Our shared vision is for UK universities to be places that promote mental health and wellbeing, enabling all students and all staff to thrive and succeed to their best potential.
We will achieve our vision by all universities adopting mental health as a strategic priority and implementing a whole university approach.
Stepchange: mentally healthy universities forms part of a refreshed call to action for universities.

It calls on universities to adopt mental health as a strategic priority, to see it as foundational to all aspects of university life, for all students and all staff.

This whole university framework, co-developed with Student Minds’ University Mental Health Charter, provides a shared framework for change.
STRATEGIC
Understanding that sustained effort is needed, now and in the long-term, across sectors and with multiple agencies and perspectives.

MENTALLY HEALTHY UNIVERSITIES FRAMEWORK

To achieve our vision of mentally healthy universities, this framework is:

ALIGNED
Recognising that working together to a shared vision and approach is essential; collaborating rather than competing, exchanging learning and celebrating each other’s successes.

ADAPTABLE
Inviting adaptation to local contexts and the needs of your population or institution.

SHARED
Not belonging to any agency or group, but is an agreed approach to realise the shared vision of mentally healthy universities.

EVOLVING
Developing in response to new evidence, emerging practice and changing policy conditions.
HOW DID WE GET HERE?

In 2016 UUK convened a proactive programme of work to develop and implement a whole university approach to mental health. The approach was informed by whole school and workplace initiatives as well as by the UK Healthy Universities Network. Direction was provided by the Mental Health in Higher Education Advisory Group.

Stepchange was published in 2017 alongside Not by Degrees, an independent review of mental health in higher education by the Institute for Public Policy Research. The University of the West of England, the University of York and Cardiff University piloted the strategic framework in partnership with UUK and Student Minds, supported by funding from the Office for Students (OfS). At the same time, many universities have used the framework to develop their own mental health and wellbeing strategies.
In 2018 additional, aligned frameworks were developed on suicide prevention (Suicide-Safer Universities) and the necessary partnerships between universities and the NHS (Minding our Future). The latter provided the basis for the commitment to student mental health in the NHS Long Term Plan (2019).

Stepchange: mentally healthy universities is a refreshed framework. It builds on learning from the university pilots, from the development process of the Student Minds University Mental Health Charter and from additional focus groups on leadership and staff mental health. The thinking on strategy and leadership was tested further at the UUK Mental Health Leadership Learning Collaborative.
HOW SHOULD WE THINK ABOUT MENTAL HEALTH?

We all have mental health. Within the student and staff community, different levels of need indicate different interventions.

Discussions on mental health tend to focus on those experiencing mental illness who need care or support. Universities have a responsibility towards those students and staff as well as an opportunity to identify those at risk and intervene early.

But we also have the opportunity to promote good mental health for the whole university population, improving the lives and outcomes of 2.3 million students and 400,000 staff.
Mental health is determined by a range of individual, interpersonal, community, environmental and structural factors.

Whether we like it or not, universities are health settings, with positive and negative effects on all students and staff. Let’s make them healthy settings.

‘Health is created and lived by people within the settings of their everyday life; where they learn, work, play and love.’

WHO, Ottawa Charter for Health Promotion, 1986
CASE FOR ACTION

There is a compelling case for universities to position mental health as a strategic priority.

ATTAINMENT
There is strong evidence that good mental health has a positive impact on a person’s learning, creativity, ability to concentrate and overall performance levels.

The link between health and learning gain continues into employability. Just as employees expect healthy workplaces, employers want graduates who are health and wellbeing literate.

THRIVING AT WORK
Employers who invest in employee wellbeing see enhanced performance, reduced costs from sickness absence, lower staff turnover and higher levels of creativity.
CASE FOR ACTION

RESPONSIBILITY
Universities have a responsibility to the health and safety of students, staff and visitors and a duty of care to their students and staff. This is set out in health and safety, employment and consumer legislation.

This responsibility should inform the risk profile of every institution.

IMPACT OF MENTAL ILLNESS
Poor mental health has negative consequences for the learning, work and lives of students and staff.

Suicide and serious mental illness have a devastating impact on families, friends and university communities.

Students experiencing mental illness are more likely to withdraw from courses, or to underachieve, and are less likely to progress.

