, meaning they may be drunk before leaving their accommodation.<sup>29</sup> However, living in shared accommodation can be protective for students' wellbeing in terms of students employing strategies to stay safe, for example returning back to accommodation together.



## Pathways, policies and practice

Recommendation 1.1: Audit current policies, procedures and practice around student mental health support within accommodation and at the university, to develop a comprehensive mental health and suicide prevention policy.

"In order to best support students, it is important that there is integration between welfare services and accommodation providers."

- Mandi Barron, Head of Student Services, Bournemouth University

A lack of clarity around policies has been identified as a key challenge in terms of communicating a student's support needs. Communication between organisations to coordinate support for students experiencing mental health difficulties is fundamental to providing effective support.

It is important for accommodation providers to work with the university to overcome issues of fragmented care, and a lack of integration of support and services.<sup>32</sup>

Accommodation and security staff are practiced in referring students to further services and thus are competent and used to making decisions, in the moment, based on intuition and past experience. To support this work, we would recommend conducting an audit and review to map your current policies, procedures, practice and provision for student mental health on site and at the university. We would recommend that accommodation providers regularly review their mental health and student welfare policies and procedures at a strategic level.

Ensure that there is cross-institutional representation to develop, update and monitor the policy.<sup>33</sup> Work in tandem with the university, to consider any gaps in support and any subsequent joint action.<sup>34</sup> Staff and students with direct experience of the impact of mental health difficulties should be consulted and asked about their needs and what they would value in accommodation.

The Healthy University model suggests that for some universities an 'overarching health policy may be the most effective, "5" recognising that various aspects of student health interlink in terms of policy and protocols – for example alcohol and drugs, consent etc. Institutions and accommodation providers should decide the best model for their situation and make use of the comprehensive guidance available.

### This audit, review and mapping exercise aims to:

- Help staff on duty to have confidence in the processes for dealing with situations in a timely and appropriate manner.
- Allow the university and accommodation provider to establish the boundaries of their roles, and their duty of care.
- Help to provide clarity to staff, especially new or temporary staff.
- Ensure equity of the experience for students across all halls at a university.
- Support accommodation staff to understand data protection and other relevant policies.

### Draw up a strategy to cover:

- · Confidentiality and data protection;
- Duty of care;
- · Roles and responsibilities of staff and students;
- · Disciplinary procedures;
- · Approaches to early-intervention procedures;
- · Crisis response procedures;
- Mechanisms for supporting students who may fall short of criteria for a crisis response, but still need on-going support;
- Post-crisis support practices and procedures (e.g. the support to be put in place if students are discharged from NHS care back into accommodation)
- Suicide prevention policies and clear postvention procedures following a student death (see below)<sup>36</sup>
- · Approaches to conflict mediation;
- Approaches to first response after cases of sexual assault/rape;
- · Approaches to bullying/housemate disagreements;
- · Understanding of Fitness to Study policies;
- An understanding of local NHS resources, referral pathways and communication channels;
- A statement of the accommodation provider's commitment to mental health and wellbeing;
- A shared purpose and vision in accommodation for promoting positive student mental health.

### Considering suicide response procedures:

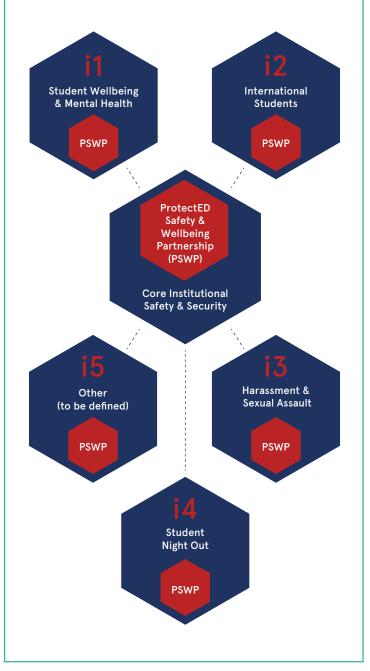
 Suicide is a significant public health issue. Providers need a postvention plan following a student death or attempted suicide. Someone doesn't need to be close to the individual to be affected by the event. Accommodation providers have an important role to play in preventing contagion. We know that contagion is more likely where there are similar characteristics and that people might be more at risk if they were very close to the individual or are within close geographical proximity. Getting postvention right is a preventative measure.

#### Further resources for suicide prevention:

- The Samaritans have comprehensive resources called Step By Step including guidance on breaking the news, communications and managing social media, dealing with coroners requests sensible reporting (such as ensuring the methods are not reported) and the correct approach to memorials and anniversaries. People may need support and the opportunity to talk about the person who died. This also needs to be balanced with family wishes. Local Samaritans branches can offer support to a community: www.samaritans.org/education/step-by-step
- Papyrus can provide support to anyone worried about a young person: www.papyrus-uk.org
- Refer to latest Public Health England guidance: www.gov.uk/government/collections/suicide-preventionresources-and-guidance

#### Further Reading: ProtectEd

- ProtectED is the first UK higher education accreditation scheme to look comprehensively across students' safety, security and wellbeing. The need for ProtectED is rooted in the recognition that universities have a wider role to play in supporting the safety and wellbeing of their students not only while they are on campus, but throughout their student experience.
- ProtectED accreditation is designed to assess the extent to which universities provide the services and structures that enable students to avoid problems and focus on their success.
- The ProtectED Code of Practice includes comprehensive measures in five key areas impacting student wellbeing:



## When conducting an audit, the accommodation provider may find these questions helpful:

- What is your current approach to supporting student mental health on site?
- What is your current strategic approach to promoting positive wellbeing and pastoral structures in halls?
- What does the typical 'day in the life' of a student look like, including the social culture within halls?
- What is the speed of response regarding student welfare issues?
- What is the relationship between the university, any accommodation services and student support services?
- What communication systems, including datasharing and confidentiality agreements exist with the university? (See Recommendation 1.2)
- What is our staffs' level of knowledge, confidence and skills in approaching students experiencing mental health difficulties?
- · How do staff job roles account for pastoral work?
- What are the current priorities when undertaking new builds or refurbishments and do these support wellbeing?
- How does the accommodation provider play a part in disciplinary procedures, student codes and student contracts?

We address these questions throughout this report in more detail.

## From this, providers can create a simple strategic plan, clarifying what will be done, clear time frames and lines of responsibility. This should include:

- · How you are going to communicate the plan;
- How frequently you will communicate about mental health with students and other stakeholders:
- The key messages you are going to give about student mental health<sup>37</sup>

### Recommendation 1.2: Develop crossorganisational understanding of information sharing and data protection.

We recommend establishing a Memorandum of Understanding (MoU) or a data sharing protocol between the University/Student Support Services and the accommodation provider on confidentiality and data protection. This should clarify how to deal with information appropriately in line with data protection, to ensure information is shared in such a way that supports the staff on the ground to best support the student.

Students have the opportunity to officially disclose their mental health difficulties before starting university, and an arrival. However, a formal or informal declaration may be made at any point. A mental health disclosure is deemed sensitive personal information under the Data Protection Act 1998 and must be treated accordingly. Generally speaking, the information provided will only be shared with those who need to be aware of it at the time of disclosure. This may result in the student being contacted by an appropriate adviser to discuss any support adjustments. With the student's consent, and presence, relevant information may be shared with academic or other professional services staff.

However, in 2014-15 only 1.56% of students had disclosed a 'mental health condition' to their university.41 This can mean that staff are often only aware of a student's difficulties when it reaches crisis point, or it is explicit in their behaviour. Accommodation staff members expressed that being aware of particular students experiencing mental health difficulties would have meant they felt prepared to approach situations sensitively. Asymmetric data sharing is to be expected, for example, a cleaner who has signposted a student to further support will not necessarily know if the student has taken on the support. The Student Support Service is unlikely to share details with the accommodation provider without the student's consent unless it is deemed relevant or appropriate due to risk, or a need for adjustments. Potential for discrimination may be avoided by ensuring students are present in discussions about their needs. Only those who are trained and qualified to handle sensitive information should be involved. This message can be conveyed to staff through training.

## Case Study: Bournemouth University – Data Sharing Protocol

Bournemouth University have established a model data sharing protocol for use with their third party accommodation providers. The agreement needs to be in place to support passing booking information the university receives from students to their providers, in order that they can manage their contract.

This data sharing protocol adds in an additional reference to sharing information for the purposes of student welfare or discipline. This allows the university and its partners to work together when a significant support need is identified, ensuring a coherent support package for the student.

### The data sharing protocol covers:

- What information will be shared between parties;
- · Why the Student Support Service may share data;
- Who is responsible for making students aware that their data is being shared;
- The obligations on the university and the accommodation partner;
- How data will be secured;
- · Staff guidance and training;
- · Data retention, archiving and deletion.

# Recommendation 1.3 Ensure consistent reporting practices, to align all halls of residence with the University's Student Support Services.

Review practice to ensure that reporting processes are transparent, and reports communicate the necessary information to best support the situation. Through the way in which they report incidents or concerns, accommodation staff contribute significantly to the university Student Support Services' understanding of a situation and the students' needs. We would recommend that accommodation staff who are involved in reporting are made aware of the value and purpose of reporting, through training and briefings. Capturing and communicating welfare concerns can be necessary to ensure students get the support they need, but care should be taken that unnecessary information is not collected.

## The importance of involving accommodation providers in reporting:

- Gives the Student Support Service more information to help them understand the history of the student's mental health difficulties. Even seemingly insignificant incidents will contribute to the bigger picture and therefore ensure that there is an appropriate and timely response.
- Reports allow better decisions to be made at an organisational level about provision, staffing and resources to support student welfare demands.
- Improves accuracy of the data on the prevalence of difficulties students face, allowing the Student Support Services to consider resourcing additional support provision.
- Heads of Student Support Services have expressed that they would rather receive lots of reports than miss a student's support needs for fear of over reporting.
- Contributes to tailoring any future training to the types of circumstances that staff manage.

- Allows for an understanding of how staff are using their time in accommodation and whether staffing is resourced accordingly.
- Contributes to the national picture of understanding the student journeys through support.

## The following questions, informed by the Student Living steering committee, may be helpful in the review process:

Recommendations regarding reporting

- Consider what warrants a report Reporting forms are often based around a 'crisis', and as such are not tailored to capture on-going support needs.
   Consider whether reporting practices adequately address recurring and relatively 'low level' support, such as conversations with students about welfare issues, and whether the approach to reporting should be changed.
- Ensure accommodation providers share categories with the Student Support Service – including unique categories for mental health within reports. This allows for a better understanding of the specific needs of the student population under your care.
- Equip staff to report accurately and objectively Staff should be briefed or trained on how to report an incident in a way that is understandable to other members of staff.
- Recording behaviours, as opposed to motivation or cause – which the staff member may not be privy to – allows for more accurate information to be shared to the Student Support Service. It also means the accommodation staff member does not need to know every detail about a specific mental health diagnosis.
- This may involve changing forms to include lists of specific recognisable behaviours and/or including more detail. For example, if the student was selfharming, the report should capture the type of harm (e.g. cuts or burns) and where the harm is visible (e.g. upper arm).
- Review number of reports retained All reports should be retained, even those that seem no longer relevant about students' behaviour or circumstances involving student distress.
   Additionally, and where relevant, reports sent through to partners at the university should be retained (within the bounds of appropriate data protection and confidentiality).
- Consider how current 'live' cases are communicated (data-sharing systems) – Accommodation staff should consider how information about concerns or students at risk can be conveyed to other staff who may need to know. This is particularly important between shifts or in larger teams. This could be done through briefing sessions or a shared record.

### Exercise: Write a template report

Student Minds worked with the Student Support Service at Nottingham Trent University to draft examples of useful reports, which were then used in training. These reports required:

- Objective Reporting: how to describe students' behaviours;
- Details of staff present (for any further discussion needed with Student Support Service);
- Inclusion of the student's ID number, mobile phone etc.

Recommendation 1.4: Review referral pathways and escalation procedures to align all halls of residence, not solely a University's own accommodation with the University's Student Support Services.

"The most important aspect for a private accommodation provider to consider is the need to work collaboratively with the university's student services to ensure the best outcome for students. Partnership is critically important, in terms of close liaison with in-house wellbeing, disability and counselling services. There will then be a platform which allows accommodation staff to come together with others involved in student care, to discuss their boundaries and responsibilities. In this way the accommodation providers can become part of the institution's support for students." – Ruth Caleb, Head of Counselling, Brunel University

In addition to reviewing reporting, which is largely an internal procedure, it can be useful to provide a standard framework for staff to follow regarding referring a student to further support, or escalating to external/ statutory services in crisis. The framework should include guidance on the appropriate procedures, and should define where possible what counts as an emergency and what counts as a support issue so that all staff have the same level of understanding, the severity of incidences is understood and issues aren't dismissed as 'not serious enough'. This can prevent students from 'falling through the cracks', and ensure they are supported in a timely and appropriate manner.<sup>42</sup>

### Exercise: Outline the referral pathways at your university

Although referral pathways may be known by more experienced members of staff, it can be useful to have them explicitly laid out for example in a flowchart format, where a staff member can see their exact role.

We would recommend developing the referral pathway flowcharts to account for any changes as the support landscape changes over time. This should not be a static document but should be reviewed on at least an annual basis. Clarity around lines of referral supports staff to feel confident that they are supporting the student to the best of their ability and role capacity.

## Questions to support a review of referral pathways

## What support exists at the university and within the broader community?

Accommodation providers can play a role in ensuring staff and students are aware of the support available, and may find the following review questions helpful:

- What support does the Student Support Service within the university offer?
- What is available for students from statutory or voluntary services, in terms of health care and support?
- Is there a University Accommodation service, Warden Service or Residence Life Team, and what is their role in supporting students' mental health? How does the accommodation provider currently work with these teams?
- What systems exist to support students with needs who are flagged through the disciplinary process?
- Does accommodation provision cater for more than one university? If so, are there ways in which you can establish a citywide working group and MoU?
- How are the university and accommodation providers linked in with local businesses, such as taxi companies, to support students' safety?

## What is the threshold of the support that the Student Support Service (or equivalent) can provide?

Student Support Services have limitations. They call and email students to offer support and only intervene actively when there are safeguarding issues. It is worth considering how to define these limitations to staff. In the case of our pilot, there were misunderstandings about the expectations of what the Student Support Service could provide. The Student

Support Service does not provide an emergency service. That is the role of the statutory emergency service. This should be made clear to accommodation staff.

- Is the Student Support Service independent or embedded within the university?
- · What are the statutory services in the local area?
- · Where does risk sit in terms of duty of care?

## How often is there escalation to further services outside of the Accommodation? Do staff escalate cases at the most appropriate point?

- · What do staff perceive as an emergency or crisis?
- In terms of staff rotating shifts, how is information captured and passed on. An example of this is that a persistently upset student, which goes unreported, may get missed by staff if they have rotated, unless information is passed on in a secure way that is in keeping with confidentiality and data protection.
- · How do referral rates differ between halls?

### What referral system does your Student Support Service use?

- Is there a named or designated individual who is the lead point of contact within the Student Support Service?
- Does the Student Support Service offer referral forms to a third party?
- How can students directly refer themselves to Student Support Services?
- Are there due to be any planned changes in the current referral system?
- · What are the expected waiting times for services?
- Is there a system whereby the accommodation provider can share resources with the Student Support Service?

