ABSTRACT

This article presents the work done by Leeds University to develop a wellbeing program for students. Dr. Bridgette Bewick, an Associate Professor at School of Medicine, discusses her work on behavioral and psychological understanding of how to improve and support the mental health and wellbeing of university students. She affirms that improvement and support services to students’ mental health and wellbeing are necessary but not sufficient to facilitate student success while at university. Dr. Bewick highlights the urgency to develop practices consistent with pedagogical wellbeing to address student education challenges that have been exacerbated by the Covid-19 pandemic.

Melhorar o bem-estar de alunos no ensino superior: a experiência da Universidade de Leeds (Reino Unido)

RESUMO

Este artigo apresenta alguns dos esforços da Universidade de Leeds para desenvolver um programa de bem-estar para os alunos. A Dra. Bridgette Bewick, professora associada da Faculdade de Medicina, nos apresenta seu trabalho sobre compreensão comportamental e psicológica de como melhorar e apoiar a saúde mental e o bem-estar dos estudantes nas universidades. Ela afirma que os serviços de melhoria e apoio à saúde mental e ao bem-estar dos alunos são vitais, mas não suficientes para dar aos alunos o melhor que podem obter na universidade. Dra. Bewick insiste na urgência de desenvolver um bem-estar pedagógico, especialmente agora, quando o mundo enfrenta novos desafios para o ensino devido à pandemia de Covid-19.


Mejora del bienestar de los estudiantes en la educación superior: la experiencia de la Universidad de Leeds (Reino Unido)

RESUMEN

Este artículo presenta algunos de los esfuerzos realizados por la Universidad de Leeds para desarrollar un programa de bienestar para los estudiantes. La Doctora Bridgette Bewick, profesora asociada de la Facultad de Medicina, nos presenta su trabajo sobre la comprensión conductual y psicológica de cómo mejorar y apoyar la salud mental y el bienestar de los estudiantes dentro de las universidades. Ella afirma que los servicios de mejora y apoyo a la salud mental y el bienestar de los estudiantes son vitales pero no suficientes para brindarles a los estudiantes lo mejor que pueden obtener de la universidad. La Doctora Bewick insiste en la urgencia de desarrollar un bienestar pedagógico, especialmente ahora que el mundo enfrenta nuevos desafíos para la enseñanza debido a la pandemia del Covid-19.

Palabras clave: Salud mental. Pedagogía del bienestar. Enseñanza superior.
Interviewer: Dr. Bewick, you have such a large scientific production on social norms approach and intervention, but also on behaviour change intervention with university students, specifically at Leeds University. Could you tell us about your work, specifically on wellbeing strategies inside universities?

Dr. Bewick: As we’ve discussed, there are no magic solutions. The challenge ahead of us, supporting our students as they navigate their studies in the midst of a pandemic, creates opportunity for us to think about how we can do things differently. The pandemic enabled examination of our educational practices in a way that we weren’t driven to do before. Developing our educational practice will benefit our students and the future of higher education. I’m excited to lead the development of new ways of doing. My journey into understanding and improving student mental health and wellbeing started around 2003. In 2006 I wrote “…the lives of students are different in many ways to that experienced by students 20 or 30 years ago. Students’ lives are becoming increasingly pressurized due to changes [that] have placed students under increasing … pressure … while higher education is expanding, there is concern that the structures … to support students are not developing at an equivalent pace ….”1 Sadly 15 years on people are still writing about the ‘crisis’ in student mental health and wellbeing and our need to develop support. Something needs to change.

Interviewer: Tell me about that:

Dr. Bewick: Literature suggests students are arriving with higher levels of felt distress. Whether that’s clinical distress or not, many students are reporting feeling high levels of stress and distress. Students are struggling and it’s impacting their ability to flourish and thrive. For a long time we’ve been talking about the need to better support students. We know it’s a problem, now is the time to act, to find ways of doing things differently.

