Supporting Staff Wellbeing in Higher Education

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Education Support

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About Education Support

Our mission is to improve the mental health and wellbeing of teachers and education staff. We believe that better mental health leads to better education. We support individuals and help schools, colleges and universities to improve the mental health and wellbeing of their staff. We also carry out research and advocate for changes in Government policy for the benefit of the education workforce. Our free and confidential helpline is open 24/7 on **08000 562 561** and is staffed by qualified counsellors. It is available for everyone working in education, including support staff, lecturers, administrators and teaching assistants. Call us. We'll listen.

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Acknowledgements

Executive summary

This report presents the findings of a national study examining working life in UK Higher Education institutions. Two thousand and forty-six academic and academic related staff were surveyed about the psychosocial hazards they encounter, how they feel about the tasks they do and the availability and usefulness of support mechanisms to manage their wellbeing. The psychosocial safety climate of their institutions was also examined along with mental health and work-life balance. Key findings include:

1

Perceptions of the psychosocial safety climate in UK universities (how well they manage psychological health and safety) are typically poor — more so than in studies of other organisations

More than three-quarters of the sample (**78%**) strongly disagreed or disagreed that the psychological health of employees is considered as important as productivity. This places employees at greater risk of work-related stress and poor mental wellbeing.

2

Higher Education (HE) employees continue to report lower wellbeing than average for all the Health and Safety Executive's (HSE) work hazard categories

Using the HSE's colour coding system, wellbeing for demands, support from managers and colleagues, working relationships and role clarity were categorised as red (indicating urgent action is required).

The level of demand found gives serious cause for concern, with **79%** of respondents reporting that they need to work very intensively often or always, and over half (**52%**) experiencing unrealistic time pressures often or always.

3

The level of mental wellbeing found among HE employees was considerably lower than population norms

Using a well-validated measure, less than one-third of respondents (**29%**) achieved scores indicating average wellbeing with more than half (**53%**) showing signs of probable depression.

Moreover, many respondents were showing signs of burnout, with nearly three in ten (**29%**) feeling emotionally drained from their work every day. On average, however, respondents felt able to think clearly and be decisive, as well as feel useful and loved.

4

More than six respondents in ten (62%) reported regularly working over 40 hours a week and 21% working more than 50 hours per week

Those on academic contracts tended to work longer hours, with over two in ten (**21%**) working at least 16 additional hours on a weekly basis — **a further two working days per week**. Just under half of the sample (**44%**) felt pressurised to work long hours either often or always.

5

A high proportion of HE employees believe that they undertake illegitimate tasks (those considered unreasonable or unnecessary) — this has not reduced since 2014

More than half of respondents reported performing tasks they considered unreasonable either often (**34%**) or frequently (**22%**). Only **3%** believed they never undertake unnecessary tasks.

6

Resources, such as support, control, role clarity and positive relationships, can help people manage the high demands of the job and the role overload that is often experienced

Nonetheless, the low level of these resources in HE has serious implications for the wellbeing of staff.

7

The work-life balance of HE employees remains poor

More than one-third of respondents (**36%**) indicated that they always, or almost always, neglect their personal needs due to the demands of their work. Nearly three in ten (**28%**) reported having to miss important personal activities due to the time they spend working always, or almost always.

8

Respondents who reported poorer wellbeing relating to job demands, control, support, relationships and role and performed more tasks they considered unreasonable and unnecessary were at greater risk of mental health problems, burnout and work-life conflict

Long working hours were an additional risk factor for wellbeing and work-life balance.

9

Seeking help for work-related stress and mental health can be stigmatised in UK universities

More than half of the sample (**59%**) feared they would be seen as weak if they sought support for their wellbeing — worryingly, just over seven out of ten agreed (**41%**) or strongly agreed (**30%**) that this would harm their career. Concerns were expressed about being considered 'inadequate' and 'failing to cope' if they tried to access support for their wellbeing.

61% of respondents would not approach their manager for support, as they believed they did not have the necessary skills or knowledge. This highlights the need for managers to be better trained in this key area.

10

Respondents were considerably more likely to approach colleagues than managers for support — indeed co-workers were often considered a 'stress management resource'

Most (**92%**) reported feeling able to discuss any work-related stress they experienced with their co-workers and opportunities for informal chats with colleagues was one of the highest rated sources of support.

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The sources of support that were considered the most helpful tended to be at the organisational level

These included managing workload and pressure at source (e.g. managers who are aware of the challenges of the job), increased autonomy (e.g. the ability to work flexibly), improving institutional policies and practices around wellbeing (e.g. steps to tackle work-related stress at source, opportunities for input into decision-making) as well as feeling appreciated and respected. Individually focused initiatives (e.g. stress management training, mental health first aid) were typically seen as less effective.

12

Overall, counselling, coaching and mentoring were considered helpful in improving wellbeing

Concerns were commonly expressed, however, that the number of sessions available to staff is often capped, and counsellors may have little insight into the work pressures in the sector. The importance of accessing psychological support via different modes was also highlighted (face-to-face, telephone and online) and the need to support for staff with significant caring responsibilities and personal difficulties such as bereavement was emphasised.

13

Common barriers to obtaining support for wellbeing were lack of time due to a heavy workload and an inflexible schedule

Other barriers included little information on what was available, difficulty with access, both in terms of location and timing; interventions that are not fit for purpose, as well as the stigma highlighted above.

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Respondents who reported having a wider range of support initiatives available to them typically perceived a more positive psychosocial safety climate at their institution

They were also at lesser risk of mental health problems and burnout and had a better work-life balance. Significant risk factors for wellbeing were a poorer psychosocial safety climate in their institution and greater stigmatisation of help-seeking for stress and mental health difficulties.

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Respondents employed on academic contracts typically reported lower levels of wellbeing related to job demands, control, support from managers and peers and role clarity than academic-related staff

They also considered more of the tasks they performed to be unreasonable and unnecessary. On average, academic staff also perceived a poorer psychosocial safety climate in their institution and greater stigmatisation surrounding mental health issues — they were also at greater risk of self-reported mental health problems, burnout and work-life conflict.

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Respondents were asked about the effects of the COVID-19 pandemic on their working conditions and wellbeing

The factors included managing increased workload pressure, longer working offers; the challenges of working online, often with little support, managing students' expectations and wellbeing; and the implications of homeworking. Some found working at home beneficial for their wellbeing and productivity, while others had difficulties maintaining boundaries between life domains, or felt socially isolated — especially if they lived alone.

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The types of support considered most useful during the pandemic were a combination of practical and emotional

These include flexibility to help manage the increased workload, adequate training and support for technology use, regular updates and the provision of clear and consistent information, avoidance of unnecessary change initiatives, restrictions on the use of online meetings, guidance on mental health and managing isolation, kind and sympathetic management, regular contact with colleagues for moral support, understanding and assistance for staff with caring responsibilities, and access to psychological support and counselling for everybody that needed it.

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Introduction

Research conducted in the UK and other countries have found that HE employees are at high risk of work related stress and poor wellbeing.

Studies conducted in the UK and other countries have found that Higher Education (HE) employees are at high risk of work-related stress (e.g. Tytherleigh et al. 2005; Biron et al. 2008; Winefield et al. 2008; Reevy and Deason 2014; Mudrak et al. 2018; Pujol-Cols and Lazzaro-Salazar 2018; Kinman & Wray, 2020). This is due to a range of factors related to workload (such as overload, intense working pace, heavy administrative burden, high student expectations and workload models that underestimate the time necessary for fulfilling tasks), as well as other issues such as role conflict, communication difficulties, lack of input into decision making, performance management, the excessive use of precarious contracts and poorly managed change initiatives (Tytherleigh et al., 2007; Barkhuizen & Rothmann, 2008; Gillespie et al., 2010; Winefield et al., 2010; Coulthard & Keller, 2016; Guthrie et al. 2017; Torp et al., 2016; Morrish, 2019; Fontinha et al. 2019; Makikangas et al. 2019; Kinman & Wray, 2020; Lee et al. 2021). Long working hours are also commonplace, with the University and College Union (UCU, 2016) reporting that the average member employed in higher education worked more than two additional days each week unpaid.

There is also evidence that wellbeing in the HE sector is deteriorating. Using a well-established risk assessment framework that assesses key psychosocial hazards at work[1], three national surveys of UK academic and academic-related employees conducted between 2008 and 2014 found that wellbeing related to job demands, support from managers and colleagues, relationships, role, and management of change were considerably lower than recommended levels (Wray & Kinman, 2020). Another psychosocial hazard, job control, met the minimum standard but has been steadily declining over time. Support, control, role clarity and good working relationships are key resources for all employees, as they can offer protection against work-related stress and burnout even in the face of high demand (Kinman & Wray, 2014; Winefield et al., 2010). This robust evidence for their deterioration, therefore, gives serious cause for concern for the continued wellbeing of HE employees in the UK.

Experiencing high demands and low resources at work can have negative effects on the wellbeing and effectiveness of employees. Studies of HE staff have found that they are at high risk of work-life conflict (Kinman 2008, 2014; Fontinha et al. 2018), burnout (Watts and Robertson, 2011) and mental health difficulties (Barkhuizen & Rothmann 2008; Kinman & Wray, 2020). A review conducted by Guthrie et al. (2017) concluded that the risk of having or developing a mental health problem (based on self-reported evidence) was higher among HE staff than for many other working populations. Moreover, a recent analysis of referrals to counselling and occupational health services in UK higher education institutions (Morrish, 2019) found that the incidence of poor mental health among staff had escalated between 2009 and 2016, with some institutions reporting that referrals had increased three or four times during this period. The hazards of 'command-and-control' leadership and managerialism for employee wellbeing were identified, but some evidence of good practice in the sector was highlighted.

"Research conducted during the COVID-19 pandemic suggests that the demands experienced by HE staff have not abated, and their wellbeing may have deteriorated further."

Research conducted during the COVID-19 pandemic suggests that the demands experienced by HE staff have not abated, and their wellbeing may have deteriorated further. Universities have been obliged to make major shifts in the management and delivery of teaching and student support and, like a considerable proportion of the UK workforce, higher education employees have been required to working remotely. Although little research has yet been published, there is some evidence that these changes to working practices have intensified workload and increased the potential for conflict between work and personal life (Watermeyer et al. 2021; Wood et al. 2021). This places an additional burden on a workforce that is already at high risk of overload, job-related stress and poor mental wellbeing. The findings of an online survey of 1,182 HE employees (73% academic staff) conducted during the pandemic found that 47% of respondents described their mental health as 'poor' (Dougall et al. 2021). Levels of anxiety, stress and unhappiness found were considerably higher than the national average in the UK during lockdown.

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1   See www.hse.gov.uk/stress/standards/ for further details

The high demands and poor mental wellbeing in the HE sector, along with the additional burden of COVID-19, mean that employees are in need of additional support. Little is known about the wellbeing initiatives that are currently available to HE staff, or how effective they are. A study commissioned by the Education Support Partnership (O'Brien & Guiney, 2018) interviewed 25 employees in higher education institutions about the aspects of work that have a positive and negative impact on their wellbeing and how this might be improved. Beneficial factors included a compassionate and supportive management style, healthy workplace relationships and feeling professionally valued, whereas harmful factors encompassed feelings of isolation, poor management and leadership, and the move to an ethos of student-as-consumer. Several priorities for enhancing wellbeing in the higher education sector were highlighted, most notably the need for institutions to 'take staff wellbeing seriously', raise awareness among management of how their systems and behaviours impact on the wellbeing of the workforce, and provide more opportunities to help staff improve their personal wellbeing.

"Little is known about the wellbeing initiatives that are currently available to HE staff, or how effective they are."

Aims of the research study

This survey of **academic and academic-related staff** working in UK universities aimed to:

- Provide insight into the support available to UK employees and the types of support that they consider to be most and least effective in improving their wellbeing

- Identify the barriers associated with accessing support aimed at managing wellbeing at work

- Examine perceptions of the psychosocial safety climate (including stigmatization of stress and mental health problems) in UK universities and how this relates to the availability of support systems and employees' wellbeing

- Assess levels of psychosocial hazards, illegitimate tasks, work-life balance and burnout and compare with benchmarks and the findings of previous surveys of the sector, if available

- Identify any demographic and job-related risk factors for psychosocial hazards, illegitimate tasks, psychosocial safety climate, support and wellbeing outcomes

- Assess the implications of the COVID-19 pandemic for working conditions, support and wellbeing

There are many initiatives that seek to improve wellbeing at work, but there is evidence that a multi-level, systemic approach is most effective (Nielsen & Noblet, 2018). This involves implementing evidence-informed interventions at the primary, secondary and tertiary levels:

- **Primary interventions** attempt to remove or reduce the source of work-related stress, with examples including risk assessments, job design and workload management. Primary interventions tend to be the most effective but are less popular among organisations as they may be considered complex, time-consuming and costly. This is not necessarily the case, as approaches where people 'co-produce' and evaluate interventions to reduce workplace stress involve little time and effort and can be particularly beneficial.

