Universities UK Mental health conference 2021

Plenary by Professor Steve West CBE

Good morning and thank you for inviting me to speak today at UUK’s annual mental health conference. It’s a shame that we aren’t yet doing this in real. It would be great to see familiar faces and even better to catch up with everyone in the coffee break. But even though this is digital, it still feels a bit like coming home!

I recently was elected as President of Universities UK. Sadly, there’s no big-shouldered uniform with lines of medals that comes with the role. Those of you who know me will be aware that a major motivation for putting myself up for the job was to bring the mental health agenda front and centre. As long-standing Chair of the Mental Health in Higher Education group – the main sector strategy group that brings together university leadership, students, staff trades unions, third sector, professional and clinical bodies, the NHS, regulators and research – you get the idea! – this has always been a personal priority and a keystone of my work.

I am now 3 months into the 2 year term – with fantastic support from my predecessor Julia Buckingham and colleagues at UUK – I am past the honeymoon period but, so far, no second thoughts. But also, no illusions about the 1 year and 9 months ahead. We have got a lot to do and we need to push on at pace and show we can deliver impact.

Yesterday, you heard from the ONS - who have been exceptional throughout the pandemic on their Student Insights work. I was struck by their recent work on first years. None of these findings will have surprised those of you working on the frontline:

- Close to 40% reporting symptoms of mild to moderate depression
- 27% self-reporting signs of possible Eating Disorder.

I don’t need to tell this audience that Eating Disorders can be complex and potentially life threatening. If severe, they are beyond the capability of university support services alone and require expert clinical intervention including in-area specialist
inpatient units. We know that - under Claire Murdoch’s excellent leadership - the NHS England Mental Health team have made extraordinary efforts to secure additional funding for mental health – with particular focus on children and young adults. Including a recent allocation of £40 million to specialist inpatient care including eating disorders. But we also know – these ONS figures confirm - this only plays catch-up with the demand curve. We also know that services are patchy and inconsistent.

Yet in the Spending Review, Rishi Sunak included no new support for young adult mental health. Despite the fact that it is exactly these young adults who will power the social and economic recovery. At the same time, despite a good commitment to R&D, the overall funding environment for our university sector continues to be chilly. Somewhat at odds with the central role we have played through the pandemic and will continue to play on skills and innovation in Rishi’s brave new post-Brexit world.

However I don’t want us to get lost in the gap between warm words and actions. Rest assured I will continue to push the government on all fronts.

What I do want to do today is share my understanding of our common vision and determination. To celebrate progress made and extraordinary efforts – particularly in the last 18 months. Also to think about the road forward, pitfalls and opportunities.

For the last five years, working in close partnership, UUK has convened an active and equal partnership to develop a proactive approach to mental health. We have urged universities to reshape themselves as healthy settings for our communities of students and staff. That means embedding mental health across everything we do, emphasising the importance of open conversations and co-production, promoting awareness and disclosure and sustained action on prevention. It also means sharing information to enable early intervention, as well as providing appropriate support and clear pathways into and out of statutory care.

We hold to that shared vision of mentally healthy universities. To achieve it we must think and act strategically and holistically. We must work hard to enhance the mental health, wellbeing and emotional intelligence of ourselves, our staff, and our students. The benefits to our community are clear: inclusion, innovation, productivity and fulfilment all flourish when we work with health in mind across our universities. We do better both as individuals and organisations – not to mention as communities and nations - when we get this right and when our mental health is well supported.
You will know that UUK’s StepChange: Mentally Healthy Universities framework was refreshed last year. Its ambition is stretching. It asks universities to embed mental health and wellbeing as a strategic priority and to implement a whole institution approach. It requires us to think across the multiple determinants of mental health and wellbeing, across transitions – from school and college and into work – and across systems – partnerships with the NHS and public health. It positions mental health as keystone of our success as individuals as institutions and as communities.

It’s important to say that it’s a permissive framework – strategic planning and implementation is for individual institutions to co-produce with their students and staff. But no university or senior leadership team is off the hook. Universities must shoulder their part of the responsibility – as workplaces and as education settings – for the health of their populations.

Our Suicide Safer Universities framework published in 2018 – following a series of tragic deaths which shone light not on student support services but on a failure of wider university systems to recognise and respond to mental distress - follows the same ‘everybody’s business’ approach.

An approach that was further refined and detailed in the Student Minds University Mental Health Charter. Based on an amazing research roadtrip across the UK sector, the Charter is a great example of how we can be aligned across different perspectives, organisations and activities. The Charter’s themes map onto the domains and enablers within UUK’s StepChange framework emphasising and building the whole university approach required to effect change. I am delighted to see the energy and momentum that it is gathering as more institutions enter their programme. Huge credit is due to Rosie Tressler, Gareth Hughes and Leigh Spanner not only for the growing success of the campaign but also for holding true to their collaborative improvement methodology.