In my earlier work I thought about mental ill-health and wellbeing as different sides to the same coin. These days I conceptualize the problem differently. There is a continuum of mental health and mental ill-health, but there is also wellbeing and ill-being. Students can have high levels of wellbeing and low levels of mental health and vice-versa. This opens up the way for us to think about mental health and wellbeing in new ways. Our early solutions focused on making sure clinically distressed students could access treatment. We, rightly, focused on making sure there were services that could support students most in need. This saw the development of dedicated student counselling services and attempts at understanding how students access into non-university mental health services. These formal support services and specialist clinical treatments4 are extremely important. We have to

4 Specialist services meaning treatments such as talking therapies and counselling.
continue this work to make sure students who need clinical mental health treatment get the right support at the right time.

If we focus solely on the development of services we fail to ask fundamental questions about our pedagogical approach. We must consider if our pedagogical decisions contribute to why student mental health is worse than their peers who chose not to go to university. Do educational practices contribute to students reporting higher levels of mental distress at the end of their university journey compared to the start? And, importantly for me, can we do things differently to support better wellbeing? Can we alter structures? Can we examine and change the way we timetable? The way we assess and examine? How can we better respond to the emotional, as well as academic, needs of our students? We absolutely need specialist student support services; they are a necessary safety net. We need to continue to develop those services to continue to improve provision and capacity. But supporting mental ill-health can’t be our only solution to supporting the mental health and wellbeing of our students. As educators, now is the time to examine our educational practices and see where there are opportunities to change. Support services alone are not enough to address the challenge we face. We need to develop and embed pedagogical wellbeing.

Interviewer: What can we do to change the culture of how we teach?

Dr. Bewick: How we teach, the ways in which we interact, offer opportunities to build a more positive experience for students. I’ve been privileged to speak with University of Leeds students about how the Covid-19 necessitated changes impacted their university experience. It is clear that small changes make a real difference in how supported students feel along their university journey. Their experiences highlight the importance of our teaching culture. Covid-19 has created a unique opportunity to examine and change that culture for the better.

Interviewer: How can we support the health and wellbeing of all university students?

Dr. Bewick: Supporting student mental health and wellbeing needs to be as important to university as providing an excellent academic experience. During Covid-19, faculty are thinking about academic and wellbeing provision equally. As a result, students are reporting feeling more supported and more valued. University is now somewhere they report being seen and respected.

Interviewer: And could you explain a bit of that? Is mental health being worried?

Dr. Bewick: Students living with clinical mental illness face particular challenges as they balance managing their own health alongside their university studies. It’s important we link students with specialist support and clinical services to enable these students to succeed. At the University of Leeds we continue to develop better treatment pathways so students can
access the services they need at the time they need it. It’s a big challenge, especially with a deficit in mental health provision across the UK, but it’s a challenge we are committed to overcoming.

The vast majority of our students do not have a clinical mental health diagnosis but many report feeling stressed, worried, and anxious. Students talk about ‘expecting university to be hard’ and ‘expecting it to be challenging’ and they are okay with studying being challenging. What students find difficult to accept is where universities seem to operate in a way that makes the student experience harder than it need to be. Students want us to consider where universities are doing things that students believe hinder their ability to flourish and thrive, and to seek to change. If we reform these practices we have the opportunity to make university a kinder and more supportive compassionate experience.

**Interviewer:** One of the challenges we face is encouraging students to talk about their mental health. In my culture, people feel really embarrassed to talk about that. Students fear they will appear weak, so they hide their mental ill-health. Usually they use private doctors, they don’t tell the university about their struggles. How do you deal with that issue in England, for instance at Leeds University? Are people really open to pay attention to that student’s condition?

