Education Support Partnership

Staff Wellbeing in Higher Education

A research study for Education Support Partnership

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Introduction

Researcher context

This research study was conducted for Education Support Partnership by two independent researchers: Dr Tim O'Brien and Dr Dennis Guiney. Dr Tim O'Brien is Visiting Fellow in Psychology and Human Development at UCL Institute of Education. Dr Dennis Guiney is a Child and Adolescent psychologist and an associate of The Centre for Inclusive Education at UCL Institute of Education. In terms of theoretical sensitivity to the field, both researchers designed and led the Teacher Wellbeing programme for The Chartered College of Teaching. Both have worked in the field of wellbeing for many years. In terms of knowledge of the analytic methodology used in this study, both researchers applied Grounded Theory in their own doctoral research.

The purpose of this study is to signpost key emergent themes for further research, investigation, discussion and dissemination by Education Support Partnership.

Confidentiality and ethical parameters

Education Support Partnership provided the researchers with lists of email addresses of staff members working in Higher Education that were randomly selected from their database, but they have no knowledge of who was interviewed, which university the participants work at or their specific job roles. No names of participants are identified in this report. No universities are identified in this report. All individual details were provided in accordance with General Data Protection Regulations (2016) and the research process was undertaken in line with the British Education Research Association's ethical guidelines (2018).

The researchers are the only people who know who participated in the interview process. All participants were anonymised on the field-notes that were taken during the interview process: each being assigned a number and not a name. Once the themes had emerged in relation to the methodology, all field notes were destroyed.

Method

In total 25 in-depth semi-structured interviews (Mears, 2012) took place covering 25 Higher Education institutions. This sample size is theoretically robust in relation to the analytic methodology that is applied (Birks and Mills, 2015). The researchers note that the average time for interviews was 51 minutes.

Education Support Partnership enabled access to participants via a process of random sampling their email database of contacts. A random sample email list was sent to the researchers and potential participants were approached by email asking if they would like to participate in a telephone interview. Four waves of random sampling were required to achieve the total number of interviews.

At the beginning of each interview confidentiality and ethical parameters were explained to each participant along with a research briefing to gain informed consent for the interview to take place. The semi-structured interview contained broad questions agreed between the researchers and Education Support Partnership. The following questions were asked of each participant:

1. What do you understand by the term wellbeing?
2. What has a positive impact on your wellbeing in your workplace?
3. What has a negative impact on your wellbeing in your workplace?
4. How could wellbeing be improved in your workplace?
5. Do you see any links between Wellbeing and Mental Health?

All participants thanked the researchers for researching into staff wellbeing in Higher Education. They emphasised that it was an area that needed attention. Ironically, some respondents replied that they felt this was an important area for research investigation but, due to the current "demands" and "pressures" of their role, they did not have time to take part in a semi-structured interview - as they felt that this would have a negative impact on their wellbeing.

Methodology

Grounded Theory was the chosen methodology for data analysis. Grounded Theory (Strauss and Corbin, 1998) is a methodology that incorporates an *a posteriori* approach in that it enables theory to be inductively generated from data through a method of constant comparison. The application of Grounded Theory provides a tool for understanding and validating lived experience and social reality as well as generating theory about that reality. Rich and valid theoretical foundations can be gathered from the analysis of interview data by using comparison-driven analytic methods (Charmaz, 2014). This makes Grounded Theory suited to the nature and context of this specific research study for Education Support Partnership.

It is important to emphasise that theory is actively generated rather than verified. Education Support Partnership did not set out with a hypothesis to test. As the researchers are involved in inductive analysis of data the role of reflexivity becomes fundamental in relation to enhancing or diminishing the validity of outcomes that occur as a result of empirical grounding. Both researchers have engaged in research at doctoral level where philosophical theorising about personal construction of reality is embedded in the act of research, particularly in how construction influences the interplay between researcher and data in the interpretation process. Their joint engagement in such reflexivity enhances validity (Glaser, 2016). Due to the grounded nature of the research process, the researchers make no claims in relation to generalisability.