### How do staff members talk to students about referral?

- Are staff aware of resources and information available to students?
- Is there scope to sit with the student and support them through filling out the self-referral form?
- How are privacy and confidentiality considered?
- Does the staff member have the capacity to check in with the student at a later stage and see what barriers have been in the way to the student seeking support?
- How can students be empowered to have the confidence to refer themselves to support? In certain (non-emergency) cases, it can be more powerful to

- support a student to refer themselves to the Student Support Services. This is part of supporting the student's motivation and confidence to access support.
- Do staff understand the level at which a student should seek external support?

### Case Study: Nottingham Trent University

In our work with Nottingham Trent University and UPP, we produced referral pathway flowcharts. They show what each member of staff should be expected to do in different sorts of situations. These were drawn up through reviewing practice and interviewing staff to see what happened on the ground.

We took these to the Steering Committee, which allowed those present to discuss disparities and potential misunderstandings between each organisation, which in turn lead to the group deciding on shared categories for reporting. These flowcharts were tailored to particular roles within accommodation and distributed at training, with the suggestion that the staff have it available in the office.

## Recommendation 1.5 Establish or join a university-wide mental health strategic working group.

When an accommodation provider joins a mental health and wellbeing strategic working group, the group can be used to consult with relevant stakeholders, engendering a shared vision. Such working groups exist at many institutions and facilitate a more integrated and coherent approach across the institution. Setting up formal structures, such as a university mental health committee or city-wide interest group, can facilitate collaboration. Student-focussed partners are particularly relevant and all organisations need to develop student specific information, rather than direct generic information towards students.

Accommodation providers may wish to identify a champion who will promote the importance of being joined up with the university to create a healthy institution. This could be a senior member of the accommodation provider's staff, which has overall responsibility for the student experience within halls. Leadership can also come in the form of designating a budget to support the development of a Healthy University approach.

#### An effective working group should:

- · Have clear lines of leadership and responsibility;
- Involve a range of stakeholders, including academic staff, Student Services, the Students' Union and external partners (for example, local clinical

- commissioning groups, Local Authorities, GP practices and Public Health networks);
- Link up with other initiatives working on student wellbeing and safety, for example the sexual violence task force at your University;<sup>46</sup>
- Join up with any activities the university may be doing on suicide prevention;
- Connect with campaigns led by the Students' Union, to see where support could be provided.

## An accommodation provider's presence on a strategic working group is valuable in terms of:

- Working with the local community, other universities, or accommodation providers within the city to ensure a joined up approach;
- Reviewing communication, escalation procedures, clarity in lines of responsibility and protocol development;<sup>47,48</sup>
- Strategically prioritising student mental health and wellbeing in student accommodation;
- Better understanding the landscape at the university as a whole – for example, sharing up to date resources around support available to students for a range of welfare issues:
- Planning joint training initiatives, events, briefings or inductions<sup>49</sup> and using the accommodation facilities for these;
- · Responding to student feedback;
- Reviewing phrasing of accommodation booking forms to ensure students can make an informed choice and so that they understand the benefits of disclosure. Accommodation booking forms may have a question about 'disability'. Students with mental health difficulties may not acknowledge their experience as a disability and therefore may not see this question as relevant. Although some mental health difficulties may result in a more explicit need for adjustments, most students will not identify the need in accommodation as they may not equate their difficulty with the physical space being changed for them. Benefits of disclosing should be made clear (see section 4.2 for more on supporting students in disclosure).

### Case Study: Suicide Safer Communities – Worcester

"Universities can make a valuable contribution to a community-led suicide prevention approach At Worcester we have over 10,000 students who, on the basis of their age alone, represent a high-risk group for severe mental illness, self-harm, suicidal ideation and death by suicide. Added to that you have a population

in transition who are disconnected from their family and usual social contacts, who are often having to deal with new or increased pressures of exams, managing money, living independently, emergent relationships and exposure to, or experimentation with, drugs, alcohol and sex.

We see ourselves as a joint partner committed to delivering a 'suicide safe' university, city and county. We're involved in gathering and sharing intelligence, developing strategy and implementing activities such as educating staff and students about how they can contribute to suicide safe environments, making sure people are aware of the full range of support services and helping those affected by suicide. We are also contributing to the understanding of suicide and suicide prevention through research and international collaboration.

In terms of accommodation support the University of Worcester has ensured all domestic and security staff have supporting student wellbeing included in their job descriptions and have received training in Mental Health First Aid. We also have employed student residential ambassadors in all our residences who are also MHFA trained."

– Jo Smith, Professor of Early Intervention and Psychosis at the University of Worcester and Suicide Safer Project Lead, University of Worcester

As part of the general approach to community and university wellbeing at Worcester, the university's security is accredited by the Community Accreditation Scheme. Authorised by the Chief Constable, the University's Security Guards are empowered to support concerns within the community, which may include callouts related to mental health difficulties. The accreditation gives staff confidence to go into the community and support students. Police Community Support Officers (PCSOs) work closely with Security to support the Students' Union with student welfare campaigns.

Recommendation 1.6 Establish case working groups through which to manage individual cases regarding student support.

In addition to partaking in a strategic working group, we recommend case discussion working groups with managerial, student facing accommodation staff and Student Support Services. Managers could give staff opportunities to feed into the working group, via a representative from accommodation.

These meetings aim to serve as a space whereby 'live' student welfare issues, such as students at risk, can

be discussed.<sup>51</sup> This form of liaison should feed into strategic work, to reflect the day-to-day practices. Participation in these groups could be built into the contract/agreement with the university.

A case discussion working group can help the accommodation provider to:

- · Manage individual cases;
- Establish where duty of care lies before, during and after a student has support needs;<sup>52</sup>
- Discuss cases with relevant partners to ensure the student gets the appropriate support;
- · Manage risk and safeguarding.

Case Study: Steering Committee for Student Living Project, at Nottingham Trent University in partnership with UPP.

Student Minds worked with a steering committee with members from UPP at Nottingham Trent, Nottingham Trent University, NTU Student Support Service, Accommodation Service, Students' Union & Volunteering.

As part of a whole university approach, collaborative cross-organisational strategies for both student and staff wellbeing is vital. This needs to be a resourced space and time, with those both responsible for strategic decision making, and those delivering support. We found that these sessions provided a space to create a common understanding of student mental health & welfare concerned between all the parties present.

In the initial session, we facilitated a discussion to review the existing practices at the university, the group reflected that this was useful as in some cases Student Minds were asking NTU to outline processes that were either not in place or not being used. It was valuable to help them to define processes and increase the relationship between accommodation services, student services and UPP.

We reported to the group on the key themes that emerged from the interviews, facilitating a discussion to hear a variety of perspectives, and worked to make recommendations accordingly.

Reflections on replicating this type of group at another university:

- The Steering Committee recognised that often staff in Student Support Service don't always understand the context of what accommodation staff are dealing with.
   It could be useful to hold joint sharing sessions between some staff in each to look at how this is working and what their roles entail.
- The Steering Committee felt that it was valuable to ensure the local context, and history of development of the institution's accommodation services, was understood before embarking on delivering training and suggesting other changes to practice.

 Every university and student support service operates differently around the UK, so in terms of replicating the approach elsewhere, it will be important to always start with a mapping and scoping exercise.

### Case Study: Students In Distress Meetings at Brunel University.

Students In Distress Meetings at Brunel University London bring together residence managers with a student welfare officer, a counselling manager and mental health adviser, to discuss students who are causing concern.

This is a working group for any major student welfare problem relating to mental health issues. In particular, it is an opportunity to discuss students who are deemed to be possibly at risk of severe self-harm or harm (or duty of care challenges) to others. A course of action is agreed so that the student's emotional issues and any concomitant problematic behaviour can be ameliorated.

# Recommendation 1.7 Disseminate a comprehensive and accessible mental health resource to guide practice across the institution and accommodation.

Following the development of a policy/approach as in previous recommendations, develop and disseminate a comprehensive guide to supporting students' mental health at the given institution. A similar guide may have been created by the university, and can be adapted to suit the needs of accommodation staff. Policies should not be hidden on the university's internal intranet where a partner cannot read them and therefore will be unable to support the crisis management approach at that institution

## Develop a basic outline of expected good practice at the institution you are working with, this should include:

- A major incident checklist basic things that need to be done in high-pressure crisis situations;
- A guide for staff including referral pathways and signposting resources;
- Guidance for staff about thresholds of the services

## Review questions that can be used to create the guidance:

 Has the Student Support Service produced any guidance for staff about supporting students in distress/experiencing mental health difficulties?

- · Do staff know of the signposting available?
- Are signposting links and phone numbers easily accessible from company homepages on computers that staff use?
- Is the guidance jargon free so it can be used by any members of staff?
- Is this directory specific to the university and local area?
- Is it tailored to suit specific roles within accommodation?

### Case Study: Nottingham Trent University – Guidance for Staff

Nottingham Trent University's Student Support Services have produced a guide, Respond to a Distressed Student, which outlines how a staff member at the University may respond to a student they are concerned about. There is a comprehensive section on how to discuss confidentiality with the student: www4.ntu. ac.uk/adq/document\_uploads/running\_a\_course/153461.pdf

The University of Sheffield – Concerns about a student's mental wellbeing? A guide for staff: www.sheffield.ac.uk/polopoly\_fs/1.672850!/file/MH-guideforstaff-webcopy.pdf

## Recommendation 1.8: Consider the appointment of a role dedicated to student support and welfare in halls.

Accommodation staff roles encapsulate a range of functions: estate management, security, administration, customer relations and pastoral support. As such, accommodation providers may benefit from having a dedicated staff position within halls on site who can oversee any health promotion work, in addition to providing extra support in managing both crisis and early intervention situations. The Student Support Service, University Accommodation Services and the provider should work to identify where an additional role could add value, as the function of the role must be clearly defined in order to meet any gaps in need in current provision. Consider where the role is situated within the organisations involved, allowing them to understand both environments. It is advisable to have a trained mental health professional in this role. If not clinically trained, the staff member should be well trained and briefed about university processes and services in order to mediate and problem-solve in relation to individual or general accommodation concerns. The role must fit within the current structure of referrals, liaison and triaging.

Case Study: Wellbeing Coordinator at King's College London Students' Union based roles

Overview of role: KCLSU and King's Wellbeing are partnering together to create a happier, healthier student community by:

- Supporting more student-led wellbeing initiatives to happen.
- Empowering better-informed students how to access support and manage personal wellbeing.
- · Growing communities and spaces of wellbeing.

### What does the role involve?

- Developing a relationship with all student groups (sport clubs and societies) and student communities within halls to ensure they are partners in delivering student-led wellbeing programmes across King's community.
- Developing innovative approaches to the delivery of Health and Wellbeing programmes and services for King's College London university students.
- Developing and delivering a mixture of Wellbeing workshops, events and campaigns in partnership with students.

### Where is the role situated?

- In conjunction with the wider Student Services and King's Wellbeing teams, help in the delivery of key Wellbeing campaigns develop new initiatives aligned to the University academic cycle.
- Objectives set in partnership with the King's Wellbeing team and KCLSU to align with both organisations' strategic plans.
- Desk space in KCLSU along with Residence Life Office allowing the Wellbeing Coordinator to support work in student accommodation.

Since the conception of this role in October 2016, the ownership of student wellbeing has shifted. In the past, King's Wellbeing mostly worked to empower students to take a proactive approach to their wellbeing. Although this is still the case, students are now seeing themselves as partners in creating a community of wellbeing. Since January 2017, over 30 different wellbeing initiatives have been carried out in collaboration with students with over 500 students engaged with on campus and in residence halls. In short, a happier, healthier community is being created by the students themselves with the support of KCLSU and King's Wellbeing.

### Case Study: Wellbeing coordinator for halls role (Derby) Students' Union based roles

Derby University has a Wellbeing Coordinator for Halls role. This person is responsible for student wellbeing in halls. The role has shifted and developed over time, in response to the needs of the student population.

#### What does the role involve?

- Initial assessment of a student and either addressing the problem or identifying the right referral pathway.
- Supporting transition, particularly supporting vulnerable groups and planning transition events such as welcome weekend and welcome days.
- · Mediation and resolving conflict
- · Safeguarding
- Strategic role in ensuring the operational interface between halls and university support is working.
- Supporting students who need to change halls or leave early.
- Responsibility for delivering training for other accommodation staff – Part of a week long training programme, which includes Equality and Diversity, Mental Health, Responding to Critical Incidents, Safeguarding, Bystander Training, Managing Conflict, Maintaining Boundaries and Confidentiality.

#### Where is the role situated?

- The role is placed within the Student Wellbeing Team within the University.
- The role requires a relevant professional background (e.g. social work, youth work, psychotherapy etc.)
- The role is part of the senior management team in halls, so that they are involved in all decisions regarding managing student wellbeing such as future building design.
- · The role is funded by the Halls of Residence.
- · Supervision provided by the Student Wellbeing Team.
- The role is mobile, with desk space provided within the Student Wellbeing Team.
- · Part time position 25 hours a week.

Recommendation 1.9: Review accommodation staff roles to ensure that job descriptions and contracts recognise the pastoral aspects of staff roles and set clear expectations.

"Immediate issues need to be dealt with responded to sensitively and then referred on to be managed well by a trained counsellor, for the student's benefit." – Warden

> Accommodation staff come from a variety of backgrounds, and fulfil a range of functions within accommodation that are not directly related to student support. It can therefore be challenging to define what is 'pastoral' in a role. Staff differ in how much they are expected to do in terms of supporting students, as certain roles involve more contact with students than others. Research shows that a lack of clarity regarding who should be responsible can cause barriers in supporting student mental health.<sup>53</sup> Whilst grading systems for job roles may make it difficult to change the nature of an employee's role, it is valuable to formally recognise and support the development of the pastoral work staff will already be undertaking. We would recommend ensuring job descriptions encapsulate the extent to which staff are involved in pastoral issues, and that there are clear expectations in terms of providing support to a range of students, without discrimination.54 Consider discussing student and staff mental health in the induction process for new staff. Make clear to all staff that they are entitled to receive mental health training (See recommendation 3)

Review questions: In our consultation process we found the following questions useful in order to define the roles and professional boundaries:

- What do staff currently recognise as supporting students?
- What do staff express is difficult about supporting students, and how can this be best accounted for?
- What are the pressure points throughout the year in terms of supporting students?
- How does the way the role is delivered differ between each person in post?
- How does the role of supporting students differ between different roles (e.g. cleaner, housekeeper, residence manager etc.)?
- Do staff feel that the supportive or pastoral elements of their roles are acknowledged and supported?
- Are staff clear that their role is to refer, signpost and escalate according to the nature of the situation?
- What is in place to support a member of staff to understand the boundaries of support within their roles?
- Do staff have an on-going supportive role, have they built up a relationship with students that they are unable to sustain?
- Does recruitment account for candidates' interpersonal skills, ability to engage in conversation and interact with students?





