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## Digital tools to support students' mental health

University of the Highlands and Islands



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# Digital tools to support students' mental health

## Development of a digital toolkit to support staff to support students with mental health conditions

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### Background

Professional experiences at the University of the Highlands and Islands (UHI) prompted initial discussions about the need to carry out research, and identify support requirements, for academic staff teaching online students who have mental health conditions, whether these are disclosed or undisclosed at the time of application to the university (Erskine and MacPhail, 2015).

UHI is a tertiary distributed university, based on a partnership of 13 independent colleges and research institutions (each with their own character and specialisms), and supported by a network of over 70 learning centres across the Highlands and Islands of Scotland. In 2013/14, 25% of UHI students were resident outside the UHI catchment area. These students were based across Scotland, the rest of the UK and internationally (UHI, 2015). 16% of the university's students were enrolled in programmes delivered entirely online.

Studying online is different from being in a face-to-face environment, and online teaching staff, who do not have visual or audio cues, need to have additional skills to be aware of the needs of their students. Also, students can be more open and less inhibited in an online environment. The distributed nature of UHI adds to the complexity of supporting students with mental health conditions and also in dealing with certain behaviours, which can be very different online than in a face-to-face lecturing situation.

A mental health condition affects the way people think, feel, and behave. How they interact with others can cover symptoms that may be regarded as severe forms of "normal" emotional experiences like depression, anxiety, or panic, as well as other symptoms that interfere with a person's perception of reality (Mental Health Foundation).

With the prevalence of mental health conditions increasing in the general population, increasing numbers of students with such conditions are entering higher education. Research by the Equality Challenge Unit (2014) suggested that 0.8% of students in UK higher education have disclosed a mental health condition to their university. The Equality Challenge Unit has argued that this represents significant under-reporting, given that an estimated 29% of students experience clinical levels of psychological distress.

UHI student data from 2013/14 indicated that there was a higher rate of declared mental health conditions than the UK average (2.5%) – but a significant percentage may still not be disclosing their conditions (UHI, 2015).

## Aims

The aim of this project was to develop a digital toolkit for all staff to support students with mental health conditions across the university sector. The intention was to enhance the experience of students with mental health conditions as staff increase their knowledge and confidence.

This may contribute to student retention and recruitment by enabling universities to show commitment to supporting students with mental health conditions face-to-face and online across the sector, including at UHI's distributed tertiary institution. This will also contribute to the sector's good practice and contribute to a university's duty of care to students.

## Methodology

Two of the project team undertook a literature search in May 2015 on the topic of mental health support for students studying on online programmes, which contributed to a paper based on their professional experience. The paper was accepted for publication in the *Journal of Perspectives in Applied Academic Practice* in June 2015. The published paper planned a mixed-methods design for research, with three phases:

- Phases 1a and 1b used a quantitative approach: a SurveyMonkey survey sent to the university's programme leaders, module leaders and personal academic tutors of online programmes at all levels of study in further and higher education.
- Phase 2 used a qualitative approach by asking more in-depth questions of module leaders and programme leaders through focus groups.
- Phase 3 was the planned development of a digital toolkit to support academic staff in providing suitable support for students studying with mental health conditions.

Ethical approval was obtained from the university in three stages for phases 1 and 2.

At the AMOSSHE Scotland group meeting on 18 November 2016, there was an extremely enthusiastic welcome for this proposed project from across the sector. It appears to address a common, recognised need. Senior managers from several universities expressed interest in not only using the outputs but also in contributing to its content. Phase 3 therefore included collaboration with these universities to gain the benefit of their input and ensure that this is a resource that can be shared with other institutions.

## Key findings

The Mental health conditions toolkit is available here: [staffresources.uhi.ac.uk/mhc](http://staffresources.uhi.ac.uk/mhc).