Throughout the process the researchers accept the data as it appears in itself and in its own context (Giorgi, 2009). Constant comparison procedures associated with Grounded Theory, such as multiple coding processes and categorisation, were used to interpret and interrelate data in order to validate emerging themes. Final thematisation was arrived at through refining to reach theoretical saturation – which will be explained in more detail at a later point. All themes emerged through a rigorous process of generating and comparing the properties and dimensions of data. Themes were generated, not forced. Analysis started after the very first interviews with the two researchers having regular communication and reflection on context and meaning. It is important here to mention sampling, and in relation to Grounded Theory, the concept of theoretical sampling. When Grounded Theory is being applied, the researcher refines categories and concepts as they emerge. The researcher will then add cases to the sample in response to emergent findings (Glaser, 2002). There will become a point where no new insights, dimensions or properties emerge from the data. Themes become reliable and valid in relation to the analytic methodology. This is referred to as theoretical saturation. Theoretical saturation is not dependent upon a specific sample size. However, analysis of research literature where Grounded Theory had been utilised (Thomson, 2011) highlights that a sample of 25 is the average sample size for producing reliable and valid themes.

This report continues by detailing the themes that emerged in relation to each question. Verbatim quotes, phrases or words from participants are used for the purposes of illuminating a theme.

Questions

1. What do you understand by the term 'wellbeing'?

2. What has a positive impact on your wellbeing in your workplace?

3. What has a negative impact on your wellbeing in your workplace?

4. How could wellbeing be improved in your workplace?

5. Do you see any links between wellbeing and mental health?

1. What do you understand by the term 'wellbeing'?

This question was asked to ascertain how individual participants conceptualised wellbeing, as there are many definitions of the term within the literature. Close scrutiny suggests that is a complex, contested and slippery concept.

When describing how they define wellbeing the 25 participants covered a wide range of dimensions associated with wellbeing. Participants in this research study engaged and worked hard at explaining - and then developing - their own definitions and responses to this question. Some participants disclaimed their definitions as being "underdeveloped" or "ephemeral" as they worked towards a more detailed answer and several were keen for the researchers to understand that they felt they had little expertise and training in this area.

There were multiple definitions offered. Some responses were in line with wellbeing as a state of being happy and physically/emotionally healthy. Some definitions stated that wellbeing relates to the absence of certain physical and psychological conditions such as illness, distress and discomfort. Other respondents focused on positive attributes of wellbeing such as a sense of achievement, physical and mental fitness. Lastly, some adopted a more holistic definition, and described it as such, encompassing physical, emotional, social and cognitive/mental health features, as well as economic/financial features. In the researchers' experience these responses accorded very much with definitions provided by a large cohort of teachers and other professionals we have worked with. Respondents also mentioned the complex and contested nature of the term once you start to think deeply about it. They also talked about the term being elusive as it can alter according to a person's perspective.

Adopting a thematic approach to definitions when they are so varied can be problematic in terms of validity. However, it is valid for the researchers to highlight the key thematic factors that emerged within definitions. The main robust theme was wellbeing as *balance*. This notion was represented in different ways. As having balance - work/life balance but also balance within professional work, such as research and teaching balance. It was also represented as maintaining balance – the "need" and "necessity" to keep things balanced such as "multiple priorities" "management expectations" and "not being overwhelmed by demands". It was also represented as re-establishing balance. This was seen essential to "coping"," surviving" and "not being brought under and dragged down by decisions that I have to make about others or others make about me". Some participants emphasised that lack of balance would make them physically and/or mentally ill and some described how this had actually happened to them.

The notion of 'sustainable wellbeing' also emerged within this theme, though this was not overly developed. What was especially noticeable within this theme was that the notion of 'balance enveloped all aspects of life. Although the interview briefing and schedule focused on work and the workplace, it was clear that participants viewed work and home as interdependent and not capable of being separated.

