Cyflwynwyd yr ymateb hwn i ymchwiliad y [Pwyllgor Plant, Pobl Ifanc ac Addysg](#) i [gymorth iechyd meddwl mewn addysg uwch](#)

This response was submitted to the [Children, Young People and Education Committee](#) inquiry into [Mental Health support in Higher Education](#)

MHHE 32

Ymateb gan: Prifysgol De Cymru

Response from: University of South Wales

Nodwch eich barn mewn perthynas â chylch gorchwyl yr ymchwiliad. | Record your views against the inquiry's terms of reference.

1. Maint yr angen | Extent of need

There are increasing numbers of students presenting with, and seeking support in relation to mental health and poor well-being and this has been a trend[1] over years prior to the Covid pandemic. Contributing factors to this increasing trend are multifaceted but higher numbers suggest:

    i)   A decline in the impact of stigma which has previously been reported to be a barrier to students seeking support. However, there is still a reluctance for some individuals to seek support or identify themselves as needing support and while numbers declaring mental health difficulties at application stage have increased, students frequently engage with services after enrolment and late on in their course, sometimes, only when failing an assessment.

    ii)   Better signposting, support opportunities and ability to identify students and target interventions. The HE sector in Wales is committed to ensure appropriate supportive and inclusive messaging but focus is needed to move away from a conflation of mental ill-health and poor well-being and improved ways to measure the extent of need and the impact of interventions.

In addition to increasing numbers of students seeking support, many are presenting with changed and complex needs requiring mulit-agency, specialist intervention from within and external to education.

Students accessing well-being support services at USW over the last five years:

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[1] https://www.ippr.org/files/2017-09/not-by-degrees-summary-sept-2017.pdf

		Academic Year				
Service	22/23 (to 04/10/22)	21/22	20/21	19/20	18/19	17/18
Mental Health Adviser	22	429	336	284	576	651
Counselling	51	530	547	619	505	370
Specialist Mentor	285	274	285	294	247	N/A
Wellbeing Advice	49	1127	957	299	N/A	N/A

The organisation and function of USW Student Services specialist teams offer cohesive support to students who present with complex needs and models of delivery have been evolving to accelerate response times, triage requirements and connect with the appropriate service. Partnership working with Faculty colleagues to respond to concerns around well-being and engagement allow for early intervention with students at risk who may not self-refer.

The student population is a subset of the overall population and although there are particular triggers and pressures on individuals in Higher Education, society changes and uncertainties equally impact. Reflective of society, the student population is diverse in individual characteristics and type and level of study. The consequences of Covid-19 and the current increases in the cost of living are particular examples where the long term effect is not yet understood.

2. Adnabod a darpariaeth | Identification and provision

Adopting a 'whole' institution approach and the Universities UK stepchange framework has enabled progress towards a culture of good mental health, not least by recognising mental health as an organisation strategic priority, and importantly driven by associated HEFCW funding. The framework is broad to cover many elements of university life including wellbeing in the curriculum.

Specialist teams in student support recognise that the higher education environment provides a good opportunity to identify and assess needs early, and provide intervention and education beyond the subject discipline a student may be enrolled on. Service developments[2] across USW over recent years, informed by the stephchange framework, are intended to promote an ethos of positive well-being and health and provide early intervention and proactive support for the purpose and enabling individuals to achieve to their potential in study and work.

However, at USW we continue to recognise a challenge of the students who do not seek or self-refer to specialist support services but may be struggling or would benefit from available interventions. Work must continue on the development of a 'well-being aware' culture across the HE community with well-being-impact an integral element for consideration in the delivery of education, processes, procedures

[2] For example the development of a social prescribing model and programme of awareness raising and group intervention activities to complement the traditional model of 'reactionary' student support.

and tools, to enable various opportunities for identification of need by others and individuals themselves. For example, well-being in the curriculum, student engagement processes and learner analytics and complaints reporting and analysis.

Building and nurturing community with a clear philosophy of support and defined responsibilities for taking care of ourselves and each other, recognising that HE students are adults. We must acknowledge that higher education will be just one aspect in a student's life and juggling multiple demands and past experiences will compound the pressures of learning. Enabling people to recognise personal limits and providing a flexible education offer can sometimes be the appropriate support route. The HE system infrastructure including funding, needs to be agile for this to facilitate people achieve to their own potential.

Transition periods through education are known to impact student well-being and mental health. Challenges arise due to assumptions that support previously accessed in other education settings will automatically follow into HE where the reality is that there is an entirely new process and this is often raised in the NADP[3] list. Further collaborative work across the post 16 sector is needed to manage expectations and smooth the transition between and within levels of education.

Universities play an important role in the promotion and education of good health and well-being, contributing positively to society challenges. Universities can also play a role for those experiencing mental-ill health as part of a package of care and support in partnership with specialist NHS providers. Equally, a university environment may not be conducive to the recovery or management of mental ill-health. A partnership and referral pathway framework between the NHS and Universities would contribute to delivery of safe care and management of individuals and preventing further harm. Such a framework should be built on a foundation of clear and explicit responsibilities reflecting the duty on local health boards and local authority to provide primary mental health support services.

There is inconsistency across and within health boards which is a barrier, along with gaps between the thresholds for support and sometimes disconnect and hierarchy of professionals separated by organisation norms. These have been recognised and effectively resolved with the establishment of the Mental Health University Liaison Service (MHULS) pilot, a partnership between Universities in Cardiff and Cardiff and Vale Local Health Board. 200 students have been referred and supported since April 2022, half of whom have been referred in from the NHS. Establishing common terminology and severity of need measures have been additional benefits supporting the success of the pilot.

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[3] National Association of Disability Practitioners

3. Polisïau, deddfwriaeth a chyllid Llywodraeth Cymru | Welsh Government policy, legislation and funding

Funding well-being and health initiatives in context of institution well-being strategies and Universities UK Stepchange framework in recent, years has been effective in progressing cultural change – 'well-being aware' for USW. For maximum impact to embed cultural change in future, longer periods of funding beyond annual allocations would be welcomed. This would support longer-term investment and delivery contributing to the ability to retain, develop and reward professional staff which, in turn, enhances provision for students.

The Welsh HE sector is privileged in its close network, collaborative ethos and shared passion for student support. The CTER can use well-being and mental health expertise and experience from within sector to shape and drive improvements between institutions and health care providers. Taking a national view in setting expectations for learners and providers but continuing to allow for appropriate local delivery will be a preferred approach.

4. Argymhellion ar gyfer newid | Recommendations for change

- Establish a sustainable funding model for the continuation and expansion of the Mental health University Liaison Service.
- A strategic funding model for Universities which gives longer term commitment and resource than current annual cycles.
- A partnership and referral pathway framework between the NHS and Institutions would contribute to delivery of safe care and management of individuals and preventing further harm. Such a framework should be built on a foundation of clear and explicit responsibilities reflecting the duty on local health boards and local authority to provide primary mental health support services.
- A common framework for measuring student and staff wellbeing against which the impact of initiatives and interventions may be measured.

5. Arall | Other