The direct and hidden costs of staff experiencing poor mental health are less documented in universities but are likely to be substantial.
WHOLE UNIVERSITY APPROACH

Good mental health enables learning, work and community. It is fundamental to the core mission of universities. The whole university approach recommends that all aspects of university life promote and support student and staff mental health.

The whole university approach:

— recognises the effect of culture and environment, and specific inequalities, on mental health and wellbeing

— seeks to transform the university into a healthy setting.

— empowers students and staff to take responsibility for their own wellbeing

Improving outcomes for students and staff experiencing mental illness or mental health difficulties requires a whole university approach.

This approach balances the opportunity for prevention and early intervention and the importance of open conversations about mental health with the need for appropriately resourced and effective support services.

Universities cannot do this alone. They must continue to develop local and national partnerships with the health and care system to improve access to and coordination of care. Equally, they need to work with parents, schools, colleges and employers to mitigate the risks of transitions.

‘Leaders of schools, colleges, universities and community organisations [to] take a whole organisation approach to the mental health of their students, young people and staff, so that it permeates every aspect of their work and is embedded across all policies, cultures, curricula and practice.’

2035 Vision, Children and Young People’s Mental Health Coalition
The Stepchange: mentally healthy universities model is formed of four domains.
Universities transform lives through learning. Higher learning involves challenge and new ways of thinking: it can have a positive impact on a person’s mental health and wellbeing over a lifetime. However, the way learning is designed, structured and provided may produce a positive or negative experience.

— **Curriculum and pedagogy**: review the design and delivery of the curriculum, teaching and learning to position health gain alongside learning gain.

— **Learning communities and environments**: develop collaborative, safe and supportive environments – including digital environments – that have a positive impact on mental health.

— **Self-belief and confidence**: support students to develop the skills they need to thrive in everyday life.

— **Academic staff**: clarify the role of academic staff in student mental health through appropriate training and development.

— **Assessment**: make sure that assessments stretch and test learning without imposing unnecessary stress.

— **Fitness to study and fitness to practice**: embed mental health support in all fitness to study/practice processes and ensure that there is consistency of approach across the university.
**DOMAIN SUPPORT**

The demand for mental health support among students and staff has increased significantly. Universities currently resource a wide range of services to support those experiencing mental illness.

There is no definitive service offer. Mental health support services may cover both students and staff or only students. They may include counselling, mental health teams, digital interventions, residential life teams, helplines and after-hours support.

**SUPPORT SERVICES SHOULD BE:**

- set within a whole university mental health strategy, alongside wider support for staff and students such as support for disability, harassment and bullying, faith, housing, and finance, learning and work
- designed through co-production with students and staff, delivered according to need, and responsive to changing need
- safe and effective interventions that are regularly audited for safety, quality and effectiveness
- properly resourced, staffed and managed
- accessible to all members of the university community, and appropriate to culture and context
- prepared for a mental health crisis and suicide by having clear plans in place
- working in partnership with local NHS and care services with effective working relationships and information sharing agreements in place
Suicide-safer universities

WHAT DO WE KNOW?
At least 95 higher education students died by suicide in 2016–17 in England and Wales.

The rate is low – half that of in the wider age-adjusted population – but rising.

Incidents of suicide are highest in January and lowest in the summer months. They are higher in male students (Gunnell et al, 2019).

‘One life lost is one life too many’
Zero suicide alliance

Does your institution have a suicide safer strategy?
Was it co-developed with students and staff?
Does it cover prevention, intervention and postvention?
Is it multi-agency, involving key stakeholders from NHS, third sector and local authorities?
Is it owned by a member of your senior team?
Good mental health is central to staff engagement, productivity and creativity. The whole university approach brings together staff and student mental health and wellbeing.

**STAFF MENTAL HEALTH**
- Develop and implement a strategy that aligns staff and student mental health.
- Promote mentally healthy workplaces.
- Build mental health into performance regimes.
- Champion open conversations.
- Deploy effective wellbeing interventions.
- Train line managers and research supervisors to promote mental health.
- Ensure that support is easy to access.

**STAFF SUPPORTING STUDENTS**
- Training for staff to be aware of mental health difficulties and to respond appropriately must be set in a wider framework that sets out roles, boundaries and support available.
- Training should support the development of aware and compassionate communities that enhance mental health as well as responding to crises.