- **Secondary interventions** are those that attempt to strengthen employees' ability to manage the challenges of their work and reverse or reduce any damage caused by exposure to pathogenic working conditions. These initiatives aim to change how individuals perceive or cope with the situation (e.g. stress management training and mindfulness techniques) or help them manage the challenges more effectively (e.g. time-management and boundary setting). Secondary interventions can be beneficial as part of a holistic approach to wellbeing but, as the individual is the focus of change, they do little to tackle the structural causes of stress.

- **Tertiary interventions** seek to rehabilitate people with work-related health problems such as workplace stress and, ideally, adapt their working conditions to their personal circumstances and needs. These interventions are typically implemented by occupational health providers, but line managers may be involved in negotiating their employees' return to work. The provision of occupational health support varies across organisations and, although undoubtedly helpful, some organisations may be resistant to implementing adjustments to working patterns.

A systemic approach incorporating primary, secondary and tertiary types of intervention is recommended to support the wellbeing of HE employees. This would offer a 'tool-box' of evidence-informed initiatives with the potential to enhance organisational systems and support structures and help individuals develop the skills required to cope with the demands of the job more effectively. This research aims to provide a foundation for such an approach in light of the current wellbeing challenges faced by employees.

Measures used

Biographical information
A series of biographical questions covered demographic (e.g. age, gender, ethnic origin) and job-related information (e.g. job title, job role, mode and terms of employment, institution type and working hours).

Support
Participants were provided with a list of 47 potential sources of support that their institutions might provide to enhance their wellbeing. The areas covered were:

- **Work/home interface and recovery:**
  e.g. the ability to work from home, guidance on managing technology, and encouragement to take time off when sick

- **Support for health and wellbeing:**
  e.g. guidance on self-care, access to exercise and sporting activities, and access to occupational health

- **Counselling, coaching and guidance:**
  e.g. personal counselling, coaching and mentoring, and telephone/ online support for wellbeing

- **Stress management training:**
  e.g. mindfulness and relaxation, time management and personal organisation, and improving coping skills

- **Social support and working relationships:**
  e.g. initiatives to build positive relationships, opportunities for informal chats with colleagues, and conflict management

- **Organisational policies and practices:**
  e.g. a commitment to monitor staff wellbeing, steps to tackle work-related stress at source, and a culture that 'normalises' conversations about stress

- **Managing workload and pressure:**
  e.g. workload management initiatives, managers who are aware of the pressures of the job, and active monitoring of working hours

- **Reducing inequalities and tackling bullying:**
  e.g. training on equality, diversity and inclusion, robust anti-bullying and anti-harassment policies, and clear consequences for staff who breach these policies

- **External professional support:**
  e.g. guidance from trade unions and support from professional bodies

See **Appendix A** for the full list of areas in each support category.

The potential sources of support were derived from a review of the literature and previous research conducted by the authors in the HE sector, followed by an initial pilot study of staff (from different institutions and backgrounds) who provided feedback on their relevance. Based on the findings, all support items were considered relevant and retained.

In this survey, respondents were asked to rate each of the potential sources of support twice: a) whether this type of support was available to them, with a response scale including 'yes', 'no', 'unsure', or not applicable; b) to what extent the type of support was appropriate for their needs (or would be if available), with a response scale ranging from 1 'not at all helpful' to 5 'very helpful'. Higher scores for b) represented higher levels of helpfulness for each source of support.

Two open-ended questions invited respondents to provide details of: a) any other source of support that they would find useful that was not included; and b) if they find it difficult to access the support available to them and why this might be case.

Psychosocial safety climate (Dollard & Kang, 2007).
This measure examines the extent to which respondents believe that their organisation has the policies, practices and procedures necessary to protect the psychosocial health and safety of its staff. It assesses perceptions of management support and commitment to protecting psychological wellbeing, the extent to which this is prioritised, whether communication about the issue is effective, and the degree of organisational participation and involvement. Research has found that people working in organisations with a poorer psychosocial safety climate are at greater risk of job strain and depressive symptoms (Bailey et al. 2015). The response scale ranged from 1 'strongly disagree' to 5 'strongly agree', with higher scores denoting more positive perceptions of the psychological safety climate.

Stigma and barriers to support (Britt et al. 2008).
The Stigma subscale of the Perceived Stigma and Barriers to Care for Psychological Problems Evaluation measure was used. This scale provided respondents with a list of concerns that somebody might have when they consider seeking help for a stress, emotional, mental health or family problem. This scale was supplemented by three additional items based on discussions with sector experts. The response scale ranged from 1 = 'strongly agree' to 4 = 'strongly disagree', with higher scores representing higher levels of stigma, or barriers to seeking help.

Additional questions asked respondents to indicate: a) the extent to which they feel able to discuss stress-related problems with their line manager; b) the extent to which they feel able to discuss stress-related problems with their colleagues. Both questions used a response scale ranging from 1 = 'always' to 4 = 'never'. These questions were used in previous surveys of the sector (2008, 2010, 2014). Higher scores represent a greater ability to discuss these issues with others in the organisation.

Administration of the online survey

The sample was accessed via professional networks and social media. Most of the respondents to the survey, however, (i.e. 96%) were obtained via the University and College Union. A link was provided to the survey via an email.

Psychosocial hazards

The Health and Safety Executive has developed a self-report survey instrument to help employers measure the key psychosocial hazards within their organisations and compare their performance with national standards. Psychosocial hazards are aspects of the work environment that are thought to have the potential to negatively affect the well-being of employees. The HSE Management Standards Indicator Tool (Cousins et al., 2004) comprises 35 items within several categories:

- Demands includes workload, pace of work and working hours

- Control measures levels of autonomy over working methods, as well as pacing and timing

- Peer Support encompasses the degree of help and respect received from colleagues

- Managerial Support reflects supportive behaviours from line managers and the organisation itself, such as the availability of feedback and encouragement

- Relationships assesses levels of conflict within the workplace, including bullying behaviour and harassment

- Role examines levels of role clarity and the extent to which employees believe that their work fits into the aims of the department and the organisation in general

Items are scored on 5-point Likert scales indicating the extent of agreement. Higher scores on each of the sub-scales represents higher levels of satisfaction. This measure was used in three previous surveys of academic and academic-related staff in the UK (2008, 2012, 2014).

Illegitimate tasks (Semmer et al. 2010).

This assesses the extent to which respondents believe they engage in tasks that they perceive to be either unreasonable (if they are believed to fall outside one's occupational role) or unnecessary (where they should not have to be done at all). Responses are obtained on a five-point scale ranging from 1 = 'never' to 5 = 'frequently'. Higher scores represent higher levels of unreasonable and unnecessary tasks. This measure was used in a previous survey of the sector (2014).

Mental health (Stewart-Brown et al. 2008).

This was assessed by the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) that assesses subjective wellbeing and psychological functioning. Respondents are presented with a series of statements about thoughts and feelings and asked to respond on a scale ranging from 1 = 'none of the time' to 5 = 'all of the time'. Higher scores denote higher levels of subjective wellbeing.

Burnout (Maslach et al. 1996).

This measure assesses three core aspects of burnout: emotional exhaustion (feelings of being emotionally overwhelmed and exhausted by one's work), depersonalisation (an unfeeling or cynical response towards people in the workplace) and sense of personal accomplishment (feelings of accomplishment and achievement in one's work). The response scale ranged from 0 = 'never' to 6 = 'every day'. Higher scores represent higher levels of emotional exhaustion and depersonalisation and lower levels of personal accomplishment.

Work-life balance (Fisher et al. 2009).

Two scales were used to assess the extent to which work is believed to: a) interfere with respondents' personal life (i.e. work-life conflict) and b) to improve their personal life (i.e. work-life enhancement). The response scale ranged from 1 'never' to 6 'always'. Higher scores represented more work-life conflict and more work-life enhancement. This measure was used in three previous surveys of the UK HE sector (2008, 2012, 2014).

The COVID-19 pandemic:

Open-ended questions were included to ask respondents: a) in which way, if at all, has the pandemic increased the work-related pressure they are experiencing? b) what type of work-related support did they find most helpful during the pandemic, or what kind of support would they have found most helpful if it had been available?

Descriptive statistics and reliability statistics for all scales used in the survey can be found in **Appendix B**.

1 Biographical information of respondents

Sample

2,046

There were 2,046 respondents to the survey after deleting non-complete responses.

Gender

53.6% Male   **45.5%** Women

The sample comprised **53.6%** males (including female to male trans men) and **45.5%** women (including male to female trans women). The remainder of the sample identified as 'other' (**0.3%**) or preferred not to say (**0.6%**).

Age

48

The mean age of the sample was 48 (SD = 10.54).

Sexuality

79.9% Heterosexual
7.2% Preferred not to say
5.7% Gay or lesbian
5.1% Bisexual
1.7% Pansexual
1.7% Identified as 'other'
0.9% Undecided

Ethnicity

64.3% White British
25.6% Other white background
4.8% Other (including mixed) background
2.3% Preferred not to say
0.7% Other Asian background
0.6% Asian Indian
0.4% Asian Chinese
0.3% Black British — Caribbean
0.2% Black British
0.2% Chinese
0.2% Asian Pakistani
0.1% Black British — African

Disability

80.4% Not disabled
13.3% Disabled
4.2% Unsure
2.1% Preferred not to say

Job type

85.9% Employed in academic roles   **14.1%** Academic-related staff

Most respondents (**85.9%**) were employed in academic roles, whereas **14.1%** were academic-related staff (i.e. non-academic managers and professional staff). Of the respondents who identified themselves as academic employees, **19.7%** worked in teaching or teaching-only positions, **7.4%** in research-only, **56.9%** in teaching-and-research, and **1.9%** in management roles.

Mode of employment

79% Worked full-time   **21%** Worked Part-time

Terms of employment

80.4% Permanent contract
11.2% Fixed-term contract
5.8% Open-term contract
1.6% Zero hours contract
0.8% 'Other' terms of employment
0.2% Variable hours contract

Institution type

35.6% 'Russell Group'[2] university
25.7% 'New' university
16.3% Unsure[3]
9.6% Another type of institution
6.8% 'Plate Glass'[4] university
6.1% 'Red Brick'[5] university

Region

87.2% England
7.8% Scotland
3.4% Wales
1.6% Northern Ireland

Length of employment

Respondents had worked in the higher education sector for between

1-51 years (Mean =16.17, SD = 10.0)

and had worked for their current institution between

1-48 years (Mean = 11.3, SD = 8.77)

Hours of work

Respondents were asked two questions concerning their working hours:
a) how many hours they work in an average week

11.4% Up to 30 hours in a week
6.9% 31-35 hours in a week
19.6% 36-40 hours in a week
21.7% 41-45 hours in a week
19.1% 46-50 hours in a week
21.3% Above 50 hours per week

b) how many of these hours (if any) were additional to their core hours of employment

13.8% No extra hours a week
23.3% Up to 5 extra hours a week
25.6% 6-10 extra hours a week
18.2% 11-15 extra hours a week
9.6% 16-20 extra hours a week
9.6% 20 extra hours plus a week

2   The Russell Group is a group of 24 leading universities in the UK — www.russellgroup.ac.uk/about
3   A considerable proportion of the sample (16.3%) were unsure about the type of university they worked in and were invited to provide the name of their institution, but this was optional.
4   A group of 18 universities established between 1963-1992 — www.ukuni.net/articles/types-uk-universities
5   A group of 19 universities established prior to the 1960s. Some Red Brick universities are also members of the Russell Group — www.ukuni.net/articles/types-uk-universities

2 Sources of support for wellbeing: availability and helpfulness

Table 1 shows the potential sources of support ranked according to the percentage of the sample who indicated that each source was available to them. Also included are the percentages of the sample who responded that the source of support was not available, who were unsure, or that the support source was not applicable to them. The final column shows the proportion of the sample who reported that the type of support would be very helpful or helpful, whether or not this was currently available.