Initially balance was described in individualistic terms: about me/myself being balanced. This was sometimes associated with being respected and valued as an individual within your working environment. For example, lack of respect or recognition could cause people to feel out of balance. As they developed their answer participants moved from an individualised view of balance and described balance in terms of collegiality. One participant stated. "In the end, wellbeing is not just about me – it is about us and it is about we". Another stated, "It is about being comfortable in how you interact with your world, being there for others as well as yourself". Collegiality as a component of wellbeing was also seen as important by many participants in the current academic climate – "we have a duty of care towards each other in a world where things just keep on changing so quickly", "we need to avoid academic toxicity – that's how I refer to it", "we have to look after each other, otherwise we have managers creating a culture where everyone is out for themselves". Participants experienced very real dilemmas in relation to focussing on individual and collective responsibility for their own, for student and for departmental and whole organisation wellbeing. Wellbeing was seen as both individualistic and relational.

Many mentioned wellbeing as being rooted in *happiness*, though when developing their definition often added that wellbeing is more than happiness and moved into different conceptualisations that related more to the meaning they gain from their role.

We note here that amongst all participants there was a high sense of personal responsibility for the wellbeing of students. We also note that some respondents took a sceptical view about the current usage and usages of the word 'wellbeing', stating, "it is currently a bit of a buzzword', "it's a term that has become ubiquitous", "wellbeing is just tick box in my organisation", "being honest, it is critically important in these times in Higher Education but to me it just feels like it's just the next thing to tick off on the management list". There was scepticism on the part of some participants about 'wellbeing activities' as a solution to wellbeing issues. Examples of wellbeing activities that participants mentioned were yoga sessions, mindfulness sessions and one-off meetings, for example, on how to be more resilient.

2. What has a positive impact on your wellbeing in your workplace?

Thematic analysis revealed four key themes in response to this question: the role/style of management, relationships, professional acknowledgment and being professionally valued.

2a) The role/style of management

Management featured highly in response to many of the questions about wellbeing in this study. What some participants described as "positive management" was seen to be a key influence on their wellbeing. The term "regime" was often applied when describing management. Elements that emerged from the data, when management was seen as being positive and therefore having a positive impact on wellbeing, were:

- The setting of targets described as "sensible", "achievable", "meaningful" and "existing after consultation"

- A management approach that valued (rather than undermined) individual and team expertise

- Being asked to 'sense check' and contribute to new ideas and strategies

- Being respected by managers as an individual who has a contribution to make. This was also represented in the theme 'professional acknowledgment'

- Being invited to offer challenge

- Creating an ethos that makes people feel valued and trusted. "It is the responsibility of management to create an affirming human atmosphere. I am fortunate in that we have that where I work. I speak to colleagues elsewhere who do not"

One theme that was represented often in the data was how much being recognised and praised for your contribution had a positive impact on wellbeing. Recognition from management as well as peers was seen to be of high importance.

2b) Relationships

In the analysis of the data it was clear that relationships matter in relation to wellbeing. The relationships mentioned that have a positive impact on wellbeing, in hierarchical order of how often they appeared in the data, were:

- participant – colleague in department/team [appeared most often in data]

- participant – student

- participant – management

- participant – colleagues within university

- participant – external colleagues [appeared least often in data]

This could be visualised as an inverted triangle between the participant and:
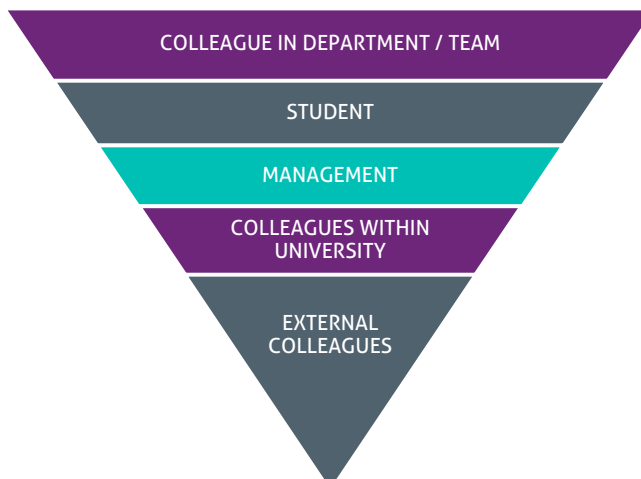
The nature of the relationships was categorised as i) professional relationships that develop into friendships; ii) relationships that are premised on intellectual stimulation and iii) relationships that create a sense of team and relationships often described as "healthy". Examples of descriptors include: "A huge benefit of working in a Higher Education institution is that discussions with colleagues – and also with students - are so stimulating, you never stop learning", "The single most positive impact on my wellbeing comes from knowing I am in a team, a close community, looking out for each other", "Academics not only exist in a community of practice but also in a community of friendships" and "Your wellbeing is high when you are involved in healthy relationships...reciprocal, affirming, nurturing."

