Teaching with student wellbeing in mind: A new initiative to support the mental health of university students.

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Abstract

Academic educators across Australia are increasingly aware of the high levels of psychological distress experienced by significant numbers of their students. Many academics are keen to develop teaching environments and practices that better support student mental health. Yet there is currently no comprehensive guidance to assist academic teachers to embed into practice pedagogical principles and approaches that support the psychological needs of university students. The national resources produced by our Office for Learning and Teaching funded project will be a significant initiative to address that gap. Culminating in an open-access online course for university teachers, Teaching with Student Wellbeing in Mind will make an important contribution to stimulating innovation in curriculum design and teaching practice with the aim of improving student psychological wellbeing as well as learning outcomes. This workshop will invite educators to tell us what they know and would like to know about teaching for student mental wellbeing.

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This workshop will introduce participants to a new initiative that will develop, model, evaluate and disseminate a suite of professional development resources for academic educators to assist them to consider the mental health and wellbeing\(^1\) of university students in decisions regarding curriculum, pedagogy and assessment. The resources will contribute to a ‘whole-of-institution’ or ‘health-settings’ framework, and draw on the expanding evidence-base related to health-promoting educational practice (Dooris, Cawood, Doherty, & Powell, 2010; Wyn, Cahill, Holdsworth, Rowling & Carson, 2000). The resources will be made freely available to academic teachers across Australia through the Centre for the Study of Higher Education at The University of Melbourne and include an online course for academic educators to advance awareness of curriculum and pedagogical approaches that embed mental health support for students in the teaching and learning environment. The course will include expert videos, reading materials and a range of interactive tasks to improve academics’ awareness of student mental health issues and of curriculum and classroom choices that can support mental wellbeing.

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\(^1\) Everyone has a state of mental health, just as everyone has a state of physical health. Thus the term ‘mental health’ does not, in itself, indicate a positive or negative state. ‘Mental wellbeing’, by contrast, suggests a positive state of psychological and emotional health; it indicates that a person is able to function cognitively and emotionally in a manner that is productive and fulfilling. A state of ‘wellbeing’ can be contrasted with ‘mental health difficulties’ or ‘psychological distress’. The latter term is used to describe elevated levels of depressive, anxiety or stress symptoms which are likely to cause mental health difficulties in academic settings.
We invite participants’ feedback on the proposed resources, as well as insights on strategies to overcome known barriers to curriculum and teaching innovation. In particular, this workshop will seek feedback and views on the following questions:

- What is your experience of curriculum or teaching strategies to support student mental wellbeing? What works and what doesn’t work in your experience?
- What would you like to know about developing and implementing curriculum and teaching innovations to support student mental wellbeing (principles, examples, evidence, implementation strategies…)?
- Thinking about the main obstacles or barriers that discourage curriculum and teaching innovation (such as limited time, resources and recognition), what can be done at the institutional level to overcome these barriers?
- In your view, what would make an online course about student mental wellbeing attractive and engaging?

Why we need curriculum and teaching innovations designed to support student mental wellbeing.

There is a strong and expanding evidence base to support increasing concern about the prevalence and severity of mental health difficulties across university student populations. For example, Stallman’s (2010) study of nearly 6,500 students attending two major Australian universities found high levels of psychological distress (as assessed by the Kessler 10) in 84 percent of the participants, where only 29 percent of the overall Australian population report such levels. Similarly, research conducted by Larcombe and colleagues (2014) involving over 5000 students at The University of Melbourne in 2013 found that one in four university students reported severe levels of psychological distress as assessed by the Depression Anxiety and Stress Scales (DASS-21). At these levels, students are likely to experience difficulties with daily activities such as sleeping or feeling rested, concentrating and reading effectively (Tang & Ferguson, 2014). Psychological distress and mental health difficulties during students’ university years are not unique to Australia (see, e.g., Eisenberg, Hunt, & Speer, 2013), and there is evidence to suggest that academic study itself has a negative impact on mental wellbeing for some students. For example, a study of youth across Australia examining responses to the longitudinal Life Patterns survey between 2007 and 2012 found a decline in mental health levels while engaged in higher education (Wierenga, Landstedt, & Wyn, 2013). Especially as the costs for students of participation in higher education are increasing, it appears likely that university students will continue to experience rates of psychological distress that match or exceed those of their community peers.

For university educators and curriculum designers, a pressing question raised by the mental health prevalence data concerns the role that universities and academic teachers do, can or should play in supporting students’ psychological wellbeing. Given that a substantial proportion of students will experience mental health difficulties during their time at university, how can universities ensure they provide supportive and ‘health-promoting’ environments (Dooris et al., 2010)?

A variety of interventions have been developed in recent years to support the mental wellbeing of tertiary students, mostly targeting students directly with programs and resources to improve mental health literacy, build resilience, develop skills to self-identify and manage stress, and promote help-seeking (Kelly, Jorm & Wright, 2007; Stallman, 2011). These health promotion strategies are extremely important, but they do not reach all students in a university environment. In addition, improving the ability of individuals to cope with and...
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manage stress only addresses one part of the picture of university student mental health; it is also important to reduce the stressors and preserve protective factors in the university teaching and learning environment.