**Dr. Bewick:** The stigma around mental ill-health continues to be a challenge. More people are talking about mental ill-health in the UK than ever before, but we know that for some students it is still a difficult conversation to have. At Leeds, we recognize that we need to provide students with many opportunities to speak about things they are struggling with. As you say, not all students feel comfortable talking to people at their university about student mental health. We encourage these students to find support outside of the university – depending on the severity of their experience this might be reaching out to their General Practitioner (GP Doctor), a mental health charity support line, or talking with friends/family. We also offer multiple opportunities throughout the university experience to access support on campus – for example every student has a personal tutor. We have an on-campus student wellbeing and counselling service. There is also support offered by the Student Union; this support is on-campus but independent of the University. We are continually listening for what students are saying they need, we constantly work with students to develop support opportunities and services that can meet their needs. It’s a work in progress and students continue to let us know what we could do better. Providing different and varied opportunities to enable open conversations about the mental health and wellbeing of our staff and students was an important first step. Our aim, to ensure that every student feels that there are places and people along their university journey where they feel a sense of belonging. We hope this means more students and staff are able to talk about the challenges they are facing.
**Interviewer:** How is that?

**Dr. Bewick:** We first needed to understand how (and where) at university, students feel that sense of community and sense of belonging. Their answers are as varied as our students are. For some students, they develop sense of belonging through interactions with services that support their transition to university (like disability services, chaplaincy service). For others it’s when they are in seminars and get to engage in academic discussions with their fellow-students and academic-tutors. For some of our students it’s when they are taking a break from studying at one of our many cafes around campus. The list goes on and on. Our challenge is to ensure all students have opportunity to develop a sense of belonging, we want all students to feel they belong and are comfortable letting us know when things are getting too challenging, when they are struggling to cope.

We also know that students value having services and support on-campus. An example is the Student Counselling and Wellbeing Service – students value having a service that has been created just for them. They value being able to speak to someone who already understands the university environment. During Covid-19 our Counselling and Wellbeing Service has continued to support students, with the majority of services moving online. Leeds has also developed a team of Wellbeing Ambassadors. They work to offer initiatives that students want, their work is very much student-led. Leeds Student Union is another example of where students can go for support that is student-led, and importantly for some students, is independent of the University.

**Interviewer:** What about their groups (students’ office). Traditionally in Brazil, students’ unions are very much engaged with political issues, not really with students’ wellbeing aspects. So, how does it differ from Leeds University?

**Dr. Bewick:** In the UK, Student Unions represent the voice of students on campus. Each year students vote for their student representatives. Leeds Student Union is very active and well supported by the students. The Union offer student societies and clubs. They run balls and events. It’s also a place where students can get support and advice that is independent from the University. At Leeds the Student Union physical building is at the heart of our campus – it’s a hub of student activity. During Covid-19 this activity has been moved online. There is also a close relationship between Leeds University and the Leeds University Union. The Student representatives are an important and powerful voice on many University committees. The Student Exec Welfare Officer is an important position at the Student Union, each year they advocate to make sure students have access to the help and support they need.
Improving students’ wellbeing at university: the experience of Leeds University (UK)

Bridgette M. Bewick, Adla Betsaida Martins Teixeira

Interviewer: What about these times of new liberalism? How to deal with a wellbeing proposal? In these times of new liberalism, wellbeing is not really a point for them. It is a type of a crazy life of production and at the end I don't think that we produce more. Perhaps we have a good quality. I don't want to answer, but they have to pay attention to this kind of thing for their safe.

Dr. Bewick: The context in which we work differently brings challenges in terms of resource and finance. Early on in our conversation you mentioned that resourcing student mental health and wellbeing is expensive and you don’t have the money to invest. Recently in the UK the value of investing in student mental health and wellbeing has been recognized. My fear is that this recognition will be short lived. We need sustained investment over a longer period of time, investment in both specialist treatment services and in the development of teaching practices that support positive wellbeing and mental health. We need to move beyond finding a way to survive to a place where students can succeed and thrive.

We know that poor mental health and poor wellbeing is associated with higher levels of drop out, lower levels of retention, and lower levels of academic success. If universities want all their students to have an equitable chance of succeeding in their studies and in their future profession then we must address the challenge of supporting student mental health and wellbeing.

Interviewer: You have a large experience in developing this mental health and wellbeing programs to help people. Is Leeds building up a wellbeing program to help students during and after this Covid-19 virus pandemic?