2c) Professional acknowledgment

In our coding, this theme began as 'positive feedback' but at the point of theoretical coding we were able to be more precise. Various participants highlighted how promotion within universities is premised upon how you personally perform, for example, *your* publications, *your* research and *your* contribution to the field. Therefore, receiving what was referred to as "validation", "recognition" and "praise" for what you achieve has high value in relation to positive impact on wellbeing. Professional acknowledgment made participants feel both more trusted and more valued. "I know that we are adults but being praised still matters to us". One aspect that mattered to many participants was being 'seen' and acknowledged as a teacher – "What do people think I do all day? Just out there researching? No, I am a teacher. I'm out there teaching...we are teachers."

2d) Professional value

This theme weaves throughout other themes but the analytic process also validates it as a self-standing theme. This is because two elements of the theme created a response where the participants felt a sense of professional value.

One element was feeling a sense of autonomy and/or agency. These two terms were often used interchangeably but were related to factors such as having autonomy in terms of organising your own time or agency in terms of selection of professional tasks and decisions, as one respondent said, "having the autonomy to just get on with it".

Another element that impacted positively on wellbeing was when participants were associated with success and usually success that is relative to agreed goals and aims. This could be their personal individual success, team/departmental success or organisational success.

3. What has a negative impact on your wellbeing in your workplace?

Responses to this question could be seen as inviting the opposite to whatever was spoken about in terms of positive impact on wellbeing, but in practice the research process used here offered opportunities to 'drill down' further through dialogue that encouraged deeper thinking and reflection.

As researchers we observed that participants were seeking to be fair, open and balanced in their responses. We did not sense that any participant was using the opportunity to actively criticise a particular institution or manager. Nor did we sense that participants were self-selecting within a randomised framework because they wanted to exercise a particular wellbeing or mental health agenda. There was both objectivity and authenticity in their responses. However, we also note that, given this context, analysis in relation to this question paints a somewhat bleak picture.

There were three themes that competed for prominence in the analysis: 'Isolation', 'Bad management' and 'The consumer model'. We accept that the term 'bad' has inherent connotations and potential biases but this is the descriptor that emerges from the analysis.

3a) A sense of isolation

One of the main factors that had a negative impact on wellbeing was feeling and experiencing a sense of isolation. Often this was emotional isolation. Here we provide a selection of comments that illuminate this theme.

"As an academic you have to be on guard to protect your own connectedness, if not, you get very easily disconnected. You just end up feeling boxed off. That's a bad place to be."

"The increasingly extreme pressures of working in a university disarm you and isolate you."

"One of the key skills in current times is working against isolation. If you can't, then it can be a very lonely job."

"At pinch points and times of pressure you feel like a single entity in a huge changing system"

"I remember a time of camaraderie and collegiality. Now, the external pressures isolate and spotlight individuals. I wonder if this is done deliberately in the system with the system consciously isolating you."

"Where do you go to when you need help – especially regarding your mental health? You are unsure who will get to know about it and if it will affect your job if people find out. You just end up dealing with it on your own without looking for support at work."

"The system has changed. It used to be far more about the department, the team, but now it is more individualistic. Eventually all systems are at risk of disease. Individualism is one of the diseases in Higher Education. The result is that you become isolated, you feel isolated and this is not good for your sense of wellness."

"Personally, I feel that we have become separated and isolated. It doesn't feel like that when you are teaching but ploughing away on your own research can be really isolating. How does that impact on me? The sense of isolation can be very demoralising."

"If you are struggling mentally, say with anxiety, you feel like you are on your own unless you are lucky enough to have colleagues who care."

"My sense of isolation was further affected by some mental health issues – work comes in at set times – marking essays for example – and you just have to get them done by a certain date – regardless, it adds to being isolated"

"The community aspect of teaching and learning is going missing – it can be very lonely and not inclusive."