**RESOURCES**
- **Charlie Waller Memorial Trust** provide free advice on staff training strategy as well as sector specific e-Learning.
- **Mind’s Mental Health at Work Commitment** is a comprehensive framework for workplace wellbeing. Their partnership with Goldman Sachs on a two year pilot programme with 10 universities, Building Mentally Healthy Universities, will share learning and guidance with the wider sector.
‘We believe there is nothing more important than investing in the health and wellbeing of employees to create more good days at work. Healthier, happier people can do great things. It’s simple – a business filled with happier people having good days at work is a better business. That’s not too revolutionary if you think about it.’

Professor Sir Cary Cooper,
Professor of Organisational Psychology, University of Manchester
DOMA\nLIVE

MAKING UNIVERSITIES
HEALTHY SETTINGS

— **Health promotion:** promote ways to improve staff and student wellbeing to encourage healthy behaviours (physical activity, healthy eating and sleeping) and to discourage unhealthy behaviours such as abuse of alcohol and drugs.

— **Healthy culture:** create safe and open cultures that encourage inclusion and diversity and actively oppose bullying, harassment and marginalisation.

— **Healthy environment:** design work, learning and living spaces that promote good mental health, encourage access to nature and reduce physical risks.

— **Healthy community:** work in partnership with students’ unions and guilds to actively support the social integration of students, support academic achievement and retention, and reduce loneliness and improve wellbeing.

— **Visible leadership:** senior leaders promoting open and supportive conversations is essential to bring about and sustain change.

RESIDENTIAL ACCOMMODATION

Many of these issues come together in student accommodation. Universities must work closely with accommodation providers and local authorities to ensure safety, good design standards, staff training. These are set out in the British Property Federation’s Student Wellbeing Guide.
WHOLE UNIVERSITY APPROACH: ENABLERS

Five cross-cutting themes to embed a whole university approach.
ENABLER
LEADERSHIP

STRONG AND VISIBLE STRATEGIC LEADERSHIP

— Commit to mental health as a strategic priority across all aspects of the university.

— Develop a whole university mental health strategy, co-produced with students and staff, that aligns student and staff mental health and wellbeing.

— Implement the strategy through integrated, organisation-wide improvement supported by clear governance, capacity building and impact evaluation.

— Influence organisational cultures, policies and practices to address cultural and structural risk factors for poor mental health and to promote open conversations.

— Enhance knowledge about mental health in higher education through support for evaluation, research and innovation at all levels.

— Create strategic partnerships with local NHS and care services, to become involved with local initiatives and to contribute to the shaping of national policy.

“The step change in student mental health begins with higher education leaders adopting mental health as a strategic imperative.”

Professor Steve West, Vice-chancellor of the University of West England, Bristol
Questions for senior leaders

**Q** Is mental health a strategic priority for your institution?

- **YES**
- **NO**

**A** Are you satisfied that your vision will drive long-term change across every aspect of your institution for the benefit of all students and all staff?

- **YES**
- **NO**

**Q** Is mental health expressed as a priority in your strategic plan?

- **YES**
- **NO**

**A** Has it been discussed at senior executive and board level? Has this decision been added to your risk register? What mitigation has been agreed?
ENABLER
CO-PRODUCTION

Co-production with students and staff is at the core of the whole university approach.

Use co-production for:
- establishing a shared vision
- strategy development
- developing appreciation of the what effects of mental health
- service design and evaluation
- quality assured peer support

“No decision about me without me”

Through effective co-production, students’ and staff unions and representative bodies have the opportunity to establish a non-adversarial space to improve outcomes.
ENABLER INFORMATION

INFORMATION SHARING
Effective information sharing within institutions is key to an integrated and cohesive response to mental health. In particular, effective information sharing between academic, professional services and support teams may be critical in identifying students or staff experiencing difficulty.

Universities are extending learning or staff analytics to identify difficulties or encourage positive behaviours. These opportunities must be built on trust: co-production and clear governance are essential.

SHARING INFORMATION WITH THE NHS
Confidentiality is fundamental to effective, safe and accessible mental health care. At the same time, sharing information and records – within effectively governed agreements – can address potentially dangerous gaps in care.

SHARING INFORMATION WITH FAMILY OR FRIENDS
It is good practice to mobilise all available resources – including family or friends – to support those in mental distress or at risk of suicide.

Ideally, this should involve a conversation about consent to avoid increasing risk, the negative effects of losing control over decisions or overriding privacy.