## Workplace wellbeing for accommodation staff

## Recommendation 2.1: Develop a Workplace Wellbeing Strategy if not already implemented.

It is not only students who may experience mental health difficulties. Accommodation Staff may be experiencing, stress, bereavement or long-term mental health difficulties. Moreover, they may find that they are stressed at work and require support. There are a number of reasons why staff may not disclose their experiences to colleagues, such as 'not wanting to be treated differently', 'not wanting to be thought less of' and 'not wanting them to tell anyone else'. 55

A Workplace Wellbeing Strategy, as a proactive approach, is beneficial to both the employee and employer. Individual adjustments and support can allow staff to feel empowered, manage their workload effectively, and sustain them to continue work without a leave of absence. A strategic approach can also help an employer to ensure they are compliant with health and safety regulations, since emotional health is a factor in health and safety considerations. It also fulfils duties under the Equality Act in terms of avoiding discrimination. Publicly demonstrating that you are an employer that prioritises workplace wellbeing can also make job roles more appealing to your potential employees and show that you value and deliver on an inclusive approach to the wider sector.

Student and staff experiences in Higher Education are completely interlinked and consequently a strategy for improving student wellbeing cannot ignore the wellbeing of staff. Prioritising staff wellbeing also helps staff to better support students.<sup>57</sup>

### A workplace wellbeing strategy may include:

- · Mental health policies;
- Flexible working arrangements where possible;
   Involvement of staff who have personal experience of mental health difficulties in the design of policy and practice;<sup>58</sup>
- Involvement of mental health charities in designing a positive wellbeing workplace;<sup>59</sup>
- · Wellness Action Plans for staff (see below);
- Promotion of the benefits of occupational health programmes, including work to dispel the myth that HR departments will use this as evidence against employees;<sup>60</sup>
- Resourcing additional supervision for staff through Student Support Services or Occupational Health;
- Commitment to mental health and welfare training for staff;
- · Signposting to a range of support options.

Further Tools to support an accommodation provider to develop a workplace wellbeing strategy:

Mind - Workplace Wellbeing Index: www.mind. org.uk/workplace/workplace-wellbeing-index

Mind – Taking care of business: Employers' guide to mentally healthy workplaces: www.mind.org. uk/media/43719/EMPLOYERS\_guide.pdf

Time to Change – Creating Mentally Healthy Workplaces: What employees say and how employers can improve: www.time-to-change. org.uk/sites/default/files/Creating%20 mentally%20healthy%20workplaces.pdf

Mental Health Foundation – Managing Mental Health in The Workplace: www.mentalhealth. org.uk/sites/default/files/CR00233\_Ebook\_dualbranded\_interactive.pdf

CIPD - Employee Outlook - Mental health in the workplace: www.cipd.co.uk/lmages/employee-outlook\_2016-focus-on-mental-health-in-the-workplace\_tcm18-10549.pdf

Fully Focused Solutions – Workplace mental wellbeing policy: Sample Policy: www. fullyfocusedsolutions.co.uk/resources/FFsolutions\_workplace\_MH\_wellbeing\_policy\_sample.pdf

Recommendation 2.2: Support managers to feel confident about talking to the staff they manage about their mental health, and protect time for this in supervision sessions.

Staff are most likely to speak to line managers, followed by Occupational Health, about support and adjustments, making managers a key player in delivering a workplace wellbeing strategy.<sup>61</sup>

## How employers can ensure managers and supervisors are best equipped to support staff:

- Mental health awareness training will allow staff to recognise signs and symptoms that a fellow staff member may be experiencing a mental health difficulty, consider how to respond in a supportive way, the boundaries of providing support and when to signpost.
- In management supervisions or `1-2-1's', managers should be encouraged to provide time (resourced within their schedules) to regularly check in on staff wellbeing and any major concerns that may arise.
- Managers and their teams should be encouraged to take the opportunity to reflect and debrief, especially after busy or stressful periods.

## How managers can directly support staff (from Equality Challenges Unit, 2014):

- Challenge inappropriate or stigmatising comments made by other members of staff;
- Ensure colleagues understand the role of reasonable adjustments in the workplace (including adequate breaks and rest periods), and how this may have implications for other members of staff;
- Promote a supportive work culture within their team to encourage disclosure and reduce the fear of unfair treatment;
- Provide reassurance and make self-available for discussions around mental health difficulties.

#### Further Resources:

Wellness Action Plans are resources managers can use with staff, can help facilitate conversations about an employee's mental health and general wellbeing: www.mind.org.uk/media/1593680/guide-to-waps.pdf

Mental Health First Aid – Line Managers' Resource: www.mhfaengland.org/line-managers-resource/

## Recommendation 2.3 Provide immediate follow up debriefing and supervision for staff managing difficult scenarios.

Accommodation staff can often be the first staff on campus to notice a student experiencing mental health difficulties. Staff who work out of hours may find themselves providing support and managing crisis situations whilst other members of the university community are temporarily unavailable. One of the key concerns that came up in interviews and training was the way in which staff who had dealt with a difficult situation felt following the incident. This is especially relevant to crisis situations and in the event of a student death. On a few occasions, staff identified that simply being asked how they were doing after a crisis situation and having their manager check in on them after the high pressured scenario would have helped.

# "You are in a customer service role, so you are expecting to be smiling straight after something had happened" — Facilities Officer (Night Staff)

In addition to creating a culture where staff are trained in mental health awareness and discussion on mental health is encouraged, we would recommend that accommodation providers allow for sufficient time and space for staff to debrief after incidents of supporting students in distress/ crisis. A lack of formalised support after crisis is a health and safety concern and if this is not addressed we have concerns about the impact this has on employee wellbeing and retention, not least to the quality of the support students receive. Under the Health and Safety at Work Act, if employers are aware of a risk to health (including emotional health) and they do nothing to address this risk, then they may be liable for any injury caused. Trauma debriefing is a way to address this.

Supporting students has the potential to be a positive learning opportunity for the staff involved if they are well supported and do not feel blamed. Post-traumatic growth is a "positive change experienced as a result of the struggle with a major life crisis or a traumatic event". Good debriefing should also include the possibility for growth and learning to come from any traumatic incident. De-briefing sessions with an

external may help facilitate spaces in which staff can speak more honestly about their concerns, and ask questions on areas they wish to improve or learn more about.

We would recommend that the accommodation provider has a clear conversation with the debriefing provider and avoid signing up with anyone who will want to open the trauma up and make it worse unnecessarily. Some universities may find it helpful to provide staff with access to the University's counselling services for any emotional support. Other providers may find Human Resources programmes tailored to their staffs' needs most helpful.

### Key considerations for providing debriefing:

- In the immediate aftermath of a traumatic event, the person may experience disturbed dreams and images. This is normal, but the staff member must be given an opportunity to talk it through with a professional who is qualified in normalising this.
- It must be made explicitly clear to staff in the situation that they are entitled to a debrief session. This should not be left to when a staff member expresses stress, but should be emphasised in the first instance.
- Steps must be put in place to ensure that this
  is prioritised and done as close to the time
  as possible (ideally within a week).
- Ideally this support should come from someone qualified and external who wasn't connected to the situation at all; this provides an external judge.
- This debrief is not counselling or trauma treatment, but is about normalising the experience the staff member had. This allows the staff member to make sense of what they have experienced.
- Some people may have on-going symptoms for 6 weeks or more and will need further support.
   Debriefing should provide opportunity for, or signpost to, further support, should a staff member need support at a later stage.
- Staff should not be penalised for any time spent in debriefing, and their shift should be covered.
- Management have the legal, health and safety responsibility to cover a shift of a staff member who may need their next shift off in order to do a debriefing.
- A staff member may also need their next shift off to rest after a severely stressful circumstance.

Recommendation 2.4 Universities and/or their accommodation providers should consider a review of overnight and out of hours practice and provision including the roles of any security staff, porters etc., ensuring that they are linked to adequate welfare/student support services.

Across university accommodation, and in the broader university community, there is likely to be a significant staff presence during the day. Day staff have large teams in the office and staff around the building, but this is typically reduced at night. Considering that students are at lectures during the day, and less crisis situations happen in the daytime, this approach may be counterintuitive.

Lone-working could be a health and safety risk and is not safe for managing the size of student populations. If there were to be an incident affecting the entire hall (e.g. a fire drill), staff would be unable to be with a student in distress. Some out of hours staff are in a position whereby they could unintentionally enter long-term supportive relationships with students. Although well intentioned, a long-term level of dependency without professional support may disempower the student. If the student is getting intensive support from one staff member, they may not feel the need to expand their support network, or seek further professional support. The accommodation staff member's position is to listen, provide an empathetic response and then empower the student to seek further support.

### Out of hours staff can be supported by:

- Access to further support, such as from services within the university, e.g. a warden service.
- Building links with the Student Support Services to provide briefings and training on any relevant welfare issues.
- Investigate ways of encouraging more women to apply for out of hours roles (female Facility Officers in interview mentioned that many female students feel more comfortable confiding in them than male counterparts)

- Having a core regular staff team who are embedded within the community of the hall and who are in the position to develop the trust of students.<sup>63</sup> Ensure that where temporary staff are employed, they are trained in relevant welfare issues and procedures and receive thorough briefings and support from more experienced staff members.
- Increasing staffing during busy periods such as freshers week, or days of the week where there are likely to be more incidents. Staff expressed that this would reduce their stress, and isolation, allowing them to feel more confident in providing sufficient support.
- · Reviewing lone-worker policies.

### Case study: University of Worcester – role of security

At the beginning of the academic year, in the second or third weeks, security staff at the University of Worcester introduce themselves around halls, to ensure that they have a relationship with students from the outset, emphasising that they are here to help. As a 24/7 service, security is usually the first to be present at an incident at the university. As a key part of the reporting mechanism, they are trained to be able to judge if an ambulance is necessary. They are enabled to signpost students to further support at the end of a conversation.

The majority of the time Security guards will visit an incident in pairs. Due to the rotational nature of the security guards shifts, there is low likelihood of an on-going supportive relationship with one individual.

Security are also available to escort a student to hospital, if absolutely necessary. Depending on the situation, they will wait with the student at the hospital. If necessary, they will arrange transportation through a local taxi company with whom the university has a partnership.

If there is a serious incident, this will be emailed to the whole team to ensure that all staff are aware.

# Mental health & welfare training for accommodation staff

Recommendation 3.1 Invest in compulsory mental health training tailored for front-line staff to support appropriate early intervention, and timely signposting to support and clarity on boundaries.

"Cleaners are your eyes and ears – the ones who notice; if you want to know what is going on within halls, speak to cleaners."

- Gareth Hughes, Psychotherapist at Psychological Wellbeing at University of Derby

The case for training the full range of staff who work in Higher Education in relation to student mental health has been well-made in a number of sector reports already. The Royal College of Psychiatrists, for instance, 'strongly recommended' that all Higher Education Institutions ensure that training in recognising mental health difficulties and suicide risk is offered to academic and other institutional staff working with students.64 Research shows that training for supporting student mental health, and disability awareness should be mandatory for on-going staff development, both permanent, temporary and agency staff.65,66,67 Whilst institutions have been reviewing and adding to their provision in this area in recent years, few accommodation providers have implemented compulsory training for their employees.

Accommodation providers have a strategic role in investing in training for staff members to equip them with appropriate level of knowledge, confidence and skills to support students experiencing mental

health difficulties. Staff training and professional development opportunities for staff who share an ethos of positive mental health can help create a safe and positive space for residents.<sup>68</sup> One option is for everyone to have at least basic training and more student-facing staff to receive customised training.<sup>69</sup> Tying mental health training to existing programmes of development and making sure training is short and targeted could help maximise participation.<sup>70</sup>

In our research with accommodation staff at UPP accommodation at Nottingham Trent University, we took a user-centred design approach and asked staff about what they would like training to involve. The priorities of accommodation staff can be summarised as follows.

### Accommodation staff want to be able to:

- · Identify issues early
- Gain a student's confidence and trust, whilst still managing disciplinary issues sensitively
- Be professional, approachable and non-judgemental
- · Use the right terminology
- Have access to a clear signposting directory for this university
- Understand the process for making referrals to support and escalating a situation to experts
- Understand when our job is done and have a feedback loop with the university
- Help students to get away from isolation

- · Receive specific guidance on self-harm
- Look after our own mental health in the event of a student death, or distressing incident
- Help flatmates involved with supporting other students
- Help international students and manage existing language and cultural barriers

## What challenges experienced by accommodation staff can training address?

## Clarifying the appropriate level of staff responsibility:

Accommodation staff have identified the challenges of understanding their boundaries in supporting a student. Staff run the risk of entering into long-term supportive relationships with students that become difficult to manage and may not be the best form of support for the student.

Training ensures specific protocols are explained and therefore can be followed uniformly, resulting in a fair and consistent approach to individual cases. Visible and regular mental health awareness training acts as a constant reminder of the issues and related policy, and demonstrates a commitment by the accommodation provider to supporting both students and employees.

Training should focus on how to have a conversation with a student and manage incidents in a way that is supportive of signposting and referral. It should be in line with Equality and Diversity policies, in order to reduce risk of discrimination, assess risk and manage crisis.<sup>71</sup>

## Identifying experiences of mental health difficulties and distress in students:

Another challenge in supporting students is identifying when students are experiencing mental health difficulties, compared to the ups and downs that we all experience in life. Training can help staff to be able to recognise problems and signpost a student to relevant support. Staff need to be clear that they are not being equipped to diagnose specific mental health difficulties, but rather to notice signs and symptoms of mental health difficulties and know how to engage in a conversation about them, in order to signpost to further support.

"In my block 2 years ago, there was a suicide.

I would like to know more so I could be more vigilant. It upset me, I'd seen the student before it happened." – Cleaner

### Improved confidence and reduced feelings of guilt:

Staff may be uncertain about whether they have provided the appropriate level of support, with many staff expressing that they wished they could have done more. Training can reassure staff that they did well, and equip them to feel more confident in dealing with these issues in the future. This could also have a positive effect on staff morale and help staff to feel the pastoral aspects of their role is valued by their employer.

### Understanding confidentiality and data protection:

It may be unclear to staff exactly what information they are able to pass on and to whom. Training, and the use of case study examples, can support staff to understand confidentiality in relation to their role and ensure that all information about individuals is discussed in line with institutional confidentiality policies and the requirements of the Data Protection Act 1998.<sup>73</sup>

## "If you disclose to a human being, you want them to respond compassionately."

- Dr Andrew Reeves

### Supporting student disclosure:

Many students with a diagnosed mental health difficulty can be nervous about disclosing it to their university and it's possible that a member of accommodation staff may be the first person the student will tell. All members of accommodation staff who work with students should have a basic understanding of the support and adjustments that are available to students who disclose mental health difficulties, as students may declare to them. In the event of a student disclosing, staff should listen and be supportive with a positive message that support is available, being aware of the need to avoid stigmatising responses.<sup>74</sup> If a student consents to this being passed on to the institution, staff will need to be aware who they should pass this information onto.<sup>75</sup>

### Providing a space for discussion between different staff teams:

Frontline staff that directly deal with incidents may not be present in working or liaison groups. Training may provide a controlled and confidential space where there can be discussions of overarching challenges that all staff can face, helping staff that do not usually get the opportunity to share experiences to feel less isolated and benefit from peer support.

### Considerations when commissioning training:

Before training takes place it can be useful to undertake some preparatory work to ensure that the key messages and protocols are clear. As such, deciding to train staff may involve some additional development work.