"Over the last 15 years I have seen things change a great deal – fear, an attack on autonomy, erosion of trust, isolation is now the norm."

"From where I stand, I see a divide and rule approach. No longer support the idea of team. Hierarchies exists that promote isolation of individuals."

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We highlight here that, without any prompting by the researchers, over fifty per cent of participants talked about feeling a sense of isolation when returning to work after *bereavement*. This related to either the participant's personal experience or the experience of the participant's colleagues. We also highlight a variation amongst participants in knowing who to go to and what processes are in place to support them in their organisation should they ever experience stress and anxiety. Six respondents, again unprompted, mentioned that they would go to their GP if they were concerned about their mental health rather than ask for support at work. All six gave the same reason that identification at work that you were stressed or anxious, for example through occupational health or a visit to an available counsellor, could result in labelling and therefore have an impact in how they are perceived in terms of their capability to carry out their professional role.

3b) Bad management

Participants described the positive aspects of management in answer to the previous question. Here, they talked about how management practice and management style was impacting negatively on their wellbeing. They describe a culture of bad management; a culture of performativity that has resulted in management approaches that do not appear to support their wellbeing.

Some participants stated that they did not 'blame' the managers but 'blamed' the system - which they felt had been impacted by undefined third-party pressures. Some respondents mentioned globalisation and government policy, which many ascribed to the marketisation of Higher Education in recent years. Respondents felt that the predominant culture produced a particular management style. Various descriptions of 'culture' were used. The most common being:

A culture of mistrust: participants talked of feeling not trusted and de-professionalised.

"Managers should be building, leading... instead, the bad ones are simply destroying. Destroying people, I'm serious here. We no longer feel trusted."

A culture of bureaucracy: administrators prioritising and "squeezing down the chain" one bureaucratic task after another. One participant stated, "It is a bureaucratic nightmare. You are constantly on a treadmill of justification". There was also data on bureaucratic hierarchies being seen to result in bullying. We only heard from one participant about what they saw as overt bullying, but we did hear about manipulative and passive-aggressive bullying.

A culture of unclear priorities and change: priorities alter; these are often not communicated well. Lack of consultation means that 'academics' do not understand the rationale for priorities. "Managers might be having a tough time but where I work everything is a priority. How can than not bring your wellbeing down?" "Constant disrupting of the model, constant change, re-organisation without consultation". "Your line manager changes, the strategy changes, then the line manager changes. It feels so unstable."

A culture of management by administration (rather than leadership). The criticism here was administrators/managers taking a functional role in relation to participants but a development role in relation to the organisation. "People who do not understand my job are constantly jostling with my priorities, and other people's priorities and as a consequence, whether they are aware of it or not, they are constantly jostling with our wellbeing."

3c) The consumer model

The student-as-consumer model was identified as creating conditions and experiences that can have a negative impact on the wellbeing of participants in this study. This affected participants in various ways. There was talk of being set "preposterous targets" and "targets that have clearly appeared from financial modelling". These targets placed participants under pressure:

"In this consumer world of target after target that we are now in at universities, academics are under pressure and over-stretched."

"The problem with the target-driven system is that you always feel you are on the edge of being caught out. What for, you never know. It's a feeling that's there. "

The consumer model is seen as a generator of anxiety and pressure.

"You have to do all you can to keep student numbers high. Otherwise, next year one of your colleagues might lose their job."

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"When I get time to reflect, I wonder how we ended up in a world where profit has become more important that pedagogy."

Other potential themes that emerged in relation to this question - but were not theoretically robust enough to be valid - were 'performance-related anxiety' and 'lack of resourcing/out-dated resources', for example computer IT systems.

4. How could wellbeing be improved in your workplace?

Participants indicated that they understood that the rapid change in the Higher Education sector that they are experiencing had come about for many reasons. They identified that the globalisation and consumerisation of Higher Education, plus government policy, had a direct impact on university funding and priorities. In relation to improving wellbeing participants did not see easy ways of changing the political landscape and so their answers here tended to focus on their own organisation/systems or their own individual responses to the pressures they experienced. Here we identify suggestions that appear in the data.