Dr. Bewick: The pandemic has bought many challenges. It’s also provided new opportunities, students are talking about how staff now have more time for students. Students know how to contact staff in their ‘online offices’, for example using Microsoft Teams. Students at Leeds are talking about how the University has looked carefully at assessment, and the assessment load is less. Students talk about the University being a kinder place because of the changes we have implemented in response to Covid-19. Students reflect on a range of positives that have come from the pandemic and some feel a sense of guilt for finding something positive from Covid-19. Students are already identifying things we have done that helped them. This gives me hope. It shows making changes to our practices is within our reach, and that these changes make a difference to our students, this provides hope that we can do this. Obviously changing our educational practices will not always address the loneliness people are feeling or the trauma people have experienced as a result of Covid-19. However, evolving our educational practices, putting wellbeing at the heart of university education could provide the necessary context to enable them to begin to work on the trauma of the pandemic. It’s encouraging that in the midst of the pandemic the University, our staff, have found ways to support students. We know the pandemic may be triggering
for some staff and for students. We need to find ways of acknowledging those challenges and providing a supportive community. We need to provide space for staff and students to realize strength that they can continue to draw upon and build on. For some, this might include remembering to ask for help and connect with support. Students are reaching out who have never done so before. It can be tempting to respond to the discourse of the pandemic having an entirely negative impact on our students – that’s not the lived experience of many; we need to allow time and space to learn from, and build upon, where students report positives resulting from changes to our pedagogy. The consequences of the pandemic are felt all around the world – we have a unique opportunity to come together, to learn from our colleagues and students. We can build on existing collaborations, by working together we can develop a more supportive and collegiate educational environment for our students.

**Interviewer:** I was thinking, do we already have this? Because we have the World University Network. We have some other things and I thought about it. And I actually thought what we often have is research collaborations. And those are important internationally. I really enjoy being part of those and contributing to those.

**Dr. Bewick:** It’s uplifting for me to share pedagogical wellbeing with colleagues around the world. To see how they are taking some of my early findings and creating new ways of thinking and working within their own cultural contexts. The World University Network has facilitated my working with colleagues such as yourself in Brazil and with my colleagues in New Zealand. It’s fantastic that conversations haven’t only been about ‘the research’ but also about practice, conversations about what we do on the ground can be transformational. It’s exciting to see our work making a difference.

**Interviewer:** Recently in Brazil, universities are becoming more diverse with poor students, black students, women students, indigenous students even visiting students from some countries from Africa. This is a challenge to our methodologies and teaching. How can we can establish a cooperation between such different realities?

**Dr. Bewick:** There is strength in working together and reflecting on how our practice evolves. Reflecting on what we can learn from each other. By coming from a place of mutual respect, where everyone’s voice is heard and listened to we can begin to confront the inequalities that are embedded in our practices and communities. One of the reasons I love working with people from around the world is their ability to see things in a completely different way. Together as communities of practice we can improve educational practice, make changes that better the lives of individuals, and better support students’ wellbeing. We can move towards successful and equitable outcomes for all.
Bridgette M. Bewick

The interviewee is a Chartered Psychologist (CPsychol) and Associate Professor in Psychological Health at Wellbeing at the University of Leeds (UK) School of Medicine. She works to advance our understanding of monitoring, managing, and modifying mental health and wellbeing; including the potential for e-health tools to support health and wellbeing. Bridgette is a Fellow of the Leeds Institute for Teaching Excellence (LITE). Her LITE Fellowship investigates how best to embody Pedagogical Wellbeing into the university curriculum.

b.m.bewick@leeds.ac.uk

Adla Betsaida Martins Teixeira

The interviewer is an Associate Professor at School of Education, Federal University of Minas Gerais since 1999. Her research interests are on Micropolitics of School organizations, gender and human rights issues in education. She also develops research projects on health education (dengue) and development of scientific thought among pupils at public schools, especially focus on girls’ education. Dr. Teixeira coordinates the Study Group on Gender, Sexuality and Sex Education since 2006.

adlaufmg@gmail.com