- Start with an exercise to map out your current support provision, roles, lines of communication between different staff and services, and the current referral pathways followed. (See section 1)
- Find out how staff currently interact with students, what their expectations in terms of providing support are, and how much students speak with them.

- Gauge staff's current understanding of the support structures, referral systems, and student support issues/mental health.
- Review the prevalent welfare challenges at your university – for example, is drug use a linked issue, and consider how this may also be addressed in training.
- Ensure that there is an understanding of the history of the development of the HEIs' accommodation services. Some staff may have had training from previous accommodation partners, depending on who delivered the accommodation.
- Make training relevant and contextualised to the individual roles and experiences of different staff, to make it appropriate for the level of support they can feasibly provide e.g. cleaners and security staff will have different experiences. This could be done through gathering case studies.
- Ensure training is in line with the training and protocols followed by relevant university accommodation staff such as wardens.
- Put the emphasis on noticing the signs of a student experiencing difficulties and equipping staff to signpost and make objective reports.
- Consider how you will get buy-in from staff.
   Practicalities can often be the biggest barrier.
   Sensitive scheduling and simple initiatives like providing hot drinks and lunch can help with attendance. A phased delivery approach can also mean that staff will informally encourage each other to attend future sessions.
- Design an impact measurement strategy. This may
  be about measuring staff's knowledge, confidence
  and skills prior to training, and after training. Number
  and quality of reports and referrals could be a
  positive measure, as could follow up after a year
  with refresher training.

### Who delivers training?

There are a range of ways in which a provider can upskill its workforce in the area of mental health with advantages and disadvantages to each method.

An external party providing training can provide staff with further opportunity to honestly and openly discuss their concerns and experiences regarding supporting student mental health.

Some universities may have an existing in-house training programme delivered to university academic or administrative staff that they could open up to the accommodation provider. University delivered training can help accommodation staff to understand the role of those at Student Support, and can strengthen links between the partners. Depending on the model (in

partnership or private halls) a conversation early on about how the time of university staff would be resourced and compensated, recognising that Student Services' primary objective is in delivering services for students and service provision hours would need to be covered. Training could, for instance, be a part of the Memorandum of Understanding between a university and accommodation provider.

Whilst working collaboratively with the institution is desirable, capacity and resource issues may make this difficult in some instances. In this instance it is still desirable to share key messages and signposting information to ensure training is aligned to the university's wellbeing strategy.

### Case Study: Student Minds at Nottingham Trent University (NTU)

Between September and November 2016, Student Minds delivered Supporting Student Mental Health in Accommodation training to 124 members of staff at Nottingham Trent University (NTU) in 13 three hour long workshops. These staff members had roles within NTU halls of residence such as Hall Managers, Cleaners, Maintenance Staff and Wardens.

Through our interview process we came to understand the type of scenarios, and the relationships staff have with students. Therefore, through specific case studies, we could provide practical training tailored to the specific needs of staff in different roles.

- · This was delivered a pilot and two phases of training.
- We reiterated training in response to feedback at each stage.
- Training was responsive to the key themes that staff identified.
- Bespoke training that suits the sorts of situations that staff encounter is very valuable.

Our staff training intends to address some of the issue we observed. The training objectives were to:

- Increase knowledge around mental health, the difficulties faced by students and the signs a student is struggling.
- Increase knowledge of the NTU Support Landscape and confidence in the policies and procedures.
- Increase the skills needed to have supportive conversations with students.

### Outline of training:

- · What is Mental Health?
- · Communication Skills
- Signposting
- · Understanding self-harm
- · Understanding suicide
- · What support is available to students at NTU?
- Referral pathways & reporting (including other welfare issues – sexual violence, consent & alcohol)
- · Looking after yourself

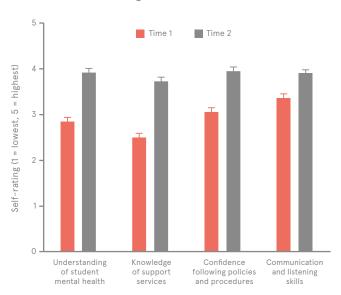
#### Feedback findings

Both quantitative and qualitative data were collected at the start and end of the workshops. Attendees' understanding of the issues surrounding student mental health; their knowledge of support services; their confidence following policies and procedures and the extent to which they felt they had the necessary communication and listening skills to support and signpost students experiencing difficulties all increased statistically significantly – beyond what could be attributed to chance.

Attendees' experience of the workshop was positive. Running separate training sessions for individuals based on their different roles was a noted potential improvement, as was more sharing of experiences and discussion. Among the most helpful and well-received parts of the workshop were the information about referral pathways and sign-posting; the self-harm and suicide section and the communication skills.

Our qualitative feedback indicated that attendees' plans to use the training mainly revolved around incorporating it into their everyday work when situations required it.

## A graph to show the change in attendess' knowledge, confidence and skills



Dimension of knowledge, confidence and skills

#### Mental Health First Aid

A range of institutions currently deliver the standard Mental Health First Aid 2-day course.

In 2017 a course for the HE sector, produced in collaboration with Student Minds, will be launched. This 1-day training programme teaches how to help a person developing mental health difficulties or in a mental health crisis, with specific applications to HE.

Security guards at Worcester University receive Mental Health First Aid training, delivered by a MHFA trained counsellor at the university. It was found that they often opt into the training during their appraisals: www.mhfaengland.org

#### Case Study: E-learning - Keeping Mental Health in Mind

The Charlie Waller Memorial Trust, have launched an e-learning package designed to give non-specialist staff the skills, knowledge and confidence to offer a first line of support to students who may have mental health issues: www.learning.cwmt.org.uk



### Training options from Papyrus

Prevention of Young Suicide (Papyrus) has a range of training options, including Applied Suicide Intervention Skills training (ASIST): www.papyrus-uk.org/training/training-options

## Recommendation 3.2: Provide additional training on other related welfare issues, which is aligned to training for staff at the university

To improve staff understanding around different aspects of the student experience, we would recommend some basic specialist training for staff on other welfare issues that are prevalent in accommodation, for example, drugs, alcohol, gambling, equality and diversity (including cultural competencies around international students, BAME students and LGBTQ+). Staff should be equipped to signpost and make appropriate reports, in line with the University's Equality, Diversity and Inclusion policy.

Sexual violence/assault response training – The Universities UK taskforce dealing with violence against women, harassment and hate crime affecting university students recommends that universities take an institution-wide approach to tackling these issues. When students disclose sexual violence to their university or accommodation, they should ensure that support is effective and holistic, linking all relevant organisations. Accommodation Staff should be equipped to help students navigate the support that is available. This requires an understanding of the local referral pathways. Staff could be briefed by Student Support Services on their preferred approach.

### Case study: Briefings for wardens at Nottingham Trent University

At Nottingham Trent University, The Student Support Service has briefed wardens on the referral pathways and lines of escalation for situations involving sexual violence, assault and rape. The example staff briefing can be found here: www4.ntu.ac.uk/equality-diversity-inclusion/document-uploads/180884.pdf

Drug and alcohol awareness and training – Accommodation Providers, as a part of the community, must contribute to a multi-level approach to dealing with alcohol misuse. Students may disclose their mental health difficulties to a member of staff whilst under the influence of alcohol or drugs. Staff should be trained to have a non-judgemental and supportive approach to a student's use of alcohol. Accommodation providers may benefit from linking it closely with the Students' Union or Guild or any current campaigns.

### Further Resources:

Alcohol Impact embeds social norms of responsible drinking on our campuses, changing attitudes towards alcohol, and building healthier, safer, more productive student communities. Institutions, and Students' Unions' can sign up to work through a list of criteria, to create a university-wide approach to provide productive places to live and work, by confronting the dangers associated with excessive drinking. alcoholimpact.nus.org.uk

Young Addiction provides resources and support to young people, their parents and careers: www.youngaddaction.org.uk

Talk to Frank provides friendly and confidential drugs advice, and resources: www.talktofrank.com

Recommendation 3.3 Review the conflict management training that is currently offered to accommodation staff.

Living with strangers can be a significant challenge for students' mental health.78 In interviews with staff we often found that concerns about a student's welfare first became known to staff when they manifested in conflict between flatmates. In these circumstances, the immediate action is usually to mitigate the conflict. This may involve disciplinary action, or offering the opportunity to resolve disputes through the formal services offered at the university or commissioned via the local council. For example, Brunel University offers a mediation service (for both parties in a dispute) and a conflict coaching service (where student wishes to become empowered to deal with a conflict, and /or the other party in a dispute has refused mediation) - both run in-house by Brunel University staff members trained in these approaches. It can be difficult to separate out disciplinary and pastoral issues in situations of high conflict.

We do not expect, nor recommend, that accommodation staff provide any long term mediation services, as these should be provided by trained professionals that are external to the situation. However, it is still important to equip accommodation staff to understand and deal with the situation that immediately presents itself and have an awareness of how mental health difficulties can effect housemate relationships.

### Consider training that:

- Goes beyond physical self-defence and de-escalation
- Covers verbal communication skills in conflict situations
- Includes how to provide basic mediation in the immediate scenario
- Enables staff to have conversations with students that empower the student to take ownership over their actions, and help students reflect on consequences
- Is tailored to the university's specific needs through including demonstrations and case studies that are student focussed

Recommendation 3.4: Encourage staff to introduce their roles and remit to students.

"When I introduce myself in Freshers
[Week], I say I am not going to be shocked
or judge, I can help. I always joke: I will not
give you cigarettes or money for drugs but
I have tea and tissues. - Night staff member at
Nottingham Trent University

Staff who are present from the beginning of a student's time in halls, and who students feel comfortable communicating with, have been shown to be important in supporting the needs of vulnerable students.<sup>79</sup> In interviews staff told us about how they would introduce themselves to the students at the beginning of term. The staff member would outline what they were there for – if a student needed someone to talk to, for example, which helps to create a supportive environment. This is not about the staff member setting themselves up as a counsellor or trained therapist, but it is about keeping the door open to a student who may need to be listened to and signposted to appropriate support. Staff should be encouraged to do this in their inductions and training.

## Information, support and resources for students

"For me, the biggest challenge for student mental health lies in the high expectations that my generation set for themselves. We all thought that education could open doors for us but we were partly wrong in that. It's us that open the doors... Expectations need to be managed."

- Student in Student Minds network

Recommendation 4.1: Universities should provide pre-entry materials to prepare students for their university experience, and collaborate with accommodation providers on a joint dissemination strategy.

Often students find that their expectations of university do not align with the reality of their experience. Many students find the transition to university difficult. The belief that this should be the "best time of your life" aggravates the isolation and stress that students feel. In marketing for accommodation, a more sensitive message can help the transition. Students who have accessed preentry resources that convey a realistic picture of the opportunities and challenges university may present can find it helps them to make a decision about if the university is right for them. Supporting a student with "pre-departure planning" can also help them to prepare moving away from home, for example by setting up support networks in advance.

Through collaboration between universities, Students' Unions and accommodation providers, for example,

through a working group or other point of liaison, preentry materials that support the transition to university can be developed or utilised. Accommodation providers may wish to work with the university to ensure all resources are aligned, and delivered to students in a timely manner.

This may include providing welcome packs in accommodation including resources on supporting friends and signposting to further support. 'The Welcome Week' induction and university website are vital sources of information for international students.<sup>85</sup>

#### Further Resources:

The UCAS website, which many applicants access when completing their UCAS forms, hosts a range of videos about accommodation: www.ucas.com/connect/videos/uni-life/accommodation

UCAS also hosts blogs and articles about choosing accommodation: www.ucas.com/ucas/undergraduate/finance-and-support/undergraduate-accommodation

Recommendation 4.2: Universities and accommodation providers should provide students with information about disclosing their mental health.

Seventy-five percent of students who had experienced mental health difficulties whilst at university have disclosed a mental health difficulty to another student.86

However the rate at which students with mental health difficulties officially declare to discuss support or adjustments with their university is significantly lower, at 1.56% in 2014–15.87 Evidence shows that students are concerned about the implications of disclosure; they may feel 'fear being judged' or feel that other students may think less of them.

The issue of low student disclosure may be more about culture than processes, however some elements of the procedures could support students to make informed decisions about declaring their mental health difficulties, and enable staff at the university and in accommodation to appropriately provide adjustments.

A lack of clarity around how the university will respond to disclosure can create a barrier to students seeking support.88 Students expressed that prior to their disclosure, they would have liked to know the benefits.89 Therefore, in communications from the university and/or provider, emphasise positive motivations so the student is aware that they will not be discriminated against and they also may gain from disclosing.90 Evidence also shows that disclosure leads to positive support, with 4 in 5 of student respondents "who received support or adjustments saying that it had a positive or very positive effect on their studies and other experiences at university."91

Accommodation providers can help by managing students' expectations of disclosure by passing on information to students in entry packs. A number of institutions run 'early induction' arrangements for students who have disclosed difficulties. Part of the process may also include inviting the student to visit the campus to see the campus and accommodation.

Support and estates teams can then arrange adjustments before a student arrives, or, where this is not possible, will be able to inform them in a timely manner about any particular difficulties.

See section 6.6 for more information on adjustments for students who have declared a mental health difficulty to their university.

"Living away from home for the first time is daunting for anyone, let alone someone with mental health problems. I have an eating disorder and when at home my family helped me to stick to the meal plans and structured routine that I needed in order to maintain my weight, so going to university meant having to do it all on my own and over the last year and a half it has been really hard." – Student®

Tips that could be communicated to students pre-entry:

It can be a good idea to chat to your university about any support needs before you arrive as this enables you to put appropriate support in place right from the outset, for example by:

 Meeting with a university mental health adviser/support worker/ mentor before starting to talk about your needs relating to the course and living away from home.

- Being shown around halls and having the opportunity to ask questions and find out what the first day will be like.
- Meeting with all relevant members of your support team and being supported through the registration process.

Student Minds and The University Mental Health Advisers Network (UMHAN) published blogs on UCAS, which an accommodation provider could share with their student networks: www.ucas.com/connect/blogs/disclosing-mental-health-difficulty-your-rights or www.ucas.com/connect/blogs/benefits-disclosing-mental-health-difficulty

### Case Study: #iChoseToDisclose

#IChoseToDisclose campaign, coordinated by The University Mental Health Advisers Network (UMHAN). The campaign aimed to break down barriers around disclosure, empowering students with the knowledge and confidence to talk openly about their mental health with their university and wider support networks:

www.umhan.com/i-chose-to-disclose

Recommendation 4.3: Universities, with support from accommodation providers should consider how they can empower students with the knowledge, confidence and skills to support themselves and others with mental health difficulties

Providers should work with the university to distribute leaflets/ posters and other physical resources that will signpost students to appropriate support throughout the student journey. Use relevant, student-facing health promotion tools to encourage students to access relevant support services when they need to. This should be ongoing work both in the halls, such as through posters in rooms, 2 and through sending out resources via online networks, 3 such as social media or email newsletters. Student engagement is likely to strengthen through links with campaigns and initiatives run by the Students' Union and the student societies, this also avoids duplication.