Adopting a more overt approach to staff wellbeing as well a necessary focus on student wellbeing: This includes offering counselling and support. Some participants were aware that counselling was available within their organisation. Some were unaware of what was available to them and felt that whilst they knew what was provided for student wellbeing there was less clarity about what was available for them. This did not mean there was nothing in place.

We note here that some participants were aware that their university was "taking staff wellbeing seriously" or "focusing on wellbeing as a strategic priority" and in these situations they were aware of what was available to them. Some mentioned a "helpline" as a form of external support; this was the Education Support Partnership phone helpline.

Increased training and professional development that relates to personal wellbeing: is seen as required and some participants feel it is urgently required.

Increased awareness by management of how their systems and behaviours can impact wellbeing:

> "Management should stop generating anxiety in the system and stop creating anxious systems". "Stop pushing stress-inducing things down the system onto us".

There needs to be a reduction of the anxiety that people might lose jobs: This anxiety appears in the data from individuals who are concerned that their expertise might become "redundant" or will "not attract the funding it used to" or that re-organisations will affect their job or the jobs of their colleagues. It is evident in the data that participants believe better communication can reduce anxiety.

Although not a robust element, some participants did talk about clarity of contracts as a way forward for reducing stress, sickness and anxiety. More transparent communication and open dialogue was recommended.

Re-focus on teaching, learning and research: For example, "Why should I engage in high quality research in my own time?"

There is a need for a less "ad-hoc" or "DIY" or "piece-meal" approach to wellbeing: One participant spoke of a wellbeing training session that was seen as "infantilising" and another of a wellbeing session that was "patronising and did all it could to avoid the real issues". Put in place a planned organisational approach to improving wellbeing. For example, "Can we stop the forced wellbeing activities and tackle the serious wellbeing problem that exists in higher education. Reducing workload would help me more than a group yoga session".

> "If we do not take the wellbeing of staff seriously then Higher Education is not sustainable. It is becoming increasingly less sustainable as we speak. Look after staff, value and trust them or else the system will implode."

Put wellbeing on the conversational agenda and speak up about your own wellbeing.

Insist that universities offer support to staff to help them become more resilient: e.g. mentoring – and to support them when they feel overwhelmed – e.g. counselling.

Kindness was seen as of high value in the 'relationships' element of what impacts positively on wellbeing in the workplace: It also appeared here with kindness towards colleagues being seen as a way that individuals could "improve" or "safeguard" wellbeing.

5. Do you see any links between wellbeing and mental health?

Many participants queried why this question was being asked, feeling the answer was implicit in their engagement in all previous questions, especially question one. As a consequence, they tended to repeat or revisit Question 1 answers. Some participants politely gave brief answers stating that they could see the nuance in the question but that they were not able to elaborate on their answer to question one, as they did not have the expertise.

> "I can see how understanding the link between wellbeing and mental health could be important – but I have given my answer. I'm not a specialist. I don't know"

At the same time participants saw a link between mental health and wellbeing. As they developed their responses, they highlighted how one impacts upon the other, but many also separated 'mental health' out as being about anxiety, stress and depression whereas wellbeing was often referred to as being "holistic".

In this way 'mental health' was often perceived as mental ill health. Some participants identified mental health as being solely "medical" – e.g. "internal, such as bipolar disorder" – and wellbeing as being a combination of internal and external factors. Below are two illuminating comments,

> "Once you are no longer able to fight the constant headwind caused by change in Higher Education your wellbeing issues become your mental health issues"

> "Anxiety and feeling a loss of control is the beginning of a slippery slope from poor wellbeing to a full-blown mental illness issue"

Participants who had spoken with colleagues about wellbeing commented on how close to the surface emotions and concerns are for people. Some were surprised by how quickly people "open up" and discuss how they are feeling.

Many participants spoke about the urgent need for support to be made available. They also spoke about the need for more research into their wellbeing and lived experience.

The researchers found that loss of trust, as detailed in previous sections, a feeling of not being in control and an increase in general anxiety had caused some respondents to disengage (even slightly) from performativity demands in institutions they worked in as a way of taking back control, exercising agency, and avoiding physically and emotionally overinvesting. Many participants spoke about if, or when, you decide to take control of your own wellbeing you are in danger of being framed as "disengaged" "difficult" "negative" or a member of a wider group who are doing the same as you who might be defined as, for example, "the awkward squad".