During development, the project leads were heartened to find a wealth of online information available relating to the physical manifestations and symptoms of mental health issues, and also a number of very useful external sites that could be linked to the toolkit, both in terms of specific conditions, and also some sites with advice specific to students. Those sites aimed at students, or those supporting students, tended to focus on the more traditional student profile (school leavers, leaving home for the first time), so the project team became even more convinced that the toolkit would provide further added value to the sector with its recognition of a range of student profiles, and specifically those studying online.

While working collaboratively, the project team was also able to draw on each of the project leads' specific skills and experience in developing the content for the toolkit. Dr Rachel Erskine, with her background in nursing and health, was able to effectively provide the descriptions of the conditions and their signs and symptoms, and highlight a range of useful further reading. Dr Eilidh MacPhail was able to draw on her experience of teaching, and particularly online teaching, to consider how mental health conditions may manifest in a teaching environment, and consider how staff should respond to these situations. Kate Mawby, with her experience of Student Services at UHI, provided a full presentation of the different roles that staff can play, and what support could be available to staff and students in terms of relevant policies and procedures.

In terms of engaging with the wider university sector in compiling the toolkit, the project leads attended an extremely beneficial conference in May 2017 at the Royal Conservatoire of Scotland, Glasgow, called 'Mental Health Disability Symposium: Supporting Student Transitions and Training'. While focused on the performing arts sector, this event included very relevant workshop discussions about the correct terminology to use, issues around disclosure, learning agreements and other tools used by different universities, and supporting staff in terms of training and raising awareness of relevant policies. This gave the project team further ideas for what should be included in the toolkit, and reassured the team that this was certainly a project worth pursuing in the current tertiary education climate.

Links were made with one of the organisers of the conference, Dr Rachel Drury, and followed up with a Skype meeting where terminology was discussed. The project team was interested to discover what terminology was preferred, as the team themselves had been discussing the language when conducting research. The word 'disability' was used for the conference, and the team wondered if this was the most appropriate term, or if 'condition', 'issue' or 'problem' may be more appropriate.

The project team then sent a short survey to all attendees of the 'Mental Health Disability Symposium' at the Royal Conservatoire of Scotland, Glasgow about the terminology used in mental health. 67 responses were received and these were the results:

- The term 'mental health condition' was the most preferred term, in rank order with 47/67 responses.
- 'Mental health issue' followed with 37/67 responses.
- 'Mental health illness' followed with 12/67 responses.
- 'Mental health problem' followed with 9/67 responses.

Of the least preferred terms, 'mental health disability' had 36/67 responses, followed by 'mental health disorder' with 32/67 responses.

The toolkit was reviewed internally in UHI, and externally, with enthusiastic comments received by all submitted reviews. Quotes from reviewers have been used on the welcome page of the toolkit and on marketing materials.

The toolkit development was written up as a paper in the *Journal of Perspectives in Applied Academic Practice* as a follow-up to the original paper of 2015.

## Recommendations

The toolkit availability is disseminated as much as possible through a variety of channels: internally and externally through UHI and all its campuses, through AMOSSHE and through the partnerships that have developed as the project has unfolded (for example, Dr Rachel

Drury at the Royal Conservatoire of Scotland, and Dr Dominique Thompson, who was the former Director of University of Bristol Student Health Services and is now an independent consultant in student wellness).

The project team recommends that:

- More research on support for online students should be undertaken, including interviews with students themselves, to refine and develop appropriate support mechanisms.
- Professional dialogue with colleagues in other higher education providers should be maintained, around both the resource and its application, and around the issue of mental health support for students. This could be through attendance at one or more relevant national conferences each year (for example the AMOSSHE national conference in July 2018) and taking advantage of other more localised opportunities to both disseminate and increase knowledge.
- All university staff should be encouraged to undertake continuing professional development in this area, whatever their role.
- Mental Health First Aid and ASIST courses should be promoted to all staff, and higher education providers should join the drive to make such training mandatory.

The toolkit in its current form is a starting point only, and the project team hopes that it will continue to develop and evolve over time. It should be reviewed at least annually for procedural updates, to ensure that links are still valid, and to allow appropriate additional material to be added.