### Campaigning Tools:

5 Ways to Wellbeing – The Five Ways to Wellbeing are a set of evidence—based public mental health messages aimed at improving the mental health and wellbeing of the whole population. Universities and accommodation providers may collaborate to create campaigns around these issues, with a focus on the experience of living in halls: neweconomics. org/2011/07/five-ways-well-new-applications-new-ways-thinking/?\_sf\_s=five+ways+of+wellbeing



#BestNightIn – Student Minds' campaign to challenge the stereotype that university freshers' weeks revolve around alcohol. The campaign provides ideas of alternative activities to show students that they're able to make their time at university whatever they want it to be and there's no ideal university experience:

The Student Minds Blog – Sharing stories of students with experiences of mental health stigma can help students feel less alone

www.studentminds.org.uk/best-night-in

in their experiences, and break stigma: www.studentminds.org.uk/student-minds-blog

University Mental Health Day – Organised by Student Minds and The University Mental Health Advisers Network (UMHAN), every year the day is a great opportunity to bring together all of the key players in university mental health. Activities and events based on the annual campaign theme are run across campuses across the UK. Accommodation providers may wish to incorporate the day into their health promotion campaigns and mental health strategy. Resources that may be used all year round, are available to download: www.studentminds.org. uk/unimentalhealthday2017

## Recommendation 4.4: Provide support and resources for students supporting housemates/ flatmates.

Students are key to unpicking stigma, which can impact on students by causing fear of being judged, or in terms of finding the confidence to tell people you have a mental health problem or are struggling. Students also express that they are concerned about mental health problems being seen as a weakness and they experience loneliness.<sup>94</sup> Good social networks

and peer contacts have a protective influence against mental health difficulties. Students who have been thinking of dropping out of university cite support from family and friends as central to their decision to remain at university.<sup>95</sup>

When students are stressed, struggling or experiencing mental health difficulties, they are most likely to turn to friends for support. Seventy-five percent of students with mental health difficulties talk to their friends about their mental health, and 69% say they could turn to flatmates in times of difficulty. Twenty-nine percent saying they have already done so, making them a more significant source of support than tutors, university support staff or designated residential assistants or mentors.

Students in university accommodation, as opposed to those renting from a private landlord, feel more confident about supporting a fellow resident. They are likely to feel less responsibility for the wellbeing and safety of a housemate, as they feel that staff are also providing support.<sup>28</sup>

"This year she moved back into student accommodation where we have graduate students specially placed in halls who look after vulnerable students. It has been easier on me since she has moved in there. I have had a number I can ring 24hrs a day if I am concerned about her safety. For example, she rang me once to say she had taken [an overdose] – before I probably would have had to go get her and take her to hospital, but I could just ring her hall wardens this time and they took the strain off me." – Student?

Day-to-day care and supervision often falls on housemates sharing the same accommodation.<sup>100</sup> Caring can be a positive experience, but it is often associated with subjective, as well as objective, burdens.<sup>101</sup> This can leave students feeling stressed, and less able to make the most of their university experience. Research indicates that students feel that training about how to manage their role as a supporter, advice and support would make it easier for them to support friends.<sup>102</sup>

For students who are supporting their friends through mental health difficulties, support is available. Staff should be made aware of the Look After Your Mate, Guide for Friends. www.studentminds.org.uk/guidefor-friends

See section 5 for more on community building and formal peer support.

#### Further Resources:

Student Minds Look After Your Mate Workshop is showcased in the ProtectED Code of Practice, as an example of good practice in the Wellbeing and Mental Health Instrument.

Look After Your Mate training covers:

- Boundary setting, to provide support without compromising their own needs;
- Balancing friendship with providing support, to help them retain the positive elements of the relationship;
- Coping with their experience of negative symptoms in the person they are supporting such as the supportee being withdrawn, uncommunicative, uninterested, slow and unreliable about doing things and indecisive;
- · Listening skills.



Recommendation 4.5: Accommodation Providers should consider their response, and draw up necessary policies on procedure if a student's behaviour is adversely affecting others in the flat.

Sometimes staff concerns around mental health can relate to cases where students have had disputes or arguments, which can effect perceptions of those experiencing mental health difficulties. As such "over a third of the public think people with a mental health problem are likely to be violent – in fact people with severe mental illnesses are more likely to be victims, rather than perpetrators, of violent crime" 103 UPP and NTU staff identified the ways in which some students may be under pressure whilst living with somebody who is experiencing distressing behaviour, for example self-harm. This may cause a negative reaction in fellow residents. One reason for this may be that the student feels ill-equipped to approach the situation with their peer.

In some cases, parents have phoned the accommodation provider to ask for their child to be removed from the distressing situation, or for the student experiencing difficulties to be relocated. In cases of self-harm, misconceptions about the severity of the issue could result in inappropriate drastic

measures such as removing a student from their accommodation. Moving a student can be a risk, as they are likely to become isolated further. Social contact, integration in a community and support from peers are protective factors to a person's mental health. All avenues of intervention and support provision should be tried before a student is moved. They must be supported to find alternative coping mechanisms and to mitigate tensions with housemates. This must be a joint decision with the working group.

"A part of her mental health difficulties result in her excluding herself from company, this can cause rifts with our other housemates as they believe she is being rude and ignoring them. I have to defend her but also I don't want to patronise. It can be difficult to balance." 104

Recommendation 4.6: Provide information, advice and guidance about housing options to students

Although this document is aimed mostly at purpose built accommodation providers, it is likely that student residents will move to private rented accommodation at some point during their time at university. Choosing where to live next is often significantly stressful for students. Dissemination of information about further housing can support the transition out of halls and into private rented accommodation. Students' Unions should support students by raising awareness of any advice or guidance about what their rights and entitlements are to help ease the transition into a new home.

#### Housing How-tos - NUS guides for students

Students have all sort of different housing needs and NUS and Students' Unions carry out work in several different areas. This resource provides guidance for students, especially those involved in campaigns at Students' Unions, to support the student population with topics such as moving in, burglary and supporting international students: www.nusconnect.org.uk/campaigns/welfare/housing-and-community





# Community building, peer support and social networks

Recommendation 5.1 Build supportive communities by establishing networks of safe peer support within halls, for example through Residence Assistants.

"I think encouraging an environment where regardless of background or circumstances everyone living there looks out for each other and respects each other really helps. Weekly visits from the residential advisor are great but they can't pick up on the subtle things, day to day signs that housemates might pick up on. Halls should encourage discussion of mental health and mental wellbeing, and how to look for signs that someone's not doing as well as they might." – Student

Living away from home is as much a part of a student's educational experience at university as the university course itself. A significant risk factor for student mental health is isolation or loneliness.<sup>106</sup> Stress from social situations, such as finding new friends and getting on with flatmates/housemates has also been identified as a factor, underlining the importance of positive social integration in increasingly the likelihood of retention.<sup>107,108</sup>

One way to mitigate isolation is by creating a welcoming and positive wellbeing community within

halls.<sup>109</sup> Services that help students to meet other students, and integrate into the community, are popular amongst university applicants.<sup>110</sup> Residence Assistants (also known as Residence Mentors) are key to setting the tone in halls and creating a supportive culture, where a student feels comfortable discussing their mental health. In a survey by YouGov, it was found that "around a third of students also use services to support on problems, specifically going to wardens, residential assistants or senior students or accessing information about people to talk to."<sup>111</sup>

"It was supportive of my mental health to have regular visits from the residential advisors to help make sure everyone's ok too. My current RA is the friendliest person, I often see him around campus and he's always got a smile for everyone, and genuinely cares about everyone's welfare." – Student

Residence Assistants (RAs) can take leadership, with support from accommodation and university staff in running social contact events in halls. RAs can help make a situation more manageable, especially if there is an incident in a flat, and the other flatmates need support. However, RAs shouldn't be taking on supportive relationships beyond the boundaries of their role. Student Support Services in tandem with accommodation staff can support defining this.

# Recommendations for accommodation providers to support residence assistants:

- Set out welfare structures within each block<sup>112</sup>
- Support adequate and appropriate training for all peer mentors, with briefing about role and boundaries

- Support RAs to develop community activities and run events in accommodation
- Ensure they have appropriate and relevant signposting resources
- Ensure accommodation staff are briefed and trained about how to best work with RAs, including the remit of role and boundaries
- Invest in the relationship between accommodation staff and RAs
- Support for peer mentors with regular supervision meeting
- Access to out of hours support for crisis or advice if required
- Support student committees to set objectives of RAs
- Recruitment and role descriptions for the RAs should include focus on 'creating community and relationships'. The accommodation provider can feed into this, reflecting the values of the hall
- Resource a staff member who can support the continuity of peer programs for example, at The University of Sheffield the Residence Life team comprises a number of full-time Officers and Coordinators, including five Support & Conduct and three Engagement & Development Coordinators, who work closely with the wider University, the Students' Union and Sport Sheffield to sustain both the day-to-day work and the ongoing work of developing the campaigns.
- Define the role in relation to disciplinary issues
   there are mixed views about how a RA should

engage with disciplinary issues. Predominantly the RA role should orientate around welfare, not discipline, to allow for trust to be built with students. It could be that accommodation staff should take on disciplinary role to ensure that RAs can maintain purely supportive role: such as at The University of Sheffield, where Residence Mentors may on occasion advise students about turning their music down, but immediate intervention is left to security, and all disciplinary action is the responsibility of staff. Residence Mentors work on campaigns such as 'Staying Up? Keep it Down', which raises awareness of the impact on noise. They may also advise on maintaining acceptable levels of noise during 'quiet times' (11pm-7am every day; and 24/7 during exams); however, their role is not authoritarian but is predominantly to give peer advice and mentoring.

"To get some distance from a difficult situation, we may take students to a neutral ground, for example the common room. We give them the opportunity to chat about what has happened and how they feel and we get the details down so we can signpost or make a report." – Head RA at Nottingham Trent University

"We feel it is important not to jeopardise the students' rapport with the RMs [by involving them in the disciplinary process] — we don't want the students to stop seeing the RMs as 'peers' and instead view them as part of the 'system', as it were. Otherwise, how can

the students confide in them with ease about personal issues? And if they don't, then the RMs cannot perform their peer supporting role effectively."

– Dr L.M. Nutu Hall Residence Life Manager

 Similarly, at Nottingham Trent University, RAs can support night staff with basic disciplinary issues such as noise levels, as it may be better received from a peer.

#### Case Study: Residence Assistants at Nottingham Trent University

Residence Assistants (RAs) are second year, third year and postgraduate students who know the challenges associated with living in a new place with new people at NTU. They are well-placed to provide empathetic support and advice. They can talk through any issues a student might be facing, and help them to make new friends.

RAs also help to organise events and activities in halls and help build community in halls.

RAs also have strong links with University departments, including accommodation services, student support, and the wardens. Students can contact RAs to referred to the right member of staff. They're on hand every night and all weekend to address any issues within the residences.

RAs receive 50% off their rent in University accommodation. They also receive full training and support through the year, and get some great experience to add to their CV.

Student Minds provided a tailored version of Look After Your Mate training to NTU Residence Assistants. This training aims to equip RAs with the knowledge, confidence and skills to support their peers in a way that is also supportive of their own wellbeing and mental health. It includes information about confidentiality, boundaries and knowing what further support is out there. According to our feedback data, attendees' understanding of the issues surrounding student mental health; their knowledge of support services; their knowledge of how to support a friend; the extent to which they felt they had the skills to support a friend and their confidence signposting peers experiencing difficulties to further support all increased statistically significantly – beyond what could be attributed to chance.

#### **Further Reading**

To read more about Peer Support – see Student Minds' Peer Support Report: www.studentminds.org.uk/ uploads/3/7/8/4/3784584/peer\_support\_for\_student\_ mental\_health.pdf Recommendation 5.2 Empower students to develop and lead campaigns and social contact events including health and wellbeing programmes.

"Community building must be peer led as isolation is a big issue in halls of residence. The first term is really important in creating the type of community where you would grab a friend from halls to go to something. The culture must be built from the beginning, as if a student hasn't been engaged in the first term, they are less likely to attend community events in the second. Running workshops on preventative measures, about stress for example, in the first term means that students will feel equipped with the tools to deal with situations as they arise."

– Julia Haas, Wellbeing Coordinator at KCLSU

The accommodation provider has a role in ensuring that the student can learn about resilience, wellbeing and making informed choices about their health – this can be through health promotion projects or simple changes in the intake week activities. This could be through sharing resources and workshops with the Student Support Service, or through supporting peerled initiatives.

Supporting students to take ownership of mental health promotional activity has far-reaching positive impact. Peer initiatives can improve knowledge, change attitudes and improve self-esteem and selfefficacy.<sup>112</sup> As such, peer-led initiatives are an exciting and promising development in the field of young people's health and effective health promotion more generally.<sup>114</sup> Campaign effectiveness can be increased when viewing the problem through the eyes of those whose behaviour they seek to change. 115,116 Peers are thought to be more credible sources than traditional adult providers of health promotion and peers are able to reinforce learning through ongoing contact. As such peers are better placed to reach 'hard to reach' groups.<sup>117</sup> In a survey of over 2,000 students, 42% attended social events throughout the year that were organised by students.<sup>118</sup> Student involvement, through campaigns and social contact events can help combat stigma, educate students in effective self-care and resilience strategies, encourage appropriate helpseeking and challenge stigma. Institutions can make use of national and local research to guide campaigns. In recent years a number of Students' Unions, and student societies (Student Minds campaign groups, Psychiatry or Psychology societies) have run campaigns relating to student mental health.

Launching student-led mental health initiatives with a transient population requires additional support in order to be sustainable. National and local charities can support student initiatives with a variety of training and networking opportunities.

### Recommendations for accommodation providers to support mental health initiatives:

- Make funds available to develop groups and their activities
- Work closely with the Students Union and Student Volunteering services, and existing Student Minds groups to discuss health needs of the student population, to promote any existing campaigns and avoid duplication of projects
- Coordinate Hall managers to discuss the objectives of a peer health education project – staff on the ground will have valuable insight into the dynamics of a hall, and the demand for programmes
- Offer to host events by the Student Support Service in accommodation communal space
- · Provide transportation from halls to university
- · Consider resourcing freebies/materials for students
- Support the employment of a member of student services and of the accommodation staff to coordinate student initiatives and provide advice to student groups
- Include student activities in all newsletters, social media communication strategies etc.
- Support the training of peer supporters or peer health educators before term begins
- Set up a schedule for the coming academic year in advance, so students know what is available when they arrive.
- Host blogs and articles about student mental health on the accommodation website

Case Study: University of Wisconsin - Stout (USA)

Hall Managers had a meeting with the Health Promotion Specialist, a role within the Student Health Centre, to discuss the goals and objectives of a peer health education project. This helped all staff involved to shape the way in which the programme was delivered. Hall managers signed their halls up to specific programmes that were run regularly during the academic year on fixed evenings during the week. The Health Promotion Specialist offered a scheduled series of workshops with input from student peer health educators, such as sessions of stress and time management, healthy eating or sexual health.

Staff in accommodation signed their halls up according to availability of space and other activities in halls. This meant that staff were aware and invested from the offset about the activities that would be run in their halls by peer educators, meaning they could signpost students, and support the event as best as possible: www.uwstout.edu/healthandsafety/studenthealth/peerhealth

## Recommendation 5.3 Support provision of workshops on practical skills for students.

Proactively providing a range of workshops, relating to different aspects of student life, can help support a student's confidence, resilience and skills. Evidence shows that there is currently unmet need for workshops on practical skills such as finance and cooking.<sup>19</sup> Fulfilling this need is important in terms of

improving life satisfaction and retention. We would recommend consulting students, especially residence assistants to ensure that the workshops meet the needs of the cohort. Private accommodation providers should work with the university to ensure that pre-existing workshops and activities run by the university can be hosted in halls, to ensure further reach.<sup>120</sup> Programmes should be evaluated and adjusted according to student feedback.