So we have a range of ongoing areas of focus. The big tickets will not surprise you.

Firstly, we continue to support the development of effective NHS-university partnerships. These are critical to ensuring students can access the statutory care they need should they experience mental health difficulties and that their experience of that care is coordinated across all touchpoints whether university-provided student mental health advisers and counsellors or university GP surgeries, IAPT talking therapies, Accident & Emergency or specialist care. You heard yesterday how Claire Murdoch has been supporting our efforts in this key area including our National Learning Collaborative initially funded by the OfS to facilitate exchange between 5 partnership Hubs but now open to all.
Secondly, we are involved in multiple efforts to adopt, implement and test the whole university approach set out in StepChange and the Charter. This involves work on the sharing of information to join up support around those who need it. We will shortly publish guidance on when and how universities should involve family and friends when students are at risk of suicide or serious self-harm.

Within that same strand of work, we are working with a number of universities to explore the role that data and whole population mental health analytics might play to help identify students at risk and to trigger earlier interventions to support them.

The pandemic and the restrictions it placed on face-to-face interactions has also highlighted the potential of virtual support services and in particular the role that technology might play in promoting positive mental health and supporting those experiencing difficulties. We are working with the NHS and commercial providers to try to bring some order to the ‘wild west’ of mental health tech.

Probably one of our most significant efforts is around alignment. By alignment, I mean sector, government and third sector working in partnership with a common approach towards a shared vision. As I mentioned, when I was thinking about standing for the UUK Presidency, this was one of the things that spurred me on. But it requires determination, common purpose and patience.

At this point, I must sound a warning bell that government ‘patience’ may be running short on this issue. That lack of patience may be very damaging to us achieving our long-term goal. I think we all understand that mental health policy, especially the mental health of children and young people, can be full of urgency but demonstrate little coherence or impact. What is really needed from government is less focus on short-term initiatives or single levers of change and more focus on coherence and sustained support for improvement. There is, we all know, no silver bullet. Nor any amount of grandstanding that will resolve this grand challenge. Just as we have stepped up to the challenge, I call on government to do the same, to be less reactive and more courageous and strategic and more collaborative. Where for example is the overarching cross-governmental approach to 0-25yrs? Where is the sustained collaboration between education and health on young adult mental health? Siloed working by departments and over-reliance on regulatory levers is not the way to drive sector-wide improvement or cultural and behavioural change. I worry – I suspect Student Minds worry – that, to mollify ministers, what is currently a voluntary Charter, based on strong improvement methodology, may end up being used as a
quasi-regulatory lever by the English sector regulator, the OfS. I think this would be a huge mistake and would not deliver sustained improvements or learning!

We have strong foundations to build on. But we must avoid complacency, there is significant work still to be done - or a heavy-handed, regulatory approach beckons.

Any sustained strategic effort to improve student and staff mental health must acknowledge the impact of the pandemic. We have seen over a period of months that the life satisfaction and wellbeing of our young people has suffered immensely during the pandemic. The ONS’ Student Insight surveys paint a troubling picture of students experiencing lower levels of life satisfaction compared to the wider population. As restrictions have lifted and students have returned to a more normal experience, the findings have become more positive - but there is still a gap between the wellbeing levels reported by students and those reported by the wider public.

Many freshers who have arrived at our universities in recent weeks have experienced disruption, digital poverty, disconnected social networks, and personal loss during the pandemic. Students moving into other years of study may also have experienced difficulties, including those entering their second year after a disrupted first year in which they may have struggled to connect with their university and their peers.

There is little doubt that it will take time for individuals to recover from their experiences and reconnect with their support networks. And for many, there will be significant anxiety about the uncertainty around Plan B – or not Plan B – with implications for student services and the support our students need both now and throughout the next few academic years. The sector was proactive in advance of the start of term highlighting wellbeing support available and implementing a range of initiatives to help students make a smooth transition into higher education.

But the evidence around student wellbeing and life satisfaction during the pandemic underlines the importance of intensifying our efforts to provide the best possible support we can for our students as we continue to navigate the impact of Covid-19.

So, what are the gaps?