Whilst respondents welcomed the current focus on wellbeing and mental health, particularly for students - who they approach with a strong sense of a duty of care - some were also sceptical about the recent institutional focus on wellbeing, seeing it more as being for external judgments that are made about the university and not really a process yet, that fully supports them as members of staff.

Many respondents expressed a concern that seeking support for one's own mental health concerns was managerialised in Higher Education institutions, requiring a meeting with a line manager and then referral to occupational health, with a report going back to your manager. They voiced concern that in the current climate this could 'go on your records' and be used for negative purposes and instead a few respondents only sought outside support to maintain what they saw as appropriate boundaries over this vital wellbeing issue.

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Conclusion

Summary

The researchers held detailed in-depth conversations with 25 staff working in Higher Education institutions. The methodology allowed a system of on-going analysis and coding that was respectful, dynamic and flexible within a given semi-structured interview framework. As mentioned in the methodology section, Grounded Theory, unlike other forms of research, does not make claim to validity, rather it is an authentic account that has credibility, consistency and dependability (Denzin & Lincoln 2017) based upon reflection and transparency. The aim of this research was to produce 'rich descriptions' (Creswell 2002) that represent the complexity of the life-world under study here and as such we would argue that in the place of generalisability readers should approach this research, instead, with notions such as fittingness and transferability in mind. To summarise the key findings in this study:

1.   Professionals in Higher Education actively consider their own wellbeing and that of their students.

2.   Respondents do not feel they have expertise in the area of wellbeing or mental health but recognise wellbeing is complex and is a dynamic process with many interrelated domains.

3.   Wellbeing is maximised when people feel valued, well-managed, have good workplace collegiality and can act with agency and autonomy.

4.   In terms of negative impacts on their wellbeing the largest expression of concern was management approaches that prioritised accountability measures and executive tasks over teaching, learning and research tasks. This was seen as disassociating what participants want to focus on – and what they came into the profession for - from what administrators want to focus on. In some interviews it was dichotomised as valuing money from student intake over providing high quality of teaching.

5.   Participants overwhelmingly identified the consumer model as a driver of management priorities and one that had severely undermined trust. One participant described the consumer model creating "the massification of education". Another said that the consumer model is founded on "a 'pile them high' mantra and making sure you never forget that overseas students mean more cash".

6.   The drive for student numbers and the competition between universities – for example, Russell Group versus non-Russell Group – was seen as a generator of pressure, including potentially souring staff/student relationships. This pressure negatively impacts on wellbeing.

7.   Bereavement and support associated with bereavement was mentioned by half of the respondents when discussing wellbeing.

8.   Several respondents said they would actively choose not to use in-house processes and procedures to deal with their own wellbeing/mental health issues at a time when trust had been eroded. They felt it could result in labelling which could be detrimental to them.

9.   In general, respondents did not feel empowered to make a difference to the way that Higher Education institutions deal with wellbeing issues and this generated some cynicism.

10. All respondents saw a clear, though hard to define, link between wellbeing and mental health.

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Future research

This research study highlights a strong need to gain the perspective of managers and administrators in Higher Education in order to better understand the world they operate within, as these were not represented in this randomised sampling process.

Further research is required in order to understand what wellbeing activities and interventions exist in Higher Education and what would be most helpful to staff.

More research is needed – and we would recommend a multi method approach – to understand the relationship between wellbeing and the lived experience of staff working in Higher Education.

Another suggested area for future research could explore the nature of, and current barriers to, collegiality in Higher Education compared to other sectors in education.

It may be useful to engage in further research to more precisely describe resistance to change in Higher Education. For example, are some populations more resistant to change than others within and across institutions?

More research is required to understand and gain insight into the ethics and processes that exist within occupational health or counselling services at universities and how they can be communicated to staff to increase trust and confidence.

We recommend that Education Support Partnership ensure that Higher Education institutions are aware of their support helpline.

Dr Tim O'Brien and Dr Dennis Guiney

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