Where this is not possible, a well governed judgement may be made in the best interests of the person who is causing concern.
ENABLER
INCLUSIVITY

Universities celebrate the widening of participation in higher education and the diversity of our students and staff. However, we recognise that people face unequal challenges to their mental health.

CHALLENGES THAT ARE HIGHER EDUCATION-SPECIFIC:
- students on professional placement or placement abroad
- postgraduate researchers and taught postgraduate students
- commuter students

CHALLENGES THAT ARE PERSONAL, CULTURAL, STRUCTURAL:
- disabled students and staff
- mature students
- LGBTQ+ students and staff
- Black, Asian and minority ethnic students and staff
- students from low-income backgrounds
- international students and staff
- students or staff who speak English as an additional language
- care leavers and care-experienced students and staff
- carers

AS PART OF YOUR WHOLE UNIVERSITY APPROACH:
- work with all students and all staff to understand their diverse needs
- promote inclusive and safe cultures
- develop targeted interventions
- ensure that support services are responsive to different characteristics, backgrounds and experiences
- see these interventions not in terms of vulnerability, but as creating a more inclusive environment for the whole university community
There are significant gaps in our knowledge of mental health and wellbeing in higher education, for example in:

- evidence of demand and need in student and staff populations
- effectiveness of interventions, especially early intervention and prevention
- emerging good practice in innovative services, approaches and use of technology

These research and innovation gaps are being addressed by a number of national research networks and what works infrastructure.

Every institution can be part of this learning system by:

- embedding evaluation of interventions and services
- involving students and support staff in prioritising the delivery of research
- encouraging an evidence-informed approach to designing interventions and services
- encouraging cross disciplinary approaches
- promoting collaboration and open sharing of findings and effective practice
- shaping national strategy and policy
IMPLEMENTATION

Implementation of the whole university approach to mental health means significant cultural and structural change.

Universities are complex organisations, rarely susceptible to linear, top-down models of change.

An integrated, organisation-wide approach to improvement needs:

- a shared vision of a mentally healthy university co-produced with staff and students
- visible leadership to drive the strategic purpose and to provide authority to resource and sustain improvement
- effective and transparent governance to ensure that the vision is realised
- open collaborative workplace cultures to encourage staff and student ideas and commitment
- capacity building among staff and students to understand and facilitate change
- infrastructure to capture and embed improvements, and to avoid duplication or inefficient use of time and resource
- data collection to establish baselines and measure outcomes
**IMPROVEMENT**

Data drives an integrated, organisation wide approach to improvement.

Smart data collection and analysis, within effective and transparent governance, is fundamental to establishing baselines and measuring progress.

The UUK self-assessment tool has been designed to encourage focused conversations about improvement. The tool maps onto the Student Minds University Mental Health Charter.

SEE HOW YOU SCORE →
Stepchange: mentally healthy universities pulls out two areas of focus where universities will need to develop and sustain strategic and operational partnerships:

**TRANSITIONS:**
working with parents, schools, colleges and employers to mitigate difficulties.

**WORKING WITH THE NHS:**
to improve access to and coordination of care.
TRANSITIONS

Transitions occur along the educational journey: at entry, from year-to-year, on placements, study abroad and the progression into work.

TRANSITION INTO UNIVERSITY

**Pre-entry:** work with parents, schools and prospective students to provide information about mental health. Recognise that certain groups benefit from additional attention, for example, students with autism.

**Induction:** view induction as an opportunity to build belonging, self-efficacy and wellbeing.

**Take an integrated approach:** pre-application, recruitment, admissions and induction should all be seen as part of the transition into university.

PROGRESSION

It is increasingly recognised that a structured approach to transitions between years of study and across modes of study (such as placements) have a positive impact on learning and wellbeing.

GRADUATION

Students and employers indicate the need for universities to take a similarly structured approach to prepare students for employment and further study.
WORKING WITH THE NHS

Universities provide significant support for students and staff experiencing mental illness, but we cannot do this alone.

Minding our Future pointed to the gaps in care experienced by students and set out the aim of a stepped pathway between educational settings and mental health services.

GAPS IN CARE FOR STUDENTS

Experience of primary care is fragmented, especially when GPs are out of area, for example when a student goes to a GP at home during the holidays and to a campus-based practice during term-time.

There is variable access to secondary and specialist care which is indicative of a wider treatment gap in young adult care that recent investment seeks to close.