Table 1: Potential sources of support ranked by availability

	Available?				Effective?
	Yes	No	Unsure	n/a	Very helpful/ helpful
The ability to work from home	86%	5%	7%	1%	86%
Trade union support and guidance	80%	7%	12%	0%	71%
Training on equality, diversity and inclusion	74%	10%	15%	0%	59%
Occupational health	70%	6%	20%	0%	47%
Opportunities for informal chats with colleagues	70%	20%	9%	1%	86%
Clear policies on equality, diversity and inclusion	66%	14%	20%	0%	68%
Access to exercise and sporting activities	62%	21%	13%	3%	53%
Encouragement to take full entitlement of annual leave	60%	25%	12%	2%	69%
Guidance on well-being and self-care	60%	14%	25%	1%	35%
Telephone or online support for wellbeing	55%	14%	31%	0%	36%
Coaching and mentoring	50%	23%	27%	0%	56%
Personal counselling	48%	17%	34%	0%	51%
Meetings with line managers to discuss workload and wellbeing	47%	38%	15%	0%	70%
Health promotion	47%	15%	37%	1%	39%
Access to flexible working options (above the legal requirement)	46%	19%	33%	2%	71%
Encouragement to take regular breaks away from your workstation	44%	33%	21%	2%	59%
Managers who are aware of the pressures of the job	44%	37%	19%	0%	81%
Mental health first aiders or champions	42%	20%	36%	1%	35%
Individual-focused stress-management training (e.g. mindfulness or relaxation)	41%	17%	42%	0%	30%
Support from a professional body	40%	19%	38%	2%	41%

2 Sources of support for wellbeing: availability and helpfulness

	Available?				Effective?
	Yes	No	Unsure	n/a	Very helpful/ helpful
Robust and accessible anti-bullying and anti-harassment policies	39%	27%	34%	0%	65%
Regular workplace social events	39%	46%	11%	4%	51%
Encouragement to take time off while unwell	38%	38%	22%	1%	83%
Time management and personal organisation training	37%	19%	43%	0%	31%
Encouragement and support for a culture of teamwork and collaboration	36%	36%	27%	0%	73%
Formal opportunities for input into decision-making affecting work	35%	40%	25%	0%	77%
Guidance on work-life balance	34%	23%	42%	0%	31%
Feeling appreciated and respected	34%	48%	17%	0%	92%
Opportunities for learning and development concerning well-being	33%	24%	42%	0%	45%
Managing technology and setting boundaries	30%	31%	38%	1%	53%
Appraisal and supervision procedures that include questions about well-being	28%	49%	22%	0%	65%
A commitment to monitor staff well-being	27%	32%	40%	0%	61%
Support and guidance for personal difficulties such as finance, substance abuse	26%	18%	53%	3%	23%
Audits that obtain information on staff well-being and act on the findings	22%	41%	37%	0%	66%
A culture of openness that normalises conversations about stress	22%	53%	25%	0%	74%
Clear consequences for staff who breach equality, diversity and inclusion policies	19%	36%	44%	0%	68%
Conflict management	19%	31%	48%	1%	44%
Goal setting and/or improving coping skills	19%	24%	56%	1%	36%
Timetabling that ensures adequate breaks between teaching	18%	52%	13%	15%	81%
Workload management initiatives	17%	47%	36%	0%	64%
A workplace stress policy that is clear and accessible	15%	40%	45%	0%	61%
Initiatives to build positive working relationships	15%	38%	47%	0%	55%
Stress risk assessment to mitigate workplace stressors	14%	39%	47%	0%	59%
Steps to tackle work-related stress at source	8%	57%	35%	0%	77%
Active monitoring of working hours	7%	74%	17%	1%	53%
Culturally appropriate counselling	6%	25%	63%	6%	35%
Group counselling	5%	38%	53%	3%	15%

A wide range of potential sources of support was found to be available, generally encompassing the different categories measured.

- As can be seen, the type of support that was most commonly available was the opportunity to work at home. This is unsurprising, given that the research was conducted during the COVID-19 pandemic when HE staff were expected to work from home. Nonetheless, homeworking was widely considered helpful in supporting wellbeing.

- Other potential sources of support that were most frequently available to respondents included external professional support (trade union support and guidance), reducing inequalities and tackling bullying (training on equality, diversity and inclusion and clear polices on these issues), support for health and wellbeing (occupational health, guidance on self-care and access to exercise and sporting activities) and social support and relationships (opportunities for informal chats with colleagues).

- Around half of the sample indicated that telephone or online support, coaching and mentoring, and personal counselling was available to them, but up to one-third of respondents were unsure if they could access this type of support.

> **"About half of the sample was unsure if stress management training and support to improve working relationships was available to them."**

- A high proportion of the sample was unsure if stress management training and support to improve working relationships was available to them: e.g. time management (**43%**), goal setting and/or improving coping skills (**56%**), mindfulness and relaxation (**42%**), initiatives to build positive working relationships (**47%**) and conflict management (**48%**).

- The sources of support that were least available to respondents related to organisational policies and practices: e.g. having a workplace stress policy that is clear and accessible (**15%**), stress risk assessments (**14%**) and steps to tackle work-related stress at source (**8%**) and managing workload and pressure: e.g. workload management initiatives (**17%**) and active monitoring of working hours. (**7%**) A high proportion of the sample, however, were unsure if they could access this type of support, with nearly half (**47%**) being uncertain whether stress risk assessments were conducted in their institution and more than one third (**35%**) unsure if steps were taken to tackle work-related stress at source.

2 Sources of support for wellbeing: availability and helpfulness

Table 2 shows the perceived helpfulness of each source of support in reverse mean order, where higher scores represent higher levels of helpfulness (1 'not at all helpful' to 5 'very helpful').

Table 2: Source of support ranked by perceived helpfulness (n = 1912 — 2029)

	Mean	SD
The ability to work from home	4.37	.87
Opportunities for informal chats with colleagues	4.26	.84
Feeling appreciated and respected	4.25	.74
Managers who are aware of the pressures of the job	4.24	.96
Timetabling that ensures adequate breaks between teaching	4.18	.89
Encouragement to take time off while unwell	4.17	.86
Steps to tackle work-related stress at source	4.12	.91
Formal opportunities for input into decision-making affecting work	4.07	.94
Encouragement and support for a culture of teamwork and collaboration	3.98	.93
Access to flexible working options (above the legal requirement)	3.95	1.00
A culture of openness that normalises conversations about stress	3.94	.91
Clear consequences for staff who breach equality, diversity and inclusion policies	3.93	.94
Trade union support and guidance	3.93	.96
Encouragement to take your full entitlement of annual leave	3.86	1.17
Meetings with line managers to discuss concerns about workload and wellbeing	3.86	1.04
Audits that obtain information on staff well-being and act on the findings	3.86	1.03
Workload management initiatives	3.85	1.04
Clear policies on equality, diversity and inclusion	3.85	1.02
Robust and accessible anti-bullying and anti-harassment policies	3.81	.98
Appraisal and supervision procedures that include questions about your well-being	3.73	1.03
A workplace stress policy that is clear and accessible	3.71	1.02
Stress risk assessment to mitigate workplace stressors	3.70	1.03
A commitment to monitor staff well-being	3.70	1.05
Training for staff on equality, diversity and inclusion	3.64	1.06
Initiatives to build positive working relationships	3.61	.92
Coaching and mentoring	3.55	1.04

2 Sources of support for wellbeing: availability and helpfulness

	Mean	SD
Encouragement to take regular breaks away from your workstation	3.54	1.10
Active monitoring of working hours	3.52	1.15
Personal counselling	3.50	1.04
Managing technology and setting boundaries (e.g. encouragement to switch off during evenings, weekends and holidays)	3.43	1.14
Access to exercise and sporting activities	3.42	1.08
Occupational health	3.41	1.02
Conflict management	3.36	.95
Opportunities for learning and development concerning well-being	3.35	.95
Regular workplace social events	3.35	1.03
Support from a professional body	3.34	.95
Culturally appropriate counselling	3.29	.92
Health promotion	3.13	1.03
Goal setting and/or improving coping skills	3.13	.97
Telephone or online support for wellbeing	3.12	.97
Mental health first aiders or champions	3.11	1.01
Guidance on well-being and self-care	2.99	1.02
Individual-focused stress-management training (e.g. mindfulness or relaxation)	2.92	1.00
Time management and personal organisation training	2.90	.99
Guidance on work-life balance	2.90	1.03
Support and guidance for personal difficulties such as finance, substance abuse	2.89	.86
Group counselling	2.65	.83

- As mentioned above, the source of support that was considered the most helpful (that with the highest mean score) was the ability to work from home. Other popular types of support for wellbeing linked to the work/home interface and the need for recovery opportunities included access to flexible working options and encouragement to take time off when unwell.

- The importance of support from co-workers and positive working relationships in enhancing wellbeing was reflected in the perceived effectiveness of opportunities for informal chats with colleagues, feeling appreciated and respected and encouragement and support for a culture of teamwork and collaboration.

- In general, the sources of support that were considered the most helpful were at the organisational level: managing workload and pressure at source (e.g. managers who are aware of the pressures of the job, a culture of openness that normalises conversations about stress, and timetabling that ensures adequate breaks between classes) and improving policies and practices (e.g. steps to tackle work-related stress at source, formal opportunities for input into decision-making).

- The sources of support for wellbeing that tended to be considered the least helpful involved individual-level strategies, such as guidance on wellbeing and self-care and work-life balance, support for personal difficulties and stress management training.

Respondents' comments on support initiatives in their institution

Many respondents highlighted the need to reduce workload pressure at the organisational level to improve staff wellbeing. In the face of high workloads in the sector, some major concerns (and some cynicism) were expressed about the relevance and effectiveness of individual level interventions.

"Individual interventions such as mindfulness and relaxation will not help when we are working 100 hours a week and still can't meet our deadlines."

"I struggle when the support is framed in a 'building resilience' narrative which individualises stress and workload issues."

"I am cynical about all types of support, as those offered are individualised 'sticking plasters', rather than representing real change that would make a difference for staff."

"Emphasising individual solutions to structural problems is extremely harmful and a big part of the problem, as it allows institutions to say they're doing something when in fact they're just pushing the problem on to employees."

"Remove the cause of the problem (too much work) rather than fighting a losing battle to mitigate the symptoms (the resultant stress)."

Although organisations may have policies in place to address wellbeing, many respondents felt that they were not necessarily put into action or were implemented inconsistently.

"The problem with many support initiatives is that they are all talk, no action. Sure, we have a 'take all your annual leave' policy, but that only consists of emails saying, 'take your leave', not a reduction of workload or more staff so that people CAN take leave."

"I feel my institution plays lip service to support initiatives; so many are in place but often they are ineffective and/or there is no real commitment to the values that are essential to their success."

"I would like to see policies translated into practice — there is too much rhetoric and no real attempt to change anything."

"What would really make a difference to wellbeing is a way of making sure that the policies/processes that are in place are implemented fairly and equitably."

Some respondents reported that their institutions conducted wellbeing audits on a regular basis, but did not address the issues raised, or even disseminate the findings to staff.

"Make sure that the results of staff surveys are actually communicated and acted upon rather than implementing yet more tokenistic wellbeing initiatives that will make no difference."

"We have staff surveys, but they are just a tick box exercise — nothing is ever done, and the results are never honestly reported. They just pick out the positive bits and bury the rest."

"We need a system where departments and universities are publicly shamed if they score low on national surveys, as only then will management do something."

Some respondents emphasised the need to tackle an 'unhealthy' organisational culture in higher education that encouraged overwork and stigmatised help-seeking. This is discussed further below.

"We need a culture of openness and clarity where people are not individually blamed if are unwell with work-related stress."

"Support such as counselling exists, but what is really needed is an organisational culture where it's OK to talk openly about stress and heavy workloads."

"The provision of support, across all these areas, is of limited use when there is a climate of work that valorises long hours, weekend working, not taking holidays and coming to work whilst sick. This is a culture endemic in higher education and is worn as a badge of honour by senior staff and those wishing to gain promotion. Universities have endless policies on work life balance, equality, mental health awareness, etc. but the actual working culture mitigates against all of them."

Respondents were invited to comment on any barriers that would discourage them from accessing support for their wellbeing from their institution. Some indicated that communication about initiatives and how to access them was lacking (as highlighted in the survey findings above), while others indicated there was insufficient provision to satisfy demand.

"There may be all kinds of support available for my wellbeing, but I have no idea where to find it. I don't have the time or energy to seek it out."

"Counselling has a massive waiting list and students take priority — I ended up paying privately to get the help I needed."

"There are not enough resources or support to go round. There is a 6-week waiting list for employee assistance counselling programmes."

