



# The All-Party Parliamentary **University Group**

## **University APPG meeting- Student Mental Health and Wellbeing**

**18:00 – 19:30, Wednesday 30 January, Committee Room 2, House of Lords**

Chair:

**Dr Roberta Blackman-Woods MP**, Chair of the APPUG

Speakers:

**Professor Julia Buckingham CBE**, Vice-Chancellor, Brunel, University London

**Meg Zeenat Wamithi**, Founder, My Mind Matters Too

**Barbara Keeley MP**, Shadow Minister for Mental Health

**Paula Sherriff MP**, Shadow Minister for Mental Health

**Julia Buckingham** opened her presentation by stressing the importance of universities addressing the problems of poor mental health and of working in partnership with students to achieve this. She noted that while the term mental health was often used to mean 'mental ill-health' it actually spanned a broad spectrum from happiness and wellbeing through to severe psychiatric disease. She acknowledged that there is still a degree of social stigma around mental health issues and in some cultures is even perceived as shameful.

Julia explained that young people up to the age of 25 are particularly vulnerable to developing mental health problems. In the past decade there has been a six-fold increase in the number of students disclosing mental health problems with inevitable increased pressure on university counselling and NHS services and a threefold increase students dropping out of university due to mental ill-health. A particular concern is in the growing rate of student suicides, and the while the number is lower than in individuals of the same age not attending university, any suicide is one too many and devastating for the family, friends and members of the university.

While the university sector is far from complacent about mental health problems, it was not where it should be. She welcomed the high priority politicians were giving mental health, and the new commitments in the NHS long-term plan. Universities Minister Chris Skidmore's pledge to improving outcomes for disabled students, which includes this with mental health problems, was also most welcome, as too was the development of a Student Mental Health Charter by Student Minds.

Julia then turned to speak about the work of Universities UK (UUK) which is being done in partnership with students, mental health charities, medical practitioners, the NHS and legal advisors. She spoke about work led by Professor Steve West, (Vice-Chancellor, University of the West of England) that resulted in the development of the StepChange Framework. This recognises the positive impact of strong mental health and wellbeing on retention, academic achievement, the broader student experience and on the whole university community. It encourages university leaders to make mental health a strategic priority within their institutions and advocates a whole-institution approach, embedding mental health in all steps of a student's journey. The Framework has been embraced by many colleagues and

provided a great starting point. On top of this a self-assessment tool to identify areas of improvement is being developed and work is being undertaken with a 'what works well centre' on wellbeing.

Turning to other UUK projects, Julia described the 'Minding our Future' publication which focuses on improving links between local NHS providers and universities and marrying up support students receive from the NHS when at university with the care they receive from local services when at home. She also drew attention to guidance published by UUK in partnership with Papyrus on student suicide prevention and to an ongoing project focused on sharing information with key third parties (in particularly families or the student's preferred contacts) if a student is considered to be at high risk of harm – the project aims to develop a consensus statement and guidance for universities on disclosure, consent and the associated legal issues.

**Meg Wamithi** introduced 'My Mind Matters Too', the mental health consultancy she had founded to represent the student voice. She appreciated that action was being taken at universities but said this was often not translated back to students. The organisation focused on 18-25-year-olds as she felt they were a misunderstood generation and struggled to access help.

She agreed with Julia that mental ill health could affect individuals at any age and spoke about her own experiences being diagnosed with a range of mental health issues at 13, yet had entered university at 18 feeling "mentally fit". This did not last and she explained the difficulty of the transition period between school and university. Meg thought that young university students should not necessarily be classed as adults.

One of the issues that still existed was the lack of knowledge and understanding about what mental health actually was she thought, stating that as soon as it was thought of like physical health more practical solutions could be found. Explaining her preference for the term 'mentally fit' over 'wellbeing', Meg said universities should be training grounds to teach people how to be mentally fit as part of a stepping stone into the adult world. Improvements would be seen if there was a greater degree of clarity in communication between universities and institutions in the form of sharing best practice and greater collaboration between bodies such as sixth forms, colleges, the NHS, the work place and universities, she thought.

The four areas that My Mind Matters Too focused on were:

- a) Transition periods, namely the pre-university summer period and transition into the world of work post-university
- b) Early intervention, preventing students reaching mental health crisis with the right procedures and help
- c) After care, ensuring universities and alumni networks provided support post-graduation

She welcomed the increase in discussions around mental health, but thought the focus should now be on what practical steps could be taken to find solutions to young people's mental health, including through universities taking on increased responsibility for their students.

**Barbara Keeley** opened her remarks by stating the UK had not spent enough on children and young people's mental health and that it was very much the 'Cinderella service' of the NHS. The transition from Child and Adolescent Mental Health Services (CAMHS) to adult services was often difficult and exacerbated the problem of students moving to university at this time and the difficulties that brought with it.

She gave statistics about mental health spending in Greater Manchester, including that less than 9% of mental health spending went on under 19s, yet 22% of the population in this area fell into that age bracket. She explained Labour's policies on mental health, including a promise to ringfence mental health spending and increase the proportion spent on children and young people. She agreed with Meg about the importance of transition period and thought that NHS structures allowed gaps to form which young people often fell through. The government needed to spell out its ambition and work out how many resources are needed as well as timeframes; both the government and opposition could pledge to do more and increase the pace of travel she said.

**Paula Sherriff** stated the shadow health team was aware of the current lack of provision and particular challenges for students, especially around transition phases. She agreed with previous speakers that early intervention was key to reducing the number of young people entering university with pre-existing conditions. In the overall policy landscape, she thought the removal of early-year Sure Start centres was a retrograde step for troubled families. Finally, she said her colleagues would do everything they could to push suicide prevention and young people's mental health up the agenda.