It’s a fair observation to make that much of the sector’s work has focused on students, driven by attention from government and the OfS. This needs to shift. We need to focus on the mental health of our entire community – staff and students. It’s been a particular focus of the MHHE group – which includes UCEA the employers organisation, sector trades unions and Mind who have led much ground breaking national work on workplace mental health.
UUK continues to encourage universities to work with staff and unions to see this as a non-adversarial space. Too important for the politics of positions! Workplace mental health and wellbeing is cultural as well as structural – it’s about purpose as well as pay and pensions and workloads. We should not forget that under the fractured relations between sector leaders and trades unions, and not underestimating the challenge of staff mental health, surveys consistently suggest that this is a great sector to work within, transformative, changing lives and life changing. That’s not to say that there is not much work to be done – over the last 18 months during an extraordinary time, staff – all staff – academic and professional services - have made extraordinary efforts. I know that there is an underlying fatigue and grief accumulated over the last 18 months. We all feel it. But there is also a genuine excitement about returning to what we do best – in real. Plus a proper focus on staff wellbeing expressed in much great work across the sector – UCEA have been collecting a series of good practice case studies accessible via their website.

But this won’t matter if we, as leaders, don’t engage and commit to leading the transformational change required.

Whilst the pandemic has undoubtably created wellbeing and mental health challenges for staff and students alike, it has also created an opportunity for a more positive style of leadership to emerge. Covid-19 has shown the importance of compassionate and values-led leadership, and this must continue as we seek to prioritise staff and student mental health across our universities.

One of the recent initiatives progressed by the Mental Health in Higher Education group has been a project examining the health and wellbeing leadership approaches taken by 12 vice-chancellors and their senior teams. The project has explored how individual leaders have placed health as a core priority and a driver of performance and organisational success. It has examined not only the health and wellbeing of staff and students but also that of university leaders and their senior teams. The process has been an organic one making use of small learning sets to explore emerging approaches. I would offer that the outcomes of this work - which we heard about yesterday from Nic Beech and Karen Cox - will be critical to our future success.

My experience has taught me that opening up and showing vulnerability as a university leader can have a powerful impact on others in my institution. And I’d like to share one personal example.

During the pandemic, my 17-year-old son, Alex, found me upset – crying - in our garden – I think I was supposed to be mowing the lawn - and asked what was wrong. I explained to him that I felt powerless to fix the uncertainty and grief that everyone
was experiencing during the pandemic. My job as a dad and leader was to fix stuff and make it better and I couldn’t. Alex gave me a hug and replied that nobody could fix it. It was exactly the response I needed. I told this story to a meeting of staff at my university and got quite emotional as I did so - it still brings a lump to my throat and tears to my eyes. But it helped to open up a space for others to acknowledge that they too felt powerless and overwhelmed in the face of such an unprecedented and challenging situation. Opening ourselves up like this isn’t easy but it can have a profound impact when we feel able to do it.

I’ve spoken about my personal commitment to ensuring positive mental health. And within my own institution, the University of the West of England, Bristol, this prioritisation underpins our entire university strategy.

In December 2017, we made a commitment to make mental wealth - the health and wellbeing of our community – a strategic priority underpinning all our activities. Last year, we launched our ten-year Transforming Futures Health and Wellbeing Strategy with a vision to establish UWE as the leading health-promoting university in the country.

We are seeking to achieve this via a range of actions mapped across the whole university approach outlined in the StepChange framework. At the same time, we are driving implementation of the Student Mental Health Charter which we will be applying for in spring 2022.

We are seeking to improve partnerships at a national and local level via our NHS Partnership Project. We are embedding health and wellbeing as key principles within curriculum design and delivery and residential life, developing and promoting inclusive and sustainable health and wellbeing initiatives based on staff and student need and encouraging staff and students to participate in initiatives that create cohesion and a sense of community.

We are also promoting positive behaviours via our ‘Feel Good’ programme and encouraging our community to be more confident in speaking up should they experience difficulties. The use of drugs and alcohol is impacting on our universities and society and the knock-on effects on behaviour, respect and violence is not something we can ignore. It is part of the health and wellbeing agenda and we must face in to it to reduce harm.
We are reviewing our staff-focused charters, implementing an action plan for staff returning to campus. We have established a Health and Wellbeing Innovation Fund to provide funding for staff-led wellbeing initiatives.

Importantly we will be measuring staff and student wellbeing using the ONS wellbeing measure and other validated tools and will use this data to continue to identify strategic actions.

But we also recognise that we still have a long way to go.

Let me wrap up.

Supporting positive mental health – improving outcomes for all students and all staff across the sector - is a priority we share in this digital room. Across an increasingly crowded space, we must continue to communicate a shared vision and an agreed strategy - with visible alignment between partners. We have the foundations in place to make and sustain real change. To place health gain alongside learning gain at the heart of our mission. But this will not happen without coherent and consistent support - from government, the OfS and the NHS - for our shared vision and approach. Such a ‘grand challenge’ – the other ‘grand challenge’ of the 21st century is being discussed in Glasgow – needs sustained common purpose, determination and collective effort. This is my challenge to government but also to myself and our sector. As my son said, we cannot fix everything, but, this one, we can make a transformational change for a generation. Let’s not duck it!

Thank you.