"When responding to the survey questions, I clicked 'unsure' a lot! Because while such policies might exist on some HR website, they are certainly not routinely bought to my attention."

"All of the different guidelines, policies etc. can be overwhelming. It would be good to have a local provision that is easily accessible and geared towards those working in that department."

"It isn't always made clear where and how to access support, even if it exists. Poor communication means that information gets buried, or news updates are changed or overwritten."

Some respondents indicated that they were reluctant to access the support available for wellbeing as it was not fit for purpose, both in terms of content and delivery.

"Everything is outsourced to external providers, probably the lowest bidder. It doesn't feel genuine and isn't very effective — just there to tick a box."

"The support and training options are superficial with no depth. An online video is not training or education. More high-quality support is needed."

"Most of it is either full-on ******** not supported by any scientific evidence, while other things just deliver a very marginal benefit if at all. It is just not worth the time if you know the work tasks you have before you don't ever go away or could be shifted on to someone else while you work on your mental health."

"I am an expert in work stress, and I am embarrassed at what my institution offers to 'educate' staff about stress management — a cheap, 'off the peg', badly designed online package with a simplistic tick box assessment. This isn't going to help anybody."

"I worry about the competence of the service. Our Employee Assistance Scheme is contracted out to an organisation in the US. They have no idea about our working conditions."

Respondents expressed concerns about being viewed as 'inadequate' and 'failing to cope' if they were seen to seek out support for their wellbeing. Others were reluctant to access support as it would involve disclosing personal information that would make them feel vulnerable or may not be kept confidential.

"I am scared to access anything that might show I am struggling."

"I would not access support for my own health and wellbeing through my employer because I don't want them to monitor me."

"If you voice a problem, you will come off worse. People who complain or ask questions are unpopular here, so we just get on with it."

"I am very wary of accessing support at work, due to fear of judgement from an un-empathic line manager who will just see me as somebody who can't cope with the pressure."

"There is an assumption from HR that we all need to be more resilient and that any difficulties are due to our personal weaknesses."

"There is stigma attached to reaching out to support services. Many support initiatives entail a certain degree of disclosure which some find uncomfortable (or risky)."

Reservations were frequently expressed about whether line managers were able to deal with the work-related stress. They may offer emotional support but would not necessarily be able to take the action required to address the problem. Moreover, line managers may not have the experience or training required to support the wellbeing of their staff or may not recognise that they need it. Line managers may also not be approachable, or even be the source of an employees' difficulties which would be problematic if they were also 'gate-keepers' to support services. Some respondents were also reluctant to approach their manager as they were also struggling with their workload, and they did not wish to add to their burden.

"I don't trust my local management not to try and use against me any difficulties that I did highlight."

"My line manager has an enormous workload, so I feel unable to ask him for support as it will make him even more stressed."

"Support is available from line managers, but there isn't much point as they can't do anything to alleviate workload, which is the problem."

"The line manager is often the problem, so talking to them about your well-being then becomes either a massive 'no-no' or makes the matter worse."

"I have an unsympathetic bully as a line manager, and I am not prepared to contact them with any wellbeing concerns. I fear that any information I disclose will be used against me. There is a culture of fear, so best stay off the radar."

"The policies are there but are effectively dismissed by my manager who seems to think I am complaining about nothing, as 'everybody else is in the same boat'."

The most common barrier to accessing support for wellbeing was lack of time due to a heavy workload and an inflexible schedule, where sessions may clash with work commitments. Even if people can engage with initiatives to improve their wellbeing, they may not necessarily have the time to put their learning into action.

"I can hardly get to see a doctor when I am physically ill, so there is no hope of factoring in a meeting to discuss my stress levels which are the result of having too much to do, without that discussion becoming yet another thing to do."

"We have initiatives in our institution such as wellbeing sessions, mindfulness sessions etc. I think it's a great idea, but never have time to attend!"

"I am often too busy to access any training or support as they are arranged during teaching times."

"The demands of my job mean that I haven't got the time to take breaks or put into action some of the things that I know will improve matters."

"I don't have time to attend training to improve my wellbeing, I would rather spend time with my family as they are suffering from my long working hours too."

"Work takes up all my time, doing anything else work-related just doesn't happen."

Many respondents indicated that the support services that were usually available for their wellbeing were not easily accessed during lockdown or had been suspended entirely. 'Zoom fatigue' also discouraged respondents from attending training sessions after working hours, where people were reluctant to spend more time on-line after a long day spent at meetings or teaching or supporting students.

Respondents highlighted some sources of support that they would find helpful that were not included in the survey, these included:

Individual support
- More support for staff with significant caring responsibilities and personal difficulties, such as bereavement
- Support tailored to early career staff to help them manage expectations/issues around workload and protect their wellbeing
- Inclusion and awareness of neurodiversity

Institutional support
- A better counselling service for staff, where the number of sessions is not capped and counsellors have an understanding of the sector
- Guidance and support to help support students with mental health problems. This has been a particular concern during the pandemic
- Teaching cover for illness
- Proactive support for job sharing
- Policies for management of emails, including clear guidance for staff and students on expectations for response

Wider opportunities for support
- Access to sector schemes or peer groups outside of the employing institution to discuss support needs and potential solutions
- An independent 'third-party' that can cast a critical eye over how wellbeing services operate in an institution and can deal with staff concerns without fear of reprisals

Other support
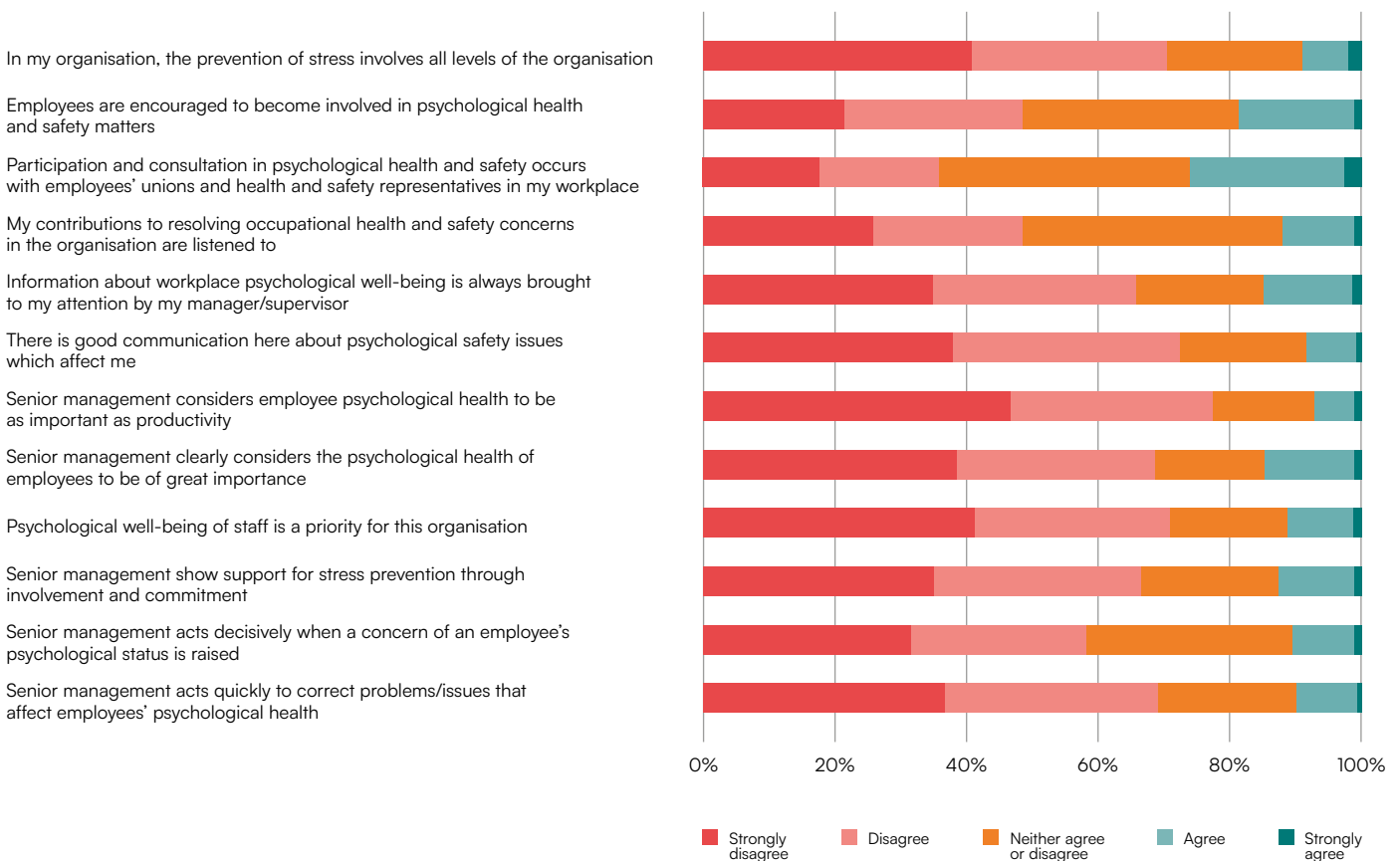An anonymous hotline for reporting bullying/harassment

3 Psychosocial safety climate and stigma

Psychosocial hazards: the HSE benchmark approach

The psychosocial safety climate (PSC) of an organisation concerns how well it manages psychological health and safety. In this survey, the mean score across items (25.89, SD = 9.76) is considerably lower than the benchmark for 'high risk' organisations (i.e. the PSC is 37 or below), placing employees at greater risk of job strain and depressive symptoms (Bailey et al. 2015). Fig 1 shows the responses to each of the questions within the PSC scale. Around seven respondents out of ten strongly disagreed or disagreed that senior management in their organisation showed support for stress prevention through involvement and commitment (**71%**) and that psychological wellbeing of staff was a priority for their organisation (**70.9%**).

Moreover, more than three-quarters of the sample (**77.5%**) strongly disagreed or disagreed that senior management considered the psychological health of employees to be as important as productivity — only **7.1%** agreed with this statement. The quality of communication about psychological safety issues that affect employees was also rated poorly, with **72.5%** strongly disagreeing or disagreeing that this was effective. Respondents also expressed a high level of disagreement with statements relating to senior management taking prompt action to address problems affecting employees' psychological health (**69.1%** strongly disagreed or disagreed).

Fig 1: Psychosocial safety climate

In my organisation, the prevention of stress involves all levels of the organisation

Employees are encouraged to become involved in psychological health and safety matters

Participation and consultation in psychological health and safety occurs with employees' unions and health and safety representatives in my workplace

My contributions to resolving occupational health and safety concerns in the organisation are listened to

Information about workplace psychological well-being is always brought to my attention by my manager/supervisor

There is good communication here about psychological safety issues which affect me

Senior management considers employee psychological health to be as important as productivity

Senior management clearly considers the psychological health of employees to be of great importance

Psychological well-being of staff is a priority for this organisation

Senior management show support for stress prevention through involvement and commitment

Senior management acts decisively when a concern of an employee's psychological status is raised

Senior management acts quickly to correct problems/issues that affect employees' psychological health