#### Case study: Community Living Campaign at The University of Sheffield

At the University of Sheffield, the Residence Life team organise the Community Living Campaign.

Residence Mentors are trained to facilitate a discussion where all flatmates are able to talk about the 'nitty gritty' of living together, such as setting ground rules on how to share kitchen space, noise levels etc. Residence Mentors organise a date to meet with all flatmates to talk about the community within and outside the flat. Although the Mentor will facilitate this discussion, the boundaries are set by the students themselves. The meetings are also an opportunity to discuss the students' participation in the wider University and city communities.

As a part of the Community Living Campaign, Residence Mentors (alongside student Consent Champions recruited directly by Student Services) have been trained to facilitate discussions between flatmates about sexual consent. This takes what is quite a taboo topic into the homes of students, and in this conversation they consider scenarios a student may encounter and set up a safe environment in which to raise awareness and build students' knowledge and confidence. A Students' Union and University-wide campaign on sexual consent is due to be run alongside the discussions.

The Residence Life team have found this method of peer-facilitated conversations to be effective, as an external person coming in allows all flatmates to be on an equal footing, without one individual feeling the need to tell the others what to do. As peers, the Residence Mentors have similar personal experiences of living in halls and can act as a role model. This approach is applied to other student health and welfare topics, such as dealing with exam stress etc.

The Residence Mentors have a two-week induction period, which includes a range of training. Their role is pro-active, and visiting their assigned mentees is the principal aspect of their shifts. Residence Mentors also have 'surgery' hours where students can drop in, if they need to speak to someone (even if not their own Mentor). The Residence Mentors are supported by staff within the Residence Life Team and given briefings before each shift, and supervision afterwards.

Residence Mentors are not on duty every night, and only on shift until midnight, from which point the Residence Life Coordinators (staff role) offer on-call support. A Mentor can always consult a Coordinator (trained in MHFA) if they are uncertain about their capacity to handle a situation, and this is strongly encouraged.



# Student wellbeing and building design

The design of a space can significantly impact many aspects of our wellbeing, from our sleep hygiene to our ability to form communities. Whilst design decisions involve balancing a number of competing demands, new builds present an opportunity to optimise the environment and student experience, and even in older sites are some simple changes that any provider can implement to create a more positive living environment. It's not just about gimmicks:

"Personally the most positive thing in halls for my mental health is the other students living with me, and I think the best thing that universities can do to help student mental health is foster this community aspect, and make their halls of residence more than just a place to reside. It should be a home from home, where we all look out for each other, and the universities can encourage this aspect of university life through activities, events and other improvements to the environment in halls." – student

design can be used to drive behaviours that promote positive mental health.<sup>121</sup> In response to legislative requirements, UK universities and providers have invested in making adjustments for students with physical disabilities, through provisions of larger rooms, adapted bathrooms, ceilings reinforced to

support hoists, and connecting rooms for carers, so the sector has an inclusive approach which can be built upon in relation to mental health.<sup>122</sup>

The Happy Homes review from the Curtin University Sustainability Policy Institute, which focused on the impact of housing on an occupant's mental health, revealed that there is not a single 'thing' that can be defined as good housing in terms of promoting positive mental health. Rather, the review of 96 papers found that "it is the result of three interconnected evidenced categories where intervention could be effective in helping to improve an individual's mental health;

- The extent of an individual's influence over their own lives (from controlling the temperature of the house to decisions about where or how to live);
- The quality of the individual's housing (which subdivides into both quality of build and of use);
- The quality of the local neighbourhood."123

Recommendation 6.1: When developing new accommodation, create communal space for social interaction and to enable activities to run that build a sense of belonging.

"More relaxed, night-in style social events among housemates would help make accommodation a more supportive environment. Chilled times of just having a chat, maybe watching a movie or playing some board games, bringing an environment where everyone can talk and laugh and develop a bond beyond going out drinking, which isn't for everyone. To facilitate this, communal spaces for relaxing,

comfortable sitting areas and pleasant places to spend time are really helpful." – Student

"I found that [my university] helped me, particularly in the year I lived at home, by halls being an easily accessible social hub. Which makes dealing with depression much easier because I found that doing social stuff became difficult, and having a readily available social space that was close to my friends was really helpful and supportive."

— Student

"I live in a studio flat and therefore do not have any communal area to enable me to socialise with other students down my corridor. I think it would be beneficial if it was made slightly easier for people with such living arrangements to speak with other people living in their accommodation." — Student Minds volunteer

"There is no way you can build communities without common space" – University Wellbeing Coordinator.

Communal space and the layout of a flat, block or building can have a significant effect on a resident's wellbeing. In some new developments, providers have put less emphasis on communal space, which can impact on students who are already at risk of becoming isolated. Since a sense of belonging has been found to be a primary factor in student retention, there is a clear imperative for designing space that promotes a sense of community, as well as enabling personal

privacy.<sup>125</sup> Various reports have pointed to the importance of social facilities, shared kitchens /dining areas and common rooms in supporting the integration and quality of experience of students in halls of residence, with the suggestion that students who are satisfied with the communal space in their accommodation are more likely to be satisfied with their life.<sup>126</sup>

The Equality Challenge Unit's 2014 report recommended a number of considerations on communal space including:

- Providing areas with soft comfortable seating in a relaxed atmosphere
- · Provide quiet spaces so that people can relax
- Consider alternatives to open-plan environments
- Where possible have available a bed on each floor, which can support people experiencing panic attacks<sup>127</sup>

Communal space can also provide the opportunity to enable students and university colleagues to deliver health promotion initiatives or other non-drinking activities on site. An accommodation provider's role is to support the provision of space, not necessarily to facilitate the activities themselves. As part of an arrangement with Student Support Services, there may be the opportunity to host university-run health promotion activities. To facilitate this, ideally communal space for activities should be a relatively open space where any residents feel welcome to join in

activities, have some level of privacy to allow for conversations about sensitive topics and accessible to those with low-mobility or disabilities.

In recent years, some universities have explored the provision of quiet spaces, for students that may require it for reasons associated with a specific disability, mental health difficulty or for religious or cultural reasons. A designated mindfulness or relaxation space could provide a quiet communal space that isn't attached to studying, socialising, or flatmates. This space could also be used by accommodation staff to speak with students in distress in a neutral and relaxed setting. For example, at Worcester University, the security guards have a similar space within their offices.

#### Case Study: Be Active Halls at King's College London (KCL)

At KCL a portion of rent funds Be Active, a scheme to encourage students to get moving in halls. All residents get membership to Be Active sessions all across campus and in halls too. Key to gaining interest from students for this programme has been the involvement of student Residence Assistants who have helped to mentor students, provide helpful information on a peer-to-peer level and encourage them to take part: www.kcl.ac.uk/campuslife/sport/beactive/halls.aspx

Recommendation 6.2 Consider the design and amenities of new accommodation to support good wellbeing and sleep hygiene.

"It slowly wears you down mentally – it takes a lot of energy to keep warm and it is impossible to concentrate on doing work / any activity. It is very stressful when you are in a situation where ... You end up spending a lot of time worrying about how you're going to be warm enough to sleep that night and devise your day around avoiding being in the house."

#### Postgraduate student<sup>128</sup>

"You never felt like you could get away, even in your own room because the soundproofing to the next room wasn't great." – Student

The interior design of a bedroom can significantly impact on the residents' ability to have healthy sleep routines. A range of factors are related to mental health, including;

- Lighting: Ensure natural light, sunshine and windows.<sup>129</sup> Mood is significantly affected by access to natural light, and by the type of artificial light we are exposed to. Lighting has a big effect on alertness and concentration and traditional lighting can disrupt the body's circadian rhythm (associated with chronic diseases including obesity, diabetes, and depression.)<sup>130</sup>
- Hydration: Students should easily be able to access a water supply to avoid dehydration
- Bed quality and comfort: Sleep and mental health have a bidirectional relationship, and investing in mattresses that can improve sleep quality can contribute to improved student wellbeing.
- Curtains: Related to the above, ensuring light pollution does not prevent sleep is important.
- Sound-proofing: Noise has been found to influence occupants' mental health.<sup>131</sup> Noise requirements and regulations will depend on how a type of residence is labelled but however the building is recognised by the local authority of building regulator we encourage providers to avoid only providing the bare minimum and think carefully about the impact of noise on residents' experience.
- Temperature: Respondents to NUS' Homes
  Fit for Study survey in 2014 described being
  mentally affected by the temperature in their
  accommodation. Whilst being warm and good
  provision of heating has a positive impact on mental
  health, issues such as pre-set thermostats and have the opposite impact and could result in heat
  stress which itself has a negative impact on mental
  health. Heating can also affect occupants' physical
  activity which in turn can impact on mental health.
- Air quality and ventilation: Being damp free<sup>137</sup> and simple improvements like plants to help with better air ventilation should be considered.
- View of green space: Views of nature have been connected to better wellbeing.

Accommodation providers should consider these factors when refurbishing or designing new builds in order to support the student cohort under their care to have improved wellbeing!<sup>38</sup>

# Recommendation 6.3: Consider providing the option of quiet blocks or corridors.

"I also think it would be useful if like-minded individuals were placed together in halls.

For example, people who feel particularly nervous about living in halls of residence or would prefer quiet, living down the same corridor." – Student

"Part of their DSA requirement for a student with acute anxiety/OCD/ depression was for

them to have a studio and so DSA paid the difference in cost between the standard accommodation and the studio." – University staff member<sup>139</sup>

In response to students wishing to avoid noise issues, some universities and providers host designated quiet blocks in anticipation of the needs of autistic students, and those with other disabilities. Quiet zones are often offered rather than individual quiet flats which are not found to be effective in segregating noise levels.

#### Case Study - Quiet blocks

York St John University and Swansea University provide substance free accommodation such as quiet blocks of five or an entire quiet floor. These halls have been popular and oversubscribed. Colleagues report that this self-select method works well. UPP also have some facilities exclusively for postgraduates.

Recommendation 6.4: Universities specifying new accommodation should consider allowing for a range of catering options within accommodation if demand is considered sufficient.

Views are mixed on whether catered or un-catered halls are more beneficial to students' wellbeing. According to data from StudentCrowd, catered halls received on average a rating of 4.36 out of 5 for 'Social Experience', whereas self-catered Halls received a statistically significant lower average rating of 4.00 out of 5 (base = 9,165 student reviews). A 'good social experience' will mean different things to different students. A lower rating of social experience in un-catered halls may be due to students being at a greater risk of isolation, however, with communal space self-catered flats can be a social environment too. Catering can offer a sense of routine and for some may provide nutritious food and motivation to eat.

For others, catering with limited options may cause a lack of control over one's own routine.

"I had bulimia from the age of 13 [...] We had no kitchens for the entire undergraduate course, meaning that the only options for a nutritious hot meal was eating out every day (not possible for most) or going to the hall/canteen. This was only open at certain times and in the evenings only offered two choices of meal [...]You had to turn up and eat at 6.30 on the dot or that was it. If you didn't like the food, that was it [...] If you hadn't finished the two courses by 6.55 and they wanted you out so they could lay the table for the next sitting, food was snatched away [...] The food was served by serving staff, which obviously is a great privilege,

but for Eating Disorder sufferers it can create a lack of control because you see nothing of the preparation. You're not invested in your meal and begin to worry irrationally about what's in it, where it's been, who has touched it, and more. You're packed up on a tight bench with at least 5 people in your immediate vision who can all see how much you eat, which [creates] extra worry [...]For me, the total lack of control over my eating habits made recovery (or even properly acknowledging the problem) impossible. [...] Kitchen provision would make my accommodation more supportive of my mental health. As well as being of practical assistance this would send an empowering message to students -"We want to provide you with the ability to look after yourselves", rather than "the institution will serve you and it's all on our terms"" - Student.

#### Suggestions of adjustments:

- Look to reduce the extent of crowds in busy areas of campus, for example staggering meal times in the canteen<sup>143</sup>
- · Provide both catering and kitchens/kitchenettes
- Provide varied and nutritious food, including for mixed dietary requirements
- Link with on-campus food outlets to allow a student a range of options, e.g. students aren't limited to eating just in their hall of residence



## Recommendation 6.5 Co-design with students.

Data suggests that new halls may have a lower social experience (3.97/5) rating than old halls (4.17/5).144 This may be due to reduction of social space, common rooms or increased security, meaning it's harder for students to meet people in neighbouring corridors or flats.<sup>145</sup> However, many students are positive about newer builds and there is a real opportunity in developing a new site for architects and accommodation providers to exceed the expectations and stand out in a busy market. The involvement of the student voice through co-production with students, and staff who have experienced mental health difficulties during the design process can help improve wellbeing. 146,147 This will depend on the relationship the accommodation provider has with the university, as they may design or build prior to establishing a relationship.

#### Case study: UPP Accommodation

The team at UPP have implemented a range of simple initiatives that consider comfort and wellbeing, driven by student engagement. Student satisfaction surveys are delivered and workshops with students take place in the design phase of a new build. This has led to investment in lighting with adjustable whiteness and brightness to support students to wind down in the evenings, improving mattresses, moving radiators nearer to beds, and designing specific study spaces and rooms where activities can be held.

# Recommendation 6.6: Provide room adjustments for students experiencing difficulties.

Connecting with the university's disability support teams within Student Services can allow students to have a needs assessment, which would consider whether any adjustments could be made to the student's room that may help with their specific mental health diagnosis. The student should be involved in all conversations about their needs. An investment in accommodation for either a current student or incoming student will future-proof the overall estate, improving suitably and accessibility more for students in a similar position. Adaptations to a building may be particular to an individual's needs, but may also benefit the wider university community.<sup>148</sup>

One example of an adjustment may be that the student is invited to meet with a welfare representative at the halls of residence, to ensure that they know who they can speak to throughout the year. The student shouldn't be made to feel this is obligatory, but offers of support should be made from the start, so the student is aware of the support networks available. A number of universities welcome students to an early induction programme if they have disclosed difficulties on their UCAS form, which can help those individuals to become more settled and used to the environment before the business of the welcome period.

Higher Education students living in England that meet the definition of disability under the Equality Act, can apply for Disabled Students Allowance (DSA) if they have a disability, including a long-term health condition, mental health condition or specific

learning difficulty. Since 2015/16 DSA funding no longer covers adjustments to accommodation, and budgets for covering reasonable adjustments within accommodation are usually dispersed between various parts of the institution and accommodation provider. It may be advisable to discuss costings, where the accommodation provider may support the student (e.g. bursaries), in a working group with university.