Our project will complement and add significant value to existing initiatives designed to support student mental health because it adopts a preventative approach to mental illness that aims to promote mental health through the curriculum, not only within or alongside it. Course design, teaching strategies and curriculum are common experiences for all university students, central to university life, and so it is perhaps these features of higher education that provide the broadest potential for promoting student wellbeing – independently and also in combination with co-curricular programs and individual support and skills-building.

Curriculum reform and innovation to foster mental health has been limited to date, and often focused on ‘making space’ in the curriculum for ‘mindfulness’ or a similar stress management practice. Less attention has been paid to the opportunities to support student health through curriculum design and teaching practice. The exceptions here are medical and legal education where academic pioneers are embedding the principles of positive psychology (Slavin et al., 2011; Slavin, Schindler, & Chibnall, 2014) and self-determination theory (Field, Duffy, & Huggins, 2014; Krieger, 2008; Tang & Ferguson, 2014) in curriculum design at both a program-wide and classroom level. These innovations, which Slavin and colleagues call ‘mental health 3.0’, show promising signs of preventing the sharp increases in psychological distress typically recorded by medical students (Slavin et al., 2014) and law students (Tang & Ferguson, 2014; Townes O’Brien, Tang, & Hall, 2011). Importantly, the academic outcomes in the health-supporting programs are strong (Slavin et al., 2014; Tang & Ferguson, 2014), indicating that the stressors embedded in conventional curriculum design are not essential to academic learning.

Our project will draw on the learnings from curriculum and teaching-based innovations in legal and medical education, as well as the wider educational and psychological research literature, to develop accessible resources that build the capacity of academic educators to adapt and implement ‘health-promoting’ principles and practices in a range of teaching settings and institutional contexts.

How the new resources are expected to promote innovation in curriculum design.

As more is learned about the ways that academic curricula can actively promote student psychological wellbeing, academic teachers have the opportunity to make a valuable contribution to student mental health through curriculum design, teaching strategies, student engagement and assessment decisions. The challenge remains to collate and disseminate information and strategies in such a way that academic teachers are enabled to adopt and develop health-promoting innovations in their role as curriculum designers and implementers.

The suite of professional development resources for academic teaching staff that this project will deliver will meet that challenge in three key ways. First, in designing the resources, the project team will draw extensively on the international research literature identifying student mental health needs, factors that can reduce their experience of psychological distress at university, and good practice in teaching and curriculum design to support student mental health. This information will justify the need to innovate as well as showcasing strategies and principles for innovation. At present, there is no systematic overview or showcase of good practice in relation to health-promoting curriculum design at the university level. The proposed resources will fill that gap by bringing together evidence of the need for and
benefits of curriculum innovation with good practice examples demonstrating how that need can be addressed.

Second, the resources will equip academic educators to adopt and adapt the good practice examples within their local context. Here we recognise that for innovation to occur across disciplines, institutions and the sector as a whole, it needs to be supported by practical guidance that builds ‘know how’ capacity. For this reason, all elements of the resources – the framework, the and the online course – will include guidance on adapting and implementing the examples and principles in specific disciplinary and institutional contexts, and at different levels of program responsibility – whole of program, subject/unit coordination, and subject/unit delivery. The resources will also pay careful attention to the disciplinary differences in teaching contexts and practices and provide advice that considers the range of settings in which teaching and learning take place in contemporary universities.

Third, the resources will acknowledge the disincentives and obstacles to innovation and prepare academic educators to meet the challenges involved in implementing a curriculum or teaching innovation. One of the modules of the planned online course will provide explicit instruction and advice for academic educators on managing a teaching and curriculum innovation. This module will shape and inform academics’ engagement with the good practice examples and research materials, assisting them to systematically document and evaluate the changes that they make and their impacts. In this way, the resources will not only build academic educators’ capacity to engage in curriculum and teaching innovation; they will present and highlight such innovation as a professional competency. Building such competency through a structured professional development program is designed to ensure greater take-up of the resources as well as more sustainable innovation across institutions and the sector as a whole.

Finally, it is important to note that the project team acknowledges the growing demands and pressures faced by academics in teaching and supporting students with increasingly diverse educational needs. In proposing that institutions and educators can do more to support student mental wellbeing, we are not suggesting that academics need to become mental health experts, either in diagnosing mental health difficulties, or in counselling students with psychological distress. Instead, we will offer curriculum, teaching and assessment approaches informed by research, that can help mitigate mental health difficulties and support student mental wellbeing. We expect that the resources produced by the project team will assist academics to interact and engage with students who may be experiencing mental health difficulties with greater confidence. We also expect they will assist academics in their roles as curriculum designers and teachers of diverse students, and that the strategies will benefit all students, not just those at risk of experiencing mental health difficulties.

References