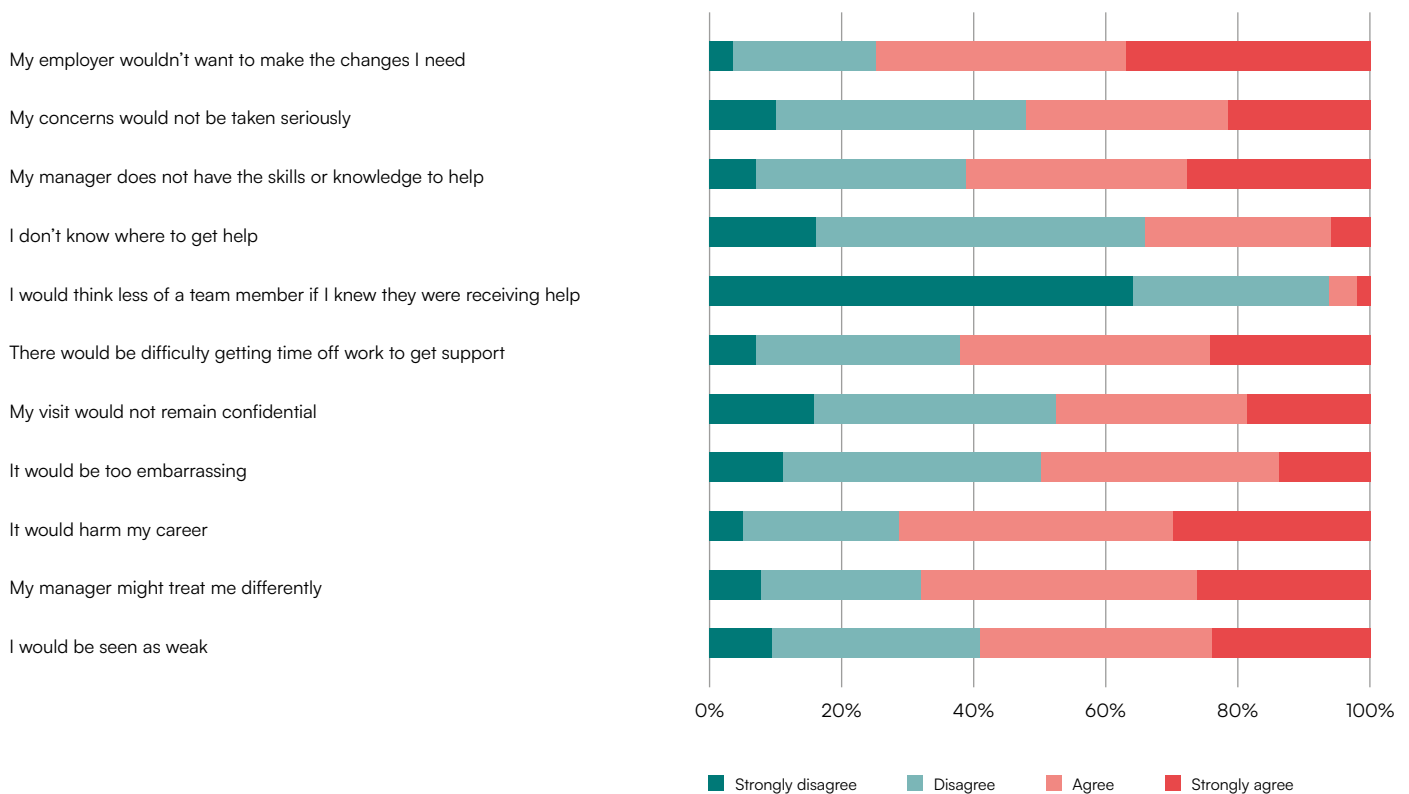Strongly disagree | Disagree | Neither agree or disagree | Agree | Strongly agree

Stigma

Seeking support for work-related stress and mental health problems can be highly stigmatised. This survey presented respondents with a list of concerns that people might have when considering seeking help for such difficulties. The findings are shown in Fig 2 below. Some evidence was found that seeking support may be subject to considerable stigma in UK universities. More than half of the sample (**59%**) were concerned that they would be seen as weak if they sought help for stress or mental health problems and just over seven out of ten (**71.2%**) strongly agreed or agreed that it would harm their career.

Almost half (**49.8%**) indicated they would find it too embarrassing to seek help for stress or a mental health concern. Reassuringly, however, only just over **6%** of respondents (**6.3%**) indicated that they would think less of a colleague if they knew they were receiving help. Highlighting the need for employees to feel confident in their line managers' abilities to seek help from them, more than six respondents in ten (**61.1%**) agreed or strongly agreed that they would not approach their manager as they did not have the skills or knowledge needed to provide support.

Fig 2: Concerns affecting decisions to seek help for workplace stress or a mental health problem

My employer wouldn't want to make the changes I need
My concerns would not be taken seriously
My manager does not have the skills or knowledge to help
I don't know where to get help
I would think less of a team member if I knew they were receiving help
There would be difficulty getting time off work to get support
My visit would not remain confidential
It would be too embarrassing
It would harm my career
My manager might treat me differently
I would be seen as weak

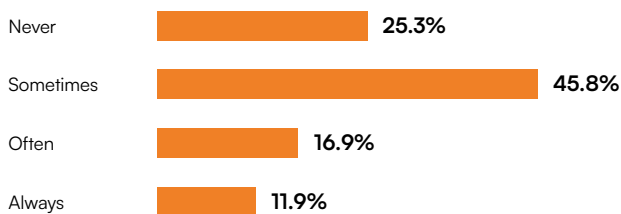Strongly disagree   Disagree   Agree   Strongly agree

Respondents were also asked to indicate the extent to which they felt able to discuss stress-related problems with a) their line manager; and b) their colleagues. Such questions can also assess the extent to which stress is stigmatised in organisations. The findings are shown in the charts below. Only just under three out of ten respondents (**28.8%**) reported feeling able to discuss their experiences of work-related stress with their manager often or always, with just over a quarter (**25.3%**) never able to do so.

Overall, respondents felt better able to discuss any work-related stress they experience with their colleagues. As can be seen in Fig 4 below, more than nine out of ten (**91.5%**) indicated they could do this at least sometimes.

Fig 3: Discussing stress-related problems with line manager

To what extent can you discuss stress-related problems with your manager

Never	25.3%
Sometimes	45.8%
Often	16.9%
Always	11.9%

Fig 4: Discussing stress-related problems with colleagues

To what extent can you discuss stress-related problems with your colleagues

Never	8.5%
Sometimes	40.7%
Often	37.1%
Always	13.8%
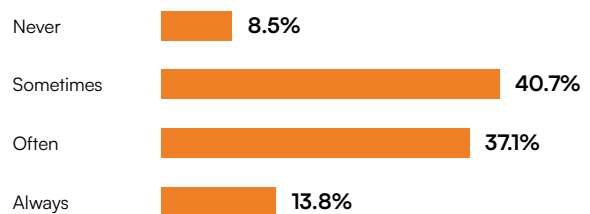
4 Psychosocial hazards and illegitimate tasks

Psychosocial hazards are aspects of the work environment that have the potential to negatively affect the well-being of employees. This survey examined the extent to which people working in academic and academic-related roles in UK universities feel satisfied with key aspects of their working conditions: demands, control, support from managers, support from peers, role, and relationships. The psychosocial hazard category 'change management' was not included in the current survey, as this measures the management of change within an organisation and during the pandemic the ability for individual institutions to manage this internally was much reduced.

The survey included 35 questions under seven hazard categories: demands, control, support from managers and colleagues, role, relationships and management of change. The mean scores for each of the hazard categories are provided in Table 3 below.

The colour coding system recommended by the HSE makes four categories of recommendation based on the hazard categories. These are: 'red: urgent action needed' (scores are below the 20th percentile in relation to benchmark data); 'yellow: clear need for improvement' (scores are below average, but not below the 20th percentile); 'aqua: good, but need for improvement' (scores are better than average but not at, above, or close to the 80th percentile) and 'green: doing very well, need to maintain performance' (scores are above or close to the 80th percentile). The HSE benchmark mean is also provided in the table. More in-depth information on responses to the questions in each hazard category is also provided below[6].

Table 3: Mean scores for hazard categories, HSE benchmarks and percentiles

Hazard categories	Mean	HSE benchmark	Percentile
Demands	2.48	3.10	<20
Control	3.43	3.47	>20
Manager support	2.86	3.46	<20
Peer support	3.33	3.78	<20
Role	3.58	4.18	<20
Relationships	3.68	3.85	<20

As can be seen, apart from control (that almost reaches the HSE benchmark), all the hazards measured fall into the red 'urgent need for action' category. The shortfall between the mean scores found among respondents and the HSE benchmarks for demands and role gives particular cause for concern.

6   Further information about the HSE Management Standards Indicator Tool can be found at www.hse.gov.uk/stress/assets/docs/indicatortoolmanual.pdf

Psychosocial hazards: typical snapshots

- **Demands:** Respondents said they 'often' had demands from different groups at work that were difficult to combine. They 'often' had to work very quickly and very intensively, 'often' under unrealistic time pressures. Respondents 'sometimes' neglected some tasks because they had too much to do and 'sometimes' believed their deadlines were unachievable. They 'sometimes' felt pressurised to work long hours and were 'sometimes' unable to take sufficient breaks.

- **Control:** Respondents 'sometimes' had a choice in deciding what to do at work and 'often' could choose how they do their work. They 'sometimes' felt in control over the speed with which they work. Respondents typically reported that their working time was 'often' flexible, and they could 'often' decide when to take a break.

- **Manager support:** Respondents were 'sometimes' given supportive feedback on the work they did and could 'sometimes' rely on their line manager to help them with a work problem. They could 'sometimes' or 'often' talk to their line manager about something that had upset or annoyed them about work. Respondents typically reported that their line manager encouraged them at work and they felt supported with the emotional demands of the job 'sometimes'.

- **Peer support:** Respondents said they 'sometimes' received the help and support they needed from their colleagues, and they would 'sometimes' help them if work got difficult. They 'often' received the respect they believed they deserved from colleagues who were 'often' or 'sometimes' willing to listen to their work-related problems.

- **Relationships:** Only half of the sample (50%) indicated that they were 'never' subjected to personal harassment or bullying at work. There was 'sometimes' friction or anger between colleagues and relationships at work were 'sometimes' strained.

- **Role:** Respondents indicated that they 'often' knew what was expected of them at work, had the information required to get their job done and were clear about their duties and responsibilities. They 'often' understood how their work fitted in with the overall aim of their organisation but were only 'sometimes' clear about the goals and objectives for their department.

Illegitimate tasks

The extent to which respondents believed they engage in tasks that are either unreasonable (i.e. they should not be done by them), or unnecessary (i.e. they should not be done at all) was examined. The chart below highlights the proportion of the sample that responded on a five-point scale where 1 = 'never' and 5 = 'frequently'. More than half reported that they perform unnecessary tasks at work either 'rather often' (34%) or 'frequently' (22.2%). Only 1.5% of respondents believed that they 'never' undertake unnecessary tasks.

Nearly seven respondents out of every ten (69%) expressed the belief that the tasks they do at work should be done by somebody else rather often (35.6%) or frequently (23.4%). The strongest level of agreement overall, however, was with performing tasks that would not exist (or could be done with less effort) if they were organised differently, and tasks that exist because some people simply demand it this way with 69.1% and 68.1% of respondents respectively reporting this was the case 'rather often' or 'frequently'.

Fig 5: How often do you have to carry out tasks where you...
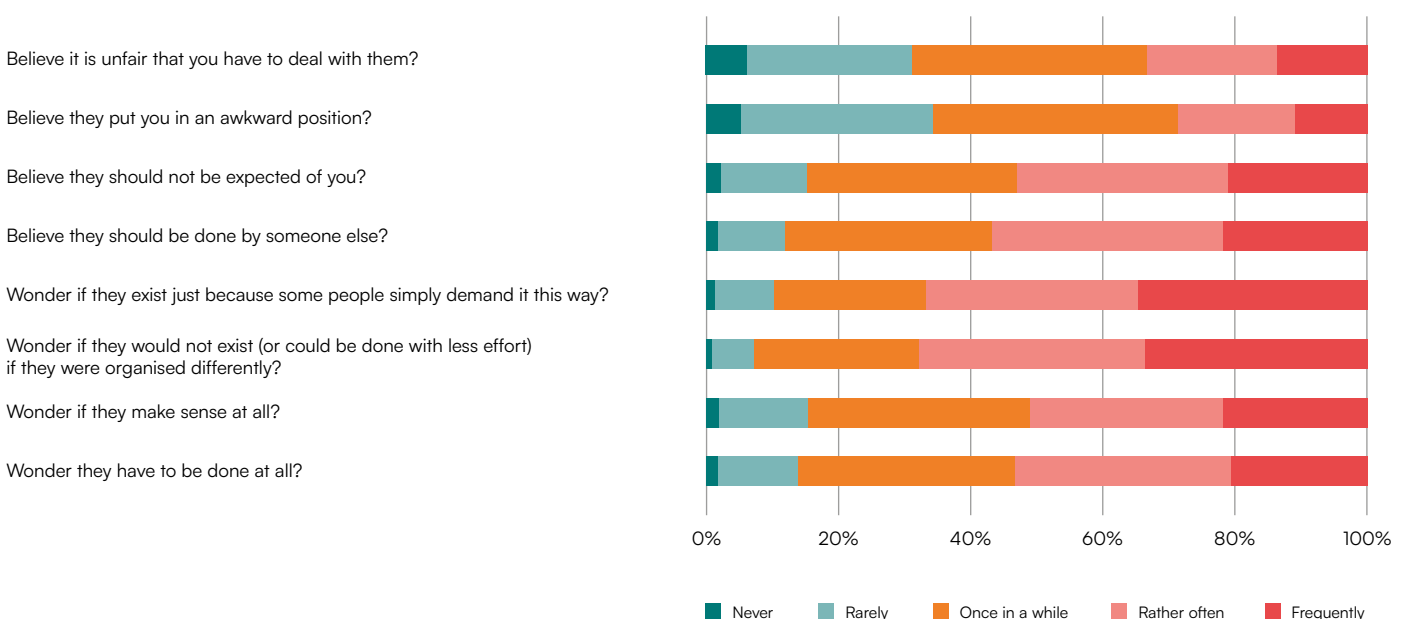
Changes over time

The mean scores for the HSE psychosocial hazard categories found in the current survey and in 2014 are shown in Table 4 below. Calculation of effect sizes[7] showed that the only significant difference was between the mean scores for relationships, but this was small (indicating minimal practical significance). The findings indicate that levels of satisfaction with psychosocial hazards have generally remained stable over time.