#### Financial Adjustments

"The accommodation staff offered to end my tenancy contract early as my departure was due to medical reasons. Before speaking to them, I didn't know that this was an option and therefore thought that I would be left owing thousands of pounds in accommodation if I was to move back home. Usually, they would ask you to pay 30 days' worth of rent after the date you move out, however, they even offered to shorten this time to 7 days as they understood that the situation was beyond my control." – Student

For students that may be unable to finish their course or need to take time out from university due to health reasons, we would suggest that these students are not punished by having to continue making payments to their accommodation: "Allocation procedures and charging policies must not be discriminatory." 150

This may be particularly pertinent for supporting students who are estranged from their families. The charity Stand Alone provides guidance on how to support estranged students. standalone.org.uk

#### Room allocations and booking systems

Universities may have trailed allocation policies that balance room allocations in terms of demographics such as nationality, gender, age and academic course. Students are less likely to feel isolated and more likely to interact with other students for socialising and eating if social integration is actively encouraged, particularly in the first few weeks.<sup>151</sup>

It is recommended that students should be given an option on booking forms to:

- Disclose mental health difficulties on their booking forms, with suggested wording provided by the university partner.
- Options to state whether they prefer nights out or quiet hallways.

#### Further Guidance:

Codes of practice to assist those involved in the management of student accommodation:

- Universities UK Code of Practice for University Managed Student Accommodation
- Accreditation Network UK (ANUK) Code of Standards for Larger Developments for student accommodation managed and controlled by educational establishments
- ANUK Code of Standards for Larger Developments for student accommodation not managed and controlled by educational establishments

"These codes cover issues such as the amenities that should be available to students, health and safety, maintenance and repair, and relationships between managers and student tenants. They are also intended to assist students in understanding both the standards and procedures applying to their accommodation, and their obligations as tenants or licensees." 152

A further non-regulatory framework used by a number of providers is BREEAM Communities Technical Standard, which focusses on "integrating sustainable design into the masterplanning of new communities or regeneration projects"

#### www.breeam.com/communities

The recommendations in this report may be considered in shaping relevant codes of practice for HE Accommodation in the future.

### Conclusion

The spotlight is on youth mental health more than ever. How education providers and the NHS provide timely support whilst implementing a preventative approach is being discussed across schools, universities and workplaces. Our health affects our ability to study, work, build relationships, take care of ourselves and reach our potential in life. In this report we've aimed to explore one major factor that we know impacts upon student mental health; the place where we live.

Where we live has a clear relationship with our health - it can make things worse but it also has the ability to drive behaviours that keep us well. For university students, this is heightened by the uniqueness of the student living environment where hundreds of young people live in the same place for the first time, and the major life transition that accompanies becoming a student tenant. A student's bedroom and living space is where they spend the majority of their time. Accommodation staff can provide regular contact at a time of change and may be some of the first colleagues to pick up on a student experiencing difficulties. If the HE sector is truly going to deliver a strategic, whole-university approach to mental health in our institutions, the approach must involve accommodation professionals.

This report has responded to these issues and the experiences of staff, experts and students with practical suggestions and case studies with three over-riding themes running throughout: the need for collaboration and auditing across sectors, to build the health literacy of the whole community, and to embed a sustainable and resourced strategic approach.

Due to the transitional nature of the university population, the provision of care is already fragmented, but when accommodation staff and student services work in the same cities, mutually beneficial ways of working can be implemented. This will require some structure, such as working groups, Memorandums of Understanding, casework groups, as well as development work to map out what both the university and providers offer across the student journey. Student Services staff are juggling many competing priorities and need external providers to be supportive and sensitive to this. Great gains can be made simply by asking staff, permitting them to be honest about the situations they have managed and the impact it had on them, as well as enabling Students' Unions and students to identify problems and opportunities.

In relation to improving health literacy, it's crucial that neither sector makes assumptions about the level of understanding about mental health within their teams. We have a long way to go as a society before we all have the skills and knowledge needed. A consistent, strategic approach to training across the whole organisation, supported by a comprehensive workplace wellbeing strategy is required. We cannot support students without supporting staff and ensuring they feel confident and supported too.

In terms of proactive changes, there are many simple and some major shifts we can make. From minor changes such as reviewing interactions with students on rent issues, to providing better resources and website information, through to more major solutions like following the wider architecture

sector by building for wellbeing through use of green and communal space, better ventilation and lighting, and supporting sleep hygiene.

This work is not a quick fix, it will require regular review, and to ensure consistency over time we anticipate many providers and universities will resource strategic leads on this. Further research into this area is encouraged to more confidently say what works, and we look forward to further work from AMOSSHE (the Student Services Organisation) looking at resilience in the coming year. There are of course other groups which interact with this space that require further support too, from parents to academic staff and many institutions and sector bodies are leading projects that respond to other aspects of a whole-university approach.

Finally, it's important that we keep learning from one another. There is much to celebrate here – so many staff doing amazing interventions every day, there are many students that want to be a representative for their halls, and student services staff proactively going out to run workshops in halls. The teams at NTU and UPP are working hard to respond to the challenge, and we look forward to hearing how colleagues make use of this report to inform their own thinking and planning. Perhaps the recommendations in this report may be considered in shaping relevant codes of practice for HE Accommodation in the future.

To keep this work developing and share your experiences and ideas visit:

www.studentminds.org.uk/accommodation

# Further resources

Universities UK - Mental Health and Wellbeing in HE - www.universitiesuk.ac.uk/news/Pages/New-programme-to-address-mental-health-and-wellbeing-in-universities.aspx

'Healthy Universities' Approach – The Healthy Universities approach involves moving wellbeing into the university's core agenda and adopting a proactive approach to benefit all members of the university community. Wellbeing should be linked to a university's core business and recognised as a mechanism for delivering strategic objectives.'

National Healthy Universities Toolkit - www.healthyuniversities.ac.uk/toolkit/index.php

ProtectEd – ProtectED is the first UK higher education accreditation scheme to look comprehensively across this students' safety, security and wellbeing. The need for ProtectED is rooted in the recognition that universities have a wider role to play in supporting the safety and wellbeing of their students – not only while they are on campus, but throughout their student experience www.protect-ed.org/

Suicide Prevention – Public Health England www.gov.uk/government/collections/suicide-prevention-resources-and-guidance

Inclusion By Design: Equality, diversity and the built environment – Design Council, 2008 – www.designcouncil. org.uk/sites/default/files/asset/document/inclusion-by-design.pdf

Inclusive Campus: Accommodation and Social Space – Equality Challenge Unit, 2008 – www.ecu.ac.uk/wp-content/uploads/external/inclusive-campus.pdf

WELL: a performance-based system for measuring and certifying features of the built environment that impact human health and well-being, through air, water, nourishment, light, fitness, comfort and mind www.wellcertified.com/our-standard

Secured by Design Standards: Secured by Design Standards is Criteria for safety and security being designed into buildings www.securedbydesign.com/

### **Endnotes/Sources**

- Williams, M., Coare P., Marvell R., Pollard, E., Houghton A., and Anderson, J. "Understanding provision for students with mental health problems and intensive support needs." Institute for Employment Studies and Researching Equity, Access and Partnership – HEFCE (2015).
- Reeves, J. and Hillman, N. "The 2016 Student Academic Experience Survey". Higher Education Policy Institute (2016).
- 3. Bewick, Bridgette Maree, Jan Gill, B. Mulhearn, Michael Barkham, and Andrew J. Hill. "Using electronic surveying to assess psychological distress within the UK student population: a multisite pilot investigation." E-Journal of Applied Psychology 4, no. 2 (2008).
- Dawson, S.P., Burnett, B.M. and McArdle, F.A., 2005. Watching learning from behind closed doors: The impact of surveillance on student online behaviour. (2005).
- Universities UK. "New programme to address mental health and wellbeing in universities." universitiesuk.ac.uk. www.universitiesuk.ac.uk/ news/Pages/New-programme-to-addressmental-health-and-wellbeing-in-universities.aspx (accessed 22-03-17)
- Higher Education Statistics Agency. "Students and graduates". hesa.ac.uk. www.hesa.ac.uk/data-andanalysis/students (accessed 22-03-17).
- Williams, M., Coare P., Marvell R., Pollard, E., Houghton A., and Anderson, J.. op cit.
- Neale, I., Piggott, L., Hansom, J., Fagence, S. "Student Resilience: Unite Students Insight Report 2016". 28. (2016).
- 9. Byrom, N. "Grand Challenges in Student Mental Health". (2014)
- <sup>10.</sup> Williams, M., Coare P., Marvell R., Pollard, E., Houghton A., and Anderson, J. op cit.
- <sup>11.</sup> Taggart, H. The Five Year Forward View for Mental Health. (2016).
- 12. Byrom, N. op cit.
- 13. Byrom, N. op cit.
- 14. Byrom, N. op cit.
- 15. Student Housing Company Survey/ The E Word 2460 students participated in the survey (in press) (2017)
- 16. Byrom, N. op cit.

- 17. Neale, I., Piggott, L., Hansom, J., Fagence, S.. op cit
- 18. Byrom, N. op cit.
- 19. Student Housing Company Survey. Op cit.
- <sup>20.</sup> NUS. "Homes Fit for Study: The state of student housing in the UK." (2014).
- <sup>21.</sup> Protect-Ed (2017). [online] Available at: www. protect-ed.org/ [Accessed 23 Mar. 2017].
- NUS. "No Place for Hate: Hate crimes and incidents in further and higher education: religion or belief". (2012).
- Penny, G.N. and Armstrong-Hallam, S., Student Choices and Alcohol Matters (SCAM): A multilevel analysis of student alcohol (mis) use and its implications for policy and prevention strategies within universities, cognate educational establishments and the wider community. (2010): 7
- 24. NUS. "Students and alcohol". (2016).
- <sup>25.</sup> Penny. op cit. 8.
- <sup>26.</sup> Penny. op cit. 8.
- <sup>27.</sup> [Cooper, Frone, Russell & Muda, 1995; Cooper, Krull, Bede-Agocha, Flanagan, Oructt, Grabe, & Dermen, 2008; Debahrt et al., 2009; Goldsmith, Tran, Smith, & Howe, 2009]
- <sup>28.</sup> Khantzian, E.J. The self-medication hypothesis revisited: The dually diagnosed patient. Primary Psychiatry, 10(9), (2003): 47–54.
- <sup>29.</sup> Penny. op cit.
- 30. Byrom, N. op. cit.
- 31. Byrom, N. op. cit.
- 32. Byrom, N. op. cit.
- <sup>33.</sup> Ferguson, S. "Student Mental Health: Planning, Guidance and Training Manual." (2002).
- 34. Mental Wellbeing in Higher Education. "Student Mental Wellbeing in Higher Education: good practice guide." (2015).
- 35. Healthy Universities. "Integrating a Commitment to Health and Wellbeing within a University's Policy and Planning Process" 79.170.44.107/healthyuniversitiestoolkit.co.uk/site/guidance-package-subsite.php?subSite=1&ss=58&catID=1 (accessed on 22-03-17)
- 36. Grant, A., Kester, G., Donnelly, N. and Hale, B. Reducing the risk of student suicide: issues and responses for higher education institutions. UUK

- Management Guidance Series. London: Universities UK/Standing College of Principals. (2002).
- 37. West of England Academy. "Guide to Quality Improvement." (2016).
- <sup>38.</sup> University Mental Health Advisors' Network. "I chose to disclose campaign". uhman.com. www. umhan.com/i-chose-to-disclose.html (accessed 22-03-17).
- 39. Equality Challenge Unit. "Understanding adjustments: supporting staff and students who are experiencing mental health difficulties" (2014)
- 40. University Mental Health Advisors' Network. "I chose to disclose campaign". uhman.com. www. umhan.com/i-chose-to-disclose.html (accessed 22-03-17).
- 41. Equality Challenge Unit "Equality in higher education: student statistical report 2016." (2016)
- 42. Equality Challenge Unit "Inclusive Campus: Accommodation and Social Space" (2008)
- <sup>43.</sup> King, R. 12S: "Promoting Mental Health and Wellbeing in Colleges and Universities." (2012).
- 44. Mental Wellbeing in Higher Education. op cit.
- <sup>45.</sup> Mental Wellbeing in Higher Education. op cit.
- 46. Universities UK "Changing the Culture: Report of the Universities UK Taskforce examining violence against women, harassment and hate crime affecting university students." (2016)
- 47. Equality Challenge Unit (2008) op cit.
- 48. Mental Wellbeing in Higher Education. op cit: 31.
- 49. Mental Wellbeing in Higher Education. op cit: 31.
- 50. Equality Challenge Unit (2014). op cit.
- <sup>51.</sup> Mental Wellbeing in Higher Education. op cit.
- 52. Byrom, N. op cit.
- 53. Byrom, N. op cit.
- <sup>54.</sup> Equality Challenge Unit (2008). op cit.
- 55. Equality Challenge Unit (2014). op cit.
- <sup>56.</sup> Equality Challenge Unit (2014). op cit.
- 57. Mental Wellbeing in Higher Education. op cit.
- <sup>58.</sup> Equality Challenge Unit (2014). op cit.
- <sup>59.</sup> Equality Challenge Unit (2014). op cit.
- 60. Equality Challenge Unit (2014). op cit.

- 61. Equality Challenge Unit (2014). op cit.
- 62. Positive Psychology. "What is PTG: The Science of Post-Traumatic Growth". positivepsychology.org.uk. positivepsychology.org.uk/post-traumatic-growth/ (accessed 22-03-17)
- 63. Equality Challenge Unit (2008). op cit.
- <sup>64.</sup> Royal College of Psychiatrists. "Mental health of students in higher education". (2011)
- 65. Scarffe, P. UMHAN Policy Paper on Students with Mental Health Difficulties and Examinations. (2007).
- 66. Morris, C. "Open Minds Final Report: Student Mental Health and Wellbeing at the University of Brighton". (2010)
- 67. Mental Wellbeing in Higher Education. op cit: 7
- <sup>68.</sup> Regan, M. "Mental health and housing". (2016)
- 69. Ferguson, S. op cit.
- 70. Ferguson, S. op cit.
- 71. Equality Challenge Unit (2008). op cit.
- 72. Byrom, N. op cit.
- 73. Mental Wellbeing in Higher Education. op cit
- <sup>74.</sup> Equality Challenge Unit (2014). op cit.
- 75. Disability Rights Commission. "Understanding the Disability Discrimination Act: A guide for colleges, universities and adult community learning providers in Great Britain". (2007)
- 76. Universities UK. op cit.
- 77. Penny. op cit.
- 78. Byrom, N. op cit.
- 79. Equality Challenge Unit (2008). op cit.
- 80. Byrom, N. op cit.
- <sup>81.</sup> Williams, M., Coare P., Marvell R., Pollard, E., Houghton A., and Anderson, J.. op cit.
- 82. Sodexo. "Wellbeing away". (2015).
- 83. Sodexo. "Wellbeing away". (2015).
- 84. Sodexo. "Wellbeing away". (2015).
- 85. Dollery, R. et al. Investigation into the Mental Health Support needs of International Students with particular reference to Chinese and Malaysian students. (The University of Nottingham, 2011).
- 86. Equality Challenge Unit (2014). op cit.
- 87. Equality Challenge Unit (2016). op cit.