Information sharing between NHS services and universities is problematic. There are cases, for example, of distressed students being discharged from hospital without university support services being notified.

Many of these issues reflect the need for local partnerships between universities and NHS and care services.

The NHS Long Term Plan (2019, England) includes the commitment to student mental health: ‘to build the capability and capacity of universities to improve student welfare services and improve access to mental health services for the student population, including focusing on suicide reduction, improving access to psychological therapies and groups of students with particular vulnerabilities.’
“We need to improve the links between local NHS services and the support that universities provide [via] a partnership approach at the local level to assess needs and to design and deliver services for students.”

Paul Jenkins CEO Tavistock and Portman Mental Health Foundation Trust, Chair of UUK Minding our Future Working Group

### Principles for Working with the NHS

- Establish and sustain strategic links between higher education and health leadership to consider joint needs assessments, integrated services and improved data sharing.

- Try to include higher education populations in healthcare system needs assessments and commissioning and to embed student and staff voices in the design and delivery of local services.

- Promote a better understanding of student and staff needs and what university support services do to meet them, including wider support in accommodation or learning.

- Encourage effective working relationships between university support services and different parts of the healthcare system, including primary care, emergency care, secondary and specialised care and third sector provision.

- Improve data sharing through agreements and working relationships.

- Consider hosting, co-locating or co-commissioning services.
UNIVERSITY-HEALTH SYSTEM PARTNERSHIPS

Local NHS-university partnerships in Greater Manchester, Liverpool, Sheffield, North London and Bristol – together with partnerships in Belfast, Cardiff and Edinburgh – are developing and evaluating new models of care in a project led by the University of West England, Bristol and funded by the OfS. A national collaborative convened by UUK with Student Minds and the AHSN Network will share learning and inform national policy.

Greater Manchester Universities Student Mental Health Service is a partnership between the Greater Manchester Mental Health NHS Foundation Trust and the region’s five universities (University of Bolton, University of Salford, University of Manchester and Manchester Metropolitan University and the Royal Northern College of Music) opened in October 2019.

Thrive Bristol is a 10-year and city-wide population health programme to improve mental health and wellbeing with university mental health as a key priority. Its focus is not on service provision but on mobilising public, private and third sector organisations for health promotion.
RESOURCES

Whole university approach
- Student Minds University Mental Health Charter (2019)
- Mind/Goldman Sachs Mentally Healthy Universities Ten universities pilot (2019)

Suicide prevention
- UUK/Papyrus Suicide Safer Universities (2018)

Workplace mental health
- Mind The Mental Health at Work Commitment (2019)

Supporting staff
- Charlie Waller Memorial Trust e Learning
- Mental Health First Aid MHFA

Changing the culture
- Universities UK Changing the culture: examining violence against women, harassment and hate crime affecting university students (2016)

Accommodation
- British Property Federation Student Wellbeing in Purpose-Built Student Accommodation (2019)

Research & innovation
- SMaReN is a national research network to improve the understanding of student mental health in higher education.
- What Works Centre for Wellbeing provides evidence, effective practice and other resources on wellbeing in higher education
- Transforming Access and Student Outcomes (TASO) provides evidence and effective practice on widening participation and improving equality within the higher education sector

The Office for Students Challenge Competition has awarded £6m, match funded to £8.5m, to 10 partnerships to improve mental health outcomes for students

Research England and the OfS awarded £1.5m support to 17 projects to improve mental health outcomes for Postgraduate Research students

Working with the NHS
- UUK Minding our Future (2018), further developed as National Collaborative of local university-NHS partnerships

Transitions
- Education Transitions Network was established by the Secretary of State for Education in 2019 to look at how students going to university can be better supported
- Student Minds Know before you go supports the transition from school to university
- City Mental Health Alliance Graduate Health Programme relating to transition into the workplace
ACKNOWLEDGEMENTS

The development of Stepchange: mentally healthy universities has been steered by the Mental Health in Higher Education Advisory Group. The group convenes students, university leadership and professional services, research and clinical expertise, mental health leadership, third sector organisations, government departments, bodies and regulators to provide strategic exchange and direction for mental health in higher education.

The framework has been co-developed with the Student Minds’ Charter development team, Gareth Hughes and Leigh Spanner, and Chief Executive Rosie Tressler OBE.

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