In terms of illegitimate tasks, the mean score from the survey conducted in 2021 was 3.58 (SD = .78) and in 2014 was 3.42 (SD = .68). The effect size between the two mean scores was found to be small, which is of little practical significance. This indicates that perceptions of performing unreasonable and unnecessary tasks have generally remained stable over time.

Table 4: Changes in levels of psychosocial hazards 2021 and 2014

Hazard categories	Mean 2021	Mean 2014
Demands	2.48 (SD .77)	2.49 (SD .72)
Control	3.43 (SD .69)	3.49 (SD .70)
Manager support	2.86 (SD 1.01)	2.75 (SD .98)
Peer support	3.33 (SD .82)	3.28 (SD .82)
Role	3.58 (SD .70)	3.50 (SD .79)
Relationships	3.68 (SD .85)	3.48 (SD .98)

7   Effect sizes were calculated using Hedges' g. An effect size shows how much one group differs from another, where the larger the effect size the stronger the relationship between the two variables.

5 Wellbeing: mental health, burnout and work-life balance

Mental health

The WEMWBS was used to assess the mental wellbeing of respondents to this survey. This examines a person's psychological functioning, overall satisfaction with life, and their ability to forge mutually beneficial relationships (Stewart-Brown et al. 2008). In this study, the WEMBWS score for the sample (39.86, SD 10.11) is considerably lower than population norms. An examination of respondents' individual scores showed that 29.4% of the sample scored 45 or above (indicating average wellbeing), 10% scored between 41 and 44 (indicating possible depression) and more than half (53.2%) 40 and below (indicating probable depression[8]).

The responses to each of the categories are shown in Fig 6. The lowest scores were for questions relating to levels of energy and feelings of relaxation, optimism and cheerfulness. For example, more than seven respondents out of ten (70.5%) reported having 'energy to spare' none of the time or rarely, more than six out of ten (64.9%) had been feeling relaxed none of the time or rarely, and only 17% had been feeling optimistic either often or all the time. On average, higher scores were found in questions that assess the ability to think clearly and be decisive, as well as feeling useful and feeling loved.

**Fig 6: Responses to the mental health scale**
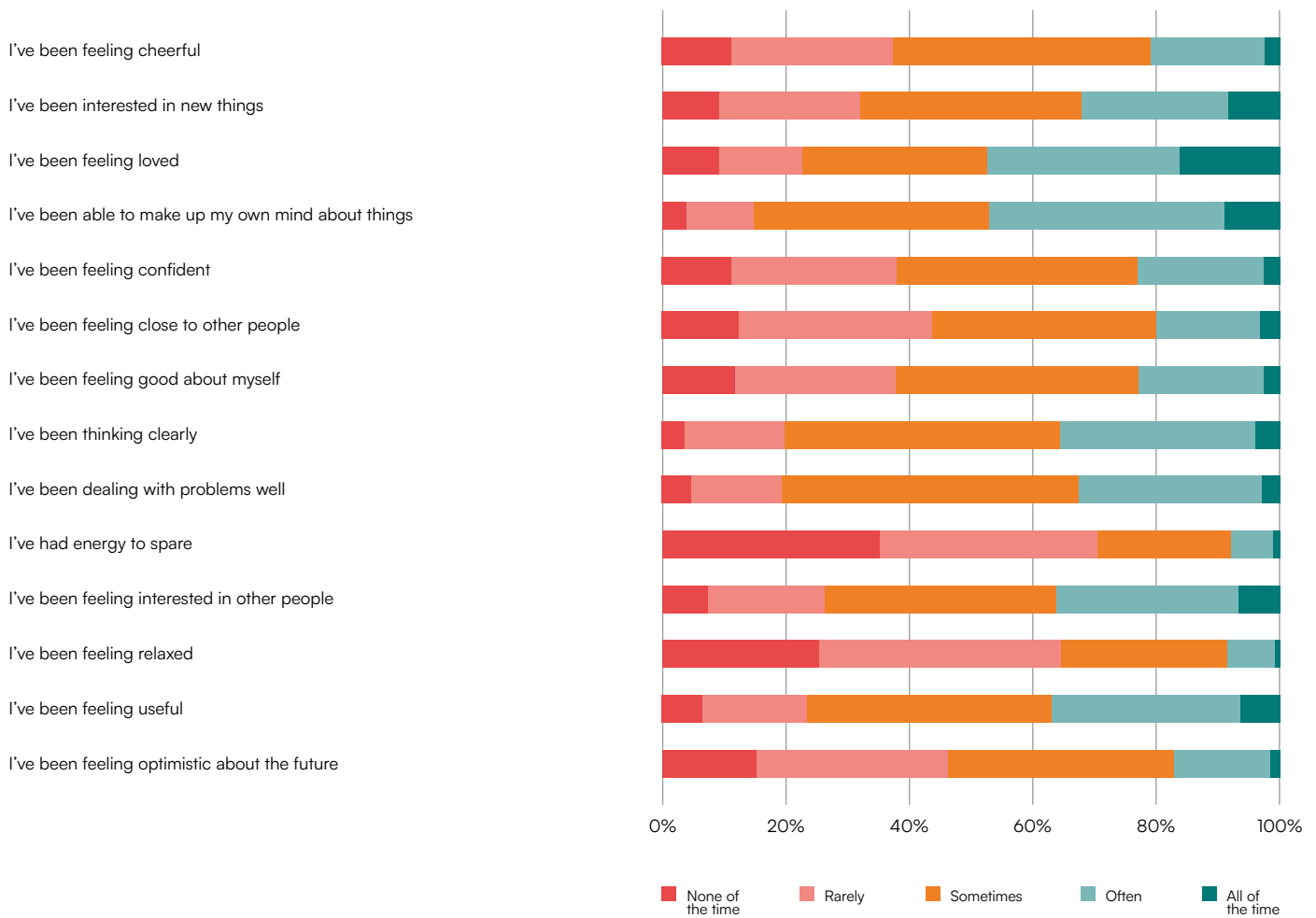
8   warwick.ac.uk/fac/sci/med/research/platform/wemwbs/using/howto/

Burnout

Burnout has three dimensions: emotional exhaustion (feeling emotionally drained from working with people), depersonalisation/cynicism (treating some people like impersonal objects and not really caring what happens to them) and reduced personal accomplishment (feeling that they are making no difference to people' lives). The mean scores for each of the three elements of burnout are shown in Fig 7. The findings include the following:

- The overall level of emotional exhaustion was high. More than six respondents out of ten (65.3%) reported feeling emotionally drained from their work at least 'once a week', with 25.6% feeling this way 'a few times a week' and 28.6% 'every day'.

- The extent of depersonalisation/cynicism found in this survey was moderate. Only 17% reported treating some people in the workplace impersonally more than a few times a year and nearly eight respondents out of ten (77.9%) indicated that they felt desensitised to people's needs once a month or less.

- Feelings of personal accomplishment were moderate, with only around a quarter (25.5%) feeling that they have a positive influence on other people's lives through their work once a week or more and 4.5% feeling this way every day. Similarly, 19.8% of respondents reported feeling they deal effectively with the problems of the people they work with at least once a week, but more than half (56.2%) had such feelings once a month or less.

Fig 7: **Mean scores for the three burnout dimensions**

3.59	1.16	2.59
Emotional Exhaustion	Depersonalisation/ Cynicism	Personal Accomplishment
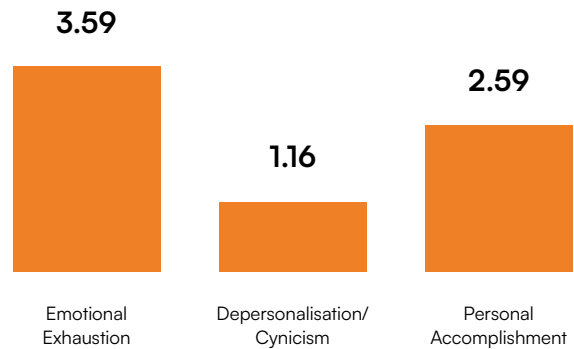
Findings indicated the overall level of emotional exhaustion was high. More than six respondents out of ten (65.3%) reported feeling emotionally drained from their work at least 'once a week'.

Work-life balance

Reflecting evidence that work can have a positive and negative effect on the quality of personal life, this survey assessed two aspects of work-life balance: a) conflict between work and personal life and b) enrichment between work and personal life. Fig 8 shows the responses to the questions on work-life conflict. Almost seven respondents out of ten (69%) reported that they come home from

work too tired to do the things they would like to do like either often (29.7%), almost always (24.5%) or always (14.8%). Of particular concern is the finding that more than one-third of the sample (38%) almost always or always neglect their personal needs due to the demands of their work. Only just over one respondent in every ten (14%) maintained that their personal life never (2%) or rarely (12%) suffers because of their work.
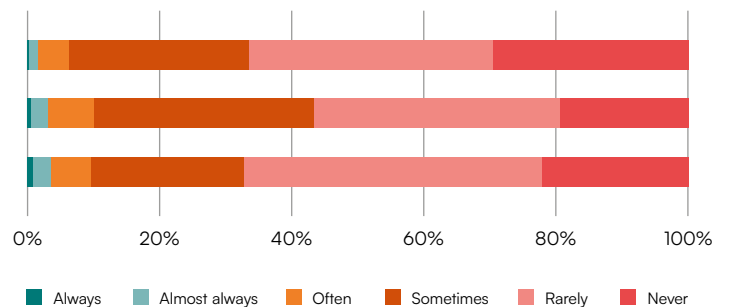
Fig 8: Work life conflict

I have to miss out on important personal activities due to the amount of time I spend doing work

My personal life suffers because of my work

I often neglect my personal needs because of the demands of my work

My job makes it difficult to maintain the kind of personal life I would like

I come home from work too tired to do things I would like to

Never · Rarely · Sometimes · Often · Almost always · Always
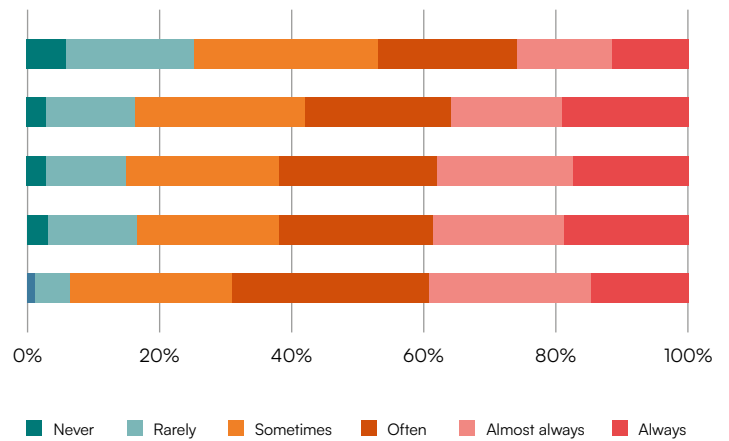
Little evidence was found that respondents experience work-life enrichment. Only just under one respondent in ten (9.9%) reported that their job gave them energy to pursue important activities more frequently than sometimes. A similar proportion (10.2%) indicated that their job helped improve their mood after the working day, whereas just over half (56.7%%) reported that this rarely (37.3%) or never (19.3%) occurred. See Fig 9 below.

Fig 9: Work-life enhancement

The things I do at work help me deal with personal and practical issues at home

Because of my job, I am in a better mood at home

My job gives me energy to pursue activities outside of work that are important to me

Always · Almost always · Often · Sometimes · Rarely · Never

Changes over time

Comparisons were made between the mean scores found for the two aspects of work-life balance in the current survey and those found in 2014. No significant differences were found for work-life conflict (2021 Mean = 3.92, SD 1.24 and 2014 Mean = 3.91, SD 1.22). Although the mean score for work-life enrichment in 2021 is higher (2.25, SD .88 v 2.14, SD .83), this was not significant.