- 88. Byrom, N. op cit. and Equality Challenge Unit (2014). op cit.
- 89. University Mental Health Advisors' Network. "I chose to disclose campaign". uhman.com. www. umhan.com/i-chose-to-disclose.html (accessed 22-03-17).
- 90. Equality Challenge Unit (2008). op cit.
- 91. Equality Challenge Unit (2014). op cit. 12
- 92. Equality Challenge Unit (2014). op cit.
- NUS Connect. "Mental Health and Suicide Prevention Guide".(2016)
- 94. Byrom, N. op cit.
- 95. Thomas, L. Building student engagement and belonging in Higher Education at a time of change. Paul Hamlyn Foundation, (2012): 100.
- 96. Brill, C. Understanding adjustments: supporting staff and students who are experiencing mental health difficulties. (Equality Challenge Unit, 2015).
- 97. Neale, I., Piggott, L., Hansom, J., Fagence, S.. op cit
- 98. Byrom, N. and Warren, A. "Looking After a Mate". (2016).
- 99. Byrom, N and Warren, A. op cit.
- Nolan, M. and Lundh, U. "Satisfactions and coping strategies of family carers". British Journal of Community Nursing, 4(9) (1999): 470-475.
- 101. Yesufu-Udechuku, A., Harrison, B., Mayo-Wilson, E., Young, N., Woodhams, P., Shiers, D., Kuipers, E. and Kendall, T. "Interventions to improve the experience of caring for people with severe mental illness: systematic review and meta-analysis". The British Journal of Psychiatry, 206 no4, (2015): 268-274.
- 102. Byrom, N. and Warren, A. op cit.
- 103. Time to Change. "Violence and Mental Health". time-to-change.org.uk. www.time-to-change.org. uk/media-centre/responsible-reporting/violencemental-health-problems (accessed 22-03-17)
- <sup>104.</sup> Mental Wellbeing in Higher Education. op cit.
- <sup>105.</sup> Mental Wellbeing in Higher Education. op cit.
- 106. Byrom, N. op cit.
- <sup>107.</sup> Neale, I., Piggott, L., Hansom, J., Fagence, S.. op cit:13
- <sup>108.</sup> Neale, I., Piggott, L., Hansom, J., Fagence, S.. op cit:13
- 109. NUS Connect. op cit.
- 110. Neale, I., Piggott, L., Hansom, J., Fagence, S., opcit.
- <sup>111.</sup> Neale, I., Piggott, L., Hansom, J., Fagence, S.. op

cit.

- 112. NUS Connect. op cit.
- 113. Turner, G. "Peer support and young people's health." Journal of adolescence 22, no. 4 (1999): 567-572.
- <sup>114.</sup> Turner, G. "Peer support and young people's health." Journal of adolescence 22, no. 4 (1999): 567-572.
- 115. Healthy Universities. "Healthy Universities Toolkit". healthyuniversities.ac.uk. www.healthyuniversities. ac.uk/course/toolkit/ (accessed 22-03-17).
- 116. Crouch, R., Scarffe, P. and Davies, S. Guidelines for mental health promotion in higher education. (2006): 2013.
- Dunne, M., O'Neill, M., and M. Friel. "Improving Emotional Health and Wellbeing through peer support-A programme in the Western Health and social Care trust is helping young people become peer educators'." Education and Health 27, no. 1 (2009): 18-19.
- 118. Neale, I., Piggott, L., Hansom, J., Fagence, S., opcit.
- 119. Neale, I., Piggott, L., Hansom, J., Fagence, S., opcit.
- 120. Neale, I., Piggott, L., Hansom, J., Fagence, S., opcit.
- Burbridge, M. and Morrison, G., 2016, November. Happy homes—the relationship between homes and mental wellbeing: a review of the literature.
   7th International Conference on Energy and Environment of Residential Buildings, November 20–24 2016, Brisbane, Australia. (2016).
- <sup>122.</sup> Williams, M., Coare P., Marvell R., Pollard, E., Houghton A., and Anderson, J.. op cit: 54.
- 123. Burbridge, M. and Morrison, G., op cit.
- 124. Equality Challenge Unit (2008). op cit.
- 125. Thomas, L. op cit.
- <sup>126.</sup> Equality Challenge Unit (2008). op cit., Neale, I., Piggott, L., Hansom, J., Fagence, S.. op cit.
- <sup>127.</sup> Equality Challenge Unit (2014). op cit.
- 128. NUS Connect. op cit: 55
- <sup>129.</sup> Equality Challenge Unit (2014). op cit.
- National Institute of General Medical Sciences. "Circadian Rhythms Fact Sheet". nigms.nih.gov www.nigms.nih.gov/Education/Pages/Factsheet\_ CircadianRhythms.aspx (accessed 22-03-17)
- <sup>131.</sup> Andringa, T., and Lanser, J. "How pleasant sounds promote and annoying sounds impede health: A cognitive approach." International journal of

- environmental research and public health 10, no. 4 (2013): 1439-1461.
- <sup>132.</sup> NUS. "Homes fit for study: the state of student housing in the UK" (2014). 120 responses.
- <sup>155.</sup> Walker, L. "The Cost of Good Intentions: Thermal Discomfort in Traditional Public Housing Units With Preset Thermostats." Housing Policy Debate 25, no. 1 (2015): 152-178.
- <sup>154.</sup> Maller, C.J. and Strengers, Y. "Housing, heat stress and health in a changing climate: promoting the adaptive capacity of vulnerable households, a suggested way forward". Health promotion international, (2011) p.dar003.
- Tatterson, A., Hahn, A., Martini, D., and Febbraio, M. "Effects of heat stress on physiological responses and exercise performance in elite cyclists." Journal of Science and Medicine in Sport 3, no. 2 (2000): 186–193.
- <sup>136.</sup> Blackman, T., Harvey, J., Lawrence, M. and Simon, A. "Neighbourhood renewal and health: evidence from a local case study". Health & Place, 7(2), (2001): 93-103.
- 137. Hopton, J., and Hunt, S. "Housing conditions and mental health in a disadvantaged area in Scotland." Journal of Epidemiology and Community Health 50, no. 1 (1996): 56-61.
- Maller, C, Townsend, M, Brown, P and St Leger.
  "Healthy Parks Healthy People", Melbourne: Deakin University and Parks Victoria. (2002)
- <sup>139.</sup> Williams, M., Coare P., Marvell R., Pollard, E., Houghton A., and Anderson, J.. op cit.
- <sup>140.</sup> Williams, M., Coare P., Marvell R., Pollard, E., Houghton A., and Anderson, J.. op cit.
- <sup>141.</sup> Equality Challenge Unit (2008). op cit.
- 142. Humphreys, P. (2017). Data from Student Reviews. [online] Available at: www.studentcrowd.com/ [Accessed 23 Mar. 2017].
- <sup>143.</sup> (Equality Challenge Unit, 2008). Op cit.
- <sup>144.</sup> Humphreys, P op cit.
- 145. Humphreys, P op cit.
- <sup>146.</sup> Regan, M. op cit.
- <sup>147.</sup> Equality Challenge Unit (2014) op cit.
- <sup>148.</sup> Williams, M., Coare P., Marvell R., Pollard, E., Houghton A., and Anderson, J. op cit.
- <sup>149.</sup> Williams, M., Coare P., Marvell R., Pollard, E., Houghton A., and Anderson, J. op cit: 132
- 150. Equality Challenge Unit (2008) op cit.
- 151. Equality Challenge Unit (2008) op cit.

- 152. Equality Challenge Unit (2008) op cit.
- 153. Mental Wellbeing in Higher Education. op cit.

# Bibliography

NUS Connect. "Mental Health and Suicide Prevention Guide".(2016)

Cooper, Frone, Russell & Muda, 1995; Cooper, Krull, Bede-Agocha, Flanagan, Oructt, Grabe, & Dermen, 2008; Debahrt et al., 2009; Goldsmith, Tran, Smith, & Howe, 2009]

Andringa, T., and Lanser, J. "How pleasant sounds promote and annoying sounds impede health: A cognitive approach." International journal of environmental research and public health 10, no. 4 (2013): 1439–1461.

Bewick, Bridgette Maree, Jan Gill, B. Mulhearn, Michael Barkham, and Andrew J. Hill. "Using electronic surveying to assess psychological distress within the UK student population: a multi-site pilot investigation." E-Journal of Applied Psychology 4, no. 2 (2008).

Blackman, T., Harvey, J., Lawrence, M. and Simon, A. "Neighbourhood renewal and health: evidence from a local case study". Health & Place, 7(2), (2001): 93-103.

Brill, C. Understanding adjustments: supporting staff and students who are experiencing mental health difficulties. (Equality Challenge Unit, 2015).

Burbridge, M. and Morrison, G., 2016, November. Happy homes—the relationship between homes and mental wellbeing: a review of the literature. 7th International Conference on Energy and Environment of Residential Buildings, November 20–24 2016, Brisbane, Australia. (2016).

Byrom, N. "Grand Challenges in Student Mental Health". (2014)

Byrom, N. and Warren, A. "Looking After a Mate". (2016).

Crouch, R., Scarffe, P. and Davies, S. Guidelines for mental health promotion in higher education. (2006): 2013.

Dawson, S.P., Burnett, B.M. and McArdle, F.A., 2005. Watching learning from behind closed doors: The impact of surveillance on student online behaviour. (2005).

Disability Rights Commission. "Understanding the Disability Discrimination Act: A guide for colleges, universities and adult community learning providers in Great Britain". (2007)

Dollery, R. et al. Investigation into the Mental Health Support needs of International Students with particular reference to Chinese and Malaysian students. (The University of Nottingham, 2011).

Dunne, M., O'Neill, M., and M. Friel. "Improving Emotional Health and Wellbeing through peer support-A programme in the Western Health and social Care trust is helping young people become peer educators'." Education and Health 27, no. 1 (2009): 18-19.

Equality Challenge Unit (2016). op cit.

Equality Challenge Unit "Equality in higher education: student statistical report 2016." (2016)

Equality Challenge Unit "Inclusive Campus: Accommodation and Social Space" (2008)

Equality Challenge Unit. "Understanding adjustments: supporting staff and students who are experiencing mental health difficulties" (2014)

Ferguson, S. "Student Mental Health: Planning, Guidance and Training Manual." (2002).

Grant, A., Kester, G., Donnelly, N. and Hale, B. Reducing the risk of student suicide: issues and responses for higher education institutions. UUK Management Guidance Series. London: Universities UK/Standing College of Principals. (2002).

Healthy Universities. "Healthy Universities Toolkit". healthyuniversities.ac.uk. www.healthyuniversities. ac.uk/course/toolkit/ (accessed 22-03-17).

Higher Education Statistics Agency. "Students and graduates". hesa.ac.uk. www.hesa.ac.uk/data-and-analysis/students (accessed 22-03-17).

Hopton, J., and Hunt, S. "Housing conditions and mental health in a disadvantaged area in Scotland." Journal of Epidemiology and Community Health 50, no. 1 (1996): 56-61.

Humphreys, P. (2017). Data from Student Reviews. [online] Available at: www.studentcrowd.com/ [Accessed 23 Mar. 2017].

Khantzian, E.J. The self-medication hypothesis revisited: The dually diagnosed patient. Primary Psychiatry, 10(9), (2003): 47-54.

King, R. 12S: "Promoting Mental Health and Wellbeing in Colleges and Universities." (2012).

Maller, C, Townsend, M, Brown, P and St Leger. "Healthy Parks Healthy People", Melbourne: Deakin University and Parks Victoria. (2002)

Maller, C.J. and Strengers, Y. "Housing, heat stress and health in a changing climate: promoting the adaptive capacity of vulnerable households, a suggested way forward". Health promotion international, (2011) p.dar003.

Mental Wellbeing in Higher Education. "Student Mental Wellbeing in Higher Education: good practice guide." (2015).

Morris, C. "Open Minds Final Report: Student Mental Health and Wellbeing at the University of Brighton". (2010)

National Institute of General Medical Sciences. "Circadian Rhythms Fact Sheet". nigms.nih.gov www.nigms.nih.gov/Education/Pages/Factsheet\_CircadianRhythms.aspx (accessed 22-03-17)

Neale, I., Piggott, L., Hansom, J., Fagence, S. "Student Resilience: Unite Students Insight Report 2016". 28. (2016).

Nolan, M. and Lundh, U. "Satisfactions and coping strategies of family carers". British Journal of Community Nursing, 4(9) (1999): 470-475.

NUS. "Homes Fit for Study: The state of student housing in the UK." (2014).

NUS. "No Place for Hate: Hate crimes and incidents in further and higher education: religion or belief". (2012).

NUS. "Students and alcohol". (2016).

Penny, G.N. and Armstrong-Hallam, S., Student Choices and Alcohol Matters (SCAM): A multi-level analysis of student alcohol (mis) use and its implications for policy and prevention strategies within universities, cognate educational establishments and the wider community. (2010): 7

Protect-Ed (2017). [online] Available at: www.protect-ed.org/ [Accessed 23 Mar. 2017].

Reeves, J. and Hillman, N. "The 2016 Student Academic Experience Survey". Higher Education Policy Institute (2016).

Positive Psychology. "What is PTG: The Science of Post-Traumatic Growth". positivepsychology.org.uk. positivepsychology.org.uk/post-traumatic-growth/(accessed 22-03-17)

Regan, M. "Mental health and housing". (2016)

Royal College of Psychiatrists. "Mental health of students in higher education". (2011)

Scarffe, P. UMHAN Policy Paper on Students with Mental Health Difficulties and Examinations. (2007).

Sodexo. "Wellbeing away". (2015).

Student Housing Company Survey/ The E Word – 2460 students participated in the survey (in press) (2017)

Taggart, H. The Five Year Forward View for Mental Health. (2016).

Tatterson, A., Hahn, A., Martini, D., and Febbraio, M. "Effects of heat stress on physiological responses and exercise performance in elite cyclists." Journal of Science and Medicine in Sport 3, no. 2 (2000): 186-193.

Thomas, L. Building student engagement and belonging in Higher Education at a time of change. Paul Hamlyn Foundation, (2012): 100.

Time to Change. "Violence and Mental Health". time-to-change.org.uk. www.time-to-change.org.uk/media-centre/responsible-reporting/violence-mental-health-problems (accessed 22-03-17)

Turner, G. "Peer support and young people's health." Journal of adolescence 22, no. 4 (1999): 567-572.

Universities UK "Changing the Culture: Report of the Universities UK Taskforce examining violence against women, harassment and hate crime affecting university students." (2016)

Universities UK. "New programme to address mental health and wellbeing in universities." universitiesuk.ac.uk. www.universitiesuk.ac.uk/news/Pages/New-programme-to-address-mental-health-and-wellbeing-in-universities. aspx (accessed 22-03-17)

University Mental Health Advisors' Network. "I chose to disclose campaign". uhman.com. www.umhan.com/i-chose-to-disclose.html (accessed 22-03-17).

Walker, L. "The Cost of Good Intentions: Thermal Discomfort in Traditional Public Housing Units With Preset Thermostats." Housing Policy Debate 25, no. 1 (2015): 152-178.

West of England Academy. "Guide to Quality Improvement." (2016).

Williams, M., Coare P., Marvell R., Pollard, E., Houghton A., and Anderson, J. "Understanding provision for students with mental health problems and intensive support needs." Institute for Employment Studies and Researching Equity, Access and Partnership – HEFCE (2015).

Yesufu-Udechuku, A., Harrison, B., Mayo-Wilson, E., Young, N., Woodhams, P., Shiers, D., Kuipers, E. and Kendall, T. "Interventions to improve the experience of caring for people with severe mental illness: systematic review and meta-analysis". The British Journal of Psychiatry, 206 no4, (2015): 268-274.