6 Differences between respondent groups

This survey explored whether there were any job-related or demographic differences in the extent of stressors and strains reported by respondents. The findings are set out in this section[9].

Academic and academic-related staff

On average, respondents employed in academic roles reported less satisfaction with job demands, control, support from managers and peers, and their role than academic-related staff (i.e. non-academic managers and professional staff). No differences between groups were found, however, in the level of satisfaction with working relationships. Academic staff reported working longer hours than those who were in academic-related roles and considered more of the tasks they perform to be unreasonable and unnecessary. Academic staff also perceived a poorer psychosocial safety climate in their institution and a higher degree of stigmatisation surrounding mental health issues. Academic staff were also at greater risk of self-reported mental health problems, burnout and poor work-life balance than those in academic-related roles. It should be noted, however, that the number of respondents employed in academic-related roles was considerably fewer.

Academic role breakdown

Respondents who were employed in roles that combined teaching and research typically reported less satisfaction with job demands and perceived that they performed illegitimate tasks on a more regular basis than those whose roles were teaching only or research only. Overall, respondents with research-only contracts were more satisfied with job demands, control, support from managers and relationships than people working in other academic roles, and they perceived a stronger sense of psychosocial safety. Research only staff also reported the highest levels of mental health and the lowest levels of work-life conflict.

Sex

No significant differences were found between men and women in any of the study variables.

Age

Older respondents tended to report more satisfaction related to the clarity of their job role, but also typically worked longer hours and perceived poorer quality working relationships and less support from management and colleagues. The risks of mental health problems and burnout tended to reduce with increasing age and older respondents also reported a higher level of work-life enhancement.

Ethnicity

As a considerable majority of the sample (89.9%) was either White British (64.3%) or White Other (25.6%), examining differences between ethnic groups in levels of study variables was not possible.

Disability

Respondents who identified themselves as disabled had lower scores on all the psychosocial hazard dimension (indicating less satisfaction with job demands, control, support from managers and peers, working relationships and role). They also reported performing more unreasonable tasks and perceived a poorer psychological safety climate than those who were not disabled. People with disabilities also tended to be at greater risk of mental health problems and burnout and perceive a poorer work-life balance.

On average, respondents employed in academic roles reported less satisfaction with job demands, control, support from managers and peers, and their role than academic-related staff (i.e. non-academic managers and professional staff).

9   All associations and tests of difference were significant to at least the <.05 level.

Tenure

The findings reflected those of age, as this is frequently a proxy for tenure. Respondents who had worked in the HE sector for longer typically worked more hours, reported less satisfaction with job demands and support from managers, and perceived they performed more illegitimate tasks. Nonetheless, older respondents also tended to report more satisfaction with job control and role clarity and be at lower risk of mental health problems and burnout.

Mode of employment

Respondents employed on a full-time basis typically reported less satisfaction with job demands, peer support and working relationships and believed that they performed more illegitimate tasks than those on part-time contracts. Respondents on full-time contracts also reported a poorer work-life balance (more conflict and less enhancement) and a higher level of burnout.

Respondents employed on a full-time basis typically reported less satisfaction with job demands, peer support and working relationships and believed that they performed more illegitimate tasks than those on part-time contracts.

Terms of employment

Respondents who were employed on a permanent, or open-ended contract typically reported less satisfaction with job demands and more work-life conflict than those on fixed-term, or zero hours contracts.

University type

Respondents who reported being employed in Russell Group universities tended to report more satisfaction with demands, control and working relationships, and reported performing fewer illegitimate tasks than those working in other types of institution. They also perceived a stronger sense of psychological safety and a better work-life balance (less conflict and more enhancement).

7 Relationships between the working environment and wellbeing

Associations between features of the working environment and mental health, burnout and work-life balance were examined[10]. Some key findings are:

1

Respondents who **reported having more sources of support available to them** typically perceived a more positive psychosocial safety climate at their institution, were at lower risk of mental health problems and burnout and had a better work-life balance (lower conflict and higher enhancement).

2

Respondents who **reported poorer wellbeing relating to job demands, control, support, relationships and role** tended to be at greater risk of mental health problems and burnout. They also had more difficulty achieving a work-life balance, reporting higher levels of conflict and lower levels of enhancement.

3

Low satisfaction with role, demands, peer support and control were particularly strong risk factors for mental health problems and burnout.

4

Respondents who **reported high job demands and low support from peers** tended to perceive the highest level of work-life conflict, whereas work-life enhancement was predicted by satisfaction with job demands, control, peer support and role.

5

Respondents who **reported performing tasks that they believed were illegitimate on a more frequent basis** were at greater risk of mental health problems, burnout and poor work-life balance (high conflict and low enhancement). Unreasonable tasks had particularly strong relationships with mental health problems and work-life conflict.

6

Significant risk factors for mental health, burnout and work-life balance (higher conflict and lower enhancement) were staff perceiving that the psychosocial safety climate in their institution was poorer and that help-seeking for stress and mental health problems was more stigmatised.

7

It should be noted that respondents who **reported higher levels of mental health problems and burnout** were more likely to indicate that stress was heavily stigmatised in their organisation. They also felt less able to discuss any work-related stress they experienced with their line manager or their colleagues. Feeling less able to discuss stress-related difficulties with line managers was a particular risk factor for mental health and burnout and also made a strong contribution to perceptions of a poor institutional psychosocial safety climate and stigmatisation of stress and mental health problems.

8

Respondents who **worked longer hours typically reported less satisfaction with their job demands, control, support from managers and peers, role and working relationships**. On average, the longer the hours worked the poorer the perception of the psychosocial safety climate and the greater the risk of mental health problems and burnout. Respondents whose working hours were longer also tended to perceive a poorer work-life balance, particularly conflict between work and personal life.

It should be noted that respondents who reported higher levels of mental health problems and burnout were more likely to indicate that stress was heavily stigmatised in their organisation.

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10 Relationships between variables were examined using correlational analysis. Associations that reached the minimum significance level of .<.05 are reported.

8 COVID-19: the challenges for wellbeing

Open ended questions asked respondents: a) in which way, if at all, has the pandemic increased the work-related pressure they are experiencing? b) what type of work-related support did they find most helpful during the pandemic, or what would they have found helpful? The responses to these questions are summarised below, with examples of quotes where relevant.

In which way, if at all, has the pandemic increased work-related pressure?

Respondents highlighted a wide range of issues relating to the increased pressure and intensification of work, the challenges of working online, the need to manage students' expectations and wellbeing, and the implications of homeworking for work-life balance. Some wrote about benefits and the pros and cons of working at home.

The benefits of homeworking

Some respondents indicated that they preferred working at home to on-site and highlighted the benefits, even in the face of a higher workload overall. Not needing to commute, the increased autonomy and the reduced distractions that working remotely can provide was often considered beneficial for productivity and wellbeing.

"Working at home has been very beneficial for me — the time saved from commuting means that I have more time and energy to do my job."

"Working from home has helped ease the pressure and the increased autonomy it provides can help people manage the increase in demand."

"I have enjoyed working at home, as I can get more done and fewer distractions. I have never been so productive."

"Stress due to personal interaction greatly reduced. The increased distance from line manager has been hugely beneficial for me."

Workload

Many respondents indicated that the pandemic had increased the demands made upon them that had drastically increased their working hours and the stress they experienced. Expectations that staff would not only ensure 'business as usual' in providing teaching and support online but would be available when required were often considered unrealistic. Respondents with line management responsibility also felt under considerable pressure to support their staff who were struggling.

"I'm responsible for a lot of people who are themselves under pressure/stress; this takes an inordinate amount of time."

"Very long hours trying to meet the demands of teaching and research, as the general attitude is 'business as usual'. How can this be possible? It isn't business as usual. It is trying to work in unprecedented circumstances."

"Expected to work at the same rate as before, but from a laptop at home with competing responsibilities."

"My workload has increased significantly, and it was already too high. There just isn't time to get everything done that is viewed as a priority."

"I am expected to deliver as much (or more) on-line as I did face-to-face. This is impossible, as everything takes longer to do. There has been no relaxation of deadlines though."

"I am working full time on a part time salary. Some colleagues email me at out of hours and I see they are working all hours themselves, so I feel pressured to do the same otherwise I will be letting them down."

"Managers and students expect us to be available 24/7. There is an assumption that because I'm not going anywhere or seeing anyone that I can work all the time — I obviously don't have anything else to do."

Adapting to new ways of working

At the start of lockdown, many people were required to adapt to new ways of working with little time for preparation. This was certainly the case for people working in UK universities. Respondents frequently reported that the pressure of work had intensified, and considerable time and effort was needed to convert teaching to an online format, develop new online resources, and interact with students and colleagues virtually. Some comments related to expectations to navigate new technology with little experience or support, and without any additional workload allowances to compensate for the additional time and effort required.

For some respondents, the increased teaching load, preparation and support meant there was little time for research and they were unable to meet previously negotiated deadlines for funded projects. Working long hours online was also considered to be more tiring than the usual face to face format. Respondents also commented on the increased amount of time spent in meetings, which was not necessarily considered productive. The challenges of supporting people who are working remotely were also highlighted.

"Teaching is a much more complex enterprise online and we are not given adequate technology to do the job but are expected to do an 'excellent' job of teaching. This has massively increased our workload. We are also dealing with students who are understandably more stressed and unhappy, and this takes up more time. None of this has been reflected in workload planning, you are just expected to do more, and more, and more."

"Revising teaching material for on-line delivery, including learning new technology and thinking up new ways to keep students engaged etc. is taking 3-4 times as much as it does for face-to-face teaching."

"I miss face to face teaching as online delivery is challenging and unsatisfactory and technology is always letting us down, increasing the pressure."

"There are many more meetings that are unnecessary and take time away from our 'real' job. Meeting invitations assume your availability since you are at home anyway."

"Supporting remote working means that I suffer other peoples' frustrations by proxy."

"Doing everything online, through a little screen, can be homogenous, fiddly and fatiguing. The systems can be very unstable and there is often little support."

Teaching and supporting students

Respondents frequently commented on how moving to online teaching, and the pressures of the pandemic more generally, had impacted on their relationships with students. Although generally sympathetic to the challenging circumstances that students were facing, some respondents highlighted the difficulties they experienced in teaching and supporting students online. The number of students experiencing stress and mental health issues also increased substantially during the pandemic and the need to provide pastoral support was highlighted.

"Teaching online is much more stressful and less satisfying since many students don't like it, never respond via microphone and discussions are almost impossible in sessions."

"I miss in-person interaction with students — I felt I was good at it. I feel deskilled in online teaching."

"Students are angry and anxious. I don't blame them for that, but I have to spend a lot of my time reassuring them and ensuring they have a 'good' experience."

"Students demand much more from you than they ever did: e.g. one emailed me 11 times one day as they had nobody else to talk to. Their marks are of greater importance therefore they obsess over their assessments wanting constant guidance and reassurance."

"Contact with students takes more time as, instead of chatting during breaks of before/after class, Zoom meetings have to be set up and this adds additional time to what could have been a simple informal 2 minute chat."

"Students are experiencing more difficulties so need far more support both academically and emotionally. There are more emails and more requests for one-to-one meetings for personal support."

Social isolation

Many comments related to respondents feeling socially and professionally isolated, particularly missing face to face interaction with their colleagues in order to compare notes, let off steam and to gain reassurance. This was often thought to impact on the quality of personal and working relationships and have implications for job performance. Colleague support is a major source of satisfaction and a stress-management resource. People who live alone may not only be more socially isolated, but also more vulnerable to overwork, particularly when workload is high.

"Lack of face-to-face contact makes relationships harder to build and maintain."

"I miss feeling part of a team — there are far fewer opportunities to get informal support from colleagues."

"I am missing my colleagues as they made a real difference to my stress."

"Working always from home makes it harder to maintain personal links with colleagues — I have no outlet for letting off steam."

"I feel overwhelmed by work and very isolated. Living alone combined with a drastically increased workload means that I tend to work most of the time."

"I have become horribly isolated and disengaged from colleagues and my work generally. I feel distant from people and getting in touch is an effort."

Problems with work–life balance

Many comments were made about the impact of working at home on work-life balance. Some appeared to have difficulties maintaining boundaries between their work and their personal life; this can be particularly challenging for people who are attempting to juggle work demands with caring responsibilities.

"I am finding it very difficult to balance such a demanding job with caring responsibilities — my manager makes sympathetic noises but doesn't really want to know. I am just expected to get on with it."

"I have a double burden (increased workload and increased domestic and childcare duties) with no time at all for myself."

"Working from home means that work has become part of home life. I used to keep it separate. It is now even harder to escape work and try to relax."

"It's more difficult to take breaks when one is mainly alone at home working."

Pros and cons

Some respondents indicated that their job had become neither more nor less stressful, just different. Others highlighted the pros and cons of working remotely.

"Being on my own all the time is a blessing and a curse. I hated working in the office — mainly because it was hot desking and often not enough desks for everyone. Now, however, I often go whole days without speaking to anyone. I often feel adrift, and it is hurting my productivity."

"In some ways working from home has been more difficult than on-site, in some ways easier — it has worked both ways."

"Working at home all of the time has changed things dramatically, but not always in a way which makes work more stressful."

"I work longer hours but they are worked from home so I mind less as the longer hours simply replace the time I would have spent commuting."

"The emergency shift to remote teaching was stressful, but also energising. I have enjoyed the challenge."

"The workload has increased but I am better able to focus working from home and don't feel as stressed. WFH has been the best and the first time ever I feel on top of my work."

"Working at home can be liberating in terms of time management and no time spent travelling is good, but it has increased my workload and working away from others feels sterile."

Support needs during the pandemic

Respondents were asked what type of work-related support they found most useful during the pandemic, or what would they have found most useful if it was available. Some respondents indicated that they felt well supported during the challenging time.

The sources of support that were considered most useful are set out below under several categories: workload; management issues; online working; information sharing and social support; and wellbeing and work-life balance.

Workload

- Sufficient time allocated to tasks with consideration of the additional demands of converting teaching materials, online delivery and providing support
- Careful and accurate monitoring of working hours
- Flexibility to help manage the increased workload
- Adequate staffing levels
- Help to manage students who are struggling academically
- Emotional support for students available from trained professionals
- Administrative support for routine tasks

Management issues

- A sympathetic, kind and supportive management
- Recognition of the challenges and pressure of online teaching and supporting distressed students
- Clear boundaries on availability
- An appreciation that students' needs must not override staff needs
- Regular updates and the provision of clear and consistent information
- Acceptance that routine, non-essential tasks may have to be re-prioritised and targets reconsidered in light of the additional pressure
- Flexibility in deadlines
- Opportunities to feed back personal experiences and voice concerns and act upon them
- Avoiding unnecessary change initiatives
- Opportunities to shape initiatives involving change
- Training for managers on how to support staff
- Individual 'check-ins' to see if staff are coping and if they need additional support

> "What is needed is a basic understanding that we are not 'all in the same boat' when it comes to how the pandemic is affecting us. Some are in luxury yachts, and some are barely clinging to a life raft — so flexibility is needed, rather than a one-size approach to support."

Online working

- Technical training and support to help with converting teaching materials
- Advice on new technologies for teaching and how to manage the online environment
- Expert support when technical difficulties are experienced
- Online meetings used sparingly and efficiently, with adequate time for breaks
- Clear guidelines about responding to emails evenings, weekends and holidays
- IT equipment, software and chair etc. required to do the job properly from home
- Financial help with extra heating, lighting and computer costs

Information sharing and social support

- Opportunities to discuss the situation and the impact with colleagues, exchange information on good practice and plan for the future
- Opportunities to spend quality time with colleagues and get moral support
- Informal meetings for casual conversations and social gatherings
- A 'buddying' or mentorship programme

Wellbeing and work-life balance

- Acknowledging the impact of the pandemic and the increased workload on a workforce that was already experiencing stress and burnout
- A realisation that many people are not coping well and need more support
- Making staff wellbeing a priority
- Access to psychological support and counselling for everybody that needs it
- Guidance on mental health and managing isolation
- Guidance on physical health when homeworking: e.g. managing musculoskeletal and eye health
- Encouragement to take annual leave with cover provided
- Support to manage stress and improve work-life balance in the new working context
- Understanding and support for staff with caring responsibilities

9 Conclusion and recommendations

This study of UK HE employees has highlighted the initiatives that are currently available to support the wellbeing of employees and the type of support they find (or would find) most effective.

The findings show that wellbeing related to key psychosocial hazards, i.e. job demands, support from managers and colleagues, role and relationships, in the higher education sector in the UK continues to be below minimum recommended standards. Moreover, the overall level of job control (an important resource for HE employees) has not improved over time. Reflecting the findings of the survey conducted in 2014, a high proportion of HE employees report being obliged to undertake tasks they consider to be unreasonable or unnecessary on a regular basis. Average working hours in the sector continue to be long, with more than two out of every ten respondents on academic contracts regularly working the equivalent of two extra days per week. Unsurprisingly, perceptions of the psychosocial safety climate in UK universities are typically poor — considerably more so than in studies of other organisations. The importance of improving the psychosocial safety climate in UK universities is intensified by the findings that the risk of burnout is high, and the level of self-reported mental wellbeing considerably lower than population norms. Interference between work and personal life is a common cause of stress and burnout and the findings of this study show that HE employees continue to have difficulties in achieving a healthy balance.

The findings of this survey provide evidence that the psychosocial safety climate, and consequently staff wellbeing, may be improved if institutions take steps to reduce demands, increase support, control and role clarity, improve the quality of working relationships, and review tasks that might be considered unreasonable and unnecessary. Working with employees to identify opportunities for change and shape interventions will be particularly helpful. By highlighting employees' support needs at the organisational and individual levels, the findings of this survey provide a foundation to help UK universities build a systemic and sustainable approach to wellbeing. As well as ensuring that individual support needs are met, it is crucial to promote a workplace culture where help-seeking is not stigmatised but encouraged and a range of interventions available that are fit for purpose and accessible to staff. These actions will help institutions meet the challenges of the COVID-19 outbreak and 'build back better' in terms of a healthy and more productive workforce.

Support needs: key recommendations arising from this report

Workplace culture, employee voice and communication
- Prioritising staff wellbeing
- Mechanisms to monitor the psychosocial safety climate
- A culture of openness that normalises conversations about stress and mental health
- Awareness of the risks of implementing individually focused solutions to structural problems
- Training for all on equality, diversity and inclusion, including an awareness of neurodiversity
- Policies and practices to identify and address bullying harassment and discrimination at an early stage
- Opportunities to co-produce and evaluate support initiatives

- Support initiatives that are fit for purpose, high quality and informed by evidence
- Information on the available support initiatives that is centralised and accessible
- Wellbeing and support policies that are put into action
- A commitment to communicate and address the findings of staff wellbeing surveys and risk assessments
- Mechanisms to formally assess the impact of change initiatives on staff wellbeing
- A regular review of support initiatives to inform continuous improvement
- Mechanisms to identify barriers to accessing support and how they can be minimised

Managing workload

- Mechanisms to identify the causes of workload pressure and manage this at source
- Workload management initiatives that accurately reflect workload and working hours
- Awareness of the risks of long working hours for staff wellbeing, work-life balance and performance
- More autonomy and flexibility to enable staff to manage workload
- More administrative support for routine tasks
- Institution-wide policies for managing emails, including clear guidance on expectations for response
- Support for early career staff to help them manage expectations regarding workload and wellbeing

Psychological support and counselling

- A counselling service for staff where the number of sessions is not capped, and counsellors have an understanding of the sector
- Psychological support and counselling that can be accessed via different modes, such as face-to-face, telephone and online
- A wide range of coaching and mentoring programmes
- Improved support for staff with significant caring responsibilities and personal difficulties, such as bereavement
- Psychological support for staff who feel socially isolated when working remotely
- Guidance and support for staff to support students with mental health problems

Support from managers

- Awareness of the pressures of the job and how the responsibilities and requirements of the various roles can lead to overload
- Training for managers to support staff wellbeing and how to access support, with regular opportunities for updating
- Appraisal and supervision procedures that include questions about well-being, clear mechanisms for referral opportunities to revisit and monitor
- Procedures to identify signs of struggle in remote workers and training on how to provide support
- Initiatives to ensure staff feel appreciated, valued and respected
- Support for line managers to protect their own wellbeing

Wellbeing and work-life balance

- A 'tool-box' of individual support initiatives to facilitate physical, mental and working health
- Mechanisms to ensure that support initiatives are accessible to all staff
- Guidance on work-life balance and healthy remote working, with particular focus on setting boundaries
- Access to flexible working options (above the legal requirement)
- A requirement for employees to take their full quota of annual leave
- An awareness of the risks of presenteeism and provision of cover for staff who are on sick leave
- Encouragement to take regular breaks from work during the day
- A requirement to implement recommendations for reasonable accommodations from occupational health

Social support

- Support to promote positive working relationships, including informal opportunities to meet with colleagues
- Mechanisms to identify and manage conflict at an early stage

National support initiatives

- Regular audits of the sector to monitor psychosocial hazards and employee wellbeing, assess change over time and identify areas of best practice and concern
- Commitment to monitor the psychosocial safety climate in the sector and a consideration of including this as a Key Performance Indicator
- Access to sector schemes or peer groups outside of the employing institution to communicate information about new initiatives, share best practice and discuss support needs and potential solutions
- An independent 'third-party' that can evaluate how wellbeing services operate at an institution level and deal with staff concerns without fear of reprisals
- An anonymous national hotline for reporting bullying/harassment

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Appendices

Appendix A: Categories of support measured in the survey

Work/home interface and opportunities for recovery
- The ability to work from home
- Guidance on work-life balance
- Access to flexible working options (above the legal requirement)
- Managing technology and setting boundaries
- Encouragement to take full entitlement of annual leave
- Encouragement to take time off while unwell
- Encouragement to take regular breaks away from your workstation

Support for health and wellbeing
- Guidance on well-being and self-care
- Health promotion
- Mental health first aiders or champions
- Occupational health
- Access to exercise and sporting activities
- Opportunities for learning and development concerning wellbeing

Counselling, coaching and guidance
- Telephone or online support for wellbeing
- Personal counselling
- Culturally appropriate counselling
- Group counselling
- Coaching and mentoring
- Support and guidance for personal difficulties such as finance, substance abuse

Stress management training
- Individual-focused stress-management training (e.g. mindfulness or relaxation)
- Time management and personal organisation training
- Goal setting and/or improving coping skills

Social support and relationships
- Encouragement and support for a culture of teamwork and collaboration
- Initiatives to build positive working relationships
- Feeling appreciated and respected
- Conflict management
- Opportunities for informal chats with colleagues
- Regular workplace social events

Organisational policies and practices
- A commitment to monitor staff wellbeing
- A workplace stress policy that is clear and accessible
- Steps to tackle work-related stress at source
- Audits that obtain information on staff well-being and act on the findings
- Stress risk assessment to mitigate workplace stressors
- A culture of openness that normalises conversations about stress
- Formal opportunities for input into decision-making affecting work

Managing workload and pressure
- Workload management initiatives
- Meetings with line managers to discuss workload and wellbeing
- Managers who are aware of the pressures of the job
- Active monitoring of working hours
- Timetabling that ensures adequate breaks between teaching
- Appraisal and supervision procedures that include questions about wellbeing

Reducing inequalities and tackling bullying
- Training on equality, diversity and inclusion
- Clear policies on equality, diversity and inclusion
- Clear consequences for staff who breach equality, diversity and inclusion policies
- Robust and accessible anti-bullying and anti-harassment policies

External professional support
- Trade union support and guidance
- Support from a professional body

Appendix B: Descriptive statistics for study variables

	N	Minimum	Maximum	Mean	Std. Deviation	Cronbach alpha
Demands	2043	1.00	4.75	2.48	.77	.90
Control	2043	1.00	5.00	3.43	.69	.87
Manager support	2043	1.00	5.00	2.86	1.01	.90
Peer Support	2043	1.00	5.00	3.33	.82	.86
Relationships	2043	1.00	5.00	3.68	.85	.87
Role	2043	1.00	5.00	3.58	.70	.82
Illegitimate tasks	2041	1.00	5.00	3.74	.91	.93
Unreasonable tasks	2043	1.00	5.00	3.33	.92	.90
Psych safety climate	2038	1.00	5.00	2.17	.81	.94
Mental health	2038	1.00	5.00	2.85	.72	.94
Work-life balance	2038	1.00	6.00	3.92	1.24	.95
Work-life enrichment	2036	1.00	6.00	2.25	.88	.76
Stigma	2038	1.00	4.00	2.49	.57	.87
Burnout total	2037	.00	5.67	2.45	.95	.74
Emo exhaustion	2036	.00	6.00	3.59	1.48	.75
Depersonalisation	2035	.00	6.00	1.16	1.24	.65
Pers accomplishment	2037	.00	6.00	2.59	1.25	.63
Valid N (listwise)	2026					

Appendix B: Descriptive statistics for study variables

Education Support